PREFACE

All students will find it helpful to study this handbook. It is updated every six months to reflect new or changed policies occurring each academic year. It is important for you to be aware of the information contained herein to facilitate your program and to protect you and your clients. We wish to create an inclusive and supportive environment that motivates everyone to do their best work and learn and grow as individuals.
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I. Introduction

This handbook is designed to serve as a resource for students enrolled in the Eau Claire and Marshfield site Nursing programs. Academic advisors can also be contacted as needed for information and support. Students are also encouraged to utilize the following additional resources:

**University of Wisconsin-Eau Claire Undergraduate Catalog** - Contains an updated description of University and College requirements, academic policies, and courses. The catalog is published annually and is available online: [http://www.uwec.edu/Registrar/catalogs/Catalogs.htm](http://www.uwec.edu/Registrar/catalogs/Catalogs.htm)

**Campus Directory Information** - Students are encouraged to utilize the UWEC website and the UWEC Outlook email system to access locations and telephone numbers for services and departments/offices; room and office telephone numbers and email addresses of faculty and staff, as well as e-mail addresses of students.

**Dean of Students Office** – The Dean of Students Office website references university regulations, procedures, student services, and where to get help for specific problems. This includes complete information regarding grievance procedures.

**Your Right to Know** - A campus resource for all students, faculty and staff which provides information and identifies resources which can assist students regarding supportive services, campus communications, safety and transportation services. An electronic copy can be viewed online (use the Search Box).

**Spectator** - Campus newspaper that contains calendar of events and official notices concerning actions required of students; available on Thursdays at various locations on campus. It is also available online at the University’s website—please use the Search box.

**Letters/Returned Papers** --Letters, graded papers, paper forms, or other items not returned directly to a student by an instructor or adviser may be picked up in Room 127 of the Nursing Building at the Eau Claire campus or in the main program office (Room 106) at the Marshfield Site.

**Email** - Students are required to use their official UWEC email address for university and nursing program communications. It is your responsibility as a student to check your UWEC email account daily. Information about accessing your e-mail address is available at the Help Desk in the Vicki Lord Larson Hall (Room 1106). Please see the University HelpDesk website for assistance.

**Bulletin Boards** - An Eau Claire site bulletin board containing University and College announcements is available on the first floor in the west corridor of the Nursing Building. Bulletin boards containing information on Nursing courses are on the Nursing building’s second floor near the department offices. Marshfield site bulletin boards are located both on ground and first floors of the Marshfield Medical Center South building.

**Program Costs** - Students are responsible for all costs relating to their professional nursing program. This includes, but is not limited to: tuition, fees, special course fees, textbooks, uniforms, clinical and skills lab supplies, professional equipment, clinical travel, required CPR updates, personal health insurance, and other health and background check requirements. Admitted students should have wireless laptop access (not Chromebook). See website for details.

**Student Records** - It is important to keep all mailing address, telephone number, and name change information updated. This can be done by accessing the following link: [http://www.uwec.edu/Registrar/student/](http://www.uwec.edu/Registrar/student/)
II. College of Nursing and Health Sciences Educational Facilities

Eau Claire Site - College of Nursing and Health Sciences Building

Hours
Building is open Monday-Thursday, 7 a.m. - 9 p.m., and 7:00 a.m. - 5:00 p.m. Friday during fall and spring semesters. During summer sessions the building is open Monday – Friday from 7:00 a.m. – 5 p.m. unless otherwise published.

Lockers
Individual lockers are available on a first come, first serve basis for nursing students each semester. Students provide their own lock (combination only). All students who would like to use a locker should select a locker and complete and return the locker form to the LRC (forms are available in the Learning Resource Center). Lockers must be cleaned out at the end of each semester. Any locks remaining on lockers at the end of the semester will be removed and personal items found in the locker will be recycled or donated. The Women’s Locker Room is adjacent to the 1st floor women’s restroom. The Men’s Locker Room is adjacent to the 2nd floor men’s restroom.

Letters/Returned Papers
Letters, graded papers, paper forms, or other items not returned directly to a student by an instructor or adviser may be picked up in Room 127 of the Nursing Building at the Eau Claire campus or in the main program office (Room 100) at the Marshfield Site.

Faculty Mailboxes
Faculty mailboxes are located in room 252 on the second floor of the Nursing building. Because the door to the room is kept locked for security reasons, students may leave items with the support staff in Room 127, who will deliver the materials to the appropriate mailboxes.

Courier Service (Marshfield to Eau Claire; Eau Claire to Marshfield)
A green courier pouch leaves the Marshfield site main office each morning and is delivered to the Nursing building (Eau Claire campus) that afternoon. A second green courier pouch leaves the Eau Claire site Dean’s office each afternoon and is delivered to the Marshfield site each morning. Students wishing to send paperwork and other correspondence items to an Eau Claire site department are encouraged to use the courier pouch. Under no circumstance are text rental books to be returned via the courier service. For more information, please speak with the Marshfield site’s Academic Department Associate.

Room Use
The Academic Department Associate for the Department of Nursing, Room 127, handles reservations for most rooms. The Learning Resource Center Media Specialist schedules rooms with distance learning technology or conference capabilities. Furniture is to remain in designated rooms. If room is rearranged for special class sessions, it is to be returned to the original arrangement at the end of the session. Rooms are to be left clean and orderly after use. No penetrating objects, such as nails or thumbtacks, are to be used on walls. Modifying rooms, such as might be done for special educational or community service projects, must be approved by the Nursing Department Chair or administrator responsible for the project.

Special Purpose Rooms
Distance Learning Classrooms
Rooms 104, 114, and 119 are interactive video classrooms set up to interact live with our satellite campus and other locations. Equipment includes student and faculty cameras, document cameras, audio systems, send and receive monitors, projection equipment, and teaching stations with control systems, and standard university computers.

Standard Classrooms
Rooms 221 and 227 are standard classrooms with projection equipment, teaching stations, document cameras, and standard university computers. However, Room 227 is reserved for Clinical Learning Center use.
Seminar Rooms
Rooms 261 and 263 are seminar rooms which comfortably seat up to 24 students each. A dividing wall that separates the two rooms can be opened to create a larger space.

Computer Labs
- Room 155 is a General Access Computer Lab with six workstations and a duplex printer. It is open for campus use and is supported by Learning and Technology Services.
- Room 246 houses a computer group workstation and serves as a simulation debriefing room.
- Room 158 houses a group workstation which seats five individuals. It is available for faculty use only.

Clinical Learning Center (CLC)/Nursing Skills Lab
The College of Nursing Skills Lab encompasses multiple rooms in the center of the second floor of the building: 202A, 202B, 212, 212A, 222, 224, 234, 238, 246A, and 246B. This area is used for teaching and practicing nursing skills incorporating high and medium fidelity simulation in many forms. There are 20 bed spaces with equipment and supplies each closely resembling an acute care patient room. Videotaping capabilities allow recording of students and faculty in simulation and demonstration activities. In addition to assigned laboratory periods, open sessions are available for student practice.

Nursing Clinic Area
The Nursing Clinic Area on the west end of the first floor consists of eight clinic rooms, an observation aisle, and a wet lab. The clinic rooms are utilized for clinical course practice and public clinic use. The observation aisle provides student/faculty observation of procedures via a one-way mirror and an audio connection between the aisle and the rooms. Videotaping capability is available in two of the rooms. The clinic area provides students with an area where they can learn and practice skills in an environment which closely resembles a clinic setting.

Student Lounge
Room 259 is a Graduate/Undergraduate student lounge area.

Nursing Student Success Center
Located in Room 167, on the 1st floor on the west side of the building. This room also serves as the office of the Eau Claire Prelicensure Academic Success Coordinator.

Reporting Damage/Malfunctions
Any damage to or malfunctioning of the building or its contents should be reported directly to the Building Coordinator whose office is located in the Nursing LRC. Please provide the Building Coordinator with the location and nature of the problem.

Copiers
Copiers are located in Davies Center and the McIntyre Library. Copiers will use cash or Blugold cards.

Food and Beverage
1. No alcoholic beverages are permitted at anytime, anywhere in the building.
2. Coffee pots or other electrical appliances for food or beverage preparation are to be used in authorized areas of the building only (Room 105, 251, and 259).
3. Faculty offices and classrooms are not to be used for beverage or food preparation or serving.
4. Soft drink and snack machines are located outside Room 114 in the west corridor on the first floor.
5. Please place all discarded trash in the appropriate recycling and waste receptacles.
6. No food is allowed in the three distance education classrooms. Drinking water in closed containers is allowed (no Styrofoam or open cans).

Updated 7/18
Food Services
Food can be purchased in a variety of locations in the Davies Center. The Nursing building contains vending machines (on the first floor of the west side) which sell soft drinks, juices, and snacks.

Food service (during clinical)
Food service for contracting students whose clinical experience schedule prevents eating meals in UW-Eau Claire cafeterias during published hours includes "sack breakfast," available at about 6:40 a.m., as well as sack lunches or suppers. To obtain such service, check with the Dining Service Cafeteria Office where you normally eat. Take your ID and a copy of your schedule, including dates for needed service. Students in uniform are also welcome to eat in employee cafeterias at the Eau Claire and Chippewa Falls hospitals.

Accessibility Features
An elevator near the rear entrance as well as ramps leading to the front, rear, and west entrances of the building are available for students, clients, or visitors.

Smoking
Smoking is not permitted in academic buildings.

Bicycles
Bicycles must be parked in provided bicycle racks, NOT attached to trees.

Posting of Items
1. Notices, posters, or communications of any kind are to be posted only in areas designated for that use; namely, bulletin boards and display cabinets. Walls, doors, and window surfaces are not to be used for posting.
2. Classroom whiteboard and bulletin boards are for instructional purposes; they are not to be used for announcements unrelated to instruction. Exceptions must have the approval of the Dean or Building Coordinator.
3. Unless otherwise designated, bulletin board items in the corridors are posted by the Dean, the Associate Dean, the Department Chair, the Marshfield Site Coordinator, the Building Coordinator, and/or the Academic Department Associates. The only exceptions are:
   a. The Eau Claire Student Nurses Association (ECSNA) bulletin board is to be used for items relevant to that organization. Non-relevant items will be removed.
   b. Course materials are posted by faculty.
   c. Two of the bulletin boards in the first floor west corridor are reserved for items of campus-wide interest and monitored by Davies Center staff.
   d. Areas are demarcated on certain bulletin boards for specific purposes, such as Sigma Theta Tau.
4. Students having items for sale, negotiating housing, or wishing to communicate about matters that might be categorized as "Classified Ads" should make use of the facilities in the Davies Center.
5. Occasionally, part-time work, scholarship, volunteer, or other opportunities are made known to the College; the posting does not mean the College has done any specific screening or that any kind of endorsement is implied.
6. Special requests for displays other than the above should be submitted to the Dean or Building Coordinator.

Marshfield Site – Marshfield Medical Center (South Building)

Hours
Office hours are Monday-Friday, 7:30 a.m. - 4:00 p.m. The building, student lounge, and student lab spaces are accessible 24/7 for those with MMC security badges.

Parking
A parking permit is not currently required to park on the MMC campus, but students will be informed of the designated lots. Students parking in non-designated areas are subject to parking fines. The hospital offers a shuttle bus which runs from November to March and drops off at the East entrance of the South building. Please contact the Marshfield Site Coordinator or Academic Department Associate for questions regarding where to park.
Lockers
Both locations are located on the ground floor of the South building. The primary lockers are located inside the student lounge which is accessible only by a coded keypad. The secondary lockers are located across from ground floor elevators 22 & 23. Students may choose any open locker and must sign up for their chosen space on the sheet located in each locker room. Lockers can be kept for the academic year by a student as long as they are enrolled in UWEC Nursing program courses. Students must provide their own locks. No food or perishable items are to be left in the lockers over the winter and summer breaks.

Room Use
1. The Marshfield site Academic Department Associate handles room reservations.
2. Room reservations are posted outside the rooms each week. Students are encouraged to make reservations in order to utilize the rooms for group work, meetings, etc.
3. Furniture is to remain in designated rooms unless arrangements have been made for special sessions.
4. Rooms are to be left clean and orderly after use.
5. No penetrating objects, such as nails or thumbtacks, or tape are to be used on walls.

Special Use Rooms
Rooms 111, 119, and 124 (Distance Education [DE] Classrooms)

Room 112 & 120 (Computer Labs): The student computer labs are available 24/7 via a coded keypad. These machines are networked to a laser printer and students must supply their own paper. Access to E-mail and the Internet is available in both of these computer labs. Room 112 has 6 computers with two printers, a scanner, and a copier. Room 120 has 4 computers, a large screen group workstation, and one printer. For security purposes, please make sure the door is closed and secure when you leave the labs and when you are utilizing the labs outside of normal office hours.

Room 118 (Nursing Student Success Center): This room is often used for group projects and peer tutoring. It holds a large-screen monitor, computer workstation, and DVD/VCR.

Ground floor (Student Lounge): The student lounge is available 24/7 via a coded keypad. For security purposes, please make sure the door is closed and secure when you leave the lounge.

Second floor (Clinical Learning Center/Skills Lab): The skills labs are located on the second floor of the South building. Open lab hours are offered throughout the week so that students are able to practice skills. Students are not allowed to utilize the main skills lab unless a faculty member is present.

Smoking
Smoking is NOT permitted anywhere on site.

Letters/Returned Papers
Letters, graded papers, paper forms, or other items not returned directly to a student by an instructor or adviser may be picked up in Room 127 of the Nursing Building at the Eau Claire campus or in the main program office (Room 100) at the Marshfield Site.

Faculty Mailboxes
Faculty mailboxes are located in the main office (Room 100, South building).

Courier Service (Marshfield to Eau Claire; Eau Claire to Marshfield)
A green courier pouch leaves the Marshfield site main office each morning and is delivered to the Nursing building (Eau Claire campus) that afternoon. A second green courier pouch leaves the Eau Claire site Dean’s office each afternoon and is delivered to the Marshfield site the next morning. Students wishing to send paperwork and other correspondence items to an Eau Claire site department are encouraged to use the courier pouch. Under no
circumstance are rental textbooks to be returned via the courier service. For more information, please speak with the Marshfield site’s Academic Department Associate.

**Copier**
A copy machine in the Student Computer Lab, room 112, is available for student use. Students must supply their own paper. Students are not allowed to utilize the main office copy machine unless directed to do so by a faculty/staff member.

