



2025-2026

Student Handbook



HENDERSON CAMPUS (ABSN, DNPFPNP, DNPNA)
SOUTH JORDAN CAMPUS (ABSN, DNPFPNP)

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Letter from the Dean, College of Nursing



Dear Nursing Student:

On behalf of the faculty and staff of the College of Nursing, I wish to welcome you to Roseman University of Health Sciences! We are honored you have chosen Roseman's innovative program to further your educational and professional goals. You are joining a professional discipline that is filled with an array of career opportunities bound only by your desires and commitment. The mission of the College of Nursing is to educate current and future generations of nurses to serve local, national, and globally diverse communities. The College of Nursing encourages innovation through evidence-based practice and research. The College of Nursing endeavors to provide an educational environment that values, respects, and promotes academic freedom for faculty and students. Our goal is to provide you with the knowledge, skills and attitudes necessary to fulfill the professional nursing role in a culturally diverse population and throughout a variety of healthcare environments. As a Roseman student, you will join a community of professionals who are committed to inspire, nurture, and empower individuals so that they can strengthen the world through compassion and caring.

This handbook will provide you with the policies and procedures of the College of Nursing. It will answer many questions you may have about expectations, resources, and opportunities. This handbook is not intended to state contractual terms and does not constitute a contract between the student and the College of Nursing. Its purpose is to assist you in understanding the policies, procedures, and general information specific to your nursing program within the College of Nursing. Students affected by any changes to this handbook or changes in procedures will be notified in writing.

On behalf of the administration, faculty, and staff, best wishes on your academic success in the nursing curriculum. Please feel free to contact me or any member of the staff, faculty, or administration to assist you.

Sincerely,

A handwritten signature in black ink that reads "Brian C. Oxborn". The signature is written in a cursive, flowing style.

Brian C. Oxborn, PhD, RN Dean and Associate Professor College of Nursing

Letter from the Associate Dean, Academic and Student Affairs, College of Nursing



Students,

Welcome to Roseman University of Health Sciences College of Nursing! We are very excited that you have chosen our program to launch your nursing career as we believe that we offer a competitive, rigorous, and engaging program.

Roseman faculty are experienced bedside nurses that have chosen to contribute to the nursing profession through the education of future generations of nurses. They are skilled educators who create an engaging, evidence-based curriculum, through ongoing research and collaboration with educators across the country.

We believe that success is a partnership between faculty and students; the incorporation of the Six Point Mastery Learning model will create learning opportunities for students to demonstrate competency and mastery of the material presented in each course. I strongly encourage you to ask questions of your faculty, arrange to meet with them during their office hours, and review all your course material when you're not understanding aspects of the course. Faculty are dedicated to student learning and growth and are here to help and want you to be successful!

Please don't hesitate to reach out to your faculty, cohort advisor, or myself with questions, we look forward to being a part of your journey to becoming a registered nurse!

Sincerely,

Jamie York, DNP, MSN-Ed, FNP-C/ENP-C, RN

Acting Associate Dean, Academic and Student Affairs College of Nursing

Letter from Dean, Faculty Affairs and Learning Innovation, College of Nursing



Dear Nursing Students,

It is a pleasure to welcome you to Roseman University of Health Sciences College of Nursing. What a tremendous accomplishment to have gained acceptance to the Nursing Program. We are sure you will soon feel a sense of pride in becoming a part of the Roseman Family.

You will find your experience at the College of Nursing to be challenging, exciting, and highly rewarding. Nursing is a wonderful profession with infinite opportunities that can bless the lives of patients, families, and those who practice nursing. These limitless opportunities that nursing can provide can only be reached if you are dedicated to mastering the art of nursing. Our dedicated faculty are ready to guide you to becoming the best nurse you can be.

You are the future of nursing and as the next generation of nurses, we want to instill the importance of combining the science and the art of nursing with quality care for clients. We will prepare you to implement safe patient care in an ever-changing fast passed world of healthcare while upholding the ethical standards of nursing.

I am looking forward to being part of your nursing journey as you prepare to practice as a professional nurse.

Sincerely,

A handwritten signature in cursive script that reads "Andrea LeClaire". The ink is a light grey or blue color.

Andrea LeClaire, PhD, MSHA, RN, NEA-BC

Associate Dean, Faculty Affairs and Learning Innovation College of Nursing

Student Handbook Notice

The policies contained in this handbook apply to all students &/or cohorts who matriculate into the College of Nursing between May 31, 2025, and May 31, 2026.

A complete detailed listing of policies specific to the Nursing program is incorporated in this Student Handbook.

Faculty, Staff, and Student Handbooks supplement the information in the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Student Handbooks are reviewed at orientation. A copy of the Student Handbook for the College of Nursing is available for review in the administrative offices and is available for download on the Roseman University website: [College of Nursing Student Handbook - 2025-2026](#)

Location, Contact Information

Roseman University of Health Sciences

College of Nursing

Accelerated BSN, DNPFPNP, DNPNA Program
11 Sunset Way
Henderson, NV 89014
Telephone: (702) 968-1608
Fax: (702) 968-2097
Website: www.roseman.edu

College of Nursing

Accelerated BSN Program, DNPFPNP Program
10920 S Riverfront Parkway
South Jordan, UT 84095
Telephone: (801) 878-1064
Fax: (801) 878-1364
Website: www.roseman.edu

Accreditation

Roseman University of Health Sciences is accredited by the Northwest Commission on Colleges and Universities, 8060 165th Avenue N.E. Suite 100, Redmond, WA 98052, website www.nwccu.org.

The Baccalaureate degree program in nursing at Roseman University of Health Sciences is accredited by the Commission on Collegiate Nursing Education, 655 K Street, NW, Suite 750, Washington, DC 20001, 202-887-6791.

The master's degree program in nursing at Roseman University of Health is accredited by the Commission on Collegiate Nursing Education, 655 K Street, NW, Suite 750, Washington, DC 20001, 202-887-6791.

The Nurse Anesthesiology Program at Roseman University of Health Sciences is accredited by the Council on Accreditation (COA) of Nurse Anesthesia Education Programs, which may be reached at 10275 W. Higgins Rd., Suite 906, Rosemont, IL 60018-5603 or at (224) 275-9130.

The Doctor of Nursing Practice program at Roseman University of Health Sciences is pursuing initial accreditation by the Commission on Collegiate Nursing Education (<http://www.ccnaccreditation.org>). Applying for accreditation does not guarantee that accreditation will be granted.

Licensure

Related to the College of Nursing, Roseman University of Health Sciences is licensed to operate a Bachelor of Science in Nursing, Master of Science in Nursing Family Nurse Practitioner, Doctor of Nursing Practice Family Nurse Practitioner, and Doctor of Nursing Practice Nurse Anesthesia program in the state of Nevada by the Nevada Commission on Postsecondary Education, 2800 E. St. Louis, Las Vegas NV 89104; telephone: 702-486-7330; fax 702- 486-7340. <https://cpe.nv.gov/>

Roseman University of Health Sciences, South Jordan campus is exempt from the registration requirements of the Utah Postsecondary Proprietary School Act. Department of Commerce, Division of Consumer Protection, 160 East 300 South, Salt Lake City, UT 84111; telephone: 801-530-6601; Fax 801- 530-6001; website <https://dcp.utah.gov/>

Approvals

The College of Nursing has full approval from the State Board of Nursing in Nevada and Utah.

Nevada State Board of Nursing

4220 South Maryland Parkway, Suite B300
Las Vegas, NV 89119
Phone: (702) 486-5800 or (888) 590-6726
Fax: (702) 486-5803
Website: <http://nevadanursingboard.org/>.

Utah State Board of Nursing

160 East 300 South
Salt Lake City, UT 84111
Phone: (801) 530-6628 or (866) 275-3675
Fax (801) 530-6511
Website: www.dopl.utah.gov

Non-discrimination Policy

Refer to the Roseman University of Health Sciences University Policy: [University Non-Discrimination Policy](#)

Accommodation

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Financial Responsibilities

Students must fulfill their financial responsibilities to the University in order to remain enrolled in the program. Please see the policy in the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Account for Student Indemnification

The State of Nevada has a bond program to reimburse defrauded students. NRS 394.553 Account for Student Indemnification. The Commission on Postsecondary Education maintains a tuition indemnification fund that may

be used to refund students in the event of a school's closure. Please contact: Nevada Commission on Postsecondary Education; 2800 E. St. Louis, Las Vegas NV 89104; Telephone: (702) 486-7330; Fax (708) 486-7340 for information concerning the fund.

The State of Utah does not reimburse defrauded students.

Evaluation of Prior Credit for VA Students

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

F1 Visa Students

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Privacy Rights

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Emails

Students must check their Roseman email on a daily basis. Roseman University and the College of Nursing use the student's Roseman email as the primary method of communication. Refer to the Computer and Network Acceptable Use Policy on the Roseman website: [Computer and Network Acceptable Use Policy](#)

Recording

Refer to the Roseman University of Health Sciences Policy: [Multimedia Recording by Students Policy](#)

Latex Allergy Policy

For the complete Latex Allergy Policy, please refer to [Latex Allergy Policy](#)

Facilities

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Student Intercampus Transfer Policy

Students enrolled in the Bachelor of Science in Nursing program may request to transfer from the South Jordan Campus to the Henderson Campus or from the Henderson Campus to the South Jordan Campus. The students' request will be considered on a first-come, first served basis, determined by the availability of clinical space. The transfer request may be for academic or personal reasons.

The student must be in good financial standing with the College of Nursing and with the University to be considered eligible for a transfer. Any academic concerns or disciplinary issues and/or grievances must be resolved prior to requesting the transfer.

The student may not transfer in the middle of a didactic or clinical course. A student who withdraws in the middle of a didactic or clinical course and then requests a transfer to the alternate campus will be required to retake the entire course.

The student is responsible for any transfer-related costs.

Transfer Process

The student must submit a written request to the Associate Dean, Academic and Student Affairs or designee and complete the required transfer paperwork at least four weeks prior to the date the course begins unless an exception is granted by the Dean or designee. Verification of the course start dates will be confirmed by the Dean or designee.

Students must submit the paperwork to the Dean, the College of Nursing

College of Nursing Academic Calendar

College of Nursing offices are open for business from 8 a.m. to 5 p.m., Monday through Friday, except as outlined in the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

College of Nursing Mission, Purpose, and Goals

Mission

The mission of the College of Nursing is to educate current and future generations of nurses to serve local, national and globally diverse communities. The College of Nursing encourages innovation through evidence-based practice and research.

Fundamental to this mission is the faculty's commitment to excellence in education, scholarship, and public service. Interprofessional collaboration through affiliation with community partners fosters internal and external outcomes. The College of Nursing endeavors to provide an educational environment that values, respects, and promotes academic freedom for faculty and students in a fiscally responsible manner.

Purpose

The purpose of the nursing program is to provide a quality multifaceted nursing education that enables its graduates to achieve their optimal intellectual and professional development.

The College of Nursing advocates life-long learning, clinical excellence in various healthcare environments, and provision of competent and caring health services to diverse populations.

In addition, the College of Nursing fosters the core values of excellence, competence, integrity and leadership, which provide the framework for students in their professional practice.

Goals

Guided by the core values, the goals of the College of Nursing are to:

- Present a curriculum that provides students with knowledge, skills, and competence to perform the role of a professional nurse in a culturally diverse population and variety of environments.
- Provide an environment that promotes intellectual stimulation and facilitates positive faculty/student relationships.

- Promote the health of communities through educational partnerships and collaborations, faculty service and scholarship, and preparation of graduates who can effectively and professionally respond to societal demands.
- Uphold the integrity of the nursing profession through principled actions and ethical decision making.
- Ensure accountability of our students and faculty.

College of Nursing Philosophy

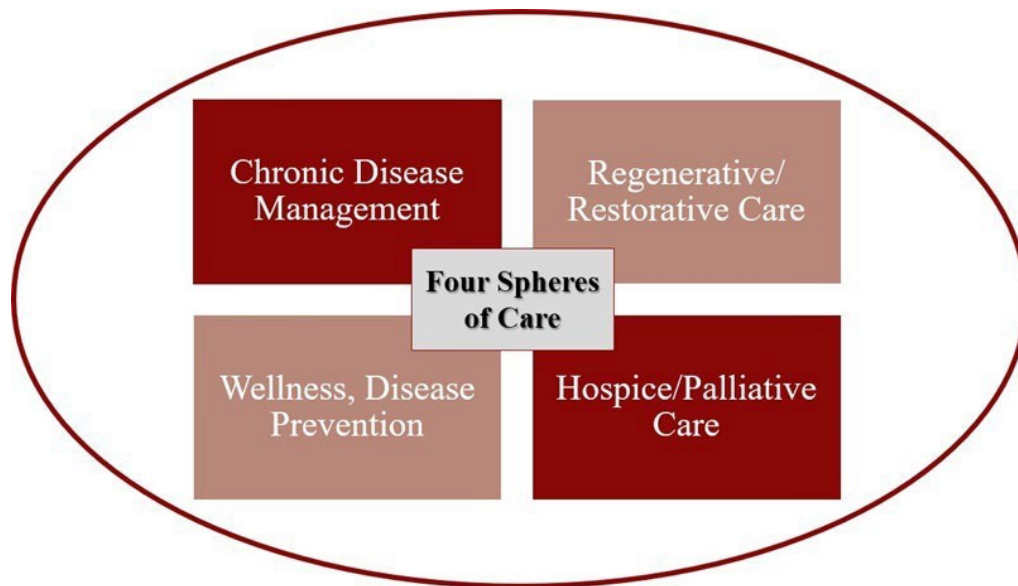
The College of Nursing is positioned within an academic environment that respects the individual, fosters diversity, promotes scholarship, cultivates life-long learning, and makes excellence an imperative. The faculty of the College of Nursing accepts the mission of Roseman University of Health Sciences and supports the concept of an educational system that instills in our students a passion for learning through dynamic curricula. Learning is facilitated by progression of concepts and principles from simple to complex.

Organizing Curriculum Framework

The competencies outlined in the Essentials are applicable across the Four Spheres of Care (disease prevention/promotion of health and wellbeing, chronic disease care, regenerative or restorative care, and hospice/palliative/supportive care), across the lifespan, and with diverse patient population.

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Four Spheres of Care



Domains of Competence



Domain 1: Knowledge for Nursing Practice Descriptor: Integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, as well as knowledge from other disciplines, including a foundation in liberal arts and natural and social sciences. This distinguishes the practice of professional nursing and forms the basis for clinical judgment and innovation in nursing practice.

Domain 2: Person-Centered Care Descriptor: Person-centered care focuses on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized,

just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate. Person-centered care builds on a scientific body of knowledge that guides nursing practice regardless of specialty or functional area.

Domain 3: Population Health Descriptor: Population health spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and non-traditional partnerships from affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes.

Domain 4: Scholarship for Nursing Discipline Descriptor: The generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care.

Domain 5: Quality and Safety Descriptor: Employment of established and emerging principles of safety and improvement science. Quality and safety, as core values of nursing practice, enhance quality and minimize risk of harm to patients and providers through both system effectiveness and individual performance.

Domain 6: Interprofessional Partnerships Descriptor: Intentional collaboration across professions and with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes.

Domain 7: Systems-Based Practice Descriptor: Responding to and leading within complex systems of health care. Nurses effectively and proactively coordinate resources to provide safe, quality, equitable care to diverse populations.

Domain 8: Informatics and Healthcare Technologies Descriptor: Information and communication technologies and informatics processes are used to provide care, gather data, form information to drive decision making, and support professionals as they expand knowledge and wisdom for practice. Informatics processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practice and professional and regulatory standards.

Domain 9: Professionalism Descriptor: Formation and cultivation of a sustainable professional nursing identity, accountability, perspective, collaborative disposition, and comportment that reflects nursing's characteristics and values.

Domain 10: Personal, Professional, and Leadership Development Descriptor: Participation in activities and self-reflection that foster personal health, resilience, and well-being, lifelong learning, and support the acquisition of nursing expertise and assertion of leadership.

Pre-Licensure Student Learning Outcomes

The nursing curriculum of Roseman University of Health Sciences' College of Nursing is built upon a foundation of liberal arts and sciences integrated throughout the nursing courses. The College of Nursing utilizes the Six-Point Mastery Learning Model as the philosophical underpinning of the Nursing Programs. The Six-Point Mastery Learning Model consists of a Block Curriculum, Active and Collaborative Learning, Competency-based Education, Formative and Summative Assessment_Learning, Early Experiential Learning, and a Classroom Design that facilitates learning. All of the Six-Point Mastery Learning components reinforce one another and contribute to an unparalleled educational environment. Course progression is designed to integrate pre-requisite learning with new concepts to further develop critical thinking, clinical judgment and nursing knowledge and skills.

Knowledge of Nursing Practice

- Apply a broad knowledge base that includes theoretical and research-based nursing knowledge integrating knowledge from the arts, humanities and other sciences as a basis for clinical judgment and transformation in nursing practice.

Person-Centered Care

- Provide person and relationship centered care that focuses on holistic, individualized, evidence- based and compassionate care.

Population Health

- Engage in collaborative health care delivery across the continuum that encompasses diversity, inclusion, and equity addressing local, national and global health concerns thereby promoting health and wellness.

Scholarship for the Nursing Discipline

- Implement best evidence gathered from research and clinical practice to improve nursing outcomes for diverse populations.

Quality and Safety

- Apply principles of quality and safety to minimize risk and to improve client outcomes.

Interprofessional Partnerships

- Facilitate intentional collaboration across professions with members of the health care team to optimize the health care experience and to improve client outcomes.

System-Based Practice

- Apply knowledge of systems and systems-based care to coordinate resources and ensure continuity of care.

Informatics and Healthcare Technologies

- Utilize current technologies and informatic processes to manage and improve the delivery of care.

Professionalism

- Develop a professional nursing identity consistent with moral, legal, ethical, and regulatory principles.

Personal, Professional and Leadership Development

- Engage in reflection, self-analysis, self-care and intentional learning to promote personal, professional and leadership development.

Graduate Student Learning Outcomes

Knowledge of Nursing Practice

- 1. Demonstrate advanced clinical judgment and transformation in nursing practice by applying a comprehensive knowledge base that includes theoretical and research-based nursing knowledge. Integrate insights from the arts, humanities, and other sciences to inform and elevate nursing practice.**

Competencies and Sub-Competencies

1.1 Demonstrate an understanding of the discipline of nursing's distinct perspective and where shared perspectives exist with other disciplines

- 1.1e Translate evidence from nursing science as well as other sciences into practice.
- 1.1f Demonstrate the application of nursing science to practice.
- 1.1g Integrate an understanding of nursing history in advancing nursing's influence in health care.

1.2 Apply theory and research-based knowledge from nursing, the arts, humanities, and other sciences.

- 1.2f Synthesize knowledge from nursing and other disciplines to inform education, practice, and research.
- 1.2g Apply a systematic and defensible approach to nursing practice decisions.
- 1.2h Employ ethical decision making to assess, intervene, and evaluate nursing care.
- 1.2i Demonstrate socially responsible leadership.
- 1.2j Translate theories from nursing and other disciplines to practice.

1.3 Demonstrate clinical judgment founded on a broad knowledge base.

- 1.3d Integrate foundational and advanced specialty knowledge into clinical reasoning.
- 1.3e Synthesize current and emerging evidence to influence practice.
- 1.3f Analyze decision models from nursing and other knowledge domains to improve clinical judgment.

Pre-Centered Care

- 2. Deliver advanced practice nursing care that is person and relationship-centered, emphasizing holistic, individualized, evidence-based, and compassionate approaches.**

Competencies and Sub-Competencies

2.1 Engage with the Individual in establishing a caring relationship.

- 2.1d Promote caring relationships to effect positive outcomes.
- 2.1e Foster caring relationships.

2.2 Communicate effectively with individuals.

- 2.2g Demonstrate advanced communication skills and techniques using a variety of modalities with diverse audiences.
- 2.2h Design evidence-based, person-centered engagement materials.
- 2.2i Apply individualized information, such as genetic/genomic, pharmacogenetic, and environmental exposure information in the delivery of personalized health care.

- 2.2j Facilitate difficult conversations and disclosure of sensitive information.

2.3 Integrate assessment skills in practice.

- 2.3h Demonstrate that one's practice is informed by a comprehensive assessment appropriate to the functional area of advanced nursing practice.

2.4 Diagnose actual or potential health problems and needs.

- 2.4f Employ context driven, advanced reasoning to the diagnostic and decision-making process.
- 2.4g Integrate advanced scientific knowledge to guide decision making.

2.5 Develop a plan of care.

- 2.5h Lead and collaborate with an interprofessional team to develop a comprehensive plan of care.
- 2.5i Prioritize risk mitigation strategies to prevent or reduce adverse outcomes.
- 2.5j Develop evidence-based interventions to improve outcomes and safety.
- 2.5k Incorporate innovations into practice when evidence is not available.

2.6 Demonstrate accountability for care delivery.

- 2.6e Model best care practices to the team.
- 2.6f Monitor aggregate metrics to assure accountability for care outcomes.
- 2.6g Promote delivery of care that supports practice at the full scope of education.
- 2.6h Contribute to the development of policies and processes that promote transparency and accountability.
- 2.6i Apply current and emerging evidence to the development of care guidelines/tools.
- 2.6j Ensure accountability throughout transitions of care across the health continuum.

2.7 Evaluate outcomes of care.

- 2.7d Analyze data to identify gaps and inequities in care and monitor trends in outcomes.
- 2.7e Monitor epidemiological and system-level aggregate data to determine healthcare outcomes and trends.
- 2.7f Synthesize outcome data to inform evidence-based practice, guidelines, and policies.

2.8 Promote self-care management.

- 2.8f Develop strategies that promote self-care management.
- 2.8g Incorporate the use of current and emerging technologies to support self-care management.
- 2.8h Employ counseling techniques, including motivational interviewing, to advance wellness and self-care management.
- 2.8i Evaluate adequacy of resources available to support self-care management.
- 2.8j Foster partnerships with community organizations to support self-care management.

2.9 Provide care coordination.

- 2.9f Evaluate communication pathways among providers and others across settings, systems, and communities.
- 2.9g Develop strategies to optimize care coordination and transitions of care.
- 2.9h Guide the coordination of care across health systems.
- 2.9i Analyze system-level and public policy influence on care coordination.
- 2.9j Participate in system-level change to improve care coordination across settings.