**Textbooks**
Students are encouraged to utilize the University Bookstore to rent/purchase the required textbooks and course materials. After placing a textbook/course material order through the UWEC Bookstore, Marshfield site students have the option of picking up their textbooks/course materials directly from the UWEC campus bookstore or paying for the items to be shipped to a home address. Rented textbooks must be returned to the University Bookstore’s posted deadline at the end of each semester. If textbook rental returns are not received by the deadline, fees will be charged to the student’s account. For more information, please see the UWEC Bookstore website: [http://www.uwec.edu/bookstore/](http://www.uwec.edu/bookstore/)

**Food and Beverages**
1. At no time are alcoholic beverages permitted anywhere on the grounds.
2. Coffee pots and other electrical appliances used to prepare food or beverages are only to be used in student lounge. Any electrical appliances must be checked by Marshfield Medical Center facilities management before use in the lounge. Please check with Academic Department Associate.
3. Food and beverages are not to be prepared nor served in DE classrooms. The only exception being drinking water, which must be kept in a covered, non-Styrofoam container.
4. Please place all discarded trash in the appropriate recycling and waste receptacles.

**Food Services**
Food can be purchased in a variety of locations in the hospital. The ground floor houses the hospital’s “Four Seasons” cafeteria as well as Subway. The hospital also offers a coffee shop at the entrance of the hospital.

**Reporting Damage and Malfunction**
During office hours, any damage to or malfunctioning of the building or its contents should be reported directly to the Marshfield site Academic Department Associate in Room 100 of the South building. If there is a problem after office hours, students are able to report issues to hospital security by calling 7-7068 from a local hospital telephone or (715)387-7068 from an off-site telephone line.

**Posting of Items**
1. Notices, posters, or communications of any kind are to be posted only in areas designated for that use. To have an announcement posted on the digital display, contact the ADA in room 100 at the Marshfield site. Walls, doors, and window surfaces are not to be used for student postings.
2. Classroom chalkboards, whiteboards, and bulletin boards are for instructional purposes only. They are NOT to be used for announcements unrelated to instruction. Exceptions must have the approval of the Marshfield Site Coordinator.
3. ECSNA bulletin board located in the Room 112 computer lab is restricted for ECSNA only.
4. The employment bulletin board is located on the ground floor across from the student lounge. The posting of an item does not mean that the college has done any special screening or that any University endorsement is implied.

**Nursing Equipment and Supplies at Marshfield Site**
Nursing Equipment and Skills Lab supplies may be checked out from the site per the approval of the course instructor. Students are required to complete and sign an item check-out contract stating the item will be returned in the same physical condition as it was in on the date of check-out.
Use of UW-Stevens Point at Marshfield Campus Facilities
The Marshfield site students are encouraged to fully utilize UW-Stevens Point at Marshfield facilities and services. The UW-Eau Claire and UW-Stevens Point at Marshfield administrators have agreed to allow student access to all UW-Stevens Point at Marshfield campus activities (i.e., clubs) and resources. In order to access these resources, students must utilize their UWEC Blugold card and nursing name pin. For further information, contact the UW-Stevens Point at Marshfield Student Services office at (715)387-6501.
III. History

The first baccalaureate degree-nursing program in West Central Wisconsin was established at what was then known as Wisconsin State University-Eau Claire, when 22 students were accepted as majors in the new School of Nursing in September 1965. The University and community leaders had seriously discussed the possibility for such a program for a number of years, and consultation had been sought from the National League for Nursing on several occasions. In 1964, the President of the University, Dr. Leonard Haas, approved the appointment of Marguerite Coffman to lay the groundwork for a degree-nursing program to be initiated in the fall of 1965.

Dean Coffman, having served as educational consultant for the Kansas State Board of Nursing for eight years, and later as director of degree and continuing education programs for registered nurses at the University of Kansas, brought with her a wealth of experience for establishing an educationally sound program. Many of the baccalaureate degree programs at that time resided within the organizational structure of university medical schools or as an academic unit in arts and sciences colleges. Such an arrangement placed the person responsible for the nursing education program under non-nursing deans or department heads, too far removed from the points at which decisions were made in regard to budget and other administrative matters that had an impact on nursing education. One of the conditions Dean Coffman had attached to her acceptance of her contract was that the program was to reside within the context of the University as an autonomous school, which gave her and the faculty access to, and representation in, the top-level decision-making processes of the institution.

Final approval by the Board of Regents and approval by the State Board of Nursing in July 1965 was followed by what was then known as "reasonable assurance of accreditation" by the National League for Nursing. Accreditation made it possible for a new School to secure federal funds available through the National Nurse Training Act of 1964.

In October of 1965, Luther Hospital announced the closure of its three-year diploma school with the last class of 25 students graduating on August 13, 1967. The announced closure was earlier than anticipated and necessitated quick re-planning to accommodate the resulting increase in enrollment and revision of the curriculum to utilize Luther Hospital clinical facilities in addition to the Sacred Heart Hospital facilities.

Dean Marguerite Coffman retired in 1977. She was succeeded by Dr. Suzanne Van Ort who continued as dean until 1982. Dr. Patricia Ostmoe was appointed Dean in 1982. In 1989 she was appointed acting Vice Chancellor of the University to fill a one-year vacancy of that office. During that period Associate Dean Dr. Linda Finke served as acting Dean of Nursing. Following the 1989-90 school year, Dean Ostmoe returned to the School of Nursing as Dean and continued in that position until July 1995.

The organization of the School has undergone several transformations. Between 1965 and 1970, the School operated as a unit, with coordinators of the various clinical areas responsible for implementing the curriculum. In 1970, the School took on the pattern of the rest of the University with the establishment of five departments: Medical-Surgical Nursing, Maternal-Child Health Nursing, Community Health Nursing, Psychiatric Nursing and Nursing Leadership. That pattern continued until July 1984, when these departments were dissolved and replaced with the departments of General Nursing, chaired by Dr. M. Regina Venn, and Adult Health Nursing, chaired by Dr. Norma J. Briggs. This arrangement organized the faculty along graduate and undergraduate lines. The transformation continued with a planned reorganization of the School into three departments, completed in September 1990. Dr. Marjorie Bottoms served as the first chair of the Department of Nursing Systems. Dr. Winifred Morse was appointed to chair the Department of Adult Health Nursing and Dr. Mary Wright chaired the Department of Family Health Nursing.

Administrative adaptations were made to facilitate the efficiency of the School and its various programs. Sister Joel Jacobi, Elaine Menges and Shirley Carlson all served as coordinators of continuing education prior to the appointment of Dr. Rita Kisting Sparks as Coordinator of Continuing Education in 1985. Dr. Sparks’ title was changed to Assistant Dean for Continuing Education in 1988.
The position of Associate Dean for Student Affairs was created in 1979. Berniece Wagner served in that capacity until her retirement in 1988. Dr. Linda M. Finke was appointed Associate Dean that same year. Dr. Finke resigned in 1991 and Dr. Marjorie Bottoms was appointed Acting Associate Dean.

In January 1995 Chancellor Larry Schnack announced a proposed merger of the School of Education, the School of Human Sciences and Services, and the School of Nursing into a new college, the College of Professional Studies. The nursing faculty voted unanimously in February 1995 to oppose the restructuring. The Academic Policies Committee of the University also opposed the merger but the University Senate voted to endorse the restructuring. Dr. Ostmoe left the deanship to return to teaching on June 30, 1995. Dr. Ronald N. Satz was appointed Dean of the College of Professional Studies. With this reorganization, Dr. Marjorie Bottoms was appointed Associate Dean and Educational Administrator. Upon Dr. Bottoms’ resignation as Associate Dean, Dr. Susan J. Johnson Warner was appointed Associate Dean and Educational Administrator in July 1998. In 1999, Dr. Ronald N. Satz accepted a position as vice-chancellor. Dr. Carol Klun was appointed Interim Dean for the College of Professional Studies. Dr. Rita Kisting Sparks was appointed Interim Associate Dean and Educational Administrator upon Dr. Warner’s resignation in June 2000. In May of 2001, Dr. Mark Clark was appointed as Dean of the College of Professional Studies. In July of 2002, Dr. Sparks retired and Dr. L. Elaine Wendt was appointed Interim Associate Dean and Educational Administrator and in 2003 she was appointed the Associate Dean and Educational Administrator.

In May of 2004, Chancellor Donald Mash notified the campus that the College of Professional Studies would be dissolved in September of 2004, and we were officially named the College of Nursing and Health Sciences. This new college was comprised of four departments: Adult Health Nursing (Dr. Sheila Smith, chair), Family Health Nursing (Karen Maddox, interim chair), Nursing Systems (Dr. Mary Zwygart-Stauffacher, chair), and Public Health Professions (Dr. Doug Olson, chair). Dr. L. Elaine Wendt was named Dean of the College and Dr. Mary Zwygart-Stauffacher was appointed Interim Associate Dean, and was named Associate Dean in May of 2005, and Dr. Lois Taft was named chair of the Department of Nursing Systems.

In 2007 the nursing faculty voted to restructure from three academic nursing departments to a department of the whole. Thus, the College was comprised of two departments: the Department of Nursing and the Department of Public Health Professions. Dr. Mary Zwygart-Stauffacher was Interim Chair of the new Department of Nursing and then Dr. Lois Taft subsequently filled the Nursing Department Chair position while a national search was completed. Following the search, in 2009, Dr. Rosemary Jadack was named the Chair of the Department of Nursing. Ms. Karen Maddox served as Interim Chair of the Department of Public Health Professions. When Dr. Wendt retired in June of 2008, Dr. Mary Zwygart-Stauffacher was named Interim Dean for the College. In 2007, an Assistant Dean: Eau Claire for Pre-Licensure programs position was created and filled by Dr. Sheila Smith; in addition the Coordinator for the Marshfield Site position was changed to Assistant Dean for the Marshfield Site, a position held by Dr. Robin Beeman. Dr. Debra Jansen was named Acting Associate Dean in 2009. In 2010, Provost Patricia Kleine approved the increase of appointment for the Associate Dean position, allowing for restructuring of the position and also that of the Eau Claire Assistant Dean position. With the restructuring, Dr. Sheila Smith served as the Assistant Dean for Evaluation and Strategic Initiatives from 2010 until her retirement in 2012. Dr. Debra Jansen served as Interim Associate Dean from 2010 to 2012, after having served as Acting Associate Dean.

Following a national search in 2010-2011, Dr. Linda Young was appointed as Dean of the College of Nursing and Health Sciences beginning August 2011. Dr. Mary Zwygart-Stauffacher became the Graduate Nursing Programs Director and the BSN Completion Program Coordinator, and subsequently named the Assistant Dean for Post Licensure Programs in July 2012. Dr. Debra Jansen was appointed as Associate Dean beginning in July 2012, after a national search. With Dr. Smith’s retirement, beginning with the 2012-2013 academic year, Dr. Shelley Rae Pehler began serving as the Nursing Programs: Director of Evaluation/Assessment and Dr. Rita Sperstad as the Department of Nursing: Coordinator of Equity, Diversity and Inclusion (EDI). In July 2013, the Environmental Public Health Program, the only program within the Department of Public Health Professions, moved to the College of Arts and Sciences. The Assistant Dean for Post Licensure Programs position was converted to a Nursing Graduate Programs Director position and a BSN Completion Program Director position around 2014-2015. Dr. Mary Zwygart-Stauffacher served in the Nursing Graduate Programs Director role through June 2019; the responsibilities for the BSN Completion Program have been dispersed. Beginning in
July 2015, Dr. Robin Beeman began serving as Interim Department Chair with Dr. Rita Sperstad functioning as interim Traditional BSN Program Director. The interim titles were removed for Dr. Beeman and Dr. Sperstad in the summer of 2016. Dr. Rachel Merkel assumed the role of Marshfield Site Coordinator when Dr. Beeman became the Nursing Department Chair and reduced her Assistant Dean duties. Following the retirement of Dr. Rita Sperstad in May 2018, Dr. Arin VanWormer was appointed as the Traditional BSN Program Director. Dr. Lisa Schiller began serving as the Nursing Graduate Programs Director in July 2019 after Dr. Zwygart-Stauffacher stepped back into full-time teaching in the graduate program. Dr. Robin Beeman retired as the Assistant Dean for the Marshfield Site and Nursing Department Chair in December 2019; Dr. Charlotte Sortedahl was appointed as Interim Department Chair, starting in January 2020.

The 2015-2016 academic year marked the 50th anniversary of the nursing program. A 50th Anniversary Gala Celebration was held at the Florian Gardens in Eau Claire on October 9, 2015. Dr. Rita Kisting Sparks, Dr. Elaine Wendt, Dr. Marjorie Bottoms, and Dr. Linda Young shared reflections of events that transpired during their time as nursing leaders. Greetings also were shared by Dr. Young from Dr. Patricia Ostmoe, Dr. Suzanne Van Ort, Dr. Susan Johnson Warner, Dr. Mary Zwygart-Stauffacher, and Sister Joel Jacobi. The Gala included a silent auction, proceeds of which were used to fund improvements to the simulation laboratories. The annual Nursing Alumni Homecoming Walk was held the subsequent morning, at which time a Nursing Alumni Homecoming Quilt created by Ms. Vicki Vogler, a BSN and MSN alum, using t-shirts from prior walks, was dedicated.

Facilities
During 1965-66 the School operated out of offices and classrooms in Schofield Hall while the first floor of the new Crest Commons building on the upper campus was completed for use by the School of Nursing. When Crest Commons could no longer accommodate the growing number of faculty, three mobile office facilities (trailers) were placed next to the building for the overflow. The Crest Commons facilities had always been regarded as temporary for the School and planning had begun early on for a separate building to house the program. Federal funds under the Nurse Training Act of 1964 were sought and received, and groundbreaking for a new building took place in July 1968. The building was completed and occupied in Fall 1969. The dedication took place in April 1970 with Ms. Jesse Margoltz, speaker at the dedication banquet was Ms. Margaret Dolan, a past president of the American Nurses Association (1962-1964). An addition attached to the west of the building was begun in the Spring of 1984 and was occupied in the Fall of 1985. It was designed to relieve the congestion in the main building which was intended originally for a student body and faculty about two-thirds the size of that of today.

With the addition of the nursing program at the Marshfield site in the late 1980s, two lecture classrooms (rooms 104 and 114) were remodeled to incorporate distance education technology. Since the inception of this program site, these classrooms have evolved from basic audio teleconferencing to state-of-the-art two-way full motion interactive video classrooms. A third interactive video classroom (room 119A) was completed in fall of 2009.