3. **Engage in collaborative health care delivery across the continuum of care that encompasses cultural competence, fairness, and accessibility, addressing local, national, and global health concerns. Utilize advanced clinical expertise and leadership skills to promote health and wellness.**

Competencies and Sub-Competencies

3.1 Manage population health.

- 3.1j Assess the efficacy of a system's capability to serve a target sub-population's healthcare needs.
- 3.1k Analyze primary and secondary population health data for multiple populations against relevant benchmarks.
- 3.1l Use established or evolving methods to determine population-focused priorities for care.
- 3.1m Develop a collaborative approach with relevant stakeholders to address population healthcare needs, including evaluation methods.
- 3.1n Collaborate with appropriate stakeholders to implement a sociocultural and linguistically responsive intervention plan.

3.2 Engage in effective partnerships.

- 3.2d Ascertain collaborative opportunities for individuals and organizations to improve population health.
- 3.2e Challenge biases and barriers that impact population health outcomes.
- 3.2f Evaluate the effectiveness of partnerships for achieving health equity.
- 3.2g Lead partnerships to improve population health outcomes.
- 3.2h Assess preparation and readiness of partners to organize during natural and manmade disasters.

3.3 Consider the socioeconomic impact of the delivery of health care.

- 3.3c Analyze cost-benefits of selected population-based interventions.
- 3.3d Collaborate with partners to secure and leverage resources necessary for effective, sustainable interventions.
- 3.3e Advocate for interventions that maximize cost effective, accessible, and equitable resources for populations.
- 3.3f Incorporate ethical principles in resource allocation in achieving equitable health.

3.4 Advance equitable population health policy.

- 3.4f Identify opportunities to influence the policy process.
- 3.4g Design comprehensive advocacy strategies to support the policy process.
- 3.4h Engage in strategies to influence policy change.
- 3.4i Contribute to policy development at the system, local, regional, or national levels.
- 3.4j Assess the impact of policy changes.
- 3.4k Evaluate the ability of policy to address disparities and inequities within segments of the population.
- 3.4l Evaluate the risks to population health associated with globalization.

3.5 Demonstrate advocacy strategies.

- 3.5f Appraise advocacy priorities for a population.
- 3.5g Strategize with an interdisciplinary group and others to develop effective advocacy approaches.
- 3.5h Engage in relationship-building activities with stakeholders at any level of influence, including system, local, state, national, and/or global.
- 3.5i Demonstrate leadership skills to promote advocacy efforts that include principles of social justice, diversity, equity, and inclusion

3.6 Advance preparedness to protect population health during disasters and public health emergencies.

- 3.6f Collaboratively initiate rapid response activities to protect population health.
- 3.6g Participate in ethical decision making that includes diversity, equity, and inclusion in advanced preparedness to protect populations.
- 3.6h Collaborate with interdisciplinary teams to lead preparedness and mitigation efforts to protect population health with attention to the most vulnerable populations.
- 3.6i Coordinate the implementation of evidence-based infection control measures and proper use of personal protective equipment.
- 3.6j Contribute to system-level planning, decision making, and evaluation for disasters and public health emergencies.

Scholarship for the Nursing Discipline

4. Advance scholarship by applying and disseminating evidence, leading practice innovations, and ensuring ethical conduct in scholarly activities. Advocate for nursing contributions and integrate best evidence into practice.

Competencies and Sub-Competencies

4.1 Advance the scholarship of nursing

- 4.1h Apply and critically evaluate advanced knowledge in a defined area of nursing practice.
- 4.1i Engage in scholarship to advance health.
- 4.1j Discern appropriate applications of quality improvement, research, and evaluation methodologies.
- 4.1k Collaborate to advance one's scholarship.
- 4.1l Disseminate one's scholarship to diverse audiences using a variety of approaches or modalities.
- 4.1m Advocate within the interprofessional team and with other stakeholders for the contributions of nursing scholarship.

4.2 Integrate best evidence into nursing practice.

- 4.2f Use diverse sources of evidence to inform practice.
- 4.2g Lead the translation of evidence into practice.
- 4.2h Address opportunities for innovation and changes in practice.
- 4.2i Collaborate in the development of new/revised policy or regulation in the light of new evidence.
- 4.2j Articulate inconsistencies between practice policies and best evidence.
- 4.2k Evaluate outcomes and impact of new practices based on the evidence.

4.3 Promote the ethical conduct of scholarly activities.

- 4.3e Identify and mitigate potential risks and areas of ethical concern in the conduct of scholarly activities.
- 4.3f Apply IRB guidelines throughout the scholarship process.
- 4.3g Ensure the protection of participants in the conduct of scholarship.
- 4.3h Implement processes that support ethical conduct in practice and scholarship.
- 4.3i Apply ethical principles to the dissemination of nursing scholarship.
-

Quality and Safety

5. Enhance advanced level nursing care through quality improvement and policy advocacy. Promote safety by evaluating data, analyzing errors, designing interventions, and fostering

transparency and well-being.

Competencies and Sub-Competencies

5.1 Apply quality improvement principles in care delivery.

- 5.1i Establish and incorporate data driven benchmarks to monitor system performance.
- 5.1j Use national safety resources to lead team based change initiatives.
- 5.1k Integrate outcome metrics to inform change and policy recommendations.
- 5.1l Collaborate in analyzing organizational process improvement initiatives.
- 5.1m Lead the development of a business plan for quality improvement initiatives.
- 5.1n Advocate for change related to financial policies that impact the relationship between economics and quality care delivery.
- 5.1o Advance quality improvement practices through dissemination of outcomes.

5.2 Contribute to a culture of patient safety.

- 5.2g Evaluate the alignment of system data and comparative patient safety benchmarks.
- 5.2h Lead analysis of actual errors, near misses, and potential situations that would impact safety.
- 5.2i Design evidence-based interventions to mitigate risk.
- 5.2j Evaluate emergency preparedness system-level plans to protect safety.

5.3 Contribute to a culture of provider and work environment safety.

- 5.3e Advocate for structures, policies, and processes that promote a culture of safety and prevent workplace risks and injury.
- 5.3f Foster a just culture reflecting civility and respect.
- 5.3g Create a safe and transparent culture for reporting incidents.
- 5.3h Role model and lead well-being and resiliency for self and team.

Interprofessional Partnerships

- 6. Enhance advanced practice care delivery by optimizing interprofessional communication, respecting diversity, and resolving conflicts. Foster effective team dynamics, direct interprofessional initiatives, and promote mutual learning and respect.**

Competencies and Sub-Competencies

6.1 Communicate in a manner that facilitates a partnership approach to quality care delivery.

- 6.1g Evaluate effectiveness of interprofessional communication tools and techniques to support and improve the efficacy of team-based interactions.
- 6.1h Facilitate improvements in interprofessional communications of individual information (e.g. EHR).
- 6.1i Role model respect for diversity, equity, and inclusion in team-based communications.
- 6.1j Communicate nursing's unique disciplinary knowledge to strengthen interprofessional partnerships
- 6.1k Provide expert consultation for other members of the healthcare team in one's area of practice.
- 6.1l Demonstrate capacity to resolve interprofessional conflict.

6.2 Perform effectively in different team roles, using principles and values of team dynamics.

- 6.2g Integrate evidence-based strategies and processes to improve team effectiveness and outcomes.
- 6.2h Evaluate the impact of team dynamics and performance on desired outcomes.
- 6.2i Reflect on how one's role and expertise influences team performance.
- 6.2j Foster positive team dynamics to strengthen desired outcomes.

6.3 Use knowledge of nursing and other professions to address healthcare needs.

- 6.3d Direct interprofessional activities and initiatives.

6.4 Work with other professions to maintain a climate of mutual learning, respect, and shared values.

- 6.4e Practice self-assessment to mitigate conscious and implicit biases toward other team members.
- 6.4f Foster an environment that supports the constructive sharing of multiple perspectives and enhances interprofessional learning.
- 6.4g Integrate diversity, equity, and inclusion into team practices.
- 6.4h Manage disagreements, conflicts, and challenging conversations among team members.
- 6.4i Promote an environment that advances interprofessional learning.

System-Based Practice

7. Apply advanced-practice nursing knowledge of systems and systems-based care to coordinate resources and ensure continuity of care.

Competencies and Sub-Competencies

7.1 Apply knowledge of systems to work effectively across the continuum of care.

- 7.1e Participate in organizational strategic planning.
- 7.1f Participate in system-wide initiatives that improve care delivery and/or outcomes.
- 7.1g Analyze system-wide processes to optimize outcomes.
- 7.1h Design policies to impact health equity and structural racism within systems, communities, and populations.

7.2 Incorporate consideration of cost-effectiveness of care.

- 7.2g Analyze relevant internal and external factors that drive healthcare costs and reimbursement.
- 7.2h Design practices that enhance value, access, quality, and cost-effectiveness.
- 7.2i Advocate for healthcare economic policies and regulations to enhance value, quality, and cost-effectiveness.
- 7.2j Formulate, document, and disseminate the return on investment for improvement initiatives collaboratively with an interdisciplinary team.
- 7.2k Recommend system-wide strategies that improve cost- effectiveness considering structure, leadership, and workforce needs.
- 7.2l Evaluate health policies based on an ethical framework considering cost-effectiveness, health equity, and care outcomes.

7.3 Optimize system effectiveness through application of innovation and evidence-based practice.

- 7.3e Apply innovative and evidence-based strategies focusing on system preparedness and capabilities.
- 7.3f Design system improvement strategies based on performance data and metrics.

- 7.3g Manage change to sustain system effectiveness.
- 7.3h Design system improvement strategies that address internal and external system processes and structures that perpetuate structural racism and other forms of discrimination in healthcare systems.

Informatics and Healthcare Technologies

8. Utilize current technologies and informatic processes to manage and improve the delivery of advanced practice nursing care.

Competencies and Sub-Competencies

8.1 Describe the various information and communication technology tools used in the care of patients, communities, and populations.

- 8.1g Identify best evidence and practices for the application of information and communication technologies to support care.
- 8.1h Evaluate the unintended consequences of information and communication technologies on care processes, communications, and information flow across care settings.
- 8.1i Propose a plan to influence the selection and implementation of new information and communication technologies.
- 8.1j Explore the fiscal impact of information and communication technologies on health care.
- 8.1k Identify the impact of information and communication technologies on workflow processes and healthcare outcomes.

8.2 Use information and communication technology to gather data, create information, and generate knowledge.

- 8.2f Generate information and knowledge from health information technology databases.
- 8.2g Evaluate the use of communication technology to improve consumer health information literacy.
- 8.2h Use standardized data to evaluate decision making and outcomes across all systems levels.
- 8.2i Clarify how the collection of standardized data advances the practice, understanding, and value of nursing and supports care.
- 8.2j Interpret primary and secondary data and other information to support care.

8.3 Use information and communication technologies and informatics processes to deliver safe nursing care to diverse populations in a variety of settings.

- 8.3g Evaluate the use of information and communication technology to address needs, gaps, and inefficiencies in care.
- 8.3h Formulate a plan to influence decision making processes for selecting, implementing, and evaluating support tools.
- 8.3i Appraise the role of information and communication technologies in engaging the patient and supporting the nurse-patient relationship.
- 8.3j Evaluate the potential uses and impact of emerging technologies in health care.
- 8.3k Pose strategies to reduce inequities in digital access to data and information.

8.4 Use information and communication technology to support documentation of care and communication among providers, patients, and all system levels.

- 8.4e Assess best practices for the use of advanced information and communication technologies to support patient and team communications.
- 8.4f Employ electronic health, mobile health, and telehealth systems to enable quality, ethical, and efficient patient care.
- 8.4g Evaluate the impact of health information exchange, interoperability, and integration to support patient-centered care.

8.5 Use information and communication technologies in accordance with ethical, legal, professional, and regulatory standards, and workplace policies in the delivery of care.

- 8.5g Apply risk mitigation and security strategies to reduce misuse of information and communication technology.
- 8.5h Assess potential ethical and legal issues associated with the use of information and communication technology.
- 8.5i Recommend strategies to protect health information when using communication and information technology.
- 8.5j Promote patient engagement with their personal health data.
- 8.5k Advocate for policies and regulations that support the appropriate use of technologies impacting health care.
- 8.5l Analyze the impact of federal and state policies and regulation on health data and technology in care settings.

9. Develop an advanced practice and professional nursing identity consistent with moral, legal, ethical, and regulatory principles for advanced practice level care.

Competencies and Sub-Competencies

9.1 Demonstrate an ethical comportment in one's practice reflective of nursing's mission to society.

- 9.1h Analyze current policies and practices in the context of an ethical framework.
- 9.1i Model ethical behaviors in practice and leadership roles.
- 9.1j Suggest solutions when unethical behaviors are observed.
- 9.1k Assume accountability for working to resolve ethical dilemmas.

9.2 Employ participatory approach to nursing care.

- 9.2h Foster opportunities for intentional presence in practice.
- 9.2i Identify innovative and evidence-based practices that promote person-centered care.
- 9.2j Advocate for practices that advance diversity, equity, and inclusion.
- 9.2k Model professional expectations for therapeutic relationships.
- 9.2l Facilitate communication that promotes a participatory approach.

9.3 Demonstrate accountability to the individual, society, and the profession.

- 9.3i Advocate for nursing's professional responsibility for ensuring optimal care outcomes
- 9.3j Demonstrate leadership skills when participating in professional activities and/or organizations.
- 9.3k Address actual or potential hazards and/or errors.
- 9.3l Foster a practice environment that promotes accountability for care outcomes.
- 9.3m Advocate for policies/practices that promote social justice and health equity.
- 9.3n Foster strategies that promote a culture of civility across a variety of settings.

- 9.3o Lead in the development of opportunities for professional and interprofessional activities.

9.4 Comply with relevant laws, policies, and regulations.

- 9.4d Advocate for policies that enable nurses to practice to the full extent of their education.
- 9.4e Assess the interaction between regulatory agency requirements and quality, fiscal, and value-based indicators.
- 9.4f Evaluate the effect of legal and regulatory policies on nursing practice and healthcare outcomes.
- 9.4g Analyze efforts to change legal and regulatory policies that improve nursing practice and health outcomes.
- 9.4h Participate in the implementation of policies and regulations to improve the professional practice environment and healthcare outcomes.

9.5 Demonstrate the professional identity of nursing.

- 9.5f Articulate nursing's unique professional identity to other interprofessional team members and the public.
- 9.5g Evaluate practice environment to ensure that nursing core values are demonstrated.
- 9.5h Identify opportunities to lead with moral courage to influence team decision-making.
- 9.5i Engage in professional organizations that reflect nursing's values and identity.

9.6 Integrate diversity, equity, and inclusion as core to one's professional identity.

- 9.6d Model respect for diversity, equity, and inclusion for all team members.
- 9.6e Critique one's personal and professional practices in the context of nursing's core values.
- 9.6f Analyze the impact of structural and cultural influences on nursing's professional identity.
- 9.6g Ensure that care provided by self and others is reflective of nursing's core values.
- 9.6h Structure the practice environment to facilitate care that is culturally and linguistically appropriate.
- 9.6i Ensure self and others are accountable in upholding moral, legal, and humanistic principles related to health.

Personal, Professional and Leadership Development

10. Engage in reflection, self-analysis, self-care, and intentional learning to advance personal, professional, and leadership development in advanced practice nursing.

Competencies and Sub-Competencies

10.1 Demonstrate a commitment to personal health and well-being.

- 10.1c Contribute to an environment that promotes self-care, personal health, and well-being.
- 10.1d Evaluate the workplace environment to determine level of health and well-being.

10.2 Demonstrate a spirit of inquiry that fosters flexibility and professional maturity.

- 10.2g Demonstrate cognitive flexibility in managing change within complex environments.
- 10.2h Mentor others in the development of their professional growth and

accountability.

- 10.2i Foster activities that support a culture of lifelong learning.
- 10.2j Expand leadership skills through professional service.

10.3 Develop capacity for leadership.

- 10.3j Provide leadership to advance the nursing profession.
- 10.3k Influence intentional change guided by leadership principles and theories.
- 10.3l Evaluate the outcomes of intentional change.
- 10.3m Evaluate strategies/methods for peer review.
- 10.3n Participate in the evaluation of other members of the care team.
- 10.3o Demonstrate leadership skills in times of uncertainty and crisis.
- 10.3p Advocate for the promotion of social justice and eradication of structural racism and systematic inequity in nursing and society.
- 10.3q Advocate for the nursing profession in a manner that is consistent, positive, relevant, accurate, and distinctive.

Core Performance Standards*

These standards are not used to determine admissions or continued enrollment. They are used to assist the student in determining whether or not accommodations or modifications are needed. Students requiring accommodations during their nursing education regardless of program level must first contact the Registrar/Student Services Office. In order to provide accommodations in a timely manner, the student should notify the Registrar/Student Services Office as soon as possible, preferably before the start of the academic year so that any necessary documentation may be submitted.

Requirement	Standard	Examples
Critical thinking	Critical thinking ability for effective clinical reasoning and clinical judgement consistent with level of educational preparation	<ul style="list-style-type: none">• Identification of cause/effect relationships in clinical situations• Use of the scientific method in the development of patient care plans• Evaluation of the effectiveness of nursing interventions
Professional Relationships	Interpersonal skills sufficient for professional interactions with diverse population of individuals, families, and groups	<ul style="list-style-type: none">• Establishment of rapport with patients/clients and colleagues• Capacity to engage in successful conflict resolution• Peer accountability
Communication	Communication adeptness sufficient for verbal and written professional interactions	<ul style="list-style-type: none">• Explanation of treatment procedures, initiation of health teaching.• Documentation and interpretation of nursing actions and patient/client responses

Mobility	Physical abilities sufficient for movement from room to room and in small spaces	<ul style="list-style-type: none"> • Movement about patient's room, workspaces and treatment areas • Administration of rescue procedures-cardiopulmonary resuscitation
Motor skills	Gross and fine motor abilities sufficient for providing safe, effective nursing care	<ul style="list-style-type: none"> • Calibration and use of equipment • Therapeutic positioning of patients
Hearing	Auditory ability sufficient for monitoring and assessing health needs	<ul style="list-style-type: none"> • Ability to hear monitoring device alarm and other emergency signals • Ability to discern auscultatory sounds and cries for help
Visual	Visual ability sufficient for observation and assessment necessary in-patient care	<ul style="list-style-type: none"> • Ability to observe patient's condition and responses to treatments
Tactile Sense	Tactile ability sufficient for physical assessment	<ul style="list-style-type: none"> • Ability to palpitate in physical examinations and various therapeutic

Southern Regional Education Board, 2016

Social Media Policy

The College of Nursing will follow the American Nurses Association (ANA) principles for Social Networking policy. Failure to follow the policy will be considered unprofessional conduct and may be referred to the University Student Professionalism Board for review.

“Social networks and the Internet provide unprecedented opportunities for rapid information exchange and dissemination among many people but this exchange does not come without risk. Nurses and nursing students have an obligation to understand the nature, benefits and consequences of participating in social networking of all types. Online content and behavior has the potential to enhance or undermine not only the individual nurse's career, but also the nursing profession.”

ANA's Principles for Social Networking

1. Nurses must not transmit or place online individually identifiable patient information.
2. Nurses must observe ethically prescribed professional patient-nurse boundaries.
3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm a patient's privacy, rights or welfare to the attention of appropriate authorities.

6. Nurses should participate in developing institutional policies governing online conduct. [American Nurses Association Social Media Principles](#)

6 Tips to Avoid Problems

1. Remember that standards of professionalism are the same online as in any other circumstance.
2. Do not share or post information or photos (including ‘selfies’ that may inadvertently include facility staff patients, family members or visitors to the facility) gained through the nurse-patient relationship.
3. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
4. Do not make disparaging remarks about patients, employers, or co-workers.
5. Do not take photos or videos of patients on personal devices, including cell phones.
6. Promptly report a breach of confidentiality or privacy.

References:

American Nurses Association. (2011, September). Principles for social networking and the nurse. Silver Spring, MD: Author.

National Council of State Boards of Nursing. (2011, August). White Paper: A nurse’s guide to the use of social media. Chicago, IL: Author.

Curriculum

Students receive one credit hour for every 15 hours spent in a didactic classroom setting, one credit for every 30 hours spent in laboratory, and one credit hour for every 40 hours spent in a clinical setting. The Curriculum is based on a course or block structure which allows students to completely focus on one content area at a time. Nursing courses are outlined in the student catalog.

ABSN Curriculum

The ABSN curriculum (delivered either on campus or hybrid online) consists of 17 blocks and 69 credits delivered over 17-18 months. The entire length of the curriculum is determined by the number of breaks incorporated into the program as determined by the start date of the courses. The course titles and associated credit hours are presented in the student catalog. *

**Subject to change.*

ABSN Course Descriptions

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

DNP/FNP Curriculum

The DNP/FNP online curriculum consists of 25 blocks and 75 credits delivered over 32 months including remediation periods. The entire length of the curriculum is determined by the number of breaks incorporated into the program as determined by the start date of the cohort.

DNPFNP Course Descriptions

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Requirements for MSNFP Degree

Graduation from the College of Nursing with a Master of Science in Nursing Family Nurse Practitioner degree requires successful completion of all courses described in the DNPFNP curriculum through NURS 723 including 750 experiential hours (clinical hours), attendance at all in-person residencies, completion of the Comprehensive Board Predictor, and Master's capstone project, Virtual Poster Symposium, and the MSN portfolio (only applicable for students who are pausing to obtain their MSN degree).

DNPNA Curriculum

The DNPNA hybrid, online curriculum consists of 35 blocks and 116 credits delivered over 3 years including remediation periods. The course titles and associated credit hours are presented in the student catalog. *

**Subject to change.*

DNPNA Course Descriptions

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Graduation

Graduation from the College of Nursing with a Bachelor of Science in Nursing degree requires successful completion of prerequisite coursework and all courses described in the nursing curriculum. Graduation from the College of Nursing with a Doctoral in Nursing Practice (DNP), Family Nurse Practitioner degree requires successful completion of all courses described in the DNP-FNP curriculum, including 750 experiential hours (clinical hours), attendance at all in-person residencies, University Predictor, doctoral capstone project, Virtual Poster Symposium, and the MSN portfolio (only applicable for students who are pausing to obtain their MSN degree). Additionally, students are required to complete an additional 250 hours to satisfy the requirements for the DNP degree. Total hours for the DNP/FNP degree is 1000 hours. Graduation from the College of Nursing with a Doctor of Nursing Practice Nursing Anesthesia degree requires successful completion of all courses described in the nursing curriculum including completion of clinical hours and experiences in accordance with Council on Accreditation standards of accreditation.

Final Formative Assessment

The UWorld Formative Assessment is completed as the final assessment for Concept Integration (NURS 432). Students must retake the final formative assessment until they successfully pass the examination with a score of 70 percent.

Remediation of the Final Formative Assessment:

Retaking the examination may occur no less than two (2) weeks after the initial attempt and two (2) weeks between each attempt thereafter. The student will receive an "Incomplete" for NURS 432 (course 12.0) until successful completion of the examination. Between the first and any subsequent attempt at the assessment, students will work with their cohort advisor, remediation specialist, or Associate Dean, Student and Academic Affairs to develop a weekly plan for success.

National Council Licensure Examination NCLEX

Students must file a request to take the NCLEX after graduation and receipt of transcripts. Since the NCLEX is a computerized exam, candidates select the date and time to take their exam after graduation from the College of Nursing. Graduates may take the exam outside of Nevada or Utah. However, they should contact the state board of nursing in the state where they plan to receive initial licensure.

The NCLEX Code for College of Nursing, Henderson Campus is: **US89500600**

The NCLEX Code for College of Nursing, South Jordan Campus is: **US38501000**

Students who have been convicted of or have had an adjudication of guilt withheld on any criminal matter are encouraged to contact the Board of Nursing in the state in which they desire to become licensed to discuss eligibility for licensure. Eligibility for licensure is determined by the State Board of Nursing.

Questions regarding eligibility for registered nursing licensure in Nevada should be directed to:

Nevada State Board of Nursing
5011 Meadowood Mall Way #201
Reno, NV 89502
Telephone: (775) 687-7700
FAX: (775) 687-7707 OR

Nevada State Board of Nursing
4220 South Maryland Parkway, Suite B300
Las Vegas, NV 89119
Telephone: (702) 486-5800
Toll Free: (888) 590-6726
FAX: (702) 486-5803
Website: <http://nevadanursingboard.org>
Email: lasvegas@nsbn.state.nv.us

Questions regarding eligibility for registered nursing licensure in Utah should be directed to:

Departments of Professions and Licensing
160 East 300 South
Salt Lake City, UT 84111
Telephone: (801) 530-6628
Toll Free: (866) 275-3675
FAX: (801) 530-6511
Website: www.dopl.utah.gov
Email: doplweb@utah.gov

For questions regarding eligibility for registered Nursing licensure in other states, students should contact the appropriate State Board of Nursing.

Comprehensive Board Predictor (DNP-FNP)

A Doctor in Nursing Practice - Family Nurse Practitioner (DNP-FNP) certification examination online review includes written and video materials in all content areas. Students are encouraged to use this material to supplement course work, and faculty members may assign the materials during the course and/or as part of active learning/remediation following assessments.

Assessments:

Standardized assessments will help the students to identify what they know as well as areas requiring active learning/remediation. There are practice assessments available to the students and standardized proctored assessments that are scheduled during a course.

Active Learning/Remediation:

Active learning/remediation is a process of reviewing content in an area that was not learned or not fully understood as demonstrated on an assessment. This is intended to help the student review important information that is important for success in courses and on the FNP certification examination. A student's individual performance profile will contain a listing of topics for remediation and detailed nursing process information to review.

Pre-Predictor Assessment:

The pre-predictor assessment is assigned one month prior to the comprehensive university predictor. The online pre-predictor assessment is proctored using an online proctoring program called Proctorio. The result of the pre-predictor assessment will help guide the students study plan in preparation for the university predictor assessment, which will take place during residency 2.

Practice Questions:

Students must complete the practice questions before taking the university predictor. There are 800 practice questions included in the online review.

Comprehensive University Predictor:

The comprehensive university predictor is the final step in the MSN-FNP portion of the DNP-FNP program in which students enter their FNP certification examination preparation. The university predictor assessment is proctored to mimic the certification examination. Students will have 180 minutes or three (3) hours to complete 150 FNP certification exam type questions. This assessment will help determine basic comprehension and mastery of core principles and provides predicted probability of passing the certification examination. Students who do not score at least 70% in the comprehensive predictor assessment will need to take it again. Students who score 70% or higher in the university predictor are more likely to pass the certification examination.

Comprehensive University Predictor Remediation:

Students who do not achieve 70% in the university predictor will receive an incomplete (I) in NURS 511. Retakes of the university predictor assessment are permitted every four (4) weeks until the student achieves a score of at least 70%. Students who have not achieved a 70% score in the university predictor assessment after their third (3rd) attempt must enroll and complete an FNP review course at the student's expense and then take the university predictor assessment again. Students must submit the certificate of FNP review course completion/continuing education before scheduling the university predictor assessment.

National Family Nurse Practitioner Certification Examination

DNPFNP graduates must hold a master's, postgraduate, or doctoral degree from a family nurse practitioner program accredited by the CCNE or ACEN in order to be eligible for one of the national examinations to be certified as a Family Nurse Practitioner, which is required in order to be licensed to practice as an FNP in most states. While the DNP-FNP program is designed to lead to licensure, authorization, endorsement, or other state credential necessary to practice as a nurse practitioner, it is the prospective student's responsibility to understand, evaluate, and comply with all requirements relating to nursing practice in the state in which he or she intends to practice as requirements vary widely. Roseman University of Health Sciences makes no representations or guarantee that completion of coursework or programs will permit an individual to obtain state licensure, authorization, endorsement, or other state credential. For more information about the requirements to practice, students should contact the appropriate Board of Nursing or state agency.

Two organizations currently offer national certification exams annually to family nurse practitioner students graduating from an accredited master's degree program. Roseman University of Health Sciences makes no specific recommendations regarding the examinations offered by national certifying organizations. The organizations are:

- (1) The American Academy of Nurse Practitioners (AANP)
- (2) The American Nurses Credentialing Center (ANCC)

The American Association of Nurse Practitioners (AANP) offers national certification for three nurse practitioner specialties including family nurse practitioner. This is a competency-based computer test offered year-round. Potential candidates may obtain information about the exam at <https://www.aanpcert.org/certs/index>.

The application process can be found here <https://www.aanpcert.org/certs/process>.

Contact:

The American Association of Nurse Practitioners Certification Board
Capitol Station, LBJ Bldg.,
P.O. Box 12926
Austin, TX, 78711-2926
Telephone: (512) 637-0500
Toll Free: (855) 822-6727
Fax: (512) 637-0540
Email: Certification@aanpcert.org

The American Nurses Credentialing Center (ANCC) offers national certification exams in advanced practice specialties. This is a competency-based computer test offered year-round. You can locate information about the family nurse practitioner exam and certification process here <https://www.nursingworld.org/our-certifications/family-nurse-practitioner/>.

Contact:

American Nurse Association
8515 Georgian Avenue, Suite 40
Silver Spring, MD 20910-3492
Telephone: 1-800-284-2378
Email: certification@ana.org

Self-Evaluation Examination (DNPNA)

DNPNA Graduation from the College of Nursing with a Doctor of Nursing Practice Nursing Anesthesia degree requires successful completion of all courses described in the nursing curriculum including completion of clinical hours and experiences in accordance with Council on Accreditation standards of accreditation. Self-Evaluation Exam. The Self-Evaluation Examination (SEE) is completed as the final assessment for NURS 729. Students must achieve a passing score of 450 which predicts a high likelihood of success on the certification exam. Students can retake the Predictor until they successfully pass the examination.

Remediation of the Self-Evaluation Exam

Retakes of the SEE are permitted every 2 weeks until the student achieves a score of 450. Students who do not pass the SEE will receive an incomplete (I) until a passing score is achieved. Students who have not passed the SEE after their third (3rd) attempt must re-enroll in the certification review in preparation for the next SEE attempt.

National Certification Exam for Nurse Anesthetists

DNPNA graduates must, amongst other requirements, hold a doctoral degree from a nurse anesthesia educational program accredited by the COA in order to be eligible for the National Certification Exam (NCE) to be a Certified Registered Nurse Anesthetist (CRNA), which is required in order to be licensed to practice as a CRNA. While the DNPNA program is designed to lead to licensure, authorization, endorsement, or other state credential necessary to practice as a CRNA, it is the prospective student's responsibility to understand, evaluate, and comply with all requirements relating to nursing practice in the state in which he or she intends to practice as requirements vary widely. Roseman University of Health Sciences makes no representations or guarantee that completion of coursework or programs will permit an individual to obtain state licensure, authorization, endorsement, or other state credential. For more information about the requirements to practice, students should contact the appropriate Board of Nursing or state agency.

The National Certification Exam is offered through the National Board of Certification and Recertification for Nurse Anesthetists. You can locate information about the NCE here <https://www.nbcrna.com/>

Contact:

National Board of Certification and Recertification for Nurse Anesthetists
8725 W. Higgins Road, Suite 525
Chicago, IL, 60631
Email: support@nbcrna.com

Attendance of Instructional Periods

Active learning and team activities are a critical component of the Roseman educational model supporting each student's achievement of competence and mastery. It is expected that all students will attend all instructional sessions, assessments, and remediation/ reassessment periods. Absence from instructional periods for any reason does not relieve the student of responsibility for the material covered during the missed periods. In the case of hybrid, online ABSN, & hybrid online DNPNA courses, attendance is based upon participation in discussions and/or group activities, and timely submission of assignments as described and required in the syllabus for each individual course.

Attendance of Assessments and Remediation

If a student is ill or experiences a personal or family emergency that would prevent the student from taking a assessment or reassessment, the student must request an excused absence. Students shall make this request to the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFPN Program). The decision to grant an excused absence is at the sole discretion of the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students). Should a student not provide requested documentation, or should a student fail to inform within the timeframes specified below, an excused absence may be denied, and the student will receive a No Pass for that assignment, assessment, and/or reassessment. Falsification of documentation is considered a violation of the College's Standards of Professional Conduct and will result in disciplinary action up to and including termination. Requests for excused absences may only be granted for the five (5) following reasons:

Student Illness

Should a student be unable to take a scheduled assessment or reassessment due to illness, the student must notify the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFPN Program) and course faculty no later than the 30 minutes prior to the scheduled assessment start time on the day of the assessment or reassessment. Notification can be made by telephone, Teams message or e-mail. In order for an excused absence to be considered, a letter from an appropriate licensed practitioner within their scope of practice who evaluated the student related to the present illness, including dates the student is unable to attend class activities, must be received no later than one business day following the missed assessment/reassessment. The provider cannot be an immediate family member of the student in question and must have been involved in the provision of care for the illness. Electronic or hard copy of the letter may be accepted. The Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFPN Program) reserves the right to require the student to provide additional information and/or documentation beyond that listed above if deemed pertinent in determining whether or not an absence should be approved.

Personal or Family Emergency

Should a student experience an emergency personally or in the student's immediate family ("immediate family" is defined as parent, guardian, spouse, child, or sibling) that would preclude the student from attending a scheduled assessment or reassessment, the student must notify the Associate Dean, Academic and Student Affairs and course faculty as soon as possible following the event, but no later than the scheduled assessment start time on the day of the assessment/reassessment. "Emergency" situations include, but may not be limited to hospitalization, death, or other unforeseen, debilitating events.

Notification can be made by telephone, Teams message or e-mail. A request for an excused absence, due to a personal or family emergency, is only granted by the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFPN Program). The Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFPN Program) may request that the student provide documentation of the emergency in order to determine if granting an excused absence is warranted.

Bereavement

A student may request an excused absence from an assessment or reassessment to attend scheduled funeral services for a close friend or family member. The funeral service must be scheduled within two calendar days of the date of the assessment/reassessment to receive an excused absence. The student must notify the Associate

Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFNP Program) at least two business days prior to the requested absence. Documentation in the form of a death certificate, funeral program and/or an obituary will be required for an excused absence to be approved and must be submitted prior to any scheduled make-up assessments as required by the attendance policies outlined in the clinical guidelines section of the Student Handbook.

Religious Observance

It is the policy of Roseman University of Health Sciences and the College of Nursing to be sensitive to the religious obligations of its students. Should a student be unable to take a scheduled assessment or reassessment due to a religious obligation, the student must request an excused absence from the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFNP Program) as soon as possible, **but not later than the end of orientation week**. The Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFNP Program) reserves the right to require the student to provide additional information and/or documentation from a clergyman confirming the religious prohibition asserted by the student if deemed pertinent in determining whether or not an excused absence should be granted.

Attendance of Professional Meetings

The College encourages students to attend nursing professional meetings. In order to receive an excused absence for an assessment/reassessment scheduled during a nursing professional meeting, each student attending the meeting must individually submit a request, in writing to the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNP/FNP Program) at least two weeks prior to the assessment/reassessment. The request must be accompanied by a copy of the student's accepted registration for the meeting.

Excused Missed Assessments, Reassessments, and Block Remediation

Requests for excused absences are only granted for initial assessments and/or initial reassessments. Makeup assessments and reassessments must be completed by the deadlines outlined below or students will receive a grade of No Pass and be required to attend the next remediation period scheduled for that course. Excused absences are not permitted for makeup assessments or makeup reassessments. Students with prolonged illnesses or other personal issues that result in multiple absences may be denied the ability to reassess due to required timelines for progression and will be asked to consult with a College administrator regarding taking a leave of absence (see [Leave of Absence](#)).

If an absence from a scheduled assessment is excused, the student will be assessed during the scheduled reassessment. Since the student could not participate in the team assessment, the student will not be entitled to receive team points on their initial assessment. The student who had an excused absence and took their initial assessment as the reassessment will have the opportunity to reassess their initial assessment. The makeup assessment must be completed within two business days of the reassessment. Otherwise, the student will receive a No Pass and will be required to attend the next remediation period for that course.

If an absence from a scheduled reassessment is excused, the student will have the opportunity for a makeup reassessment. The makeup reassessment must be completed within two business days of the scheduled reassessment.

If the student does not complete within two business days the student will receive a No Pass and will be required to attend during the next block remediation period for that course. If a student has an excused absence for both

the assessment and the reassessment, the student will have the opportunity for a makeup assessment and reassessment.

The makeup assessment and, if necessary, the makeup reassessment, must be completed within five business days of the initial assessment. If the student has not passed the makeup assessment or reassessment within five business days of the initial assessment, the student will receive a No Pass and will be required to attend the next remediation period for that course.

Assessment review will be provided for makeup assessments or reassessments which may be a previously recorded review which can be viewed by the student or an in person/virtual meeting with faculty oversight. The date and time of the makeup assessment or reassessment will be scheduled during regular business hours.

Unexcused Missed Assessments, Reassessments, and Block Remediation

If an absence from a scheduled assessment is unexcused, the student will receive a No Pass on that assessment. The student will be required to attend the scheduled reassessment for the missed assessment.

If an absence from a scheduled reassessment is unexcused, the student will receive a No Pass on that assessment. The student will be required to attend the next scheduled block remediation assessment for that course.

If an absence from a scheduled block remediation assessment is unexcused, the student will receive a No Pass in the course and will be required to repeat the course with a subsequent cohort pending space availability.

Following the first unexcused absence from a regular course assessment or reassessment, the student will be placed on academic probation and receive an Academic Intervention Plan to include written notification that additional unexcused absences will result in academic suspension from the College of Nursing.

Following the second unexcused absence from a regular course assessment or reassessment, the student will be placed on academic suspension and receive an Academic Intervention Plan to include written notification that additional unexcused absences will result in academic termination from the College of Nursing.

Following the third unexcused absence from a regular course assessment or reassessment, the student will be terminated from the College of Nursing and not eligible for automatic readmission to a subsequent cohort. The student may re-apply to the College of Nursing through the College's Admissions Application process as outlined in the 2025-2026 Student Catalog.

Paper or Project-Based Assessments

Selected Blocks in the pre-licensure and post-licensure program utilize alternative methods of summative assessment for student evaluation and grade determination. The due date and time of submission is considered for the purpose of identifying assessment attendance in these Blocks. Students who fail to submit the summative assessment item by the date and time indicated by the course faculty will be considered Unexcused and will follow the policy as outlined in the Unexcused Missed Assessments, Reassessments, and Block Remediation section.

Class Start Time, Assessment Start Time and Class Hours Policy

The stated class hours for the didactic portion of the ABSN Hybrid In Class and classroom DNPNA curriculum are from 8:00 am to 3:00 pm per course calendar. Punctuality is an expected attribute of professional students. Should a student arrive late, the student may be instructed to wait in a breakout room or in the hallway until the next scheduled break to avoid disrupting members of the class and faculty members.

Similarly, assessments are scheduled to begin as posted in the syllabus. Start times for the individual assessment, team assessment, and expert review will be clearly communicated to the students in accordance with the Assessment Policy. Times for reassessments will be communicated to students in accordance with the Assessment Policy. The scheduled dates for assessments and reassessments are set. The dates for scheduled assessments and reassessments are published in the course Calendar. These dates are communicated to students in writing upon receiving each course calendar. Any deviations from this policy must be approved in advance by the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students, or Director DNPFNP Program)

Program Progression

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Pre-licensure & DNPNA Program (Classroom Blocks) Assessment Process

Roseman University's College of Nursing (CON) adheres to a standardized process for all course assessments. Adhering to a standardized process helps to ensure that all assessments are conducted in a consistent and fair manner. Students are expected to be familiar with the guidelines contained within the assessment policy, which outlines the steps and procedures for both assessments and reassessments.

Assessments

- Used to determine mastery learning of course content and are included in every course.
- Depending on the length of the course, there will be one [1] or two [2] assessments or an alternative evaluation such as a paper or presentation.
- All exams are worth 60 points (the number of questions may vary).
 - Exception: ABSN Pharmacology block remediation is worth 80 points.
- Reassessments, including block reassessments, evaluate identical concepts.
- The faculty will conduct a review prior to each assessment and reassessment.
- All BSN assessments will follow the NCLEX guidelines.
 - All assessments will include NGN questions, these questions will be worth partial credit.
 - All assessment will include "Select All That Apply" questions. These questions will be worth partial credit with plus/minus scoring.
 - Backward navigation will not be accessible on assessments

Assessment Administration

- Exemplify is the platform used to take course assessments.
- All pre-licensure student assessments are taken using a Roseman issues electronic device.
- Students are expected to maintain their Roseman device.
- If a student requests an alternate device, the following requirements must be met.
 - At least one week prior to the assessment, any non-school issued device must be inspected and approved for use in writing by the Associate Dean of Academic and Student Affairs or designee (or Director, Nurse Anesthesia Program for DNPNA students).
 - The serial number of the approved device will be noted in the approval letter and will be recorded and maintained by the office of the Associate Dean of Academic and Student Affairs (or Director, Nurse Anesthesia

Program for DNPNA students).

- Students will not be permitted to participate in the assessment if they do not have an approved device, this will result in a “no pass” on the assessment or reassessment.
- The faculty are responsible to ensure all students have a Roseman approved device.
- Malfunction of an approved device will be resolved on a case-by-case basis with the faculty member teaching the course, and an Associate Dean of the College of Nursing (or Director, Nurse Anesthesia Program for DNPNA students) and the IT help desk.
- It is the student’s responsibility to ensure the approved device has sufficient power (either by batter charge or charging cord) for the entire duration of the assessment.
- If a student’s device loses charge during the assessment, they will not be allowed to continue and the last saved record in the electronic assessment system will be the student’s final score.
- If an assessment item has a typographical error or grammatical mistake that is noticed during the assessment process, the faculty should put the correction on the overhead [stem of the question and response to be corrected].
- Corrections are not made verbally during the assessment.
- If a student with ADA accommodation is taking an assessment in another location, any changes must be communicated to that student through the ADA proctor.

Assessment Rules

- Students are expected to download the assessment as instructed by faculty, the day before the assessment.
- Students will place all personal belongings in a designated location upon arrival for the assessment. Students are not allowed to have any electronics (smartwatch, phones, optical head- mounted display type eyewear, etc.) other than their Roseman approved laptop in the assessment area.
- Students are not permitted to access electronic devices or personal items during the assessment process. Failure to comply will result in a “No Pass” for the assessment.
- Students may access water bottles from a designated location during breaks.
- Students will not be permitted to wear hats, coats, jackets, hoods, sunglasses, or blankets during any portion of the assessment. Failure to comply will result in a “No Pass”.
- Assessments will begin at 8:00 am [HD] and 9:00 am [SJ].
 - Students will be present to sign in with their Roseman University ID and will sign in on the designated sheet from 7:30-7:55 am [HD], 8:30-8:55 am [SJ].
 - Students will not be admitted into the assessment room after 7:55 am [HD], 8:55 am [SJ].
 - If a student does not have a Roseman ID, they must obtain a temporary badge with a valid ID.
- Assessments will not be delayed for a student without the appropriate ID.
 - Students will sit in the seat designated by the proctor
 - Students must be in their designated seat prior to the assessment in order to participate in the assessment process.
 - A student who is not in their designated seat will receive a “No Pass” for the assessment and will be required to participate in the reassessment.

- A proctor may request a student move to another seat at any time during the assessment.
- Failure to comply with the designated seating process will result in a “No Pass”.
- ADA students will be held to the same standards and rules.
- Students will receive scratch paper, pencil, and ear plugs from faculty prior to the individual assessment and expert review.
 - Students will write their name at the top of their scratch paper.
 - All scratch paper will be given to the proctor and accounted for, prior to the team assessment and EBR.
- Students who are disruptive or non-compliant with faculty direction(s) and/or policy during any part of the assessment process may be removed.
 - Removal from an assessment may result in a “No Pass” for the assessment and/or course.
 - If a student is removed from an assessment they will be required to meet with the Associate Dean of Student Affairs and will receive an Academic Intervention Plan (AIP).
- Students will be given the assessment password verbally by faculty or designated proctor at the beginning of the assessment.
- Students will log in to Exemplify and will stop at the yellow screen until all students are logged in.
- Once all students have reached the yellow screen, the proctor will tell them to begin.
- Once a student finishes the assessment, they will click submit and wait for the green screen to appear. Once they have reached this screen, the student will close their laptop.
- Students who finish the assessment early will remain in their seat and may complete material provided by the proctor.
- Once the assessment is complete, the proctor will ensure all assessments are uploaded under the Exam Taker Activity tab.
- Assessment time allotment is as follows:

Points	Individual Assessment	Team Assessment	EBR	Remediation EBR
60 points	90 minutes	60 minutes	60 minutes	75 minutes

- Exception: ABSN Pharmacology Dosage Calculations will be allotted 2 minutes per question

Communication and Breaks

- Students will receive a 10-minute break after the individual assessment and expert review.
- Students will receive a 30-minute lunch after the team assessment.
- Students cannot access any personal items during any of the assessment breaks including but not limited to backpacks, electronic devices, books, coats, or jackets.
 - Exception: Students may access personal items during the lunch break.
- If a student believes they require nutrition during any portion of the assessment, they

must request ADA accommodation from the Office of Student Services.