Since 2004 the existing skills lab space has been renovated to accommodate high fidelity simulation equipment. High tech mannequins, a birthing room, acute care simulation rooms and electronic charting have all contributed to changes in the design and usage of the skills lab. Video technology in the lab allows for demonstrations in the Eau Claire site skills lab to be broadcast not only to classrooms at the Eau Claire site, but to the Marshfield Site classrooms as well, allowing students at both sites to see lab demonstrations simultaneously.

Curriculum

Traditional BSN
Although curriculum revision has been an ongoing process since the beginning of the School, a major revision of the basic nursing curriculum was implemented with students who entered the University as pre-nursing students in the fall of 1983. Credits required for graduation were reduced from 136 to 128, which facilitated elimination of the summer session that had been mandatory between the sophomore and junior years. The faculty adopted a developmental organization framework and a curriculum based on the model of Loomis and Wood. Curriculum revision was again undertaken in the 1994-95 academic year. The impetus for this work arose from current trends in health care reform
and the Redefinition of the Baccalaureate degree completed by the University faculty in 1993-94. Revisions were implemented in fall 1996. Credits required for graduation are 120 in keeping with the redefined university degree. Another curriculum revision was implemented beginning in January 2014, following approval by the Wisconsin Board of Nursing, to be consistent with the American Association of Colleges of Nursing (AACN) Essentials of Baccalaureate Education and current practices.

**BSN Completion Program**

Registered nurses were admitted to the nursing program for BSN degree completion beginning in 1974. Starting in 1980 the nursing courses were taught on the campus of the UW Center-Marshfield/Wood County for several years to accommodate registered nurses in that part of the state. In the fall of 1985 the School initiated a special educational option for registered nurse students who aspired to the BSN degree. This track was phased out in 1996 to enter into a Collaborative Nursing Program for registered nurses to pursue baccalaureate degrees in nursing. Facilitated by UW-Extension, this program was a collaborative distance learning effort by UW-Eau Claire, UW-Oshkosh, UW-Green Bay, UW-Madison and UW-Milwaukee. In 2012, UW-Stevens Point became the sixth member of this collaboration, and began admitting students to their program in 2014. These campuses share at present six (initially five) core courses which are offered online, and some of the courses are also offered on campus at UWEC. Students can take courses from any one of the six universities but retain a “home school” student status. That is, one is admitted to a selected university, and is required to fulfill all degree requirements specific to that university. The first courses in the program were piloted in spring 1996 with UW-Eau Claire and UW-Madison offering the first two courses. The five (now six) core courses and several nursing electives, shared between the campuses, were offered online. The majority of nursing courses are taken online and are taught by faculty of the participating institutions. Each campus has designated credits that are campus specific nursing courses and are taught only to their students. A state-wide curriculum revision was implemented, beginning Fall 2014, to be consistent with the American Association of Colleges of Nursing (AACN) Essentials of Baccalaureate Education and current practices. The new curriculum includes six core courses offered by the six UW-System campuses. Additionally, the beginning and capstone BSN Completion courses offered by UW-Eau Claire are offered in a hybrid format. Selected sections are offered at the Marshfield Site, depending on enrollments.

**Master of Science in Nursing Program**

In 1976, the UW-Eau Claire School of Nursing was granted an entitlement to plan a graduate degree program in nursing. The strength of the baccalaureate nursing program at UW-Eau Claire provided a strong base upon which to build the graduate nursing program. Support for the planned graduate program was derived from the 1970 Commission on Statewide Planning for Nursing Education and the 1979 Statewide Study of Nursing and Nursing Education.

In July 1979, a feasibility study for the Master of Science in Nursing (MSN) program was completed by Dr. Norma Briggs and Dr. Rita Kisting Sparks. The study was carried out with the support of an ad hoc graduate committee, an advisory committee, and student consultants. This study supported the need for a graduate nursing program at UW-Eau Claire. A graduate program with a focus in adult health nursing was implemented.

Dr. Briggs was appointed Interim Director of the Graduate Program in 1979 and served in this capacity until the appointment of Dr. Barbara Haag, who filled the position of Director of the Graduate Program from 1981 until 1982. Dr. Patricia Ostmo, Dean of the School of Nursing, served as Acting Director of the Graduate Program from 1982 until 1983. Dr. Briggs was appointed Director of the Graduate Program in 1983, and in 1984 was selected as Chairperson, Department of Adult Health Nursing, which housed the graduate program. The National League for Nursing granted initial accreditation to the master’s program in 1985.

The first graduate students were accepted to the program in 1981 and began graduate courses in the fall of 1981. Three full-time and nine part-time students were enrolled. The first three graduates of the masters program were awarded their degrees in May 1983. The enrollment of the graduate program varied between 60 and 80 students through the 1980’s and early nineties, with the majority of students enrolled part-time. The program increased to an enrollment of over 100 students during the 1990’s largely due to student interest in expanded clinical practice role options.

In the fall of 1989, the graduate nursing faculty approved a second area of specialization within the graduate nursing curriculum. A focus on family health nursing, as an option along with adult health nursing, was initiated in 1990. Role
preparation options of clinical nurse specialist, educator, and administrator were offered during the 1980's.

In the spring of 1990, the faculty approved a reorganization of the School of Nursing. Graduate courses were assigned across the three departments of Adult Health Nursing, Family Health Nursing, and Nursing Systems. Department chairs were responsible for the courses assigned to their individual departments; a Graduate Curriculum and Admissions Committee was and still is responsible for the graduate curriculum.

The graduate faculty undertook extensive curricular work during the early 1990's. The major impetus for the changes was to update the total curriculum and to expand the clinical nurse specialist role preparation area to an advanced clinical practice role which allowed students the option to sit for the certification exam as adult or family nurse practitioners.

The 1995-96 academic year was a year of transition for the School of Nursing. On July 1, 1995, the School became one of three schools in the College of Professional Studies. The University was structured with three Colleges; the two others were the College of Arts and Sciences and the College of Business.

In July 1995, the School of Nursing was awarded an Advanced Nurse Education grant from the Health Resources and Services Administration (HRSA), Bureau of Health Professions, Division of Nursing, to establish the Family Health Advanced Clinical Practice program in cooperation with Saint Joseph's Hospital in Marshfield, Wisconsin. The first part-time students were matriculated in fall 1995 and the first full-time students began the course work in summer 1996.

The curriculum was revised again in 2002. Subsequently, the role preparations expanded to include Advanced Clinical Practice for Adult Nurse Practitioner (ANP), Family Nurse Practitioner (FNP), and Clinical Nurse Specialist (CNS, Adult); Nurse Educator; and Nursing Administration. In 2004 the newly appointed Associate Dean, Dr. Mary Zwygart-Stauffacher, was named director of the graduate programs in the College. Dr. Debra Jansen served as the graduate programs director, beginning in 2009, while serving as the acting and interim associate dean. In 2010, in response to a Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education endorsed by the major national nursing organizations and all major APRN organizations, the adult specialization was changed to an adult-gerontologic population focus. Thus, the Adult Nurse Practitioner and Adult Clinical Nurse Specialist role preparations were transitioned to the Adult-Gerontologic NP and Adult-Gerontologic CNS preparations, with the first classes graduating with these changes in May 2012. During the 2012-2013 academic year, the Adult-Gerontologic NP role preparation was changed to Adult-Gerontologic Primary Care Nurse Practitioner (A/G PC, NP). Dr. Susan Peck was named MSN program coordinator in 2010 and Dr. Mary Zwygart-Stauffacher became the Graduate Nursing Programs Director in 2011, the Assistant Dean for Post Licensure Programs beginning in 2012, and then back to the Nursing Graduate Programs Director in 2014, in the wake of severe state budget cuts. Dr. Lisa Schiller began serving as the Nursing Graduate Programs Director in July 2019 after Dr. Zwygart-Stauffacher stepped back into full-time teaching in the graduate program.

In 2004, the American Association of Colleges of Nursing (AACN) recommended that the level of preparation necessary for advanced nursing practice roles be moved from the master's degree to the doctorate level by 2015. In keeping with the AACN Position Statement on the Practice Doctorate in Nursing, the last class of MSN students seeking nurse practitioner or clinical nurse specialist role preparations was admitted for the summer of 2011. The first class of post-baccalaureate Doctor of Nursing Practice (DNP) students was admitted for the Fall of 2012. The College of Nursing and Health Sciences continues to admit students interested in the nursing education and administration/leadership and management role preparations to the MSN program.

**Doctor of Nursing Practice Program**

The Doctor of Nursing Practice (DNP) degree is a clinical doctorate designed to prepare nurses to assume leadership roles in the areas of advanced clinical practice (nurse practitioner or clinical nurse specialist) or nursing administration. In 2008, the University of Wisconsin System Board of Regents approved an Entitlement to Plan a collaborative DNP program between UW-Eau Claire and UW-Oshkosh. Planning and development of the proposed DNP program occurred collaboratively between both institutions. In March of 2009, UW-Eau Claire and UW-Oshkosh were given permission to develop independent authorizations to offer a DNP program on each campus. On May 8, 2009, the University of
Wisconsin System Board of Regents approved establishing a DNP program at UW-Eau Claire. This is the first doctoral program at UW-Eau Claire. Both post-master’s (MSN-to-DNP) and post-baccalaureate (BSN-to-DNP) options were approved. A DNP program also was approved for UW Oshkosh, making these the first doctoral programs at any of the UW System’s 11 comprehensive universities. Both UW-Eau Claire and UW-Oshkosh will continue to collaborate on aspects of the curriculum that will help us to effectively and efficiently offer our independent programs.

During the first two years of the program, the 2010-2011 and 2011-2012 academic years, the DNP degree was offered as a post-masters option only (for part-time students during the initial year). Sixteen students were admitted to the first class of post-master’s DNP students, with coursework beginning in the summer of 2010. Twelve post-master’s DNP students were admitted for the summer of 2011. The first class of post-master’s DNP students graduated in 2012, with 14 of them graduating in May and one individual graduating later in August. The first class of post-baccalaureate DNP students was admitted for the Fall of 2012, with 13 of them graduating in May 2015.

Marshfield Site
After a survey of the health care needs for Central Wisconsin was completed, a distance education nursing site was established in Marshfield in cooperation with Saint Joseph’s Hospital in the fall of 1986. The hospital had decided to phase out the three-year diploma program it had operated for many years, but wished to continue an active participation in nursing education. This school had a long and honorable history of educating registered nurses but chose to discontinue its program in response to the increasing social and technological complexities of health care that made the baccalaureate degree for professional nursing essential. Students utilize course offerings for the non-nursing requirements mainly at the University of Wisconsin-Stevens Point, UW Marshfield/Wood County, and UW Marathon County. In July 1986, the Board of Regents endorsed this program and the first class was admitted in 1987-1988. The first class of graduates (N=18) completed the program in May 1990. Nursing courses are taught by a combination of on-site faculty, main campus faculty, and telecommunications technology.

Since the inception of the program, approximately 24 students had been admitted once a year to the Marshfield site. In 2008, a Decision Item Narrative (DIN) proposal from UW-System was funded, in part, to allow for the expansion of the Marshfield site, so that 16 students can be admitted each semester. In January 2013, in a pilot partnership with Aspirus Wausau Hospital, eight additional students (for a total of 24 students) started nursing courses. Aspirus Wausau Hospital provided the clinical instructors for additional clinical settings in the Wausau area to accommodate the extra 8 students for the pilot.

Nancy Ray was the first satellite site program coordinator. Judith Vanderwalker replaced Ms. Ray in 1988. In July 1993, Dr. Norma Briggs was appointed the coordinator. She held this position until her retirement in 1997. Ms. Rebecca Wiegand replaced Dr. Briggs as coordinator in the fall of 1997. Dr. Robin Beeman accepted the coordinator role in 1999. In 2007, the title “Site Coordinator” was changed to Assistant Dean, Marshfield Site. Dr. Rachel Merkel assumed the role of Marshfield Site Coordinator in 2015 when Dr. Beeman became the Nursing Department Chair and reduced her Assistant Dean duties. Following the retirement of Dr. Beeman in December 2019, University administration did not support the filling of the Assistant Dean position.

A 25th anniversary celebration of our nursing education partnership with Ministry Saint Joseph’s Hospital was held at the Hospital on April 29, 2013. Alumni in the area were invited to attend. Featured speakers included UW-Eau Claire Provost and Vice Chancellor Patricia Kleine and Dr. Linda Young, Dean of the College of Nursing and Health Sciences; Mr. Brian Kief, the President and CEO of Ministry Saint Joseph’s Hospital; Mr. Mike Schmidt, former President and CEO of Ministry Saint Joseph’s Hospital; Dr. Marjorie Bottoms, Associate Dean and Educational Administrator Emeritus; Ms. Marcia Bollinger, our first distance education specialist; Ms. Karen Maddox, the first faculty member to teach using the original distance education audiostream system; Ms. Judy Vanderwalker, an early Marshfield Site Coordinator; Ms. Patricia Burbach, the first office assistant at the Marshfield Site; Ms. Anna Alexander-Doelle and Ms. Nancy Danou, two of the first nursing faculty members at the Marshfield Site; Ms. Linda Duffy, a long-standing faculty member at the Marshfield Site; Ms. Michelle Johnson, Mr. Mark Knauf, and Ms. Paula Thompson, three graduates of the very first class; and Ms. DeAnn Dickinson, Ms. Kate Filla, Mr. Brian Tessmer, and Ms. Rachel Zaleski, current students (and graduates) at our
Marshfield Site. A plaque to commemorate and celebrate the partnership was presented by Dean Linda Young to Mr. Brian Kief.

In July 2017, Marshfield Clinic Health System finalized the purchase of Ministry Saint Joseph’s Hospital and renamed the hospital the Marshfield Medical Center. Marshfield Clinic signed an agreement with UW-Eau Claire to continue to support the undergraduate nursing program in Marshfield. They are providing building space in the hospital, resources, and some funding for FTE. We are quite grateful for the many years of support we received through Ministry Saint Joseph’s Hospital; however, we also appreciate the opportunities Marshfield Clinic will provide for our students in central Wisconsin. Recent state budget cuts caused us to reduce enrollments to 8 students per semester for two terms in 2016; yet with the support of Marshfield Clinic, we are continuing to enroll 16 students per semester. A celebration of the 30th anniversary of our nursing education site in Marshfield and our new partnership with Marshfield Clinic Health System was held on November 20, 2017. Up to then, 670 nurses had earned the BSN degree from UW-Eau Claire through the Marshfield Site.

**Accelerated Baccalaureate Program**

An accelerated program for second degree students was piloted with 8 students in 2006-2007. With the assistance from the DIN as noted above, 16 students were admitted for summer 2009 (16 graduated May 2010) and 18 students for summer 2010 (18 graduated May 2011) and summer 2011 (18 graduated May 2012). Dr. Cheryl Brandt served as the coordinator, under the direction of the Chair of the Department of Nursing. Due to human resource issues and the impact of budget reductions on programming, the Accelerated Program was placed on hold effective starting summer 2012. The program had operated under a cost recovery model in which the students paid a higher rate of tuition than other undergraduate students on campus. As part of a program array review process, the Accelerated BSN option was identified as low enrollment (no admissions had occurred while nursing had placed it on hold) and was therefore recommended for suspension by University Academic Affairs. The University Senate formally voted to suspend the program on November 27, 2018; the suspension becomes permanent after 5 years.

**Chippewa Valley Alliance/Coulee Region Nursing Alliance and Other Technical School Alliances**

In 2004 and 2005, in an effort to graduate more baccalaureate prepared nurses, Alliances were formed with Chippewa Valley Technical College (CVTC) and Western Technical College (WTC), Black River Falls campus. An announcement of the CVTC Chippewa Valley Nursing Alliance occurred in November 2004. Students who were denied admission to the traditional BSN program, due to limited space and resources, are afforded an opportunity to attend CVTC and WTC to earn their Associate Degree in Nursing (ADN), while being concurrently enrolled through UWEC. Students apply to the technical college and are admitted to these programs based on technical college guidelines, though eligibility to apply is based on their lack of admission to the BSN program. Following completion of their ADN, these students apply for admission to the BSN Completion Program to finish their BSN. Seats have been available for sixteen to twenty-four students annually for the Chippewa Valley Nursing Alliance with CVTC and for seven to nine students annually for the Coulee Region Nursing Alliance with WTC.

In February 2018, an updated Memorandum of Understanding (MOU) alliance agreement was signed with CVTC to enable 16 students to start each fall at the CVTC-Eau Claire campus and 8 students each fall at the CVTC-River Falls campus. A similar MOU was signed in February 2018 with Wisconsin Indianhead Technical College (WITC) to create the Northwest Nursing Alliance (NWNA), thereby enabling 4 students to start each fall at the WITC-Rice Lake campus and 4 students at the WITC-New Richmond campus; as well as 8 students to start each spring at the Rice Lake campus and 8 at the New Richmond campus. Following suit, a similar MOU was signed in March 2018 with the Nicolet Area Technical College (NATC) to admit up to 8 students each fall to NATC in Rhinelander as part of the Nicolet Nursing Alliance.

**Research, Practice, and Scholarly Activity**

As the School and the nursing profession matured and the graduate program began to evolve, research and scholarly activity received greater emphasis. In support of these efforts, the Coffman Lecture Series fund was established to promote scholarliness in faculty, students and alumni. The series was established in honor of Dean Marguerite Coffman upon her retirement in 1977. Dr. Suzanne Van Ort established the Van Ort Award for Faculty Creativity and Scholarliness in 1985.

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The creation of the first donor-supported faculty chair in the College of Nursing and Health Sciences, the Jane W. and James E. Moore Chair in Nursing Research, was announced on May 18, 2018. Jane (BSN class of 1973) and James Moore committed to providing funds to augment a nursing faculty position base salary (position and base salary are being provided by the University). The chair position will later be endowed by the Moores through their estate gift. A search is actively taking place to fill the named chair position. The person holding the position will facilitate and lead research activities with faculty and students in the College and engage nursing students in high impact practices such as research and manuscript development; mentorship is a significant aspect of the role. The chair will further foster a culture of scholarship within the College and assist in expanding collaborations with health care partners.

Dr. Patricia Ostmoe established an award for excellence in clinical instruction in October 1991. The establishment of this award coincided with the celebration of the twenty-fifth anniversary of the School of Nursing.

In the mid-1990's the School made several refinements and generated new initiatives with vision that extends into history's third millennium. Although a University-wide Honors Program has been available for several years in which qualified nursing majors have participated, the College now has a Departmental Honors in Nursing program; however, the nursing honors program was placed on hold in October 2016 due to a shortage of faculty resources compounded by severe state budget cuts in the 2015-2017 biennium.

The quality of the faculty and students, as well as the reputation for outstanding performance of the College’s graduates, has been sources of pride in both the School and the University. Approximately one-half of each year's graduating class has earned graduation honors. In 1980 the National Honor Society of Sigma Theta Tau awarded the School a charter as the Delta Phi chapter, enabling the School to not only recognize excellence of performance of individuals through invitational membership, but to promote nursing as a scholarly pursuit through its affiliation with the Society.

The new addition to the building in 1985 made possible the establishment of the Nursing Center for Health. Professional nursing education, practice, and service to the community come together in the Center; here faculty and students in various educational programs may learn, test, and refine as they direct their attention to health maintenance and restoration for clients across the life span, particularly those who are under-served by existing health care services. The Nursing Center for Health was put on hold in 2007, due to lack of faculty resources.

A Pre-College Program for 10th and 11th graders was developed in the early 1990s and was offered most summers between 1992 and 2004. The program, designed to recruit and retain minorities in nursing, consisted of a one-week summer camp held on campus. Scholarships for 20 minority students were made available by a grant from the Wisconsin Department of Public Instruction.

Diversity
Diversity is a high priority for the Department of Nursing. For ten years, from 1993-2003, UW-Eau Claire was the recipient of a federal Indian Health Service (IHS) nursing education grant. During this time curriculum articulation was established with Lac Courte Oreilles Ojibwa Community College. Through this grant Native American students were able to attend pre-nursing courses in their home community and come to campus for their professional nursing education. Although the grant is no longer available, efforts to partner with regional tribal communities have continued.

The Department of Nursing recognizes the importance of clinical immersion experiences as one strategy for fostering cultural awareness in our students. Undergraduate clinical experiences have been offered at the Rosebud Lakota Sioux tribal community in South Dakota since 2004. Additionally, beginning in 2011, undergraduate cultural clinical immersion experiences have been offered at Wisconsin dairy farms with Hispanic migrant workers. Clinical groups also have been working with the Somali population in Barron County and in Minneapolis since about 2017. For several years in the early 2000’s, undergraduate students also had the opportunity to work with the Alaskan Native populations in Anchorage, Alaska as funding and staffing allowed, as well as at a free-standing, nurse-managed Hispanic birth center in...
In 1990s, 40 student had been admitted to the traditional undergraduate program at the Eau Claire site. To increase university tuition funds in response to severe 2015-2017 biennium budget cuts to the UW System, an additional 25 students per year were admitted for two years (16 with the June 2015 and 2016 cohorts and 9 with the January 2016 and 2017 cohorts). This increase was in response to a request by University administration.

Accreditation
Faculty continue to seek an increasing level of quality for our nursing programs. In 1993 the maximum eight-year accreditation (until 2001) was received with no recommendations for the undergraduate or graduate programs from the National League for Nursing (the last year we sought reaccreditation from NLN). In 2001, the School was visited for accreditation by the Commission on Collegiate Nursing Education (CCNE) and received full accreditation for the graduate and undergraduate programs through December 2011. Following a reaccreditation visit in April 2011, the baccalaureate and master’s programs were accredited by the Commission on Collegiate Nursing Education (CCNE), 655 K Street NW, Suite 750, Washington, DC 20001, (202) 887-6791, through December 31, 2021. As a new program, the Doctor of Nursing Practice (DNP) program was accredited by CCNE through December 31, 2016. Following a CCNE site visit for the DNP program that occurred March 7-9, 2016, the doctoral program was re-accredited through December 31, 2026.

In the years since the School of Nursing first took recognizable shape, much has happened to change the character of nursing and nursing education. Responding to these changes as scholars, teachers, and practitioners within a University setting has been a position of privilege, as well as responsibility. We look forward to the future and continue our commitment to excellence.
IV. Department of Nursing Organization

Department of Nursing Vision Statement
Members of the University of Wisconsin-Eau Claire Department of Nursing, as a learning community, honor our successes while we pursue new avenues of excellence.

Vision: Educating nurse leaders to challenge boundaries and build bridges for a healthier world.

Revised & approved 11.7.19.

Department of Nursing Mission Statement
The purpose of the University of Wisconsin-Eau Claire Department of Nursing is to provide a scholarly environment in which faculty and students gain and extend knowledge of health, health care, and the practice of professional nursing. The Department of Nursing is dedicated to accomplishing this mission using traditional, as well as technology-based instructional strategies and a variety of innovative and diverse teaching methods.

The Nursing Department shares the mission of the University and the College by building upon the foundational values of transformative liberal education, inclusivity, and educational excellence.

The select mission of the Nursing Department is to:

- Educate nurses to lead within diverse, complex environments
- Promote health and the public good through ethical leadership, collaboration, and practice
- Contribute to knowledge development for health and nursing,
- Serve the broader missions of the College and University

Revised & approved 11.7.19.

Nursing Department Philosophy

Nursing is a discipline that practices. In our practice, we protect, promote, and optimize health and abilities; prevent illness and injury; alleviate suffering through the diagnosis and treatment of human response; and advocate in the care of individuals, families, communities, and populations (American Nurses Association, 2003). In our practice, evidence underscores what we do and client education assumes a primary role. In all settings, holism shapes our approach and expands our effectiveness. Although deliberate and purposeful, to improve world health we also remain imaginative and continually search for the unforeseen in our practice.

Nursing is a discipline that leads. Leadership demands us to confront what is and imagine what could be. We hold and articulate our own values and visions with conviction. But in challenging what exists, we also recognize that accomplishing commonly-shared goals about health requires collaboration that emerges from inclusive leadership. Inclusion is expanded because professionally-educated nurse leaders strive to understand people who are unlike them. Furthermore, leadership insists that we persuade rather than coerce, appreciate the power of mutual information, and live peacefully with irony and paradox. As architects, then, nurse leaders design strategy, influence policy, and advocate for clients in political places. As designers, nurse leaders inspire others to seek environmentally-beneficial solutions. Both strategy and inspiration call for knowledge, energy, and courage.

Nursing is a discipline that generates, translates, and applies knowledge. Research, as the process of knowledge generation, uses data that are systematically collected and judiciously interpreted to help us answer questions and construct interventions. We engage in this process with students and colleagues, as well as with other campus and community partners. In this collaboration, where we respect traditional and emerging approaches to knowledge generation, we study issues that influence nursing practice, education, and administration. Our goal is that our research
launches wide-ranging conversations, contributes to a culture of scholarship in all settings, and advances and promotes world health and well-being.

**Nursing is a discipline that educates.** Because nursing education is a liberal education, faculty and students reflect thoughtfully, commit to innovation, and exhibit a spirit of scholarship. As educators, we value multiple evidence-based methods of teaching and honor numerous ways of learning. Nursing education serves society where we strive to practice wisely and try to understand unpredictability and complexity. At the same time, nursing education is a reflective haven where we can disagree, examine, and dialogue in ways that incite and enrich us. Unmistakably, then, preparing students for the workforce is not our only goal as we both serve society and retreat from society in our nursing education. More broadly, improved healthcare outcomes for all people direct our teaching and learning. Freedom and lifetime growth for both students and faculty draw us onward. With our rekindled effort, this nursing education will become more accessible to all.

As we **practice, lead, generate knowledge, and educate**, several convictions structure our actions. First, the American Nurses Association Code of Ethics for Nurses (Fowler, 2008) guides our decisions. Further, a commitment to a person-centered collaborative relationship secures what we do. This commitment compels us to embrace diverse peoples and understand distinctive lifestyles from all global places and positions. By foregrounding ethics and relationship, a seamless link merges our roles in practice, leadership, knowledge generation, and education.

In our blended roles, it is our curiosity and wonder—our search for opportunity and sense of inquiry—our ability to create associations and see patterns—that lead us forward. In this way, we focus on social justice, environmental protection, and the promotion of world health through our engagement with and contributions to the human health experience.

Accepted September 17, 2009


**Purpose**

The purpose of the baccalaureate program is to prepare graduates for the practice of professional nursing in a variety of health care settings. The program leads to a Bachelor of Science in nursing, which serves as an entry-level professional degree and as the basis for graduate study.

Accepted 10/83

Revised 12/84; 01/85; 10/92; Reviewed 7/02; Reaffirmed 2/5/15

**Baccalaureate Program/Student Learning Outcomes**

Students graduating from UW-Eau Claire with the Bachelor of Science in Nursing demonstrate accomplishment of the AACN Baccalaureate Essentials’ through:

I. Integration of liberal and nursing education, with particular distinction in:
   - leading change in complex health care environments.

II. Organizational and systems leadership for patient safety and quality care, with particular distinction in:
   - developing effective working relationships for quality improvement and optimizing patient care outcomes.
III. Scholarship for evidence-based practice, with particular distinction in:
   • providing leadership in the synthesis and application of evidence with integration into changing
     standards of care.

IV. Information management and application of patient care technology.

V. Understanding of health care policy, finance and regulatory environments, with particular distinction in:
   • advocacy for individuals, families, and communities.

VI. Inter-professional communication and collaboration for improving patient health outcomes, with particular
     distinction in:
   • delivery of evidence-based, patient-centered care;
   • coordination of care across settings and through the health-illness trajectory.

VII. Clinical prevention and population health for optimizing health, with particular distinction in:
   • analysis of population health needs, determinants, and resources, and development of action strategies.

VIII. Professionalism and professional values, with particular distinction in:
   • ethical practice, social responsibility, a commitment to social justice, and global citizenship;
   • delivery of culturally competent care within diverse settings and/or populations.

IX. Beginning competence in baccalaureate generalist nursing practice, with particular distinction in:
   • holistic, relationship-based care incorporating therapeutic use of self;
   • integration of nursing concepts, human responses, and safe and competent nursing care;
   • use of nursing process to effect highest quality health outcomes.

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

Approved: Nov 24, 2008; revised 10/18/12, reaffirmed 4/17/14

Nursing Curricular Organizing Framework

Core Concepts
   • Nurse as leader
   • Nurse as scholar
   • Nurse as professional
   • Nurse as global citizen

Nurse as leader
   • Empowering others and stimulating change to reach a shared vision.

Nurse as scholar
   • Drawing on a liberal education to reason critically, investigate carefully, and think creatively to build an
     advancing discipline and affect patient outcomes

Nurse as professional
   • Advocating vigorously for the profession and providing nursing care that is based on the Code of Ethics.