Team Assessment

- When the students return from the 10-minute break, the proctor will provide the teams with the team assessment password.
- All students must participate in the team assessment process.
- If a student is late for team assessment, they will not be permitted to participate and will forfeit team points.
- Each team will be allowed one laptop, this should be the team leader's laptop.
 - The team leader is responsible for downloading the team assessment the day before the assessment.
- Each team will be provided with one piece of paper and pencil that will be submitted to the faculty at the end of the team assessment.
 - Students must write their team number at the top of their scratch paper.
- During the team assessment, students may list any questions or items they would like clarified during the expert review with faculty.
- The proctor will gather all paper and pencils given to each team at the end of the team assessment.
- Students may not communicate with individuals from another team during the team assessment.
 - Any communication between teams during the team assessment will result in a "No Pass" for all team members from both teams for the team assessment and team points will be forfeited.
- Individual teams may be given their team score prior to the lunch break.
- Each team member scoring 90% or greater on the team assessment will be awarded an additional 5% on their individual assessment score.
 - 60 points = an additional 3 team points (5%)
 - 80 points = an additional 4 team points (5%)

Expert Review

- Expert review will begin following the 30-minute lunch break.
- During the expert review, the course faculty will review all assessment questions and rationales with the students, allowing time to clarify all student questions.
- Faculty will place the assessment questions and rationales on the monitors in the classroom so students can see the question and rationale.
- Students will be provided with scratch paper and pencil by faculty for note taking during the expert review.
 - All other personal items including laptops, cell phones, and smart watches will remain in a designated location.
 - All scratch paper and pencils will be returned to faculty upon completion of the assessment process.
- Any student who is disruptive, argumentative, or unprofessional as outlined in the student handbook may be asked to leave the expert review.
 - Any student asked to leave will meet with the Associate Dean of Student Affairs.
 - The student will forfeit their team assessment points and will not be allowed

- to participate in the EBR process.
- The student will receive an Academic Intervention Plan (AIP)

Evidence-Based Review Assessment [EBR]

- At the completion of the expert review, teams can request a review of selected assessment questions.
- The proctor will give each team lead the EBR password.
 - The team leader is responsible for downloading the EBR the day before the assessment.
- Students are permitted to use one additional laptop during the EBR segment of the assessment. This laptop may only be used to access approved course electronic textbooks.
- The additional laptop must not be used for any other purpose, including but not limited to internet searches, communication, or accessing unauthorized materials.
- Assessment content is the intellectual property of Roseman University College of Nursing and as such is considered copyright material.
- There is a zero-tolerance policy for cheating or academic dishonesty. The following actions and consequences apply:
 - Cheating includes, but is not limited to, using unauthorized materials, accessing non-approved websites, or duplication of any part of the assessment into any format.
 - Duplication of assessment content is considered a copyright infringement.
 - Accessing anything other than the approved electronic textbooks or materials on the additional laptop will be considered cheating.
 - The consequences for cheating are as follows:
 - Team Accountability: If any team is caught engaging in cheating behavior, all members of the team will receive a "No Pass" for the assessment.
 - Individual Accountability: If a student is found to be using their additional laptop or primary laptop for purposes other than accessing approved electronic textbooks during the EBR, the student will face disciplinary action including but not limited to termination from the College of Nursing.
- Any suspected instance of cheating must be reported immediately to the proctor/faculty.
- During reassessment or block remediation, if there is only one student, the College of Nursing will provide the student with an additional laptop for accessing approved course electronic textbooks.
- In the event of internet connectivity issues, students will be supplied with hard copies of textbooks.
- Students may use a personal hard copy of assigned course textbooks during the EBR.
- While proctoring the EBR, faculty will not participate in the process or make suggestions to students.
- All evidence-based review requests are required to have a reference from the course material in order to be considered.
 - References must include the textbook name, current edition, and page number to be reviewed.
- All items requested for structural review are not required to have a reference.

- When students have completed and submitted the EBR and returned their scratch paper, they are dismissed from the assessment process.
- Faculty will ensure that all whiteboards, front and back, are erased and all testing items are removed from the classroom.

Review of Student EBR Requests and Item Analysis Review

- All EBR requests are reviewed by an Associate Dean of the College Nursing (or Director, Nurse Anesthesia Program for DNPNA students), and faculty teaching the course.
- All decisions about acceptance or denial of an EBR request will be made by the end of the assessment day.
- The students' grades are adjusted/calculated in ExamSoft prior to releasing final grades.
- Final grades will be released to students via ExamSoft.
 - Students may log in to ExamSoft and review their strengths and opportunities report.
- Upon completion of item analysis and review of EBR, no additional challenges or changes are accepted.
- Students will receive an email that includes a brief explanation of EBR requests.

Reassessments

- Students who do not achieve a 90% on the individual assessment will participate in the reassessment process.
- Students participating will receive additional assignments and learning opportunities as deemed appropriate by the faculty.
- There will be a minimum of 24 hours scheduled between the assessment and reassessment.
- Students participating in the reassessment will follow the same assessment rules and guidelines as outlined above with the following exceptions:
 - Students do not participate in a team assessment or receive a 30-minute break; therefore, the expert review will immediately follow the individual assessment and 10-minute break.
- Students must actively participate in the EBR until all students have completed their submissions.
 - Participation includes submitting individual EBR's and/or assisting other students with an EBR.
- Students must achieve a 90% on the reassessment to receive a "Pass".
- Students scoring less than 90% will receive a "No Pass" for the reassessment and will participate in the Block Remediation Assessment.
- Students participating in the Block Remediation Assessment will receive an AIP that must be completed within one business day and returned to faculty.

Block Remediation

- Students participating in the Block Remediation Assessment will follow the same procedures as the reassessment.
- If a student achieves a 90% or greater on the Block Remediation Assessment, they will

receive a “Pass” for the course.

- If a student achieves an 85%-89.9% on the Block Remediation Assessment, they will be eligible to participate in the Block Remediation Additional 5%, if they have met all of the criteria outlined in the assignment.
- Students who do not meet the criteria for the additional 5% will receive a “No Pass” and will meet with the Dean, College of Nursing to determine next steps.

Block Remediation Additional 5%

- Students participating in block remediation are eligible to receive an additional 5% if the following criteria are met:
 - The student achieves an individual score on the Block Remediation Assessment of 85%- 89.9%.
 - The student has submitted all required assignments and remediation activities for the course in Canvas (assignments and activities are determined by individual faculty teaching the course).
 - The student has participated in all required assessment(s) for the course.
 - The student has participated in the reassessment(s) for each individual where a 90% minimum score was not achieved.
 - The absence policy will be followed regarding excused and unexcused absences from assessments.
- The Block Remediation 5% Assignment will consist of the following requirements. If the requirements are met, the student will receive an additional 5% on the Block Remediation Assessment to achieve a passing score. The requirements are as follows:
 - A “Health Concept” template or “Professional Concept” template will be completed for each **concept** that was answered incorrectly on the Block Remediation Assessment.
 - Additional assignments will be given to assess competency on all questions marked incorrectly on the Block Remediation Assessment.
- The student will meet individually with one member of the course faculty to review their Strengths and Opportunities report and receive their individualized assignment. This will be included in the block remediation AIP documentation.
 - Due date & time will be determined by faculty, taking clinical shifts immediately following block remediation into consideration.
- The Block Remediation Assignment will be submitted in the appropriate module in Canvas at the day & time designated in writing by the course faculty (No late submissions will be accepted).
- Faculty will have one business day to grade the Block Remediation Assignment once it is submitted. The assignment will be graded by the course faculty using the designated rubric.
- The faculty will notify the Director/Assistant Director of Clinical Resources (or Director, Nurse Anesthesia Program for DNPNA students or Director, Family Nurse Practitioner Program for DNPFP students), clinical coordinators, Associate Deans and Dean, College of Nursing of the “Pass/No Pass” grade once the Block Remediation Assignment has been graded.
- Faculty will attach the student’s block remediation assignment to their AIP.
- If the student receives a “No Pass” on the Block Remediation Assignment, they will not be eligible to receive the additional 5%.
- The student receiving a “No Pass” will meet with the Dean, College of Nursing to be

withdrawn in accordance with the College's Progression Policy.

Final Grades

- Final block grades must be submitted to the Dean's administrative assistant within two [2] days of completion of the block.
- Once a student has passed block remediation, a grade change will be submitted using the appropriate template.

Additional Reassessment Information

- Successful remediation of the Assessment(s) will result in a pass "P" for the course.
- A student who receives a no-pass ("NP") after any reassessment must attend the scheduled comprehensive remediation period, complete all requirements for the course (s) and take the comprehensive assessment during the designated course remediation period.
- Students who successfully remediate the course during the designated comprehensive remediation period, will receive a pass "P" for the course.
- Any team points earned during the initial assessment will not be awarded for the reassessment.
- Students who receive a no-pass "NP" following the comprehensive remediation periods will be required to complete the academic withdrawal process as indicated in the progression policy.
- No review of prior assessments will be allowed for students repeating a course.

Graduate Program (MSNFP/DNFPNP) Assessment Process

Students enrolled in graduate courses are evaluated on mastery of course outcomes through submission of scholarly papers, student presentations, individual and/or group projects, participation in course discussion boards, and summative assessments via Exemplify©: as identified in the block syllabus. Specific course requirements and dates of submission are outlined in block syllabi. Comprehensive grading rubrics will be available in each course to provide students with detailed expectations for graded work. In alignment with Roseman's mastery learning model, students not achieving the minimum 90% passing grade on formative and summative assessments will be provided the opportunity for remediation.

Platform for Taking Assessments

- Exemplify© is an electronic exam platform used to take all summative course assessments.
 - All Exemplify© assessments will be remotely proctored.
- Students are expected to utilize their own electronic device for assessments and must ensure that the device is fully operational.
- Students will not be permitted to participate in the assessment if they do not have an approved device available at that time, which will result in a zero (0) on the assessment or reassessment.

Online Testing: Electronic Devices

- It is the student's responsibility to ensure their electronic device has enough power (either by battery charge or by charging cord) for the entire duration of the electronic assessment.
- Students are encouraged to keep their electronic device charging during the assessment; any movement in attempting to retrieve a charging cord during the assessment may cause

the student to forfeit the assessment.

- It is important to note: if a student's device runs out of charge during the assessment, the student will not be allowed to continue with the assessment.
- The assessment score will be determined by the last saved record in the electronic assessment system.
 - If there is no record, the student will receive a zero (0) on the assessment or reassessment.
 - Malfunctions of approved devices not related to power supply issues will be resolved on a case-by-case basis by the Director (Family Nurse Practitioner Program or Nurse Anesthesiology Program) or designee, in conjunction with the IT Helpdesk.
- The electronic device must have a built-in camera, which must be turned on for continual monitoring during the assessment process.
 - Exemplify© has the capability of monitoring via the device's camera for any aberrancies such as moving off screen, etc.

Assessment Rules

- Computer should be updated and exam downloaded prior to the exam day.
 - Extra time will not be given for a student to download the exam on the assessment day.
- Decide on a test area and computer set up.
- Write the meeting ID (provided in the instruction) at the top of the personal whiteboard to be used as scratch paper.
 - The meeting ID will be the only thing written on the whiteboard before the assessment begins.
 - This will be verified by the proctor.
- Students must show their government ID prior to starting the assessment.
 - ID will be shown to the proctor before starting the assessment process.
- Examples of government ID include the following:
 - Driver's license
 - Non-driver photo ID
 - U.S. passport or passport card
 - Foreign passport
 - U.S. military ID card
- Failure to provide valid ID will result in a "No Pass" grade for the assessment.
- Electronic devices must meet the technological requirements.
- Students are expected to ensure all equipment is in working order and charged.
 - Extra time will not be given to retrieve power cords for computers and phones.
 - Leaving the assessment area to retrieve power cords will not be allowed.
- The testing area is an extension of the classroom, leaving will only be permitted for scheduled breaks or for emergencies.
- A student not in their designated testing area on time will receive a "No Pass" for the assessment and will be required to participate in the reassessment.
- Students are expected to comply with all the proctor's instructions during the entire assessment process.
- All issues regarding internet connection, connection to the assessment, or inability to see questions will be addressed with the proctor. No questions related to assessment questions will be answered.

- Students will not be permitted to wear hats, coats, jackets, hoods, sunglasses, or blankets during any portion of the assessment; failure to comply will result in a “No Pass”.
- All assessments will begin at 8:00 AM PST. Students in other time zones must plan accordingly to align with this schedule.
- Whiteboards may be used during the individual assessment and expert review.
 - Whiteboards must be erased at the end of the assessment, this will be verified by the proctor.
 - No paper will be allowed in the testing area.
 - Student will be responsible for providing their own white board, it may be no bigger than 9”x”12.
 - Students who are noncompliant with assessment rules and proctor instructions may be removed from the assessment which will result in a “No Pass”.
 - If a student is removed from an assessment, they will be required to meet with their respective director and will receive an Action Intervention Plan (AIP).
- Students with ADA accommodation will be held to the same rules and standards.
- Allotted times for testing are as follows:

Points	Individual Assessment	Team Assessment	EBR	Remediation EBR
60 points	90 minutes	60 minutes	75 minutes	75 minutes

Individual Assessment

- Prior to beginning the individual assessment
 - Log in to Zoom using a phone, iPad, or electronic device (may not be the device used for the assessment) 30 minutes prior to the scheduled assessment time (730am PST) to ensure all devices are charged, functioning properly, and to allow ample time for technical issues to be addressed.
 - Students must display their full name in Zoom for easy identification
 - Prepare to log in to Exemplify©.
 - Have personal whiteboard available to use as scratch paper.
 - Prepare the zoom camera to face the individual and show the assessment area.
- Students and testing area must remain visible at all times during the assessment process.
- Students will complete a 360° scan of the assessment area when prompted by the proctor.
 - Testing area includes personal electronic device, a device with a camera (such as a phone or tablet), and the desk or table where the personal electronic device is placed.
- Students will provide valid ID when prompted by the proctor.
- Students will receive the password for the individual assessment once checked in.
- Students will log in to Exemplify© and will pause at the red stop sign screen until all students are logged in prior to beginning the assessment.
 - Students will begin the assessment when prompted by the proctor.
- All individual assessments consist of 60 questions and have a maximum completion time of 90 minutes (1.5 minutes per question).
- Students will not be allowed to enter the virtual assessment after the designated start time
 - If a student arrives late, the student will forfeit team points and will participate in

reassessment.

- At the completion of the assessment, the student will exit and upload the assessment.
- When the assessment is uploaded successfully the student will see a message from Exemplify©: “Congratulations, the file uploaded successfully.”
 - Once the individual assessments are completed, the students will be given a 15-minute break.
- After completion and upload of the individual assessment, the device camera must remain on, and the device cannot be moved to any other location.
 - Students must remain in their designated testing area until all exam takers have completed the assessment and are excused by the proctor.
- The use of any device between individual and team assessments is prohibited.
- Any student using an electronic or communication device outside during these times will forfeit the assessment.
- Students may not access any personal items during the assessment breaks including, but not limited to food, backpacks, electronic devices, books, coats, or jackets.
 - If a student requires nutrition during an assessment, they must request ADA accommodation from the Office of Student Services.
- Upon returning from the 15-minute break, students will begin the team assessment.

Team Assessment

- Once the individual assessment is completed, students will convene with their respective teams on Zoom to take the assessment.
- Teams will be assigned to a breakout room in Zoom
- The team assessment may begin once all team members are in the breakout room.
- Each student will once again be required to scan their testing area, which must be free of any personal items, books, notes, etc.
- All students must participate in the team assessment process.
- A student who is late returning from the break will not be permitted to participate in the team assessment and will forfeit any additional points.
- It is the responsibility of the team leader to download the team assessment prior to the assessment day.
 - The team leader will log in to Exemplify© and will read the questions and choices or use their camera device to show the screen to the team.
- Only one device may be utilized during the team assessment.
 - If more than one device is used or open during the team assessment, all members of the team will forfeit team points.
- Each team will be allowed access to one whiteboard that must be erased at the end of the assessment. This will be verified by the proctor.
- Once the team has completed the assessment, or time has expired, the breakout room will close and all students will rejoin the main room.
- Once the team assessment is complete, students will begin a 30-minute break.
- After completion of the team assessment, the device camera must remain on and logged in to the virtual Zoom for the duration of the break.
- Each team scoring 90% or greater on the team assessment will be awarded an addition 5% on their individual assessment score. (60 points= 3 additional team points/5 %).

Expert Review

- Upon return from the 30-minute break, the course faculty will review all assessment questions.
- Students will be required to complete a 360° scan of the testing area prior to the Expert Review.
- Students requesting clarification of assessment question(s) are addressed during this review.
- Faculty will display assessment questions with the rationales for students to review.
- Students may use a whiteboard to write down the question number and a brief description of the question for evidence-based review (EBR).
- All questions pertaining to the assessment must be addressed during the expert review.
 - Questions regarding the assessment will not be answered once the expert review is complete.
- Students may request specific text page numbers from the question rationale during the expert review only.

Evidence-Based Review Request

- Following expert review, students will convene with their teams in the breakout rooms on Zoom and will begin the evidence-based review (EBR) request process.
- The EBR will be conducted in the same manner as the team assessment.
- The EBR assessment has a maximum completion time of 75 minutes.
- The team will discuss, collaborate, and reach consensus on all EBR requests.
- Student teams can request a review of selected assessment questions by the block faculty.
- The team leader will download the EBR assessment the day before the assessment, as instructed by the faculty.
- Only the team leader's electronic device may be powered to complete the EBR assessment.
- The designated team leader's device will be the only one permitted to link with the electronic assessment system (Examplify©)
- Each team may utilize one electronic device to access the electronic textbook application and/or course content for referencing individual assessment items for the EBR process.
 - The student using the electronic device for textbook access must turn their zoom camera to face their computer.
- The additional device must not be used for any other purpose, including but not limited to internet searches, communication, or accessing unauthorized materials.
- Assessment content is the intellectual property of Roseman University College of Nursing and as such is considered copyright material.
- There is a zero-tolerance policy for cheating or academic dishonesty. The following actions and consequences apply:
 - Cheating includes, but is not limited to, using unauthorized materials, accessing non-approved websites, or duplication of any part of the assessment into any format.
 - Duplication of assessment content is considered a copyright infringement.
 - Accessing anything other than the approved electronic textbooks or materials on the additional laptop will be considered cheating.
 - The consequences for cheating are as follows:
 - Team Accountability: If any team is caught engaging in cheating behavior, all members of the team will receive a "No Pass" for the assessment.
 - Individual Accountability: If a student is found to be using their additional laptop or primary laptop for purposes other than accessing approved

- electronic textbooks during the EBR, the student will face disciplinary action including but not limited to termination from the College of Nursing.
 - Any suspected instance of cheating must be reported immediately to the proctor/faculty.
- Students may use a personal hard copy of assigned course textbooks during the EBR.
- All evidence-based review requests are required to have a reference from the course material in order to be considered.
 - References must include the textbook name, current edition, and page number to be reviewed.
- All items requested for structural review are not required to have a reference.
-

Evidence-Based Review Request Procedure

- At the completion of the expert review, student teams can request a review of selected assessment questions.
- Team members may gather their textbooks only.
- Printed textbook copies may be used by individual teams for referencing assessment review items, however, the student is responsible for providing their own copies.
- All evidence-based review requests are required to have a reference(s) to the assigned reading and articles etc.
- Textbooks used as a reference must be the edition assigned for the course.
- An evidence-based review request will not be reviewed if a reference is not included.
- The EBR request will be reviewed by faculty teaching the course and the Director of the FNP/DNP program or the Director of the Nurse Anesthesia Program for DNPNA students.
- Upon completion of the review, an email will be sent indicating which EBR requests have been approved or denied.
- Scores will be released via ExamSoft© along with a “Strengths and Opportunities” report.
- The evidence-based review will adjust/calculate scores before releasing grades to students.
- Once the review of the EBR items requested is complete and grades are released to students, no further evidence-based review requests are accepted, and the decision is considered final, however, students are encouraged to meet with faculty and discuss concepts that remain unclear before the next assessment opportunity.
- Faculty will contact students via Canvas if reassessment is necessary.

Process for Scheduled Reassessment

- Students who do not achieve a 90% on the individual assessment will be required to participate in the reassessment process.
- There will be a minimum of 24 hours scheduled between the assessment and reassessment.
- Students participating in reassessment will follow the same assessment rules and guidelines as outlined above with the following exceptions.
 - Students do not participate in a team assessment and will not receive a 30-minute break.
 - The expert review will immediately follow the individual assessment and 15-minute break.
 - Students may complete the EBR as a group or individually during the reassessment.
- Students must achieve a 90% on the reassessment to receive a “Pass”.
- Students scoring less than 90% will receive a “No-Pass” for the reassessment and will

participate in the block remediation assessment.

Block Remediation

- Students participating in the block remediation assessment will follow the same rules and guidelines as the reassessment.
- Students achieving a 90% or greater on the block remediation assessment will receive a “Pass” for the course.
- If a student achieves an 85%-89.9% on the block remediation assessment, they will be eligible to receive an additional 5% added to their assessment score as outlined in the Block Remediation: Additional 5% Policy. (*page 38*)
- Students who do not meet the criteria for the additional 5% score increase will receive a “No Pass” and will meet with the Director of their respective program to determine next steps.

Scheduled Remediation Periods

The College of Nursing provides comprehensive remediation periods after the completion of defined courses in the curriculum.