Nurse as global citizen
   • Enlarging an understanding of the world that expands inclusivity, embraces diversity, and strengthens cultural
     sensitivity to reduce health disparity

*Revised per faculty suggestions offered at the April 15, 2010 Nursing Department meeting
Glossary of Terms

Commission on Collegiate Nursing Education:

Academic Policies: Published rules that govern the implementation of the academic program including, but not limited to, policies related to admission, retention, progression, graduation, grievance, and grading.

Academic Support Services: Services available to the nursing program that facilitate faculty and students in any teaching/learning modality, including distance education, in achieving the expected outcomes of the program. These may include, but are not limited to, library, computer and technology resources, advising, counseling, and placement services.

Advanced Nursing: Nursing roles requiring advanced nursing education beyond the basic baccalaureate preparation. Academic preparation for advanced nursing may occur at the master’s and/or doctoral level.

Chief Nurse Administrator: A registered nurse with a graduate degree in nursing who serves as the administrative head of the nursing unit.

Community of Interest: Groups and individuals who have an interest in the mission, goals, and expected outcomes of the nursing unit and its effectiveness in achieving them. The community of interest comprises the stakeholders of the program and may include both internal (e.g., current students, institutional administration) and external constituencies (e.g., prospective students, regulatory bodies, practicing nurses, clients, employers, the community/public). The community of interest might also encompass individuals and groups of diverse backgrounds, races, ethnicities, genders, values, and perspectives who are served and affected by the program.

Curriculum: All planned educational experiences under the direction of the program that facilitate students in achieving expected outcomes. Nursing curricula include supervised clinical learning experiences.

Distance Education: Teaching-learning activities characterized by the separation, in time or place, between instructor and student. Courses may be offered through the use of print, electronic, or other media. Distance education methodologies may be used for a portion of or for an entire nursing degree program.

Formal Complaint: A statement of dissatisfaction that is presented according to a nursing unit’s established procedure.

Goals: General aims of the program that are consistent with the institutional and program missions and reflect the values and priorities of the program.

Mission: A statement of purpose defining the unique nature and scope of the parent institution or the nursing program.

Nursing Program: A system of instruction and experience coordinated within an academic setting and leading to acquisition of the knowledge, skills, and attributes essential to the practice of professional nursing at a specified degree level (baccalaureate, master’s, doctorate).

Nursing Unit: The administrative segment (e.g., college, school, division, or department of nursing) within an academic setting in which one or more nursing programs are conducted.

Outcomes: Individual Student Learning Outcomes - Learner-focused statements explicitly describing the characteristics or attributes to be attained by students as a result of program activities. At the curricular level these outcomes may be reflected in course, unit, and/or level objectives.
**Expected Outcomes** - Statements of predetermined levels of aggregate achievement expected of students who complete the program and of faculty. Expected outcomes are established by the faculty and are consistent with professional nursing standards and guidelines and reflect the needs of the community of interest.

**Aggregate Student Outcomes** - Statements of the level of attainment of designated outcomes expected of a group or cohort of students as a result of completing the nursing program. Aggregate student outcomes include graduation rates, NCLEX-RN® pass rates, certification rates, employment rates, and employer satisfaction with graduates. Programs may identify other expected student outcomes, such as percentage of alumni pursuing further education or actively involved in professional organizations.

**Aggregate Faculty Outcomes** - Statements of expected collective faculty accomplishments that support the program’s mission and goals. Expected aggregate faculty accomplishments may reflect teaching, scholarship, practice, and/or service components of the faculty role, as defined by the program and its parent institution.

**Actual Outcomes** - Aggregate results describing student and faculty accomplishments. Actual outcomes are analyzed in relation to expected outcomes to demonstrate program effectiveness.

**Aggregate Student Outcomes** - A description of the level of students’ actual collective attainment of designated outcomes as a result of completing the nursing program. Aggregate student outcomes include graduation rates, NCLEX-RN® pass rates, certification rates, employment rates, employer satisfaction with graduates, and program-identified outcomes.

**Aggregate Faculty Outcomes** - Collective accomplishments of faculty that support the program’s mission and goals. Actual accomplishments may reflect teaching, scholarship, practice, and/or service components of the faculty role.

**Parent Institution:** The entity (e.g., university, academic health center, college, or other entity) accredited by an institutional accrediting agency (regional or national) recognized by the U.S. Secretary of Education that has overall responsibility and accountability for the nursing program.

**Preceptor:** An experienced practitioner who facilitates and guides students’ clinical learning experiences in the preceptor’s area of practice expertise.

**Professional Nursing Standards and Guidelines:** Statements of expectations and aspirations providing a foundation for professional nursing behaviors of graduates of baccalaureate, master’s, and professional doctoral programs. Standards are developed by a consensus of professional nursing communities who have a vested interest in the education and practice of nurses. CCNE recognizes that professional nursing standards and guidelines are established through: state rules and regulations, nationally recognized accrediting agencies and professional nursing specialty organizations, national and institutional educational organizations, and health care agencies used in the education of nursing graduates.

CCNE requires that baccalaureate or graduate pre-licensure programs in nursing use *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008); that master’s degree programs use *The Essentials of Master’s Education in Nursing* (AACN, 2011); that DNP programs use *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006); and that nurse practitioner programs use *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2008). Programs incorporate additional professional nursing standards and guidelines, as appropriate, consistent with the mission, goals, and expected outcomes of the program.

**Program Improvement:** The process of utilizing results of assessments and analyses of actual student and faculty outcomes in relation to expected outcomes to validate and revise policies, practices, and curricula as appropriate.
Teaching-Learning Practices:  Strategies that guide the instructional process toward achieving individual student learning outcomes and expected student outcomes.

Commission on Collegiate Nursing Education (CCNE), 2009.

UW-Eau Claire Nursing Definitions

Advanced Practice Registered Nurses (APRN): A certified nurse practitioner, certified registered nurse anesthetist, certified nurse midwife, or clinical nurse specialist who is educationally prepared (usually at a post-baccalaureate level) accredited by a national accrediting body, and has current certification by a national certifying body in the appropriate APRN role and at least one population focus. *

Assessment: A systematic, dynamic process by which the registered nurse, through interaction with the patient, family, groups, communities, populations, and healthcare providers, collects and analyzes data. Assessment may include the following dimensions: physical, psychological, sociocultural, spiritual, cognitive, functional abilities, developmental, economic, and lifestyle. **

Autonomy: The capacity of a nurse to determine their own actions through independent choice, including demonstration of competence, within the full scope of nursing practice. **

Care Coordination: “The National Quality Forum (NQF) describes care coordination as ‘a function that helps ensure that the patient’s needs and preferences for health services and information sharing across people, functions, and sites are met over time’ (2006, p. 1). The U.S. Agency for Healthcare Research and Quality (AHRQ) defines care coordination as “the deliberate organization of patient care activities between two or more participants (including the patient) involved in a patient’s care to facilitate the appropriate delivery of health care services” (2011, p. 189).” [ANA Position Statement, Care Coordination and Registered Nurses’ Essential Role, June 11, 2012]


Certified Nurse Practitioner (CNP): A registered nurse who is professionally prepared to provide direct primary care and acute care (initial, ongoing, and comprehensive) along the wellness-illness continuum and in all settings. Clinical CNP care includes health promotion, disease prevention, health education, and counseling as well as the diagnosis and management of acute and chronic diseases (APRN Consensus, 2008). *


Clinical Prevention: Individually focused interventions such as immunizations, screenings, and counseling, aimed at preventing escalation of diseases and conditions. ***

Clinical Reasoning: The process used to assimilate information, analyze data, and make decisions regarding patient care (Simmons, Lanuza, Fonteyn, & Hicks, 2003). ***

Code of Ethics (Nursing): A list of provisions that makes explicit the primary goals, values, and obligations of the nursing profession and expresses its values, duties, and commitments to the society of which it is a part. In the United States, nurses abide by and adhere to the Code of Ethics for Nurses (ANA). **
**Collaboration:** A professional healthcare partnership grounded in a reciprocal and respectful recognition and acceptance of: each partner’s unique expertise, power, and sphere of influence and responsibilities; the commonality of goals; the mutual safeguarding of the legitimate interest of each party; and the advantages of such a relationship. **

**Community:** A social system characterized by geographical or relational bonds. The functions of this social system are defined by the people within the community based on their norms, values and perceptions of common concerns. ****

**Competency:** An expected and measurable level of nursing performance that integrates knowledge, skills, abilities, and judgment, based on established scientific knowledge and expectations for nursing practice. **

**Continuity of Care:** An interprofessional process that includes healthcare consumers, families, and other stakeholders in the development of a coordinated plan of care. This process facilitates the patient’s transition between settings and healthcare providers, based on changing needs and available resources. **

**Critical Reflection:** “a deliberate, consistent, systematic effort in becoming aware of how power distorts, permeates, and oppresses processes, interactions, and practices; as well as uncovering assumptions that maintain the status quo” (Brookfield, 1995).

**Critical Thinking:** All or part of the process of questioning, analysis, synthesis, interpretation, inference, inductive and deductive reasoning, intuition, application, and creativity (AACN, 1998). Critical thinking underlies independent and interdependent decision making. ***

**Cultural Competence:** “having the knowledge, understanding, and skills about a diverse cultural group that allows the health care provider to provide acceptable cultural care. Competence is an ongoing process that involves accepting and respecting differences and not letting one’s personal beliefs have an undue influence on those whose worldview is different from one’s own. Cultural competence includes having general cultural as well as cultural-specific information so the health care provider knows what questions to ask” (American Academy of Nursing Expert Panel on Cultural Competence, 2007).

**Cultural Sensitivity:** Cultural sensitivity is experienced when neutral language, both verbal and not verbal, is used in a way that reflect sensitivity and appreciation for the diversity of another. Cultural sensitivity may be conveyed through words, phrases, and categorizations that are intentionally avoided, especially when referring to any individual who may be interpreted as impolite or offensive (American Academy of Nursing Expert Panel on Cultural Competence, 2007). ***

**Culturally Congruent and Competent Care:** “the use of sensitive, creative, and meaningful care practices to fit with the general values, beliefs, and lifeways of clients for beneficial and satisfying health care, or to help them with difficult life situations, disabilities, or death” (Leininger, 1995).

**Delegation:** The transfer of responsibility for the performance of a task from one individual to another while retaining accountability for the outcome. Example: the RN, in delegating a task to an assistive individual, transfers the responsibility for the performance of the task but retains professional accountability for the overall care. **

**Diagnosis:** A clinical judgment about the healthcare consumer’s response to actual or potential health conditions or needs. The diagnosis provides the basis for determination of a plan to achieve expected outcomes. Registered nurses utilize nursing and medical diagnoses depending upon educational and clinical preparation and legal authority. **

**Diversity:** The range of human variation, including age, race, gender, disability, ethnicity, nationality, religious and spiritual beliefs, sexual orientation, political beliefs, economic status, native language, and geographical background. ***

**Environment:** The surrounding context, milieu, conditions, or atmosphere in which a registered nurse practices. **
Evaluation: The process of determining the progress toward attainment of expected outcomes, including the effectiveness of care. **

Evidence-Based Practice: Care that integrates the best research with clinical expertise and patient values for optimum care (IOM, 2003b). ***

Expected Outcome: End results that are measurable, desirable, and observable, and translate into observable behaviors. **

Family: Family of origin or significant others as identified by the healthcare consumer. **


Health: An experience that is often expressed in terms of wellness and illness, and may occur in the presence or absence of disease or injury. **

Health Determinants: Complex interrelationships of factors, such as the social and economic environment, the physical environment, individual characteristics, and behaviors that influence health. ***

Health Literacy: The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions (U. S. Department of Health and Human Services, 2000b). ***

Healthcare Provider: Individuals with special expertise who provide healthcare services or assistance to patients. They may include nurses, physicians, psychologists, social workers, nutritionist/dietitians, and various therapists. **

Healthcare Team: The patient plus all of the healthcare professionals who care for the patient. The patient is an integral member of the healthcare team. ***

Holistic Nursing: “All nursing practice that has healing the whole person as its goal.” (American Holistic Nurses Association, 1998, Description of Holistic Nursing)

Human Responses: The phenomena of concern to nurses that include any observable need, concern, condition, event, or fact of interest actual or potential health problems. *

Illness: The subjective experience of discomfort. **

Immersion Experience: Clinical experiences with a substantive number of hours in a consistent clinical setting over a concentrated period of time. ***

Implementation: Activities such as teaching, monitoring, providing, counseling, delegating, and coordinating. **

Information Literacy: “a set of abilities allowing individuals to recognize when information is needed and to locate, evaluate and use that information appropriately” [The Association of Colleges and Research Libraries (200) as cited in Technology Informatics Guiding Education Reform / TIGER, Informatics competencies for every practicing nurse, no date: available at http://www.tigersummit.com/Competencies_New_B949.html.]
Information Management: “Information management is a process consisting of 1) collecting data, 2) processing the data, and 3) presenting and communicating the processed data as information or knowledge.” [Technology Informatics Guiding Education / TIGER, Informatics competencies for every practicing nurse, no date; available at http://www.tigersummit.com/Competencies_New_B949.html.]

Information Technology: The study, design, development implementation, support, or management of computer-based information systems, particularly software applications and computer hardware. ***

Integrative Strategies for Learning: Coherent organization of educational practices that integrate general education concepts throughout the major, through the widespread use of powerful, active, and collaborative instructional methods (Association of American Colleges and Universities, 2004). ***

Interprofessional: Working across healthcare professions to cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable. The team consists of the patient, the nurse, and other healthcare providers as appropriate (IOM, 2003b). ***

Intraprofessional: Working with healthcare team members within the profession to ensure that care is continuous and reliable. ***

Leadership *****: An evolutionary and learned process. It is an informal and formal process used to persuade rather than coerce, that appreciates the power of mutual information and lives peacefully with irony and paradox, while focusing on influencing individuals and/or groups to achieve a shared vision and challenge boundaries.

Management *****: Provides approaches to minimize chaos and to increase efficiency and effectiveness. Focuses on planning, prioritizing, delegating, budgeting, organizing, staffing, controlling, problem solving, and designating organizational resources. The outcome of management is to assure the attainment of organizational goals.

Microsystem: The structural unit responsible for delivering care to specific patient populations or the frontline places where patients, families, and care teams meet (Nelson, Batalden, Godfrey, 2007). ***

Multi-Dimensional Care: Relating to or having several dimensions; it speaks to the fullness of the patient-clinician experience, but also to people’s lives in general. Spirituality is one of those many dimensions. ***

Nurse Sensitive Indicators: Measures of processes and outcomes – and structural proxies for these processes and outcomes (e.g., skill mix, nurse staffing hours) – that are affected, provided, and influences by nursing personnel, but for which nursing is not exclusively responsible (National Quality Forum, 2003). ***

Nursing: The protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations. **

Nursing Practice: The collective professional activities of nurses characterized by the interrelations of human responses, theory application, nursing actions, and outcomes. **

Nursing Process: A critical thinking model used by nurses that comprises the integration of the singular, concurrent actions of these six components: assessment, diagnosis, identification of outcomes, planning, implementation, and evaluation. **

Organized Framework: A structure made up of constructs identified from philosophy and united in a way which gives direction and sequence to the curriculum. ****
Outcomes (Nursing): The results of nursing actions, in relation to identified human responses, based on findings from nursing research, the efficacy and benefit of which are determined by evaluation. *

Patient: The recipient of nursing care or services. This term was selected for consistency and in recognition and support of the historically established tradition of the nurse-patient relationship. Patients may be individuals, families, groups, communities, or populations. Further, patients may function in independent, interdependent, or dependent roles, and may seek or receive nursing interventions related to disease prevention, health promotion, or health maintenance, as well as illness and end-of-life care. Depending on the context or setting, patients may, at times, more appropriately be termed clients, consumers, or customers of nursing services (AACN, 1998, p. 2). ***

Patient-Centered Care: Includes actions to identify, respect and care about patients’ differences, values, preferences, and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health (IOM, 2003b). ***

Plan: A comprehensive outline of the components that need to be addressed to attain expected outcomes. **

Population Focus: Any one of these six APRN practice areas: family/individual across the life span; adult/gerontology; neonatal; pediatrics; women’s health/gender-related health; psychiatric/mental health. *

Population Health Interventions: Actions intended to improve the health of a collection of individuals having personal or environmental characteristics in common. Population health interventions are based on population-focused assessments. ***

Professional Nurse: An individual prepared with a minimum of a baccalaureate in nursing, but is also inclusive of one who enters professional practice with a master’s degree in nursing or a nursing doctorate (AACN, 1998). ***

Quality: The degree of which health services for patients, families, groups, communities, or populations increase the likelihood of desired outcomes and are consistent with current professional knowledge. **

Reflective Practice: “Reflective practice is an active and deliberate process of critically examining practice where an individual is challenged and enabled to undertake the process of self-enquiry to empower the practitioner to realize desirable and effective practice within a reflexive spiral of personal transformation” [Duffy, A. (2007). A concept analysis of reflective practice: determining its value to nurses. British Journal of Nursing, 16(22), 1400-1407].

Registered Nurse (RN): An individual registered or license by the state, commonwealth, territory, government, or other regulatory body to practice as a registered nurse. **

Regulation of Nursing Practice: The process of governance and controls established by authorized bodies as standards, guidelines, protocols, and other mandates for defining, attaining, and maintaining mandated quality of care and practice. *

Scholarship: Scholarship is generating, investigating, integrating, and disseminating knowledge. ****

Scope of Nursing-Practice: The description of the who, what, where, when, why, and how of nursing practice that addresses the range of nursing practice activities common to all registered nurses. When considered in conjunction with the Standards of Professional Nursing Practice and the Code of Ethics for Nurses, comprehensively describes the competent level of nursing common to all registered nurses. **
Simulation: An activity that mimics the reality of a clinical environment and is designed to demonstrate procedures, decision-making, and critical thinking through techniques such as role-playing and the use of devices (e.g., interactive videos, mannequins) (National Council of State boards of Nursing, 2005). ***

Social Ethics: “the domain of ethics that deals with ‘issues of social order – the good, right, and ought in the organization of human communities and the shaping of social policies. Hence the subject matter of social ethics is moral rightness and goodness in the shaping of human society.’ There are three major functions of social ethics, all of which fall within the legitimate, if not essential, sphere of the professional nursing association: reform of the profession, epideictic discourse (which is a type of public values-based speaking), and social reform” (Fowler, 2010, p.123). [Fowler, M.D.M. (2010). Guide to the Code of Ethics for Nurses, Interpretation and Application. Washington, DC. ANA. Inserted quotation is credited to Gibson, 1966, Elements for a Social Ethics]

Social Reform: “...the [nursing] profession critiques society and attempts to bring about social change that is consistent with the values of the group...It is expected that all nurse will be involved in this aspect of the profession’s social ethics. However, the actual implementation of social criticism and social change generally depends upon collective action, usually through a professional association” (Fowler, 2010, p. 124). [Fowler, M.D.M. (2010). Guide to the Code of Ethics for Nurses, Interpretation and Application. Washington, DC. ANA.]

Spiritual Care: “Interventions, individual or communal, that facilitate the ability to experience the integration of the body, mind, and spirit to achieve wholeness, health and a sense of connection to self, others, and a higher power” (American Nurses Association and Health Ministries Association, 2005, p. 38). ***

Standards: Authoritative statements by which the nursing profession describes the responsibilities for which its practitioners are accountable, the outcomes for which registered nurses are responsible, and by which the quality or practice, service, or education can be evaluated. *

Theory: A set of interrelated concepts, definitions, or propositions used to systematically describe, explain, predict, or control human responses or phenomena of interest to nurses. *

Vulnerable Populations: Refers to social groups with increased relative risk (i.e., exposure to risk factors) or susceptibility to health-related problems. The vulnerability is evidenced in higher comparative mortality rates, lower life expectancy, reduced access to care, and diminished quality of life (Center for Vulnerable Populations Research, UCLA School of nursing, 2008). ***

****Source: Retained from UWEC Nursing Definitions, Nursing Faculty/Instructional Academic Staff Handbook, CONHS, UW-Eau Claire, August 5, 2011 Version (Web)
*****New in April 2012 version UWEC Nursing Definitions

Conceptual Definitions: Nursing as a Healing Art

Nursing as a healing art is the skilled application of nursing knowledge, multiple ways of knowing and diverse practice modalities. It involves expert and compassionate use of caring, relational processes, knowledge of health and illness and insight into nuances of the human condition, to bring about healing outcomes. Such outcomes may include the full spectrum and continuum of healing processes, including growth and change, pursuit of wellness or relief from suffering and distress.
Relationship dimensions are paramount in nursing as a healing art; connecting compassionately with others, sometimes within their most vulnerable life spaces; providing a supportive awareness, an integrative presence, a reflective understanding and a conduit for change. The connection and response occur at the level of specific need, as well as at the level of the whole person.

Concepts and processes of nursing as a healing art are applicable to nursing relationships with individual clients, families, groups, communities and complex systems.

Some Components of Nursing as a Healing Art:
- Attends to body-mind-spirit integrity
- Is concerned with the meaning of health experiences
- Is a relational process of healing, change, growth
- May involve restoration of self, relationship
- May involve relief from suffering
- Can be understood through health patterning: unique, evolving pattern of the whole
- Involves use of self, multiple ways of knowing
- Processes of change, restoration, integration, transformation
- Concerned with wholeness, harmony, patterning and connection
- Making meaning, making sense, putting into meaningful relationship
- Seeks movement toward reconciliation of losses, physical-emotion-spiritual well-being
- An experiential process of expert caring in the human health experience
- Involves all domains of nursing knowledge and practice modalities: aesthetic, scientific, cognitive, behavioral, social, cultural, spiritual, relational

Department of Nursing Sample Program Plans of Undergraduate Study
Sample program plans can be found on the College of Nursing and Health Sciences web site: www.uwec.ly/conhs.

➢ UW-Eau Claire (Eau Claire site)
➢ UW – Stevens Point at Wausau / UW-Eau Claire (Marshfield Site)
➢ UW – Stevens Point at Marshfield / UW-Eau Claire (Marshfield Site)
➢ UW -Stevens Point / UW-Eau Claire (Marshfield Site)
V. Academic Affairs

The following information pertains specifically to nursing academic programs. Additional information is available in the UW-Eau Claire catalog, UW-Eau Claire Dean of Students Office website and the UW-Eau Claire web pages.

Academic Advisers

Undergraduate students in Eau Claire are assigned an academic adviser through the Advising, Retention & Career Center (ARCC); following admission to the nursing program, students are additionally assigned a nursing faculty adviser to provide career guidance. Students at the Marshfield Site and second degree students typically do not have an ARCC adviser, but do have a faculty or instructional academic staff member assigned to them as an adviser for academic and career guidance. Your academic adviser assists in your course planning and ensures that you meet all degree requirements. Your adviser can also help you, or refer you to others who can help you, with a wide variety of difficulties related to course work, study habits, reading skills, and personal problems. When you wish to see your adviser, a telephone or electronic mail request for an appointment will be useful.

Degree Audits/Plans

First-Degree students - Degree audits have replaced the need for degree plans.

Second Degree students – MUST file a degree plan. This should be done by the end of the spring semester of the first year in the professional nursing program. Degree audits should be reviewed each semester with your faculty adviser. The 2nd degree plan forms are filed electronically by your faculty adviser and are available via Blugold Insider or eform1.uwec.edu.

Scholarships

Nursing scholarships are available through the UWEC Foundation and are publicized and administered through the College of Nursing and Health Sciences rather than the Financial Aids Office of the University. Information regarding the scholarships and financial resources specific to nursing students are available on the University Website. The information is updated annually. Students are notified via email regarding the application deadline. Information about other scholarships is available through organizations, and are emailed to nursing students and posted on boards in the LRCs at both sites.

The general nursing scholarship form is available at http://www.uwec.edu/academics/college-nursing-health-sciences/departments-programs/nursing/explore-opportunities/scholarships/. Follow the instructions listed under each scholarship. Please see the Dean’s office personnel for more information.

Dean's List

At the close of each semester, outstanding scholastic achievement is recognized through the Dean's List. Each student on the Dean's List receives a letter of notification and congratulations from the Dean. A copy goes into the student's file. In order to be eligible, during a given semester a student must:

1. Have completed 12 credits, with no incomplete or repeated courses or Satisfactory/Unsatisfactory courses
2. Have earned a minimum semester grade point average of 3.7
3. Be in good standing with the College

Collection of Student Work for Accreditation and Assessment Processes

Faculty are encouraged to place in syllabi and announce in class:

As part of the accreditation and assessment process, on-site visitors may want to review examples of student work. These examples may include items such as care plans, written papers, projects, etc. Faculty will de-identify the required
sampling of artifacts. If a student does not want any personal papers or projects included in this sample, they should please notify each course or clinical faculty person of this request.

Approved March 2015.

**Departmental Honors in Nursing**

Currently on hold, pending resources. Students admitted to nursing with a GPA of 3.5 or higher are eligible for Nursing Honors. After receiving a letter of invitation to participate in Nursing Honors, the students will meet with their Academic Advisors to discuss their interests and motivations for application. The academic advisor will assist interested students in completing the Nursing Honors Acceptance Form. See the Departmental Honors in Nursing web site for further information.

The purpose of Departmental Honors in Nursing is to provide an opportunity for students to discover nursing knowledge in a specific topic area **using advanced scholarship abilities** beyond the student learning outcomes of the baccalaureate nursing program.

Nursing Honors student will:

1. Demonstrate professional motivation and commitment to the contribution of nursing knowledge by participating in a scholarly project that engages the student in any of the following formats: research, evidence-based practice, service project with a health care/ community partner, and/or leadership.
2. Demonstrate some or all of the following scholarly behaviors with abundant depth and breadth through the scholarly project:
   a. Formation of a focused practice/ academic/ management problem or need
   b. Retrieval, appraisal, analysis, and synthesis of scholarly literature/ evidence
   c. Collaboratively design a scholarly project to meet the identified need
   d. Implement the honors scholarly project
   e. Disseminate results of the scholarly project in a professional format (oral/ poster presentation, manuscript, or other).
3. Cultivate professional relationship(s) with Nursing Honors Advisor and/ or other significant professional partners.

**Criteria for Participating in Departmental Honors in Nursing**

- Admitted UWEC baccalaureate nursing students with a minimum GPA of 3.5 will be invited to apply for participation in Departmental Honors in Nursing.
- Acceptance and initiation of participation in Departmental Honors in Nursing is **required by the start of the Junior 1 semester**. Application with written rationale to the Departmental Honors in Nursing **after Junior 1 semester** may be submitted to the Nursing Honors Chair for consideration by the Nursing Honors Committee.
- Nursing honors students must maintain a minimum GPA of 3.3 in nursing courses throughout the nursing honors program.
- Demonstrated ongoing active participation with honors work through submission and approval of progress reports and successful completion of scholarly project.
<table>
<thead>
<tr>
<th>Sophomore 2</th>
<th>Junior 1</th>
<th>Junior 2 and Senior 1</th>
<th>Senior 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exploration and Application to the Departmental Honors in Nursing</td>
<td>Honors Topic Exploration and Scholarly Project Development</td>
<td>Scholarly Project Implementation</td>
<td>Scholarly Project Dissemination</td>
</tr>
</tbody>
</table>

**Student Requirements:**

1. After receiving letter of invitation to participate in Nursing Honors, student will meet with Academic Advisor to discuss interests and motivation for application.

<table>
<thead>
<tr>
<th>Student Requirements:</th>
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<th>Student Requirements:</th>
<th>Student Requirements:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Attend Nursing Honors Student Forum 1.*</td>
<td>1. Establish goals, activities and timeline for implementation of scholarly project in collaboration with Nursing Honors Advisor.</td>
<td>1. Attend Nursing Honors Student Forum II.* (offered once per semester)</td>
<td>1. Attend Nursing Honors Student Forum II.* (offered once per semester)</td>
</tr>
<tr>
<td>2. Complete the Nursing Honors Acceptance form and return to the Nursing Honors Chair.</td>
<td>2. Submit Scholarly Project Progress Report to Nursing Honors Committee at the end of each semester prior to dissemination.</td>
<td>2. Demonstrate professional dissemination of Scholarly Project with Nursing Honors Advisor guidance.</td>
<td></td>
</tr>
<tr>
<td>3. Collaborate with Academic Advisor to select Nursing Honors Advisor.</td>
<td>3. Complete Nursing Honors Scholarly Project Completion Form (with Nursing Honors Advisor signature). Submit form and product of Scholarly Project (copy of manuscript, poster, abstract of presentation, etc.) to Nursing Honors Chair by November 12 (fall semester) or April 12 (spring semester).</td>
<td>3. Complete Nursing Honors Scholarly Project Completion Form (with Nursing Honors Advisor signature). Submit form and product of Scholarly Project (copy of manuscript, poster, abstract of presentation, etc.) to Nursing Honors Chair by November 12 (fall semester) or April 12 (spring semester).</td>
<td></td>
</tr>
<tr>
<td>4. Design scholarly project in collaboration with Nursing Honors Advisor.</td>
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<tr>
<td>5. Complete Scholarly Project Proposal and submit to Nursing Honors Committee for approval.</td>
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</tbody>
</table>

*The Student Nursing Honors Forum I and Forum II will be scheduled at a designated time arranged by the faculty facilitator. The Forum is not for credit, but is required for development through the Departmental Honors in Nursing program.