ABSN

Didactic remediation periods are provided following the completion of indicated didactic courses:

NURS 324 (Block 4.0) encompassing Blocks 1.0 through 4.0

NURS 326 (Block 6.0) encompassing Blocks 5.0 & 6.0

NURS 428 (Block 8.0) encompassing Blocks 7.0 & 8.0

NURS 430 (Block 10.0) encompassing Blocks 9.0 & 10.0.

Clinical remediation periods are provided following each clinical course:

NURS 323.1 (Block 3.1)

NURS 324.1 (Block 4.1)

NURS 326.1 (Block 6.1)

NURS 428.1 (Block 8.1)

NURS 430.1 (Block 10.1).

DNPENP (MSNENP)

Following the completion of:

NURS 707 (Block D7) encompassing Blocks D1, D2, D3, D4, D21, D6, & D7.

NURS 504 (Block F4) encompassing Blocks F3, F4, & F6

NURS 511.1 (Block F11.1) encompassing Blocks F9.1, F10.1, & F11.1

NURS 705 (Block D5) encompassing Blocks D22, D23, & D5.

DNPNA

Following the completion of:

NURS 707 (Block D7) encompassing Blocks D1, D2, D3, D4, D21, D6, & D7.

NURS 709 (Block D9) encompassing Blocks D8, D9, D10, & D11.

NURS 717 (Block D17) encompassing Blocks D13, D14, D15, D16, & D17.

NURS 719 (Block D19) encompassing Blocks D18 & D19.

NURS 705 (Block D5) encompassing Blocks D22, D23, & D5.

NURS 729 (Block D29) encompassing Blocks D27, D28, & D29.

Students who receive a No-Pass following the comprehensive remediation periods will be required to complete the academic withdraw process.

DNPFNP

During the first scheduled comprehensive remediation period a DNPFNP student may remediate a maximum of 3 courses which precede the comprehensive remediation period. The second comprehensive remediation period is reserved for the completion of required clinical hours, block quizzes, summative assessments, and the University Predictor remediation. Remediation is considered part of the regular educational process and, as such, the University does not charge additional fees or tuition for remediation.

Students who receive a No-Pass following the comprehensive remediation periods will be required to complete the academic withdraw process.

Students who exceed the maximum allowable blocks for the comprehensive remediation period will receive a No-Pass in those excess blocks and will be required to complete the academic withdraw process.

Incomplete Assignments

Students are required to complete and submit all assignments by the designated due date. If a student submits an assignment late, the Late Assignment Policy will be followed. Failure to submit all required assignments and make-up assignments will result in a no pass for the subsequent assessment and the student will forfeit the opportunity for team points. The student will be allowed to participate in the reassessment as long as all assignments and make-up assignments are completed.

If a student does not complete all assignments and/or make-up assignments by the reassessment, the student will forfeit the opportunity to take the reassessment and will then participate in Block Remediation Assessment during the course remediation period.

DNP/FNP students with an unexcused absence who do not complete and submit all assignments by the scheduled date and time will receive an incomplete "I" for the block and will be required to complete all assignments in order to receive a grade change to a Pass "P".

Late Assignment Policy

- All course assignments and additional assignments must be completed to be eligible to participate in the course summative assessments, reassessments, or block remediation assessment.
- Students who submit an assignment after the designated date/time will receive a written warning regarding submission of late work and receive an additional assignment to be completed by a date/time designated by the faculty.
- Upon completing the assignment and the additional assignment with passing grades by the date/time designated by the faculty, the student will progress normally within the course.
- Failure to complete any missing assignments with passing grades, by the time designated by the faculty, the student will not be permitted to participate in the subsequent assessment, and an academic intervention plan (AIP) will be initiated. The student will receive a No Pass for the assessment and will forfeit team points and will be required to attend the scheduled reassessment.

- Failure to complete any missing assignments with passing grades, by the time designated by the faculty will result in the student forfeiting their opportunity to take the reassessment. The student will receive a No Pass on the reassessment and will be required to attend the scheduled block remediation assessment.
- Failure to complete any missing assignments with passing grades, by the time designated by the faculty will result in the student forfeiting their opportunity to take the block remediation assessment. The student will receive a No Pass in the course and will be required to repeat the course with a subsequent cohort pending space availability.

Student Evaluations of Courses and Course Faculty

At the completion of each course, students are provided the opportunity and are encouraged to evaluate the content of the course, the instructional strategies used to meet the course outcomes and/or the clinical facility. The evaluations are used as a tool to determine if changes need to be considered or made to improve the course.

Evaluation of the faculty performance as a facilitator of learning should be growth promoting, constructive, fair, and impartial and based on the stated outcomes for the course. The evaluation of the didactic component of the course and the faculty performance as a facilitator will be scheduled on the day of the final assessment after the team assessment.

The evaluation of the clinical component and the clinical facility is usually scheduled at a time designated by the Director/Assistant Director of Clinical Resources (or Director, Nurse Anesthesia Program for DNPNA students or Director, Family Nurse Practitioner Program for DNPFPN students or Director DNPFPN Program).

Results of the faculty evaluations by students are not released to the faculty until the course has been completed and grades have been submitted. Comments are aggregated and de-identified so that individual students are not identified to the faculty member. Any comments written by students or clinical staff are typed by the Administrative Assistant, reviewed by the Dean or Associate Dean, Faculty Affairs and Learning Innovation (or Director, Nurse Anesthesia Program for DNPNA students or Director, Family Nurse Practitioner Program for DNPFPN students, or Director DNPFPN Program), and provided to the faculty.

Academic Standing

A student is considered not in good academic standing if the student has been administratively withdrawn or have been dismissed from the College of Nursing.

Transcripts

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

The honors (H) designation denotes individual high achievement on a didactic topic within the nursing curriculum for students enrolled in the ABSN program.

An ABSN student who achieves an average score $\geq 95\%$ on the individual assessment(s) without team points will receive the honors (H) designation for that course. This designation only applies to a student's first attempt at the material and cannot be earned for reassessments. The transcript will reflect "H" for each course where 95% or higher has been achieved.

Experiential courses, courses assessed by methods such as projects or papers and graduate courses are not eligible for the Honors designation.

The transcript footnote will include the statement: “For the College of Nursing, the honor (“H”) designation denotes an average score $\geq 95\%$ on the individual assessment(s) for that course. However, College of Nursing graduate courses are not eligible for the Honors designation.”

Withdrawal

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#)

Attendance is a privilege granted in consideration of specified levels of performance and established standards of professional conduct and personal behavior. To safeguard appropriate standards of conduct, the College of Nursing reserves the right to require student withdrawal for violations of policies and procedures. The student will be afforded the appropriate due process rights.

Administrative Withdrawal

Students who leave the nursing program without completing the established procedures within five (5) days will be administratively withdrawn from the University. Students who are administratively withdrawn in this manner must complete the re-admission process by requesting readmission to a subsequent cohort, if eligible. Readmission is not guaranteed.

Academic Withdrawal

A student is considered an academic withdrawal if the student does not achieve the required 90% on course assessments and/or projects/papers and electively withdraws or is required to withdraw from the College of Nursing. Students who are academically withdrawn must complete the re-admission process by requesting readmission to a subsequent cohort, if eligible. A student who does not repeat the course the next time it is offered on the curriculum calendar (based on space availability) may be required to reapply to the nursing program. The decision as to when a student may re-enter the curriculum and the conditions of re-entry will be made on a case-by-case basis by the Dean, the College of Nursing.

The Procedure for Academic Withdrawal

The procedure for academic withdrawal is as follows:

- A withdrawal interview is scheduled with the student and the Dean, College of Nursing, at which time the terms of withdrawal (if any) are agreed upon and put in writing.
- The College of Nursing completes the University withdrawal form and notifies the applicable service units. Terms of re-admission (if any) and re-admission paperwork (if applicable) must be signed by the student and returned for signature to the Dean, the College of Nursing to complete the process.
- Once all forms are signed and dated, the withdrawal process is complete. Withdrawal is not complete until the required forms are signed by the Dean, the College of Nursing.

Voluntary Withdrawal

Request for voluntary withdrawal from the nursing program must be made in writing to the Dean, the College of Nursing and will be accompanied by a personal interview with the Dean. Every effort should be made by the student to ensure that no misunderstandings or errors occur in the withdrawal process. Following written

notification by the student and the personal interview with the Dean, the necessary forms to process the official withdrawal will be completed by the College of Nursing.

The Procedure for Voluntary Withdrawal

The procedure for voluntary withdrawal is as follows:

- The student will meet with the Dean, the College of Nursing, at which time the terms of withdrawal are agreed upon and put in writing. A student who withdraws mid-block, (and has not completed all course requirements) for medical reasons, serious personal problems, pregnancy, or military leave; may be approved for a Leave of Absence (See below) and will receive an Incomplete, “I” grade for the course.
- The College of Nursing completes the University withdrawal form and notifies the applicable service units. Terms of re-admission (if any) and re-admission paperwork (if applicable) must be signed by the student and returned for signature to the Dean, the College of Nursing to complete the process.
- Once all forms are signed and dated, the withdrawal process is complete. Withdrawal is not complete until the required forms are signed by the Dean, the College of Nursing.

Conditions for Re-Admission

Following a voluntary or academic withdrawal, a student that wishes to re-enroll in the nursing program must meet with and request approval from the Dean, the College of Nursing. Students are not guaranteed readmission. The student must comply with the Student Handbook and University Catalog for the cohort to which he or she is returning.

Leave of Absence

A student may request a leave of absence due to occurrence of medical problem(s), serious personal problem(s), military leave, or pregnancy.

Students requesting a leave of absence must apply in writing to the Dean, the College of Nursing. In the event of a medical problem or pregnancy, the request must be accompanied by a letter from an appropriate licensed practitioner within their scope of practice who evaluated the student describing the nature of the condition for which the leave is requested, and the estimated length of time needed for recovery. The Dean shall determine if and when the student may return to school.

In the event of a military leave, the request must be accompanied by a letter from the appropriate agency indicating the estimated length of absence. In the event of serious personal problems, the Dean reserves the right to request appropriate documentation.

A student who is granted a leave of absence must submit a letter of intent to return to classes by the date designated by the Dean prior to the requested date of return. It is the student’s responsibility to keep the Dean informed of any change of address while on a leave of absence.

Leaves of absence may be granted for a maximum of 180 days. The terms and conditions of the leave will be determined by the Dean, the College of Nursing. If the leave exceeds 180 days, the Dean and student will complete a re-evaluation of the situation and a determination will be made whether the Leave of Absence may be continued.

Students who have been granted a Leave of Absence prior to completing all course requirements and remediation opportunities may receive an Incomplete, “I” for the course in which they are currently enrolled at the time of approval.

Students on an approved leave of absence will be considered withdrawn for Federal Student Aid and enrollment reporting purposes.

Auditing Courses in the College of Nursing

A student who received a No Pass in a course and will re-take the course the next time it is offered on the curriculum calendar may audit the previously successfully passed courses to refresh the student's knowledge with prior written approval from the Dean or Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students or Director, Family Nurse Practitioner program for DNPFP students or Director DNPFP Program). The student must notify the College of Nursing that the student wishes to audit no later than the first day of the course.

The student who attends the didactic component of a course will not be required to pay tuition or fees and may not take assessments. The student will not receive additional credit or a grade.

The student who elects to re-attend the skills laboratory component of a course will be required to pay a fee of \$50.00. The fee will be collected by the Bursar's office. Clinical rotations cannot be audited.

Academic and/or Professional Misconduct

The College of Nursing expects students to be academically honest. To maintain academic integrity and professionalism in the College of Nursing, academic and/or professional misconduct will not be tolerated. All students are expected to behave professionally in all matters relating to their program of study.

The College of Nursing has established what constitutes academic and/or professional misconduct. Academic misconduct includes, but is not limited to the following:

- **Cheating** – Cheating is defined as providing or receiving information and/or assistance during assignments and assessments. Examples of cheating include, but are not limited to:
 - Possession or dissemination of unauthorized copies of assessments (tests), assessment items or access to assessments prior to, or following completion of the assessment.
 - Looking at another person's answers during an assessment or allowing another person to look at your answers. This applies to hard copy and online assessments.
 - Collaborating with another person during individual assessments or assignments where the work is to be performed by the individual student.
 - Taking an assessment for someone else or having another person take one for you.
 - Exchanging notes or information between students during an assessment.
 - Bringing materials or information to an assessment that is not permitted, whether you planned to use it or not.
 - Presenting collaborative work (2 or more) as your own independent work.
 - Utilizing unauthorized electronic devices or recording devices during an assessment, team assessment, expert review and EBR.
 - Turning in work that was not completed by you, downloaded from an external source including artificial intelligence (AI), or received from a previous student.

- Students who are found to have cheated as defined above will meet with the Associate Dean, Academic and Student Affairs of the College of Nursing or the Dean, the College of Nursing. Consequences can include suspension or withdrawal from the College of Nursing without the opportunity of readmission. All students are afforded due process related to any consequences of their actions and may be referred to the University Student Professionalism Board.
- **Plagiarism** - Plagiarism is defined as a similarity/originality score of 25% or higher after appropriate similarities have been removed. Taking someone's work and presenting it as your own without acknowledgement or giving credit to the originator of the work. This includes having someone else write a paper or assignment, putting your name on it and submitting it as your own.
- **Fraud** - Intentional misrepresentation or omission of material facts.
- **Misrepresentation** - Providing misleading information.
- **Unethical Behavior** - Violation of any ethical standard of your profession and/or academic program. An example of unethical behavior is knowingly disclosing or participating in the disclosure of client information to unauthorized individuals.
- **Improper Behavior** - Disruptive behavior may occur in the classroom, online discussion threads, or other facilities. Disruptive behavior is defined as any behavior that hampers the ability of instructors to teach or students to learn. Common examples of disruptive behaviors include, but are not limited to:
 - Monopolizing classroom discussions
 - Failing to respect the rights of other students to express their viewpoints
 - Talking when the instructor or others are speaking
 - Constant questions or interruptions which interfere with the instructor's presentation
 - Disrespectful behavior towards faculty or other students
 - Creating excessive noise
 - Entering the class late or leaving early
 - Use of cell phone in the classroom
 - Inordinate or inappropriate demands for time or attention
 - Refusal to comply with faculty direction.

Students exhibiting these types of behaviors will receive an Academic and/or Professional Intervention Plan from the faculty and/or dismissal from the class in which the behavior occurs. Failure to correct such behaviors can result in a "No Pass" for the course and may lead to further disciplinary action including probation, suspension or withdrawal. An Academic and/or Professional Intervention Plan will be provided by the faculty member and discussed with the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students or Director, Family Nurse Practitioner for DNPFP students or Director DNPFP Program).

More extreme examples of disruptive behavior include, but are not limited to:

- Use of profanity or pejorative language
- Intoxication

- Verbal abuse of instructor or other students (e.g., taunting, badgering, intimidation)
- Harassment of instructor or other students
- Threats to harm oneself or others
- Physical violence

Students exhibiting these more extreme examples of disruptive behavior may be dismissed from the lesson or the entire course. If faculty/administration or staff have a “reasonable suspicion” that the disruptive behavior is caused by intoxication or impairment from a non-prescribed medication or substance, the student will be required to submit to a drug screen (See below).

- **Unprofessional conduct** - Incompetent, non-collegial, unethical, or illegal conduct which may deceive, defraud or injure clients, fellow students, faculty members, or the public; or deviation from standards of professional conduct; criminal convictions for crimes against persons or property; physical presence on university grounds under the influence of non-prescribed controlled substances or alcohol, etc.
 - If a faculty member/administrator/staff member observes the student and has a reasonable suspicion that the student may be impaired, the student may be required to submit to a random drug screening at the time of the event. If the drug screening results are negative for the presence of tested substance, the College of Nursing will cover the cost of the screening. If testing results are positive for any substance, the student will be responsible for the cost of the screening. The student may be encouraged to seek treatment for alcohol and/or drug addiction. However, if the student continues to engage in unprofessional conduct, the student may be recommended for additional misconduct proceedings which may include anything up to and including probation, suspension or withdrawal.
- **False Information** - Providing or reporting untrue or inaccurate information.

Clinical Misconduct

Any of the following behaviors are sufficient grounds for faculty to determine that the student is unsafe clinically and may not continue in the student’s clinical rotations. –This decision is based on serious offenses and requires accurate documentation. Behaviors that provide sufficient grounds for faculty to evaluate a student as unsafe include, but are not limited to:

- Failure to meet clinical outcomes resulting in unsafe client care
- Actions which place clients, families, oneself, or other humans at risk for physical or emotional harm
- Refusal, failure to follow, or violation of the College of Nursing, clinical site, or agency policies or protocols
- Violation of Health Insurance Portability and Accountability Act (HIPAA) regulations
- Illegal use of drugs or the consumption of alcohol during clinical rotations, or attending clinical activities under the influence of drugs, alcohol, or mind-altering medications
 - **See Unprofessional conduct above**
- Providing or reporting untrue or inaccurate information

- A deliberate attempt to cover up any error or negligent performance during a clinical rotation
- Falsification of documentation
- Unsafe, unethical, and/or illegal practices or behavior
- Violations of academic and professional conduct

The student(s) involved in violations named above and/or receiving an Intervention Plan for any of the above reasons may face immediate removal from the clinical environment for any of the behaviors that include but are not limited to those listed above. Students can expect a Professional and/or Clinical Intervention Plan from the faculty, Director/Assistant Director of Clinical Resources, or Associate Dean, Academic & Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students). Failure to correct such behaviors may result in a “No Pass” for the block and may lead to further disciplinary action including probation, suspension or withdrawal.

University Student Professionalism Board

A student who has or may have violated the College of Nursing’s policy on Academic, Professional, and/or Clinical misconduct will be notified verbally and in writing of the violation and of the sanction, which may include but is not limited to probation, suspension, or termination.

Following this notification, the College of Nursing administration and the student will follow the policies and procedures of the University Student Professionalism Board as outlined at: [University Student Professionalism Board](#)

Probation for Academic, Professional, and/or Clinical Misconduct

A student who exhibits inappropriate academic, professional, and/or clinical behavior as described above may be placed on probation for academic, clinical, or professional misconduct. Probation is defined as a period during which the student’s progress will be closely monitored by a member of the administrative team. Violations can also lead to suspension or termination from the program. Matters involving a student’s inappropriate academic, professional, and/or clinical behavior on campus or at experiential facilities will be brought to the attention of the Dean, Associate Dean, Academic and Student Affairs, Director (Nurse Anesthesia Program for DNPNA students and Family Nurse Practitioner Program for DNPFP students or Director DNPFP Program), or designee. The appropriate administrative officer will acknowledge the student’s placement on probation for academic, clinical, or professional misconduct, and will specify in the intervention plan the terms of probation, including further disciplinary action to be taken should the terms of probation not be met within the specified timeframe. This document will be delivered by email to the student's university email address, certified mail, or hand delivered. A copy of the letter will be submitted to the Dean. During the probationary period, the appropriate administrative officer shall be responsible for monitoring the student’s progress toward meeting the terms of probation.

Suspension for Academic, Professional, and/or Clinical Misconduct

The College reserves the right to suspend a student at any time to safeguard patient safety, its standards of scholarship, professional and personal conduct, and/or orderly operation.

The Dean, Associate Dean, Academic and Student Affairs, Director, or designee, may place a student on suspension as a result of unprofessional behavior by the student. Additionally, the Dean, Associate Dean, Academic and Student Affairs, Director, or designee, may suspend a student even if the student has not been

placed on probation and/or if the student's conduct has not been reviewed by the University Professionalism Board.

The Dean, Associate Dean, Academic and Student Affairs, Director, or designee. will notify the student of the suspension, including the terms and conditions of the suspension, within two business days. The decision shall be delivered to the student by hand, or via email to the student's university email address, or certified mail. A copy of the letter will be submitted to the Dean. A student will be placed on suspension even if the student refuses to accept the hand-delivered notice of the suspension or neglects to check the students' email or refuses to sign the certified mail receipt. This decision will also include the length of time for which the suspension will be in force. During the imposed suspension, the student is prohibited from attending or participating in any instructional sessions (either in the classroom or on experiential rotations), or any College or University events that are not open to the public.

Following the suspension period, the student must petition the Dean, Associate Dean, Academic and Student Affairs, Director, or designee, in writing to allow the student to return. The Dean, Associate Dean, Academic and Student Affairs, Director, or designee, shall consider the request and notify the student and the Dean, in writing, of the exact date and conditions under which the student's status is reinstated or the official termination date of the student.

Termination for Academic, Professional, and/or Clinical Misconduct

The College reserves the right to terminate a student at any time to safeguard patient safety, its standards of scholarship, professional and personal conduct, and/or orderly operation. Actions which threaten or endanger, in any way, the personal safety and/or well-being of self or others, or which disrupt or interfere with the orderly operation of the College are cause for immediate termination of the student. Academic, clinical, and/or professional misconduct can also result in the termination of the student.

The Dean, Associate Dean, Academic and Student Affairs, Director, or designee may terminate a student's enrollment at the College of Nursing. Additionally, the Dean, Associate Dean, Academic and Student Affairs, Director, or designee. may terminate a student even if the student has not been placed on probation and/or if the student's conduct has not been reviewed by the University Student Professionalism Board (USPB).

Upon finalization of a student's termination, the Dean, Associate Dean, Academic and Student Affairs, Director, or designee. will notify the student of the student's termination within two business days. The decision shall be delivered to the student by hand or, via email to the student's university email address, or certified mail and will be effective as of the date specified in the termination letter. A copy of the letter will be submitted to the Dean.

A student who is terminated for academic, professional, and/or clinical misconduct may not be reinstated under any circumstance.

Appeals of Probation Decisions for Academic, Professional, and/or Clinical Misconduct

If a student feels the student has been treated unfairly in a matter involving probation, the student may appeal that decision in writing to the Dean. The written appeal must be submitted to the office of the Dean within two (2) business days of notification of the Dean, Associate Dean, Academic and Student Affairs, Director, or designee. decision. The Dean shall consider the appeal and render the decision. The Dean shall communicate this decision

in writing to the student and Associate Dean, Academic and Student Affairs, Director, or designee. **The decision of the Dean shall be final, effective immediately.**

Appeals of Suspension or Termination Decisions for Academic, Professional, and/or Clinical Misconduct

If a student feels the student has been treated unfairly in a matter involving suspension or termination, the student may appeal that decision in writing to the Dean. The written appeal must be submitted to the office of the Dean within two (2) business days of notification of suspension or termination. The Dean shall consider the appeal and render the decision. The Dean shall communicate this decision in writing to the student and the Associate Dean, Academic and Student Affairs, Director, or designee. If the suspension or termination was imposed by the Dean, the student may appeal directly to the Chancellor of the Henderson, Nevada campus, using the procedures below.