12.5.14 Approved by Dept. of Nursing; Revised 5/7/15

**Please note that the program currently is on hold, pending resources.**
**Grading Scale**
The below course grade scale is the standard course grade scale for all undergraduate required and elective nursing courses. Grades will round up from the “tenths” position to the nearest whole number when the number in the tenths position is 5 or greater. (i.e. 72.5% rounds to 73%).

<table>
<thead>
<tr>
<th>Grade Range</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>93-100</td>
<td>A</td>
</tr>
<tr>
<td>90-92</td>
<td>A-</td>
</tr>
<tr>
<td>87-89</td>
<td>B+</td>
</tr>
<tr>
<td>83-86</td>
<td>B</td>
</tr>
<tr>
<td>80-82</td>
<td>B-</td>
</tr>
<tr>
<td>77-79</td>
<td>C+</td>
</tr>
<tr>
<td>73-76</td>
<td>C</td>
</tr>
<tr>
<td>70-72</td>
<td>C-</td>
</tr>
<tr>
<td>67-69</td>
<td>D+</td>
</tr>
<tr>
<td>63-66</td>
<td>D</td>
</tr>
<tr>
<td>60-62</td>
<td>D-</td>
</tr>
<tr>
<td>59 and below</td>
<td>F</td>
</tr>
</tbody>
</table>

Approved 12.16.2010

**Policies Related to Student Progression**
1. Students must receive a satisfactory clinical evaluation in each of the following critical areas in each clinical course on a summative clinical evaluation of a course (also see Lasater Clinical Judgment Rubric below):
   a. Effective noticing (focused observation, recognizing deviations from expected patterns, and information seeking).
   b. Effective interpreting (prioritizing data and making sense of data).
   c. Effective responding (calm, confident manner, clear communication, well-planned intervention/flexibility, and being safe and skillful).
   d. Effective reflecting (evaluation/self-analysis and commitment to improvement).
   e. Respectful and professional behavior.
   f. Professional attire.
   g. Professional values.
   h. Accountability and responsibility for own professional behavior.
2. If a student demonstrates deficiencies that the instructor determines are clearly unsafe or unprofessional behaviors, the student will be immediately removed from the clinical situation.
3. Remedial work is a faculty decision and includes a number of factors, including but not limited to consideration of workload, faculty availability, resources, scheduling, and potential for the student to succeed.
4. Remedial work not completed before the end of a semester will result in the student receiving an incomplete or a failing grade.
5. A student may repeat only two required nursing courses. Only one of these repeated courses may be a clinical course. Failure in or withdrawal from a third nursing course, or a second clinical course, will result in dismissal from the program.
6. When a faculty member has determined that a student has failed a clinical component of a course at any point during the semester, a course grade of F will be assigned and the student cannot withdraw from the course.
Academic Standards
Students must maintain the following scholastic standards after admission to the nursing program if they are to be considered in good standing:

1. Achieve a semester grade point average of at least 2.25
2. Maintain a resident grade point average of at least 2.50
3. Achieve a grade of at least “C” in each specific course required by nursing

Students who do not meet these standards will be placed on probation with the nursing program and must appeal to continue in the program. The nursing student who is placed on probation in the nursing program will be officially notified of the change in academic standing within the college and will be required to negotiate a contract designed for regaining good standing with the Associate Dean. Failure to submit an appeal to continue in the nursing program by the designated due date assumes the student no longer wishes to continue in the nursing program and constitutes withdrawal from the nursing program. Should a grade of less than “C” in a required nursing course be a factor in the probationary status, the student must repeat that course BEFORE earning credit for any course for which the repeated course is a prerequisite. For the traditional undergraduate nursing program, students are not allowed to progress further in the nursing program until the course with the less than satisfactory grade is successfully completed. No more than one instance of probation within the program is allowed. All required traditional undergraduate program nursing courses with exams require a 75% minimum exam average in order for a student to successfully pass the course; a grade of F will be earned if the minimum exam average is not reached. This minimum exam average score requirement does not include the grades from course assignments. Vendor standardized exams will not be calculated into the exam average. Once the minimum 75% exam average is reached, in order to pass a course, students must earn a C (73%) when scores for all exams, papers, and other assignments are calculated together. Written and other assignments count toward the final course grade, once the minimum exam average is reached.
### LASATER CLINICAL JUDGMENT RUBRIC
Noticing and Interpreting

<table>
<thead>
<tr>
<th>Effective NOTICING involves:</th>
<th>Exemplary</th>
<th>Accomplished Senior 1 and 2 (A2)</th>
<th>Accomplished Sophomore 2, Junior 1 and 2 (A1)</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Focused Observation</strong></td>
<td>Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information</td>
<td>Regularly observes/monitors a variety of data including both subjective and objective; most useful information is noticed, may miss the most subtle signs</td>
<td>Attempts to monitor a variety of subjective and objective data, but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information</td>
<td>Confused by the clinical situation and the amount/type of data; observation is not organized and important data is missed, and/or assessment errors are made</td>
</tr>
<tr>
<td><strong>Recognizing Deviations from Expected Patterns</strong></td>
<td>Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment</td>
<td>Recognizes most obvious patterns and deviations in data and uses these to continually assess</td>
<td>Identifies obvious patterns and deviations, missing some important information; unsure how to continue the assessment</td>
<td>Focuses on one thing at a time and misses most patterns/deviations from expectations; misses opportunities to refine the assessment</td>
</tr>
<tr>
<td><strong>Information Seeking</strong></td>
<td>Assertively seeks information to plan intervention; carefully collects useful subjective data from observing the client and family</td>
<td>Actively seeks subjective information about the client’s situation from the client and family to support planning interventions; occasionally does not pursue important leads</td>
<td>Makes limited efforts to seek additional information from the client/family; often seems not to know what information to seek and/or pursues unrelated information</td>
<td>Is ineffective in seeking information; relies mostly on objective data; has difficulty interacting with the client and family and fails to collect important subjective data</td>
</tr>
<tr>
<td><strong>Effective INTERPRETING involves:</strong></td>
<td>Exemplary</td>
<td>Accomplished Senior 1 and 2 (A2)</td>
<td>Accomplished Sophomore 2, Junior 1 and 2 (A1)</td>
<td>Unsatisfactory</td>
</tr>
<tr>
<td><strong>Prioritizing Data</strong></td>
<td>Focuses on the most relevant and important data useful for explaining the client’s condition</td>
<td>Generally focuses on the most important data and seeks further relevant information, but also may try to attend to less pertinent data</td>
<td>Makes an effort to prioritize data and focus on the most important, but also attends to less relevant/useful data</td>
<td>Has difficulty focusing and appears not to know which data are most important to the diagnosis; attempts to attend to all available data</td>
</tr>
<tr>
<td><strong>Making Sense of Data</strong></td>
<td>Even when facing complex, conflicting, or confusing data, is able to (1) note and make sense of patterns in the client’s data, (2) compare these with known patterns (from the nursing knowledge base, research, personal experience, and)</td>
<td>In most situations, interprets the client’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or complicated cases where it is appropriate to seek the guidance</td>
<td>In simple or common/familiar situations, is able to compare the client’s data patterns with those known and to develop/explain intervention plans; has difficulty, however, with even moderately difficult data/situations that are within the expectations for</td>
<td>Even in simple or familiar/common situations has difficulty interpreting or making sense of data; has trouble distinguishing among competing explanations and appropriate interventions, requiring assistance</td>
</tr>
</tbody>
</table>
intuition), and (3) develop plans for interventions that can be justified in terms of their likelihood of success of a specialist or more experienced nurse students, inappropriately requires advice or assistance both in diagnosing the problem and in developing an intervention

### LASATER CLINICAL JUDGMENT RUBRIC

#### Responding and Reflecting

<table>
<thead>
<tr>
<th>Effective RESPONDING involves:</th>
<th>Exemplary</th>
<th>Accomplished Senior 1 and 2 (A2)</th>
<th>Accomplished Sophomore 2, Junior 1 and 2 (A1)</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calm, Confident Manner</td>
<td>Assumes responsibility: delegates team assignments, assess the client and reassures them and their families</td>
<td>Generally displays leadership and confidence, and is able to control/calm most situations; may show stress in particularly difficult or complex situations</td>
<td>Is tentative in the leader’s role; reassures clients/families in routine and relatively simple situations, but becomes stressed and disorganized easily</td>
<td>Except in simple and routine situations, is stressed and disorganized, lacks control, making clients and families anxious/less able to cooperate</td>
</tr>
<tr>
<td>Clear Communication</td>
<td>Communicates effectively; explains interventions; calms/reassures clients and families; directs and involves team members, explaining and giving directions; checks for understanding</td>
<td>Generally communicates well; explains carefully to clients, gives clear directions to team; could be more effective in establishing rapport</td>
<td>Shows some communication ability (e.g., giving directions); communication with clients/families/team members is only partly successful; displays caring but not competence</td>
<td>Has difficulty communicating; explanations are confusing, directions are unclear or contradictory, and clients/families are made confused/anxious, not reassured</td>
</tr>
<tr>
<td>Well-Planned Intervention/Flexibility</td>
<td>Interventions are tailored for the individual client; monitors client progress closely and is able to adjust treatment as indicated by the client response</td>
<td>Develops interventions based on relevant patient data; monitors progress regularly but does not expect to have to change treatments</td>
<td>Develops interventions based on the most obvious data; monitors progress, but is unable to make adjustments based on the patient response</td>
<td>Focuses on developing a single intervention addressing a likely solution but it may be vague, confusing, and/or incomplete; some monitoring may occur</td>
</tr>
<tr>
<td>Being Safe and Skillful</td>
<td>Identifies system-wide violations of safety standards and proposes solutions; shows mastery of necessary nursing skills</td>
<td>Consistently maintains safety standards; displays proficiency in the use of most nursing skills; could improve speed or accuracy</td>
<td>Usually maintains safety standards; is hesitant or ineffective in utilizing nursing skills</td>
<td>Violates culture of safety standards; is unable to select and/or perform the nursing skills</td>
</tr>
</tbody>
</table>

#### Effective REFLECTING involves:

<table>
<thead>
<tr>
<th>Evaluation/Self-Analysis</th>
<th>Exemplary</th>
<th>Accomplished Senior 1 and 2 (A2)</th>
<th>Accomplished Sophomore 2, Junior 1 and 2 (A1)</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independently evaluates/analyzes personal clinical performance, noting decision points, elaborating alternatives and</td>
<td>Evaluates/analyzes personal clinical performance with minimal prompting, primarily major events/decisions; key</td>
<td>Even when prompted, briefly verbalizes the most obvious evaluations; has difficulty imagining alternative choices; is</td>
<td>Even prompted evaluations are brief, cursory, and not used to improve performance; justifies personal decisions/choices without evaluating them</td>
<td></td>
</tr>
<tr>
<td>Commitment to Improvement</td>
<td>Satisfactory (All levels)</td>
<td>Unsatisfactory (All levels)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------</td>
<td>---------------------------</td>
<td>-----------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrates commitment to ongoing improvement: reflects on and critically evaluates nursing experiences; accurately identifies strengths/weaknesses and develops specific plans to eliminate weaknesses</td>
<td>Demonstrates a desire to improve nursing performance: reflects on and evaluates experiences; identifies strengths/weaknesses; could be more systematic in evaluating weaknesses</td>
<td>Demonstrates awareness of the need for ongoing improvement and makes some effort to learn from experience and improve performance but tends to state the obvious, and needs external evaluation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appears uninterested in improving performance or unable to do so; rarely reflects; is uncritical of self, or overly critical (given level of development); is unable to see flaws or need for improvement</td>
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</tbody>
</table>

**PROFESSIONAL CONDUCT IN CLINICAL EXPERIENCES**

<table>
<thead>
<tr>
<th>Professional conduct</th>
<th>Satisfactory (All levels)</th>
<th>Unsatisfactory (All levels)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Respectful and professional behavior</strong></td>
<td>Is respectful of all faculty, student peers, professional colleagues, institutional staff, patients/clients and their family members or other visitors, community/clinical hosts, and community members; exhibits active engagement, participating in and contributing to a positive learning environment; behavior honors cultural beliefs, expectations and practices</td>
<td>Exhibits behavior that is distracting, disruptive, disrespectful, inappropriate or disengaged from the teaching-learning activities</td>
</tr>
<tr>
<td><strong>Professional attire</strong></td>
<td>Follows the attire policies as described in the UW-Eau Claire Nursing Undergraduate Student Handbook; selects attire for cultural events or activities, or during clinical immersion experiences, that is respectful of cultural expectations for the setting</td>
<td>Deviates from the attire policies as described in the UW-Eau Claire Nursing Undergraduate Student Handbook; adopts attire during cultural events or activities that disregards cultural expectations for the setting</td>
</tr>
<tr>
<td><strong>Professional values</strong></td>
<td>Adheres to the professional code of ethics, professional standards, and workplace/academic ethics and standards, including those standards related to privacy, confidentiality and the use of social media; exhibits integrity, honesty, compassion, empathy, altruism, responsibility, maturity, respect and acceptance of differences</td>
<td>Exhibits behavior that is unethical, uncaring, irresponsible, immature, disrespectful, and indicative of bias; violates academic and/or workplace ethical and practice standards.</td>
</tr>
<tr>
<td><strong>Accountability and responsibility for own professional behavior</strong></td>
<td>Adheres to attendance standards; completes assigned responsibilities; demonstrates awareness of need for improvement in performance; takes responsibility for personal behaviors; identifies personal plan for improving performance; responds positively to faculty suggestions for improvement and acts on the suggestions</td>
<td>Is late, absent without notice, or has excessive absences.; fails to complete assigned responsibilities; appears uninterested in improving performance or fails to do so; justifies behaviors without evaluating them for their appropriateness</td>
</tr>
</tbody>
</table>
Unsatisfactory Grades in Nursing Courses

(Grade of less than C) Any of the following may result in an unsatisfactory grade in a nursing course:

1. Clearly unsatisfactory achievement in either the theoretical or the practicum components of a nursing course
2. Failure to earn at least a 75% minimum exam average in required nursing courses in the traditional undergraduate nursing program
3. Failure to submit course assignments or projects
4. Failure to meet make-up requirements in relation to course work missed
5. Failure to appear for the final examination, unless prevented by illness or other emergency from taking the examination at the scheduled time. In this case the Dean’s Office must be notified. See University Catalogue for policy.
6. Offenses as defined by the University of Wisconsin Board of Regents in Chapter UWS 17 and published on the Dean of Students website.
7. Failure to comply with attendance policy as stated in writing by the instructor

Incompletes

A grade of “incomplete” is negotiated with the course coordinator and is allowed only when illness or other extenuating circumstances beyond the student’s control have interfered with completion of the course, and the plan for completion is a clearly viable alternative for meeting the course objectives. Students may not progress to courses that have a prerequisite course in which a grade of “incomplete” has been received. For the traditional undergraduate nursing program, students are not allowed to progress further in the nursing program until the course with the incomplete grade is successfully completed.