If the student is still dissatisfied, the student may appeal the Dean's decision in writing to the Chancellor of the Henderson, Nevada campus. The written appeal must be submitted to the office of the Chancellor of the Henderson, Nevada campus within two (2) business days of notification of the Dean's decision. The Chancellor of the Henderson, Nevada campus shall consider the appeal and render the decision. The Chancellor of the Henderson, Nevada campus shall communicate this decision in writing to the student and the Dean. **The decision of the Chancellor of the Henderson, Nevada campus shall be final and effective immediately.**

When the Dean, Associate Deans, or designee (or Director, Nurse Anesthesia Program for DNPNA students or Director, Family Nurse Practitioner Program for DNPFNP students) concludes that it is more likely than not that the student does not pose a threat to the safety or well-being of the members of the University community, the student shall have the opportunity to continue to attend classes and participate in all sanctioned College activities until such time as any/all appeals are exhausted. The student is expected to behave in a professional manner during this time period.

Any disruptions of class or University operations or any other unprofessional behavior may result in rescission of the student's opportunity to attend class and/or all sanctioned College activities.

Grievances

Grievance Procedures

The College of Nursing is committed to mutual respect among all of its members. This commitment includes students, faculty, staff and administration. We seek to resolve issues and concerns in a fair and informal manner. However, should a formal grievance be filed by a student the student shall be given the right to due process.

An action or a decision can be grieved if it involves the failure to follow, or a misapplication, or misinterpretation of University policy, regulation, or rule, or a violation of state or federal law. Unless a clear threat to the safety or well-being of members of the University community exists, the student shall have the opportunity to continue to attend classes and participate in all sanctioned College activities until such time as any/all appeals are exhausted.

The student is expected to behave in a professional manner during this time period. Any disruptions of class or University operations or any other unprofessional behavior may result in rescission of the student's opportunity to attend class and/or all sanctioned College activities.

Throughout the grievance process, the student may be accompanied by a support person who may advise the student but cannot speak for or provide information on behalf of the student.

Informal Grievances

Any student in the College of Nursing who believes that he or she has a grievable issue (as defined above under Grievance Procedures) is encouraged to resolve the matter informally. The student must first talk with the person or groups at whom the grievance is directed in an attempt to informally resolve the issue. Grievances will be reviewed, and decisions made based on the evidence presented. In no event shall persons who review a grievance substitute their subjective judgment about the issue or academic quality for that of the professor or other parties involved. In order for the grievance process to move forward, the informal grievance must be initiated with the utilization of the grievance form within 24 hours excluding days the university is closed.

Student Concerns, Issues & Questions Phase 1: Attempt resolution with parties involved.

- The student (s) should meet with individual (s) with whom the concern originated. The Grievance Form will be completed by the student and all individuals involved in the meeting.
- After meeting with the individual (s) to discuss the matter, if a resolution cannot be reached, the student must continue with the chain of command which proceeds to phase 2 and/or 3. The Grievance Form will be completed and signed by all individuals involved in any meetings related to the grievance.

Phase 2:

- **Course Issue:** All parties involved will meet with the Course team. If the student met with the course team in phase 1, the student is not required to have a second meeting with the team but may consider the informal grievance procedure complete. The grievance form will be updated, signed and dated by all individuals involved in the meeting.
- **Non-Course Issue:** All parties involved will meet with the Cohort Advisor to discuss the matter (s) and reach a resolution. The grievance form will be updated, signed and dated by all individuals involved in the meeting.

Formal Grievance Procedures

The formal grievance procedure is available to resolve issues that have not been satisfactorily resolved through the informal grievance process. The person filing the grievance must be the recipient of the alleged incident leading to the grievance. A grievance cannot be filed on behalf of another person. Grievances must meet the requirements of a “grievable action/decision” (the failure to follow misapplication or misinterpretation of University policy, regulation, rule, or violation of state or federal law). If the Associate Dean, Academic and Student Affairs (or Director, Nurse Anesthesia Program for DNPNA students) determines that the student’s issue is grievable and it is unresolved or if the decision results in involuntary withdrawal from the College of Nursing, the formal grievance procedure should be followed as outlined below. For issues that are not considered grievable, a student should follow the student resolution process for non-grievable issues (informal grievances). A grievance that is not filed in a timely manner or is from a person without grievance rights may be dismissed by the Associate Dean, Academic and Student Affairs (undergraduate), Director, Family Nurse Practitioner Program, or Director, Nurse Anesthesia Program.

To initiate the formal grievance procedure, the student must submit his or her grievance in writing to the Associate Dean, Academic and Student Affairs (undergraduate) or Director, Family Nurse Practitioner Program or Director, Nurse Anesthesia Program (graduate) of the College of Nursing.

- The written grievance must include:
 - The completed grievance form with all signatures and dates from previous meetings resulting from the informal grievance process and updated with the date of the formal grievance letter submission.
 - A statement indicating how the informal grievance process has been followed.
 - A statement that the student wishes a review of the situation by a grievance committee.
 - The identification of the person or group to whom the grievance is directed.
 - The specifics of the incident leading to the filing of a grievance.
 - Evidence to support the student's grievance and the outcome or resolution desired by the student. This must include reference to the College of Nursing Student Handbook, Roseman University Student Catalog, or applicable state or federal law.
- The formal grievance process must be initiated no later than one (1) business day after completing the informal grievance process. A student who does not file a grievance within one (1) business day of completing the informal grievance process will be subject to the resolution of the informal grievance process.
- Within 2 business days of receiving and validating the formal grievance, the Associate Dean, Academic and Student Affairs (undergraduate) or Director, Family Nurse Practitioner Program or Director, or Director, Nurse Anesthesia Program Nurse Anesthesia Program (graduate) shall appoint an ad hoc committee to review the formal grievance.

Ad Hoc Grievance Committee

If the Associate Dean, Academic and Student Affairs (undergraduate) or Director, Family Nurse Practitioner Program or Director, Nurse Anesthesia Program (graduate) determines that convening the committee is appropriate, an Ad Hoc Grievance Committee will be convened on the alternate campus and Associate Dean, Academic and Student Affairs (undergraduate) or Director, Family Nurse Practitioner Program (graduate) or Director, Nurse Anesthesia Program (graduate). will appoint the chair of the committee. The chair of the committee will select individuals who are not personally involved in the assessment/course.

The committee will consider the points-of-view of both the student and the faculty member(s) to make a recommendation to the Associate Dean (undergraduate) or Director, Family Nurse Practitioner Program or Director (graduate), Nurse Anesthesia Program (graduate).

The Ad Hoc Grievance Committee will consist of one nursing student and two nursing faculty members. The student shall not be in the same cohort as the student filing the grievance. If a nursing student is not available, a student representative may be selected from another discipline.

(Pharmacy, Dentistry, or Medicine).

- The committee will review the student's letter to the Associate Dean (undergraduate) or Director, Family Nurse Practitioner Program (graduate) or Director, Nurse Anesthesia Program (graduate) stating the rationale for the grievance. The committee may request a written response from the person or group at whom the formal grievance is directed, may ask for additional information from any or all parties involved, may request that the parties involved appear before the committee, and/or may take other steps in an attempt to resolve the issue.

- Within 5 business days after forming the committee, the committee shall send a written report with recommendations to the Associate Dean (undergraduate) or Director, Family Nurse Practitioner Program or Director (graduate), Nurse Anesthesia Program (graduate) who initiated the grievance committee.
- The Associate Dean (undergraduate) or Director, Family Nurse Practitioner Program or Director (graduate), Nurse Anesthesia Program (graduate) will provide a copy of the Committee's report and recommendation to the student.
- A student wishing to appeal the committee's recommendation to the Dean, the College of Nursing must submit a written appeal to the Dean within one (1) business day of the date of the committee's report. The request must state the specific basis for appeal and identify the specific aspects of the committee's recommendation that he or she believes are the subject of the basis for appeal.
- Only facts presented to the committee may be introduced to and considered by the Dean. The Dean shall notify the student and the committee in writing within five (5) business days of receiving the written appeal, stating the action on the appeal and the grounds for the action taken.
- The Dean will notify the student via email or certified mail.
- The Dean's decision shall be final, effective immediately with the exception of suspension or termination decisions.
- If the final grievance decision is against the student, the College of Nursing's policies and procedures that govern the issue will be enforced.
- Suspension or termination decisions may be appealed to the Chancellor, Henderson Campus following the procedures outlined under Appeals of Suspension or Termination for Academic, Professional, and/or Clinical Misconduct.

Course Grade Appeal

The College of Nursing is committed to providing an environment that promotes learning and professional growth. Therefore, the College of Nursing will use assessment practices that are fair and equitably applied. It is the responsibility of the didactic or clinical course team to clearly define the assessments and assignments by which the student shall be evaluated in the course syllabus according to established College of Nursing assessment standards. The didactic and clinical course team includes faculty members teaching in the area of expertise and the Director of Clinical Resources (undergraduate) or Director, Family Nurse Practitioner Program or Director, Nurse Anesthesia Program (graduate). The formal grade appeal process should only be initiated when the student perceives the grade received does not reflect the criteria established/outlined by the professor.

The grade appeal procedure is designed to give the student the opportunity to correct a perceived injustice. It should be used only when the student contends that the final course grade assigned by the professor is arbitrary, capricious or otherwise in error. "Arbitrary or capricious" implies that a student grade has been assigned on the basis of something other than the student's academic performance in the course. Grounds for a grade appeal may include any or a combination of the following:

- A calculation error in the grade.
- Assignment of a grade based on factors other than student achievement.

- Inconsistently applied standards for evaluation of student academic performance. Individual assessment items may not be appealed.
 - The student may request the review of an assessment item(s) only during the evidence-based review process provided after each team assessment is completed. Once a decision has been made regarding each evidence-based submission, there will be no further discussion of that item.
- Appeals may not be submitted for any assessment until all reassessments have been completed and grades have been released. Consequently, no appeals will be accepted between the assessment and the reassessment.
- Any student achieving a Pass on either the assessment or the reassessment is ineligible to submit grade appeals for that assessment/reassessment.
- A student who wishes to initiate a grade appeal must follow the Grade Appeal process outlined below

The student may proceed to the next step only if the issue is not resolved.

- Discuss the issue with the Block Coordinator, within one (1) business day of the assigned grade.
- Discuss the issue with the course team within two (2) business days of the assigned grade. If the course team is not available, the student may proceed to step 3 below.
- Submit a formal written grade appeal to the Associate Dean, Academic and Student Affairs (undergraduate) or Director, Family Nurse Practitioner Program or Director, Nurse Anesthesia Program (graduate) within 3 business days of the assigned grade. Include the Grade Appeal Form.
- The Associate Dean (undergraduate) or Director, Family Nurse Practitioner Program (graduate), or Director, Nurse Anesthesia Program (graduate) will consult with the course team members. If the Associate Dean (undergraduate) or Director, Family Nurse Practitioner Program (graduate), or Director, Nurse Anesthesia Program (graduate) determines that the student has a basis for a grade appeal and the issue is not resolved, an Ad hoc committee will be appointed within 2 business days of receiving the written grade appeal.
- The Ad hoc committee will provide a written recommendation to the Associate Dean (undergraduate) or Director, Family Nurse Practitioner Program or Director (graduate), Nurse Anesthesia Program (graduate) within 3 business days of forming the committee. The Ad hoc grade appeal committee will consist of a chairperson and two additional faculty members who have expertise in the area of the grade appeal.
- **The Associate Dean, Academic and Student Affairs (undergraduate) or Director, Family Nurse Practitioner Program or Director, Nurse Anesthesia Program (graduate) will make the final decision and notify the student via email or certified mail.**

Last Date of Attendance

The student's last date of attendance is the date the final decision is made by the Dean. In the case of suspension or termination decisions, the last date of attendance is the date the final decision is made by the Chancellor, Henderson Nevada campus in cases where the Dean's decision has been appealed. The student will be notified via email with read receipt requested or certified mail by the Dean, College of Nursing.

Record of Students' Complaints

The colleges and schools of nursing have an obligation to respond to any written complaints by students lodged against a college or school of nursing, or a nursing program that are related to the standards and the policies and procedures of the Commission on Collegiate Nursing Education.

Complaints may be directed to the "CCNE Complaints Administrator" and sent to:

CCNE
655 K Street NW Suite 750
Washington, DC, 20001

Hence, the college has established, implemented, and maintains a student complaint procedure that affords the complainants with fundamental procedural due process. In accordance with CCNE and good academic conduct, our college has developed the following policies and procedures. The student may submit a written complaint to any of the following college administrators: Associate Dean, Faculty Affairs and Learning Innovation, Associate Dean, Academic & Student Affairs and/or Directors. A student may also submit a written complaint to a student class officer (e.g., class president, vice president) or anonymously place the complaint in a secure box located in the student commons. The Student Affairs committee will formally investigate a student's written complaint. If the complaint involves a member of the Student Affairs Committee, the member will recuse themselves. If the complaint involves the Dean, the Chancellor of Henderson, Nevada campus will assume responsibility for leading the investigation. The Chairperson of the Student Affairs committee will share the results of this investigation with the other Deans and Directors. The Dean will review this report and determine if the complaint requires formal intervention. All written complaints will be kept in a confidential, secured file in the Dean's office.

Undergraduate Class Officers & Responsibilities

Class President

- The president is the chief executive officer of the class and takes the lead in determining non-academic outcomes.
- The president works with all class officers to ensure that the class's interest is being observed in matters of finance, publicity, and fundraising programs.
- The president acts as a liaison with the College of Nursing administration and the class advisors on behalf of the class.
- The president presides over all meetings of the class and is responsible for implementing all decisions of the class.
- The president may appoint an interim class member to fill an officer vacancy that arises between class officer elections. The careful selection of class officers is vital to an energetic, active class.
- The president selects the time and place of all regular and special meetings.
- The president oversees duties and activities of all other class officers.
- The president is proactive in matters related to fundraising development, implementation and evaluation.
- The president is responsible for implementing agendas for each class officer meeting.

- The president selects the graduation committee chairperson, and the fundraising committee chairperson. The chairs, with advice from the president, recruit the committee. The president sits on both committees. Coordinating the work of these two committees is a major responsibility of the class president.
- The president may serve in the absence of the vice-president, secretary, and treasurer and fulfill duties of each office as required.

Vice President

- The vice president shall perform the duties of the president in the president's absence.
- The vice president shall assist the president to act as a liaison between the class and class advisors.
- The vice president may be appointed by the president to assume oversight of a committee such as graduation or fundraising.
- The vice president represents the class in the planning of related activities and events.
- The vice president may serve in the absence of the secretary or treasurer and fulfills duties of each office as required.
- The vice president shall fulfill other duties as directed by the president.

Secretary

- The secretary shall prepare and distribute the meeting agendas.
- The secretary shall record and publish meeting minutes and maintain all records (including attendance) that apply.
- The secretary shall prepare and respond to all class correspondence.
- The secretary may serve in the absence of the president, vice president and treasurer and fulfills duties of each office as required.
- The secretary will fulfill other duties as directed by the president, vice president and class advisors.

Treasurer

- The treasurer is responsible for the financial resources of the class.
- The treasurer shall prepare and maintain the class budget and accounting records.
- The treasurer shall prepare and present a financial report setting forth the amount, management, and disposition of the class funds at each class meeting. The treasurer's report will update and communicate balances and progression toward goals.
- The treasurer shall disburse class funds to pay necessary and authorized charges in accordance with College of Nursing policy.
- The treasurer will work in close collaboration with the fundraising chair and committee.
- The class account maintained by the treasurer will be used to pay for expenses associated with class events, e.g., publicity, invitations, catering, etc.

- The treasurer may serve in the absence of the president, vice president and secretary and fulfills duties of each office as required.
- The treasurer will set up an account with the Roseman Bursar's Office.
- The treasurer shall fulfill other duties as directed by the president.

Standing Class Committees

Fundraising Committee

- Creates, organizes, and implements fundraising activities with the assistance of class officers to meet financial goals of the class.
- The chairperson of the committee shall report fundraising committee activities to the class and class officers at class meetings.
- All fundraising must be approved by the Student Affairs Committee

Graduation Committee

- Assists with planning, organizing, and implementing the graduation event activities.
- The chairperson of the committee shall report graduation event activities to the class and class officers at class meetings.

Class Meetings

Class meetings should be held as needed. The schedule of meetings will be determined by the officers of the class.

Student Participation in Governance

Students are active participants in the governance of the College of Nursing. Selected College of Nursing Faculty Council committees shall have a class member from each campus who may be elected or appointed by the Class President. All elected or appointed student committee members must be admitted and in good academic standing to serve on Faculty Council committees. Student representatives will hold voting privileges on assigned committees. The College of Nursing has student representation on the Student Affairs Committee, Simulation Committee, Curriculum Committee and the Advisory and Resource Committee.

College of Nursing Faculty Council Committees

Advisory Resource Committee (ARC)

The purpose of the ARC is to:

- Provide counsel to the Dean in matters related to policy implementation or change, external and internal relations, and College of Nursing activities not specifically delegated to other committees by existing bylaws.
- Assist in the development of long-range plans for the College of Nursing.
- Review long-range plans annually and make recommendations.

- Review bylaws at least every two years (or as needed) and make recommendations.
- Create and/or review forms (academic tools) for consistency with College of Nursing (CON) philosophy, mission, and student outcomes.

Curriculum Committee

The purpose of the Curriculum committee is to:

- Provide for ongoing planning, development and evaluation of the educational program(s) and curriculum.
- Receive recommendations from course coordinators and course teams regarding curriculum.
- Make recommendations to the Faculty Council regarding curriculum and/or course changes.
- Provide counsel to the Dean in matters related to recommended curriculum changes.
- Review course evaluations, aggregate and trend data across cohorts and present data to the Faculty Council for evaluation and discussion quarterly.

Educational Resource Committee

The purpose of the ERC is to:

- Collaborate with Library staff to purge outdated library holdings of digital and hardcopy materials as determined by relevancy to the CON.

Student Affairs Committee

The purpose of the Student Affairs committee is to:

- Discuss student issues that impact consistency in admissions, progression and graduation policies, scholarship administration and other areas of responsibility that may be assigned to the Student Affairs committee on an ad hoc basis for the College of Nursing.
- Address student issues and concerns.
- Review application/admission criteria annually and make recommendations for changes/revisions.
- Maintain a schedule for selection of students for scholarships and awards.
- Develop and communicate procedures for selection of recipients of scholarships.
- Implement procedures to select recipients for scholarships administered by the College of Nursing, University, or other organizations.
- Develop and implement procedures to ensure recognition of scholarships and awards.
- Develop and maintain a procedure for the mentor/mentee program in the College of Nursing.
- Review and approve all cohort fundraisers.

Simulation Committee

The purpose of the Simulation committee is to:

- Provide ongoing planning, development, and evaluation of simulation activities.

- Develop and recommend protocols and guidelines for simulation activities.
- Collaborate with interprofessional members to develop interprofessional simulation scenarios.
- Recommend simulation equipment and resources for purchase.

Class Advisor

Each faculty member is assigned to be the class advisor for an individual cohort by campus. An advisor should meet with their cohort on a regular basis to establish rapport and provide guidance as needed.

The class advisor is a faculty member who is responsible for providing the students with the guidance and support necessary to maximize the opportunity of the class to successfully progress from admission to graduation. The advisor may use multiple strategies including, but not limited to, sharing ideas, facilitating insight, inspiring, providing different perspectives, and counseling the class and individual cohort members. An advisor may only advise one cohort at a time. Faculty may volunteer for this position or be assigned by the Dean/Associate Dean. The class advisor may also be an intermediate step in grievance resolution between the faculty and the Associate Dean.

The class advisor shall perform the following functions:

- Class organization & officers
 - Explain roles of the class officers and conduct elections (generally in Block 4).
 - Support, assist, and monitor fundraising activities and management of finances.
 - Approve all advertisement material
 - Support, assist, and monitor the students with organization and production of the pinning video and graduation banquet.
 - Actively participate in the planning, goal development, and implementation, and progress of the class goals and outcomes.
 - Provide continuity/consistency within the class and communicate class goals and outcomes.
- Attend class meetings as necessary.
 - Serve as a role model and liaison
 - Provide the class with a professional role model and mentor.
 - Act as student liaison.
 - Build a good rapport with students.
 - Assist with growth and development of professional behaviors.
- Academic advisement
 - Attend new student orientation
 - Counsel students experiencing difficulties with their education.
 - Provide positive support, and encourage student achievement.

- Discuss potential or significant issues and present them to the Associate Dean.
- Provides guidance throughout the grievance process to address student issues.
- Progress checks in Block 5 or 6 and Block 10.
- Proctor all UWorld Formative Assessments and Formative Quiz #1.
- Organize the live review for Block 12 (NURS 432).
- Participate in cohort pinning including the oath and lighting of the candle.

Student Organizations/Clubs

Refer to the Roseman University of Health Sciences Student Catalog: [2025-2026 Student Catalog](#) A full list of approved student organizations can be found at [Student Organizations](#).

Professional Organizations and Ceremonies

Professional Organizations

As part of the nursing profession, students are encouraged to become a part of a professional nursing organization. This may provide resources, connections, networking, and scholarly achievement opportunities that may be beneficial to the student nurse.

The nursing student organizations at Roseman include the Student Nurses Association (SNA), the Roseman Honor Society of Nursing, the Lesbian, Gay, Transgender, Bisexual and Allies association (LGBTAA), the Asian American Pacific Islander Nurses Association (AAPINA), the Maternal and Neonatal Student Nurse Association (MANSNA), Global Health Student Nurses Association (GHSNA), and the Critical Care and Emergency Student Nurses Association (CCESNA).

ABSN Pinning Ceremony

The pinning ceremony is a time-honored tradition dating from before the 1800's. Traditionally, the pinning ceremony marks the passage from student to professional nurse. It is a special even that students share with family and friends. Students will be dressed in professional dress with white lab coat.

White Coat Ceremony (DNP/FNP (MSN/FNP) students)

The white coat ceremony is an event that many healthcare professions, such as nurse practitioners, take part in to commemorate graduate nursing students who are to assume new roles as nurse practitioners. Typically, these events include students being “coated” by their faculty using a long-tailed white coat that symbolizes the nurse’s transition to the role as healthcare provider.

The white coat ceremony provides recognition of professional and academic achievements upon the completion of the DNP/FNP program. In concert with the ABSN pinning ceremony, this ceremony allows friends and loved ones to celebrate students’ success. The DNP/FNP students are to join in celebrations with the ABSN students for a unification of these ceremonies. Celebration of this momentous event with the ABSN students is done for the purpose of solemnizing and unifying a commitment to the nursing profession, no matter the level of practice. The ceremony is planned in a manner that reflects the significant achievements for both ABSN and DNP/FNP students.

Skills and Simulation Laboratory Policies

Attendance in Lab

Attendance is mandatory at all scheduled skills and simulation laboratory sessions. An excused absence (as described in the excused absence section p.28) from the skills and simulation lab must be re-scheduled with the skills and simulation faculty and be completed prior to the next assessment.

Punctuality is expected. Being on time for the start of lab is a sign of professionalism and is therefore expected. If there is a likelihood that the student will be tardy, the student must contact the instructor before the start of the scheduled lab day, immediately upon realizing they will be late. Failure to notify the lab instructor of expected tardiness before the lab activity begins may constitute an absence.

Unexcused absences from scheduled skills and simulation laboratory sessions will not be rescheduled with the student. An unexcused absence from skills and simulation instructional periods for any reason does not relieve the student of responsibility for the material covered during the missed instructional period.

Following the first unexcused absence from a scheduled skills and simulation laboratory sessions, the student will be placed on academic probation and receive an Academic Intervention Plan to include written notification that additional unexcused absences will result in academic suspension from the College of Nursing.

Following the second unexcused absence from a scheduled skills and simulation laboratory sessions, the student will be placed on academic suspension and receive an Academic Intervention Plan to include written notification that additional unexcused absences will result in academic termination from the College of Nursing.

Following the third unexcused absence from scheduled skills and simulation laboratory sessions, the student will be terminated from the College of Nursing and not eligible for automatic readmission to a subsequent cohort. The student may re-apply to the College of Nursing through the College's Admissions Application process as outlined in the [2025-2026 Student Catalog](#)

Expectations in Lab

- No food, gum chewing, or drinks will be allowed, except for approved water containers with spill- proof lids.
- No photography in lab with mannikins, as mannikins are patients and HIPAA applies to them too.
- Come prepared to practice the assigned skill(s).
- Leave the lab area cleaner than you found it. This includes putting the beds in their lowest position, two side rails up, bed made, trashcan and bedside table at foot of bed.
- Lab is for practicing of skills, no studying in the lab
- Badge in and out of the lab for student safety and to account for practice time.
- Students are prohibited from performing any invasive procedure on other students or professors for example but not limited to: IV placement, NG tube placement, Foley catheter placement, and medication administration.

Professional Appearance

Students must maintain professional standards in grooming, appearance, and dress at all times in the lab.

- Dress
 - Grey or burgundy/maroon solid tops, and solid matching bottoms free of any print or the College of Nursing's clinical uniform
 - Students may also wear a long sleeve shirt under their scrubs, a grey or maroon scrub jacket, or a Roseman jacket.
 - Grey or burgundy surgical caps that match may be worn.
 - No clothing with a hood will be allowed.
 - White shoes with an impenetrable top.
- Equipment
 - Wristwatch must be worn
- Appearance
 - Long hair must be pulled back and up off the collar.
 - Acrylic or fake nails may not be worn during lab activities.
 - Stud earrings and wedding rings are allowed, however, jewelry may need to be removed for sterile procedures per infection prevention guidelines.
 - No tongue jewelry or facial piercing jewelry is allowed.
 - No other excessive jewelry.

Skill Assessment Day

- Students will not be permitted to participate in skills assessment if not in compliance with professional appearance as stated above.
- No talking with peers during or after assessments.
- No congregating after the assessment.
- HIPAA applies to skills assessment; therefore, no discussion of patients or scenarios shall take place.
- Reassessment will be scheduled on a separate day.

Safety & Infection Control

- All students must perform hand hygiene prior to entering and leaving the lab.
- Trash should be thrown in the designated receptacles.
- Red bags are for medical waste only.
- The sharps must be disposed of in the red sharps containers.
- All beds should be made appropriately after use with clean linen.

Mannikin and Simulator Care

- Do not remove or interchange mannikin parts without permission.

- Use only the appropriate solutions for procedures and for cleaning the mannikins.
- No defacing of school property or mannikins.
- Use of high-fidelity mannikins is only allowed with faculty supervision.
- Do not remove mannikins from the beds unless directed by lab coordinator.
- Treat the mannikins as if they were real patients.
- No equipment or supplies may be removed from the lab without permission from the lab coordinator.

*For Nursing Simulation Laboratory Policy, see **Appendix D**

Policy & Procedures for Laboratory Skills Assessment Purpose

- To ensure each nursing student is informed regarding the level of competency required for each laboratory clinical skill assessment.
- To ensure each skill assessment is graded impartially and consistently for skill competency by the nursing faculty.
- To ensure that each nursing student is given adequate resources and opportunity to remediate a No Pass skill assessment.

Policy

Students must achieve 90% or above on each clinical skill that requires demonstrated competency in the laboratory setting. The student who receives less than 90% will be provided with an opportunity to remediate the clinical skill in the laboratory setting. The student must receive 90% or above on the remediation skills assessment in order to successfully complete the course.

Procedure

- The course in Canvas will state the required laboratory clinical skill(s), the dates for instruction, availability of audiovisual aids, and the scheduled dates for initial assessment and for reassessment, as needed.
- The lab coordinator will emphasize in class the importance of the laboratory clinical skills assessment.
- The lab coordinator will explain the remediation process of receiving a No Pass grade.
- The skills procedure guideline will be available in Canvas.
- The student will have an opportunity to practice the skill during the nursing skills lab. A lab coordinator will always be available during lab hours for instruction.
- If a “live patient” is required for the assessment, another nursing student will serve as the “live patient”. Students may work in teams of 2 or 3 as needed. The team will remain intact and support each individual member until the assessment is complete. This includes remediation if needed.
- The faculty member evaluating the student’s skill assessment will use the ExamSoft assessment rubric.
- Faculty decision of assessment performance is final.

- The student who receives a No Pass on the student's skill will be provided an opportunity to remediate or reassess.
- If remediation or reassess is required, the student must practice in the nursing skills lab prior to remediation.
- Grading of skill re assessments will follow the same guidelines as initial assessment. If the student does not achieve 90% or above on the reassessment, the student will complete block remediation. Block remediation assessment will include the same guidelines above and will include two faculty members.
- If the student does not achieve 90% or above on block remediation, the student will not be allowed to advance in the program and will have to remediate the course.

Undergraduate Clinical Policies & Procedures

* Graduate clinical policies and procedures are outlined in the respective Clinical Practicum Handbook

Introduction

The faculty and administration of the College of Nursing welcome you to the clinical experiential component of the curriculum. The clinical component of the nursing curriculum is where you provide hands-on patient care that is both exciting and rewarding. The faculty will be available to assist you in achieving your learning outcomes. We wish you success in attaining competency in your clinical skills.

Attendance in Clinical Courses

Attendance at clinical sites for the entire assigned time period is mandatory. The student is responsible for notifying the clinical instructor in advance if they will be tardy or absent from clinical. Excused absences will be granted only by the Director/Assistant Director of Clinical Resources or designee. Students are required to complete all clinical assignments and clinical hours. The student must make-up time missed from the clinical rotation during the designated remediation period, if any. Clinical make up time in the facility is based on availability of clinical sites and is not guaranteed.

Excused absences may include student illness, personal/family emergency, bereavement, or religious observance (see page 28 for more details). See table below for excused absence occurrence criteria. Each occurrence must be approved by the Director/Assistant Director of Clinical Resources or designee. Students who are meeting course outcomes and have an excused clinical absence may miss one (1) day in clinical courses that are one (1), two (2) or three (3) weeks long and up to two (2) days in clinical courses that are four (4) weeks or longer without being required to remediate/repeat the clinical course in which the absence occurred.

Block Length	Excused Absence
2 weeks	1 excused absence occurrence
3 weeks	1 excused absence occurrence
4 weeks	2 excused absence occurrences
5 weeks	2 excused absence occurrences

The student will receive an alternate clinical assignment that is comparable to the missed clinical day(s). The alternate clinical assignment will be consistent with the established clinical outcomes and the student's learning

needs. All alternate clinical assignments must be approved by the Director/Assistant Director of Clinical Resources. The option for an alternative clinical assignment is only available for two courses throughout the duration of the program.

If a student exceeds the number of excused absence occurrences as outlined above, even if the absences are excused, the student will receive an incomplete for that clinical course, be withdrawn from their current cohort, and will be required to repeat the clinical rotation the next time it is offered, based on space availability.

If the student has an excused absence in a third clinical block, the student is not eligible for an alternative clinical assignment. The student will receive an incomplete for that clinical course, be withdrawn from their current cohort, and will be required to repeat the clinical rotation the next time it is offered, based on space availability.

Students with an unexcused absence will be given a No Pass, for the course and be required to repeat the clinical course the next time it is offered, based on space availability.

Punctuality in Clinical Courses

Being on time for the start of clinical shift conferences and meetings is a sign of professionalism and is therefore **mandatory**. If there is a likelihood that the student will be tardy, the instructor must be contacted before the start of the clinical day immediately upon knowing that they will be unable to report to the clinical facility on time. The report time is determined by the clinical faculty. Failure to notify the clinical instructor of a tardy may constitute an unexcused clinical absence. A student will be considered tardy when the student arrives after the time designated by clinical faculty. If the student is tardy one (1) time, the student will receive a Clinical Intervention Plan (CIP). If the student is tardy two (2) times, the student will receive an alternate assignment. If the student is tardy three (3) times, the student will receive a No Pass and must repeat the clinical course the next time the course is offered on the curriculum calendar based on space availability.

Students who arrive after the shift report has been completed will be given an alternate assignment within the clinical facility at the discretion of the clinical faculty. Students arriving after the shift report has been completed will not be given a client assignment as they are not prepared to safely care for the client. Students who arrive more than 1 hour late to any clinical experience for any reason will receive an unexcused clinical absence. The absence may be declared excused by the Director/Assistant Director of Clinical Resources if the student was in contact with the clinical instructor and the reason for the late arrival was beyond the control of the student.

Program Progression – Clinical

Clinical formative and summative evaluations shall be performed during each clinical rotation. All evaluations will receive a Pass “P” or No Pass grade. Evaluations will be assessed by student learning outcomes, program competencies and sub-competencies. Students are required to remediate if the student’s clinical performance is unsatisfactory. A No Pass grade in a clinical course must be remediated or repeated to continue in the program. The student will be given a Clinical Intervention Plan specifying placement on academic probation. The student is required to remediate or repeat the entire course and successfully complete all assignments or assessments. If the student is successful in repeating or remediating the course, the student will be removed from academic probation. If the student does not meet clinical course competencies after remediation, the student will receive a No Pass for the course and must withdraw from the program. The student’s status at the time of the withdrawal is “not in good academic standing.” If a student demonstrates unsatisfactory clinical performance, a Clinical Intervention Action Plan will be completed by the clinical faculty and reviewed with the student. The student may make comments on the clinical intervention plan, develop goals to achieve a successful resolution, and both parties will sign verifying that the information was discussed. The clinical instructor will notify the

Director/Assistant Director of Clinical Resources and submit the Clinical Intervention Action Plan (See Appendix B).

Clinical Remediation

Remediation for excused clinical absences is based on the availability of clinical sites and is not guaranteed, this may include a virtual clinical day or alternative assignment. Students are required to follow clinical course standards and expectations.

Any student with an unexcused clinical absence will not be allowed to make up missed clinical time during the remediation period. The student will be given a No Pass for the experiential course and will have to repeat the course the next time it is offered based on space availability.

Students may be required to attend remediation to make up excused missed clinical days. The alternative clinical assignment will be consistent with the course outcomes and the identified student needs.

If a student is unable to complete the clinical remediation when scheduled, the student will be given an Incomplete “I” if the student was meeting course outcomes prior to the excused absence. In order to replace the Incomplete “I”, the student will need to complete the clinical requirements necessary. If the student meets the clinical outcomes, the Incomplete “I” will be replaced with a Pass “P”. If the student is assessed and does not meet the clinical outcomes, the Incomplete “I” will be replaced with a No Pass.

Clinical Attendance Requirements during Remediation

Students may be required to attend remediation to make up excused missed clinical days. The alternative clinical assignment will be consistent with the course outcomes and the identified student needs.

Targeted Clinical Remediation

Students complete experiential learning throughout the nursing program. Student evaluation takes place throughout the clinical experience but is focused and directed at the midterm point and at the end of each clinical learning experience. Grading in the clinical area, as in the didactic courses, is done on a “Pass” or “No Pass” basis utilizing defined role-specific competencies. Students are expected to achieve a “Pass” mark in all areas on the student clinical evaluation tool to pass an experiential course. However, because students learn at different rates, some students may not achieve the “Pass” grade in all areas by the end of a clinical rotation.

If a student receives a “No Pass” grade in three (3) or fewer areas not designated with an “*” on the final evaluation, the student will move into a targeted remediation period of no more than three (3) additional clinical shifts. These extra shifts allow the student to demonstrate competency in the identified clinical areas. However, if a student receives a “No Pass” in any clinical area deemed an “Absolute No Pass” (indicated on the clinical evaluation sheet with an asterisk “*”), the student will not be permitted to remediate the clinical in the targeted remediation period and must repeat the entire experiential course the next time it is offered based on space availability. The “Absolute No Pass” designation is determined by the faculty council and reflects knowledge, skills or abilities that the faculty do not believe can be remediated or demonstrated in a shortened clinical rotation or are of such importance to patient safety as to require a repeat of the entire experiential course.

Placement in a targeted remediation clinical group will be coordinated by the Director/Assistant Director/Assistant Director of Clinical Resources. The same clinical facility or instructor is not guaranteed. The targeted clinical remediation period may not be utilized to make up clinical time for unexcused absences or excessive tardiness.

Student Responsibilities

- Students who must remediate are required to report to the remediation clinical facility appointed by the Director/Assistant Director of Clinical Resources and/or Clinical Coordinator for all remediation clinical shifts. Attendance is mandatory without exception.
- Students will work directly with the remediating clinical instructor to create a remediation plan based on the Clinical Intervention Plan from the initial clinical rotation sufficient to demonstrate to the remediating faculty that the student has the knowledge, skills or abilities required to receive a passing grade by the end of the targeted remediation period.
- Students will complete all assignments given by the remediating clinical instructor within the appointed timeframe.
- Following the targeted remediation period, the student will meet with the remediating clinical instructor to review the original clinical intervention action plan and the student clinical evaluation form to receive a final grade for the experiential course.

Incomplete Assignments

The clinical faculty will determine the due dates for all clinical assignments based on the clinical schedule. All assignments must receive a “Pass” grade on or before the final clinical day or as designated by the clinical instructor to complete the course successfully. Unless excused, the student who does not complete and submit a clinical assignment on the scheduled date and time will be given a Clinical Intervention Plan. A student who has received a Clinical Intervention Plan for failure to complete and/or submit a satisfactory or completed clinical assignment and has a repeated occurrence will receive a No Pass and must repeat the clinical course during remediation or the next time it is offered on the curriculum calendar, if space is available in the requested cohort. Students who are excused must complete and submit all clinical assignments at the time and date designated by the faculty and complete all clinical hours to successfully complete the course.

Medical and Training Requirements for Clinical Sites

Students must meet the following clinical requirements to protect self, assigned clients, and to adhere to agency policies. Additional requirements may be required by clinical sites or agencies. Failure to provide the required information will result in an inability to attend clinical rotations.

Documentation showing completion of all clinical requirements must be provided at a time designated by the Director/Assistant Director of Clinical Resources. The following is required:

Students must submit documentation of updated annual clinical requirements at the specified date and time, to attend clinical rotations.

- **A copy of current American Heart Association BLS-HCP card** –Basic Life Support for Healthcare Providers (BLS-HCP)
- **Medical History (Appendix E) and Physical Examination (Appendix F)** – The physical exam must be signed and dated by a licensed health care provider, (i.e. physician, nurse practitioner, or physician assistant), and performed within 6 months prior to entry into the nursing program and annually thereafter. If a change in health status occurs after admission into the nursing program, students must notify the Director/Assistant Director of Clinical Resources and the Associate Dean, Student and Academic Affairs. A change in health status is defined as, but not limited to injury, surgery, hospitalization, pregnancy, or contagious or severe illness.

- **Tuberculin Test Nevada and Utah** – An initial QuantiFERON- Gold TB blood test is required and annually thereafter. If the result of the initial QuantiFERON-Gold TB test is positive, a one- view chest x-ray is required. If the student’s chest x-ray has findings consistent with TB and/or the student has symptoms consistent with TB, the College of Nursing policy must be followed (**Appendix F or G**). It is acceptable if a student has had a QuantiFERON-Gold TB blood test **within 6 months prior** to entry into the nursing program. Annually students must have a repeat QuantiFERON-Gold TB blood test. Students who are positive reactors, must complete the TB Screening Tool and it must be signed by their healthcare provider (**Appendix H**)

- **Students with a baseline positive or newly positive test result for *M. tuberculosis* infection or documentation of treatment for latent tuberculosis infection (LTBI) or tuberculosis (TB) disease:** Should receive one chest radiograph to exclude TB disease performed within 6 months prior to entry into the nursing program, with results submitted to the Director of Clinical Resources.

Repeat radiographs are not needed unless signs or symptoms of TB disease develop or unless recommended by a clinician. *Students with positive baseline results must be screened within 6 months prior to entry and annually for symptoms of TB disease.* The *Tuberculosis Screening Tool* (**Appendix H**) must be completed and signed by a licensed healthcare provider (physician, nurse practitioner, or physician assistant).

- **Immunizations** – A copy of completed immunization record of documentation that contains the following:
 - **Hepatitis B Vaccine** – completed series of three (3) injections (2nd injection 1-2 months after 1st injection, 3rd injection 4-6 months after 1st injection) or a positive titer showing immunity.
 - **Hepatitis B Titer**- some facilities request a positive titer for Hepatitis B even if documentation of the three-shot series is available for evidence of immunity. You will be notified if you need to submit this additional documentation.
 - **Hepatitis A Vaccine** – two (2) injections – 2nd injection 6 months after 1st injection or a positive titer showing immunity, unless a waiver is signed.
 - **MMR** – (Measles, Mumps, and Rubella) 2nd injection (booster) is required – need evidence of documented receipt of the MMR vaccine. If you have had the disease, a positive antibody titer showing immunity is required.
 - **Tdap (Tetanus/Diphtheria/Pertussis)** – Tetanus immunization must be documented within the last 10 years. You must have documentation of at least one Tdap as an adult, subsequent tetanus shots may be TD only.
 - **Varicella (Chickenpox)** – Must have a documented immunization record (2- injections, 2nd injections 4-8 weeks after the 1st injection). If you have had the disease, a positive antibody titer showing immunity is required.
 - **Seasonal Flu Vaccine**
 - **Any other vaccinations as required by clinical practice sites.**
 - If a student is not immunized with any required vaccine regardless of waiver status granted by the College of Nursing, the clinical/experiential training may refuse to allow the student to receive training at their facility/facilities. If this happens, it may delay or prevent such a student’s program completion.

- **Completed Health Insurance Statement** along with copy of your Health Insurance Card (front & back). This is required even if you obtain the Roseman student insurance.
- **Background Check** – A background check must be obtained through American DataBank, LLC. Instructions regarding this process will be provided by the Director of Clinical Resources. Fees associated with the background check are the responsibility of the student.
- **Requirement for Criminal Background Check** - The nursing curriculum contains a didactic and clinical component. All students must complete a criminal background check as required by the clinical agencies. Student criminal background checks are conducted via American DataBank, LLC. Personnel from Human Resources at the clinical agency review the results of each student's background check and either accept or deny the student the opportunity to enter their agency for the clinical rotation. A student who is not accepted in an agency for all clinical rotations cannot meet the curriculum requirements for graduation. Therefore, the student must withdraw from the nursing program.
- **Drug Screen** – A negative ten panel drug screen is required prior to the first clinical rotation through American DataBank, LLC. Information and the drug screening process will be provided by the Director of Clinical Resources at a later date. Fees associated with the drug screen are the responsibility of the student.

If a faculty member/administrator/staff member observes the student and has a reasonable suspicion that the student may be impaired, the student may be requested to submit to a random drug screening at the time of the event. The student will be accompanied to the testing center by an administrator or staff member. If the drug screening results are negative for the presence of tested substance, the College of Nursing will cover the cost of the screening. If testing results are positive for any substance, the student will be responsible for the cost of the screening and may be recommended for additional misconduct proceedings which may include anything up to and including probation, suspension, or withdrawal.

- **Signed Clinical Requirements Statement** (given to students at orientation)
- **Signed Confidentiality Statement** (given to students at orientation)
- **Certifications and Training** – Will be provided to students while enrolled in the College of Nursing.
- **Compliance Education** that includes but is not limited to:
 - ✓ Fire, Radiation Safety
 - ✓ Latex Allergies
 - ✓ Health Insurance Portability and Accountability Act (HIPAA)
 - ✓ Infection Control/Blood-borne Pathogens

Students must submit an updated medical history, physical examination, TB screen, flu immunization annually and bi-annual BLS-HCP certification on or before the due date specified by the Director/Assistant Director of Clinical Resources. If clinical requirements are not submitted on or before the due date, the student will not be permitted to attend clinical rotations.

Clinical Rotations

Expected Behavior

All client information is considered confidential. Verbal, non-verbal, or written communications must follow the HIPAA regulations (*See Health Insurance Portability and Accountability Act of 1996*). Protected Health Information (PHI) includes names, geographic areas smaller than a state, dates, telephone numbers, addresses, hospital account numbers, or photographic images. Laptops and phones are not allowed in patient care areas. Images or information of any kind associated with a client or clinical site cannot be posted on social media or online to protect client and hospital privacy.

Cell phones may be used to communicate with the clinical instructors only. If you must communicate with the clinical faculty, please remove yourself from the patient care area to engage in any conversations on the cell phone. All cell phones must be put on vibrate even if they are stored outside of patient care areas.

Steps must be taken by students to protect the privacy of their clients. These include, but are not limited to:

- Any information obtained from the client's chart or other sources must contain only the client's initials.
- Close curtains and speak softly (as appropriate) in client rooms when discussing treatments and/or performing procedures.
- Close room doors for client privacy during nursing care, when appropriate.
- Do not discuss clients in public places such as elevators, waiting rooms, and cafeteria.
- Do not post any patient information on social media.
- Safeguard medical records by not leaving the records unattended in areas where the public may have access.
- Log off before leaving the computer.
- Printing, photocopying, or faxing of client records and removing any part of the medical record from the facility is prohibited.
- If a student is not prepared for clinical rotation, a remediation assignment will be required.
- The student is responsible for transportation to and from ALL required clinical sites. Faculty may not transport students to or from a clinical site.

Blood Borne Pathogens and Exposures

Incidents of exposure to pathogens may include needle stick or laceration, blood or body fluid splashes, abrasions, hangnails, or acquired dermatitis (i.e., latex allergies), human bite that breaks the skin, or other exposures.

In case of exposure, the first step is to follow the facility guidelines for exposure and treatment including reporting to the Infection Control Department or Employee Health Office. Next, call your instructor immediately. If the source client is known, the agency in which the exposure occurred may request that the client or family consent for testing, according to hospital policy. Each incident will be treated on a case-by-case basis and if indicated, treatment initiated. Students are responsible for any initial treatment and any subsequent treatment. The student and instructor will complete the Incident Report process electronically.

It is important to report all injuries, whether they are deemed blood borne, or not. The student and clinical instructor will complete the incident report process electronically for documentation of all other non- blood borne incidents.

Medical Insurance/Medical Care

Roseman University of Health Sciences' students are required to obtain adequate health insurance coverage while they are enrolled in their program, except students in the following category:

- Students enrolled in the College of Nursing who have successfully completed their clinical component of the program, who only need to satisfy didactic (i.e., on-line and/or classroom instruction only) requirements to graduate.

Each student is responsible for their medical care and/or treatment in case of illness or injury while on a clinical rotation, if necessary, including transportation. In the event a student no longer has medical insurance, the student is ineligible to continue their clinical training.

Some sites will provide post-exposure evaluation, source patient testing, and initial prophylactic treatment as a result of exposure to blood or bodily fluids during a rotation, according to the most recent Center for Disease Control guidelines. The site will not provide HIV or Hepatitis B follow up. The exposed individual will be responsible for the follow-up with the student's own physician or other medical personnel. The student shall be responsible for payment of any care/testing received as well as any additional or subsequent care.

Professional Appearance

Professional attire and behavior are mandatory. Students are expected to represent the College and the nursing profession with good hygiene and a well-groomed appearance.

Students may not wear excessive perfume and cologne. Nails should be cut and unpolished during clinical experiences. Acrylic or fake nails may not be worn during clinical rotations as they may be an endangerment to patient care.

Students may not have visible piercings except for stud earrings. No tongue rings or studs, or facial jewelry may be worn. Students must cover all visible tattoos. Students must have professional appearing hair color and style. Males should be clean shaven or have neatly trimmed beards or mustaches. Long hair must be pulled back or put up above the collar during clinical rotations. One single watch with a second-hand and one plain wedding band are acceptable. Other than the items listed above, no additional jewelry may be worn during the clinical rotation. Students must follow healthcare institution guidelines.

Students going into a clinical facility for any reason, including getting client assignments and other non-client care situations must be in clinical uniform with appropriate picture ID and other ID as required by agency policy.

Violations of Dress Code

Any violations of the above dress code will be subject to disciplinary action. The first offense will be a verbal warning and correction of the dress code violation. The second offense will include correction of the dress code violation and a referral to the Director/Assistant Director of Clinical Resources.

Clinical Uniforms

Students are expected to wear the approved College of Nursing uniform, purchased from the approved vendor, when reporting to clinical rotations. Any student who appears at a clinical site without a clean and appropriate uniform will be sent home immediately and will not receive credit for any subsequent missed clinical hours.

The College of Nursing uniform consists of a "white scrub top with burgundy trim on the sleeve, burgundy pants, and white shoes with an impenetrable top.

- May wear a white $\frac{3}{4}$ length sleeve shirt under scrub top

- May wear a black vest, must be non-fleece or non-wool

Clinical Orientation

For each clinical course, students may be expected to rotate to several nursing agencies or nursing units. Specific hospital requirements will be discussed during orientation. The clinical instructor will plan orientation days and a facility tour. Parking, conference rooms, and meals will be discussed as they pertain to each facility's protocols. Orientation to a clinical setting may be considered a component of a full clinical day during regularly scheduled clinical courses.

Clinical Assignments

Some clinical courses may require that students report to the assigned clinical agency to obtain a patient assignment on the day before clinical rotation. Clinical uniform must be worn including appropriate student identification when reporting to get the patient assignment.

Information obtained from the clinical chart must not include the client's name or personal data. All information must adhere to HIPAA regulations.

Students may not copy a medical record, take a picture of, or remove any document printed from the patient's medical record from the facility. Please be considerate of staff and their shift changes and/or physician rounds. Any chart with an order must not be removed from the nurses' station.

Clinical Preparation

Clinical preparation, including the clinical documents, is done to prepare students for total client care within the scope of their current skill level. Typically, this consists of morning care, treatments, meals, physical assessment, documentation, and medication administration. The student will be expected to

perform the skills appropriate to the corresponding didactic and laboratory content. Each clinical day, the student must:

- Come fully prepared to perform patient care.
- Bring a penlight and stethoscope.
- Review assigned medical records.
- Have drug cards or drug reference book.
- Know the client's medications, diet, and allergies.
- Bring appropriate paperwork needed for client care.
- Bring clinical skills and outcomes sheet for applicable course.

Students should place items with patient information in a notebook to protect client information and for an organized and easy reference.

Clinical Conferences

Clinical conferences are an integral part of clinical rotations. The purpose of clinical conferences is to share preparatory information and address any care issues.

Clinical post-conference is required as part of a clinical course. The post-conference is held during the clinical shift assignment. Post conference is used to share information, to teach, or to discuss actual problems which occurred during the clinical day.

Professionalism

As a nursing student, it is important to remember that you are representing the university, the nursing profession, and are a guest of the clinical facility.

Any of the following behaviors are sufficient grounds for the instructor to determine that the student is unsafe and may not continue in the clinical rotations. This decision to remove a student from the clinical setting is based on the commission of serious offenses and requires accurate documentation.

- Failure to meet clinical outcomes.
- Actions which place clients, families, oneself, or other humans at risk for physical jeopardy
- Refusal or failure to follow College of Nursing or clinical agency protocols.
- Verbally or otherwise publicly revealing confidential patient information in violation of HIPAA regulations
- Illegal use of drugs or alcohol during clinical rotations or on school grounds
- The falsification of information (patient, peer or preceptor)
- Absences or tardiness (See Punctuality in Clinical Courses)
- Failure to safely execute critical elements of procedures or protocols in practice.

Supervision of Skills in the Clinical Area

Nursing skills that are correctly performed by the student and signed off in the Skills Lab may be performed in the clinical setting, if consistent with the policy of the clinical agency. For each clinical course, please review the clinical outcomes document (found in Canvas) to review a list of skills that may be performed. Performing a skill that is not passed off in lab or is not listed on the clinical outcomes document may result in removal from the clinical setting. (See Professionalism)

Medication Administration Limits

- Students MAY NOT administer blood products.
- Students may not administer drugs during a “Code.”
- Students may not sign out or sign as the witness for the wasting of narcotics.
- Students may not administer medications to a client without a patient ID.
- Students may only access a central venous catheter or PICC line in accordance with facility policy (instructor and/or supervising RN present)
- Students may not administer any medications that they did not draw up, mix, or open.
- Students may not administer any medication without the supervising RN or instructor present.

Graduate Program Clinical Policies & Procedures

Provided in the respective MSN/FNP & DNPNA Practicum Handbooks.

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Appendix A – Undergraduate Academic Intervention Action Plan



Roseman University of Health Sciences College of Nursing Academic Intervention Plan



Student Name:

Course #:

Course Title:

Occurrence # and Date

Date:	Date:	Date:
Concern #:	Concern #:	Concern #:
Faculty:	Faculty:	Faculty:

This form is to be completed by the Course Coordinator or designee for each student who meets any of the concern criteria listed below. Circle all areas that apply.

Statement of Concern:

1. No Pass assessment
2. Failed Reassessment or course reassessment
3. Excessive days absent or tardy
 - a) Excused
 - b) Unexcused
4. Academic and/or Professional Misconduct: Cheating, Plagiarism, fraud, misrepresentation, unethical behavior, improper behavior, unprofessional conduct, and false information.
5. Failure to submit required assignments completely and on time.
6. Lack of group participation
7. Other

Outcome Statement:

1. Pass assessment remediation.
2. Pass course reassessment.
 - 2b. Consult with appropriate persons regarding the process to:
 - Retake the course when next offered
 - Place on Academic Probation until successful remediation of Course.
 - Exit the Roseman University of Health Sciences CON program.
3. Be on time for class or contact course coordinator or lecturing faculty to request excused absence or tardiness. Be aware of the consequences if corrective action is not taken.
4. Refrain from unacceptable behavior and be aware of consequences if behavior does not change.
5. Submit all required assignments completely, satisfactorily, and on time. Be aware of consequences as described in the syllabus if this is not done.
6. Actively participate in all group assignments. Be aware of the consequences if group participation does not improve.
7. Other

Action Plan:*Concern #1:*

1. Review failed assessment for areas of weakness.
2. Review all assessments, lectures, and handouts.
3. Clarify concepts with appropriate faculty.
4. Assess study habits for ways to improve.
5. Review test taking strategies.
6. Complete ATI Nurse Logic tutorials.
7. Review ATI practice assessments.
8. Other

Return form to the Associate Dean, Academic & Student Affairs.

Concern #2:

1. As stated in outcome statement, above

Concern #3:

1. Discuss with appropriate faculty reasons for frequent absences and/or tardiness, whether excused or unexcused, to try to resolve problems.
2. As stated in the course syllabus, be aware that any absence from nursing lab must be made up during the student's free time.

Concern #4:

1. Meet with appropriate faculty and Associate Dean to determine causes for unacceptable behavior and possible solutions to problems.
2. Be aware that improper behavior may result in dismissal from the nursing program (See the current Student Handbook on Academic and/or Professional Misconduct).

Concern #5:

1. Meet with appropriate faculty to determine causes for failure to submit required assignments.
2. Be aware that satisfactory completion of all individual and group assignments and submission on the due date is a course requirement as stated in the course syllabus. Failure to meet this requirement will result in a No Pass grade for the course.

Concern #6:

1. Meet with all group members with or without group faculty advisor to determine course of action.
2. Be aware that a student who does not participate in group assignments/assessments will not be awarded group assessment points.

Concern #7: Other

Student Outcomes	
Student Comments:	Faculty Comments:

Date Academic Intervention Action Plan Initiated_

I have received a copy of the Academic Intervention Action Plan.

Student Signature

Date

Faculty Signature

Date

Date Academic Intervention Action Plan Resolved

Student Signature

Date

Faculty Signature

Date

Place in student file until the student graduates.

Program Outcomes Mapping:

- Patient-Centered Care
- Evidence-based Practice
- Safety & Quality
- Health Information
- Communication
- Professionalism

Appendix B – Clinical Intervention Action Plan

Roseman University of Health Sciences College of Nursing Clinical Intervention Action Plan

Student Name:

Date:

Faculty Name:

Block:

Statement of Concern may include, but are not limited to: (select all that apply)

- ☐ Unsafe Clinical practice
- ☐ Actions which place patients, families, oneself, or other humans at risk for physical injury
- ☐ Refusal or failure to follow clinical site agency policy/protocols
- ☐ Unprofessional behavior
- ☐ Disrespectful behavior toward faculty and/or agency staff
- ☐ Failure to report changes in client's condition to faculty and/or agency staff
- ☐ Providing untrue or inaccurate information
- ☐ Unsatisfactory and/or incomplete assignments
- ☐ Failure to meet clinical outcomes
- ☐ Other

As Evidenced by (Detailed Description of Student's Behavior)

Detailed Description of Interventions by Faculty

Detailed Description of Corrective Action Plan by Student

Failure to comply with any of the above requirements set forth in this corrective action plan will result in a no pass for this block. Any further incidence of not meeting all clinical outcomes and/or unsafe clinical practice will result in immediate dismissal from this clinical block.

Date Clinical Intervention Action Plan Initiated

Student Signature:

Date:

Faculty Signature:

Date:

Student received copy of Mid-Term Evaluation:

Student received copy of Clinical Intervention Action Plan:

Clinical Intervention Plan Outcome (to be completed at the end of the clinical block)

[illegible]

Appendix C – Punctuality Clinical Intervention Plan



Punctuality Clinical Intervention Plan

As discussed in the Clinical Course Agreement signed at the start of each clinical block, being on time for the start of clinical shifts and meetings is a sign of professionalism and is therefore mandatory. A student is tardy if they arrive after the time designated by the instructor. Tardies will be tracked by the Director/Assistant Director of Clinical Resources and will be taken into consideration when determining capstone placement.

If the student is tardy one time, the student will receive a Clinical Intervention Plan (CIP). If the student is tardy two (2) times, the student will receive an assignment. If the student is tardy three (3) times, the student must repeat the clinical the next time the course is offered on the curriculum calendar based on space availability.

Students who arrive after shift report has been completed will be given an alternate assignment/clinical activity within the clinical facility at the discretion of the clinical faculty. Examples of alternate clinical activities include quality assurance audits, reviews of lab reports, intravenous fluid audits, helping certified nursing assistants with tasks, etc. Students who arrive more than 1 hour late to any clinical experience for any reason will receive a clinical absence.

Student Name: _____ Date: _____

Clinical Site: _____

Instructor: _____

Expected Time: _____

Arrival Time: _____

Student's plan for Improvement: _____

Student Signature: _____

Instructor Signature: _____

Appendix D – Nursing Simulation Laboratory Policy and Confidentiality Agreement

Roseman University of Health Sciences College of Nursing

ROSEMAN SIMULATION CONFIDENTIALITY AGREEMENT

As a user of the Roseman University of Health Sciences Simulation Laboratory, I understand the significance of confidentiality with regards to all aspects concerning simulation experiences. I will uphold the requirements of the Health Insurance Portability and Accountability Act (HIPAA) regarding confidentiality. I agree to report any violations of confidentiality that I become aware of to the simulation faculty. I am aware and understand sharing scenario experiences with fellow students outside of the simulation laboratory will be considered academic misconduct and may result in disciplinary action. I agree to adhere to the following guidelines:

- All patient information whether electronic, written, overheard or observed is confidential and any inappropriate viewing, discussion or disclosure of this information is a violation of Roseman University of Health Sciences Nursing Simulation Laboratory policy.
- Maintain strict confidentiality regarding my performance as well as the performance of others, whether witnessed in real time or on media. This includes events, actions and statements seen or heard during the scenario and as part of the debriefing discussions.
- Viewing, using, disclosing or copying information related to simulation scenarios will only be allowed as it relates to the performance of educational duties.
- All simulation scenarios, regardless of the outcome, will be treated in a professional manner. Simulation manikins are to be treated with the same respect as if they were live patients.
- Refrain from use of demeaning, mocking, negative verbal, written or body language about any scenario participant's action or behaviors before, during or after the scenario.
- Support and guide participants in a positive, professional manner and fully participate during the debriefing session.

STUDENT SIGNATURE

FACULTY FACILITATOR SIGNATURE

Appendix E – Medical History Form



ROSEMAN UNIVERSITY OF HEALTH SCIENCES



MEDICAL HISTORY

For the purpose of eligibility for clinical rotations, complete this page legibly and in its entirety. Examining Physician must complete the Physician's Examination page.

Name:

Age:

Date of Birth:

Address:

City, State, Zip:

Phone:

Cell Phone:

Personal Physician:

Phone:

Address:

City, State, Zip:

Medical History – Check Yes or No below if you suffer from any of the following conditions. (If yes, please provide an explanation)

Conditions

Yes

No

Diabetes

Heart Trouble

Psychiatric Illness

Back Pain

Cancer

AIDS or ARC

Conditions

Yes

No

Epilepsy or Seizures

High Blood Pressure

Eye Problems

Tuberculosis

Arthritis

Malaria

Any other medical condition not mentioned above:

If yes to any of the above conditions, please explain:

Allergies:

Are you currently taking any medications?

Yes

No

If yes, please list:

Any Drug, Narcotic or Alcohol Problems:

Yes

No

If yes, please explain:

I declare that the information on this form is true, correct and complete to the best of my knowledge. Information contained in this form may be discussed with clinical instructors and preceptors, if warranted.

Patient Signature:

Date:

Please return signed form to:

Roseman University of Health Sciences
College of Nursing Director of Clinical Resources
10920 S. Riverfront Parkway
South Jordan, UT 84095

Roseman University of Health Sciences
College of Nursing Director of Clinical Resources
11 Sunset Way
Henderson, NV 89014

Appendix F – Physical Examination Form



ROSEMAN UNIVERSITY OF HEALTH SCIENCES



COLLEGE OF NURSING

PHYSICAL EXAMINATION

Must be completed and signed by a licensed health care provider i.e. physician, nurse practitioner, or physician assistant, and performed within the past year.

Students Name: _____ Date of Birth: _____ Sex: M F
Age: _____ Height: _____ Weight: _____
Blood Pressure: _____ Pulse: _____ Vision: (R) (L)

	Normal	Abnormal	Details of Abnormality
Abdomen & Viscera			
Back & Spine			
Ears			
Endocrine System			
Feet			
GU System			
Head, Neck, Face, & Scalp			
Heart			
Lower Extremities			
Lungs, Chest, & Breasts			
Lymph Nodes			
Mouth & Throat			
Nose & Sinuses			
Pupils & Ocular Motion			
Skin			
Teeth & Gingiva			
Upper Extremities			

Additional Comments: _

I certify that I have on this date examined this patient and that, on the basis of the examination requested by this patient and the patient's medical history as furnished to me, I have found no reason which would make it medically inadvisable for this patient to participate in supervised clinical rotations in various settings.

Examiner's Name and Address (Stamp or Print)

Examiner's Signature

Date

If the Physician's Assistant or Nurse Practitioner performed the exam, please include name and address of collaborating physician or group below.

**Name and Address of collaborating physician or group
(Stamp or Print)**

Please return signed form to:

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NOTE: Medical History must be completed prior to the Physical Examination

Appendix G – Reporting TB Symptoms/Findings

Reporting Symptoms and/or Findings Consistent with TB to Southern Nevada Health District TB Clinic

Student Name:

Student Phone #:

Students who have a positive QuantiFERON-Gold TB blood test must complete the TB Screening Tool that documents the presence or absence of TB symptoms. The student must also obtain a 1-view chest x-ray **within 48 hrs.** All above documentation must be immediately submitted to the Director of Clinical Resource at Roseman University College of Nursing.

If the student has a positive TB test and has symptoms consistent with TB or a Chest x-ray report with findings consistent with TB, the student must be seen by a healthcare provider **within 24 hrs.**

The student will not be permitted to continue in classes or in a clinical rotation until a medical clearance from the student's healthcare provider is submitted to the Director of Clinical Resource or designee.

Because TB is a reportable infectious disease, the Director of Clinical Resources will notify the TB Clinic at the Southern Nevada Health District of all students with a positive TB test and symptoms consistent with TB or a Chest x-ray report with findings consistent with TB.

The address for the Southern Nevada Health District is:

280 S. Decatur Blvd Las Vegas, NV 89107 702-759-1364

If you have any questions, please feel free to contact the Director of Clinical Resources.

Director of Clinical Resources Roseman University
College of Nursing

Appendix H – Reporting TB Symptoms/Findings

Reporting Symptoms and/or Findings Consistent with TB to Salt Lake County Health District TB Clinic

Student Name:

Student Phone #

Students who have a positive QuantiFERON-Gold TB blood test must complete the TB Screening Tool that documents the presence or absence of TB symptoms. The student must also obtain a 1-view chest x-ray **within 48 hrs.** All above documentation must be immediately submitted to the Director of Clinical Resource at Roseman University College of Nursing.

If the student has a positive TB test and has symptoms consistent with TB or a Chest x-ray report with findings consistent with TB, the student must be seen by a healthcare provider **within 24 hrs.**

The student will not be permitted to continue in classes or in a clinical rotation until a medical clearance from the student's healthcare provider is submitted to the Director of Clinical Resource or designee.

Because TB is a reportable infectious disease, the Director of Clinical Resources will notify the TB Clinic at the Salt Lake County Health District of all students with a positive TB test and symptoms consistent with TB or a Chest x-ray report with findings consistent with TB.

The address for the Salt Lake County Health District is:

610 South 200 East

Salt Lake City, UT 84111 (385) 468-4225

If you have any questions, please feel free to contact the Director of Clinical Resources.

Director of Clinical Resources Roseman University

College of Nursing

Appendix I – Tuberculosis Screening

(If students & faculty have had positive TB test in the past, they are to use this form for their annual TB requirement)

Name:

Gender:

Race:

Birthday:

Section A

Please answer the following questions:

Do you have:	Description	Yes	No
1. Unexplained productive cough	Cough greater than 3 weeks in duration		
2. Unexplained fever	Persistent temperature elevations greater than one month		
3. Night sweats	Persistent sweating that leaves sheets and bed clothes wet		
4. Shortness of breath /Chest pain	Presently having shortness of breath or chest pain		
5. Unexplained weight loss/appetite loss	Loss of appetite with unexplained weight loss		
6. Unexplained fatigue	Very tired for no reason		

The above health statements are accurate to the best of my knowledge. I will see my doctor/healthcare provider and or the health department if my health status changes.

Signature:

Date:

Witness:

Section B

This is to certify that the above-named person had a tuberculosis test on_ which was read as Positive and had a subsequent chest x-ray on_ which showed no sign of active inflammatory disease. This person has no symptoms suggestive of active tuberculosis disease. A chest x-ray for tuberculosis is not indicated.

Licensed Medical Professional (physician, nurse practitioner, physician assistant)

Date

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10920 S. Riverfront Parkway

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