Withdrawal from a Class

There are issues to consider before withdrawing from a class. A student must maintain 12 credits to be considered full-time. If you fall below full-time during a semester it may affect health insurance coverage, athletic eligibility, veteran’s benefits, financial aid, and eligibility for the dean’s list. Students should meet with their advisor and discuss implications of withdrawing from a class before withdrawal date. It is expected that course faculty are also included in considering the need to withdraw from a class. For students in the traditional program, students are expected to be enrolled full-time in the required nursing courses while completing the 60 credits of nursing courses in the program.

Students wishing to withdraw from all classes will be withdrawing from the university. Withdrawal from the university presumes that the student is also withdrawing from the nursing program. University withdrawal requires completion of electronic paperwork through the Advising, Retention, and Career Center and cannot be done using a Change of Registration (Drop/Add) form.

Academic and program progression implications of course withdrawal need to be carefully considered by the student and academic advisor. Withdrawal from a professional nursing course may significantly affect academic standing and program progressions. For admitted students, approval of a Nursing Program Plan Change form (available via Blugold Insider) may be required as part of progressions planning.

University Withdrawal

Students wishing to withdraw from all classes will be withdrawing from the university. Withdrawal from the university presumes that the student is also withdrawing from the nursing program. University withdrawal requires completion of electronic paperwork through the Advising, Retention, and Career Center and cannot be done using a Change of Registration (Add/Drop) form. Notification of the Nursing Department Chair and CONHS Dean’s Office is essential. Readmission to the university does not result in readmission to the nursing program. Consideration for re-admission into nursing must be specifically requested in a letter to the Dean at least three months in advance of the desired readmission date. Reapplication to the nursing program may be required. Approval of the readmission request will
depend upon the reasons for withdrawal, the student’s academic standing, program capacity, the length of absence, the student’s ability to achieve, and progress made to rectify any previous concerns or difficulties.

**Termination from Program**
A student may be terminated from the nursing program for any of the following reasons:

- Failure to regain good standing.
- A second instance of probation within the College.
- Failure to demonstrate the potential for consistently safe and responsible nursing practice.
- Likelihood that a student's condition or prior experience will adversely affect the student, other persons, the University, an agency or unit used for clinical practice, or the patients or clients served.
- Failure in or withdrawal from a third nursing course, or a second clinical course.

Termination from the program constitutes dismissal from the nursing program only. A student's status within the University is not affected, providing the University standards for good standing are met. A student who has been notified of termination from the program may appeal for reinstatement through the College of Nursing and Health Sciences Dean’s Office.

**Academic Conduct and Misconduct**
The student's work is expected to be theirs alone, unless the instructor has granted prior approval for assistance. Students are expected to appropriately acknowledge ideas borrowed from the work of others through use of quotation marks for short quotations, setting off of longer quotations, and identification of the sources of both direct quotations and materials paraphrased or summarized. Failure to acknowledge such resources is considered academic dishonesty and will be handled according to University policy.

**FALSIFICATION OF ANY PATIENT/CLIENT RECORDS OR MISREPRESENTATION OF A STUDENT'S NURSING ACTIONS IN RELATION TO PATIENTS/CLIENTS ASSIGNED FOR CLINICAL PRACTICE ARE REGARDED BY THE FACULTY AND ADMINISTRATORS OF THE COLLEGE OF NURSING AND HEALTH SCIENCES AS ACADEMIC MISCONDUCT AND SUBJECT TO DISCIPLINARY ACTION.**

**Accountability Contract Agreement Policy for At-Risk Performance**
Students enrolled in a nursing course with a didactic and/or clinical component are expected to follow the policies and procedures of the nursing program, course and assigned clinical agency. Professional, academic and performance behaviors all need to be followed. Violations may result in failure of the nursing course and possible dismissal from the nursing program.

An accountability contract is a joint agreement between the course faculty and a nursing student. The student’s academic advisor and the department chair are notified of the contract. This agreement is entered into when a student has been found to demonstrate action that is not consistent with university, nursing program, clinical agency or course policies/expectations or policies and procedures. Through dialog with the faculty, the student is able to reflect on ways to meet course outcomes. The student will earn a failing grade in the course if the outcomes are not met. If a student demonstrates behavior not consistent with course and/or clinical agency policies/expectations, that student will receive warning notification from the course faculty.

An Accountability Contract Agreement will be developed if the behavior continues or at the time of initial notification, if warranted. The agreement will include conditions for progression and services/resources recommended to the student. The student will meet with course faculty and their academic advisor, as appropriate. In egregious situations immediate course dismissal may occur.
The student and course faculty must sign and date the Accountability Contract Agreement. The agreement must be signed by the student in order for the student to continue in the course or the student will receive a grade of F for the course. The student may respond with written comments.

An original agreement will be placed in the advising file. The student will receive a copy of the agreement. Copies will also be forwarded to the academic advisor, Department Chair and to the appropriate Assistant/Associate Dean.

A student can be placed on an Accountability Contract Agreement a maximum of two (2) times while in the nursing program. At the time of initiating the contract, course faculty will review the student’s academic file for previous contracts. If previous contracts have been written the student, academic advisor, department chair, and assistant/associate dean will be notified.

If course faculty need to place a student on an accountability agreement for a third time, a performance review will be conducted by the Department Chair and the Dean’s office, and may be grounds for dismissal from the nursing program. The Dean of the College of Nursing and Health Sciences will notify the student of dismissal from the nursing program.

**Classroom Behavior Expectations**

The classroom is considered an extension of the professional practice environment. Students are expected to extend the usual common courtesies to the faculty and others in the classroom of attentiveness to what is being said or demonstrated, and refraining from behaviors that may be distracting to others. Faculty may request students whose behavior is distracting, disruptive, or disengaged from the teaching-learning activities in process to leave the classroom.

**Clinical Behavior Expectations**

When students are participating in clinical (including immersion experiences) they are representatives of the Department of Nursing. Students are expected to conduct themselves in a professional manner. The clinical setting, or in the case of immersion experiences, the full immersion experience (including the housing site) is considered the professional practice environment. No alcohol is to be purchased, transported, or consumed by students en route, during, and when returning from clinical immersion experiences. This includes when driving or flying to and from the clinical site. Students are expected to be respectful of all faculty, student peers, professional colleagues, institutional staff, patients/clients and their family members or other visitors, community/clinical hosts, and community members. Respect and professional behavior are demonstrated through active engagement, participating in and contributing to a positive learning environment, honoring cultural beliefs, expectations and practices, and taking responsibility for personal behaviors. Attire in the clinical setting is required to follow the policies as addressed under UW-Eau Claire dress requirements in the student handbooks. Attire for and behavior at cultural events or activities, or during clinical immersion experiences, must be respectful of cultural expectations for the setting. Faculty may request students whose behavior is distracting, disruptive, disrespectful, inappropriate or otherwise unprofessional to leave the clinical site. Students may also be asked to leave the clinical site if not engaged in the teaching-learning activities. These behaviors may result in failure of the clinical course. Approved 10/16/09; revised 10/16.

**Written Assignments**

Students are expected to know and use appropriate literary style for written reports and papers or to follow format designated by faculty. Faculty request that students be guided by: *Publication Manual of the American Psychological Association*, (Current edition). It is available in the University Bookstore for purchase and in the library.

Not all papers are to be in essay form. Some nursing faculty provide directions for the format of particular assignments; adhering to such directions fosters logical progression of ideas and also makes it easier for faculty to determine students’ understanding of content. Legibility is essential. Some faculty require typewritten papers;
handwritten papers should be in ink unless otherwise instructed. Most faculty object to ragged edges being present on paper torn from notebooks. When in doubt about the instructor’s expectations in regard to an assignment, ask.

**Submitting Papers**

Arrangements for submitting papers vary among the faculty. Please check the course syllabus and with individual faculty.

**Absences**

Students are expected to attend all sessions of nursing courses in which they are enrolled. Instructors expect calls or messages concerning class absences. For reporting clinical absences, see individual clinical instructor and/or course syllabus for direction. When absences are anticipated, make-up work should be done, or at least planned. Students are responsible for arranging for make-up work with their course instructor. This includes absences planned/required as a member of university athletics, music and other extramural activities, etc. Extended absences must be reported to the UW-Eau Claire Office of the Dean of Students. If the absences are extensive, it may not be possible to successfully complete the course. See Class Attendance Policy and Authorized Absence Policy available online from the Dean of Students website.

**Final Examination Schedule Changes**

A request for a change in the time of an individual final examination must be approved by the instructor, the department chair, and the assistant/associate dean of the college in which the course is offered. Make-up examinations must be scheduled during finals week or later and must be arranged by the student with the instructor (See policies regarding final examinations in "Academic Policies and Regulations" of current University Catalog or the following link: [https://www.uwec.edu/blugold-central/academic-planning/final-common-exam-schedules/](https://www.uwec.edu/blugold-central/academic-planning/final-common-exam-schedules/).

The following points are considered in granting permission to change an examination schedule:

- Three or more examinations scheduled for one day.
- Military obligation.
- Work or employment related reasons, if they existed prior to publication of the examination schedule and the employer verifies the need for the request.
- Illness that clearly renders the student incapable of demonstrating their achievement through the exam.
- Death or serious illness of family members that are verified as in four above.
- Personal or family events that are verifiable and deemed sufficiently cataclysmic to warrant the student's absence from campus.

Planned "emergency" or "extraordinary circumstances" are generally not honored. For example, circumstances typically not approved for final exam rescheduling may include: family vacations, weddings, baptisms, family reunions, medical tests, dental appointments, job interviews, fishing trips. For courses in the College of Arts and Sciences, final exam rescheduling requires submission of the “Final Exam Change Form” which is located on the College of Arts and Sciences website or at this link: [https://www.uwec.edu/blugold-central/academic-planning/final-common-exam-schedules/](https://www.uwec.edu/blugold-central/academic-planning/final-common-exam-schedules/).

**Nursing Program Sponsored Examinations**

Selected professional examinations are administered to students in the traditional undergraduate program for special purposes.
As part of NRSG 317, NRSG 359, NRSG 424, NRSG 447, NRSG 477, and NRSG 487 nursing program assessment exams (Elsevier HESI exams) are administered. The exams have been prepared by a national testing service and provide information regarding areas in which remediation may be needed. They assist in preparing for the national nursing licensure (NCLEX) exam as they cover similar content.

The Elsevier examinations are administered at specific scheduled times, usually outside of assigned classroom hours. Students need to plan ahead to reserve the exam dates.

Students receive their exam results confidentially with an interpretation on how they are progressing toward building knowledge needed for the nursing licensure exam. Students will have an opportunity to talk with faculty members about their results and areas in which improvement may be needed.

Students are encouraged to spend some time reviewing past nursing course content in preparation for these exams. Additional preparation activities may be assigned in courses and will be outlined in individual course syllabi when applicable. Remediation expectations for each required HESI specialty exam and each required HESI exit exam are outlined in the course in which the remediation is required. HESI exam scores are incorporated into nursing course grades and therefore may affect the ability to pass a course. Course fees are associated with these exams. Note: Vendor standardized exams are not calculated into the regular course exam 75% minimum average required to pass a course.

As specified in the course syllabi, students are required to take the HESI RN Pharmacology specialty exam in NRSG 317 (5% of course grade), the HESI RN Fundamentals specialty exam in NRSG 359 (10% of course grade), the HESI RN Medical-Surgical specialty exam in NRSG 447 (10% of course grade), the HESI RN Pediatric specialty exam in NRSG 477 (10% of course grade), the HESI Exit one exam in NRSG 424 (10% of course grade), and the HESI exit two exam in NRSG 487 (20% of course grade). Students participating in the Harlaxton study abroad experience complete the HESI RN Pediatric specialty exam near the end of the Senior 2 semester. The HESI Exit I Exam is worth 10% of the course grade in the NRSG 495 Directed Study for the students returning from Harlaxton.

**HESI Testing Policy**

While nursing students are evaluated in multiple ways throughout the course of their program (simulation, observation of clinical performance, quizzes, and testing), an additional way of helping students be prepared for practice and passing the National Council Licensure Examination (NCLEX) is to take standardized tests. Standardized tests are normed so that a student’s score on these exams can help a student determine if they understand and can apply the required content as well as predict how they might do on NCLEX (Hyland, 2012; Lavandera et al, 2011). After an extensive review of the literature and available research, the UWEC faculty has decided to use HESI standardized exams through Elsevier.

A nursing student will take a total of 7 standardized HESI exams once they are admitted to the nursing program. Student scores on the standardized exams will be factored into the student’s course grade. All HESI exams will be taken outside of regular class and clinical time.

Two of the HESI exams are Exit exams, which are designed to test all content areas and simulate taking an NCLEX exam. The RN Exit Version 1 is given in the Senior 1 semester (NRSG 424), and the RN Exit Version 2 is given in the Senior 2 semester (NRSG 487). Students are given 4 hours to complete these exams. HESI Exit exams are given one time without retakes, and remediation is recommended although not required. Five of the HESI exams are specialty exams which cover a single content area. Students are given 2 hours to complete each of the specialty exams. They are taken as follows:

- Pharmacology in the Jr. 1 Semester (NRSG 317)
- Fundamentals in the Jr. 2 Semester (NRSG 359)
- Medical-Surgical in the Sr. 1 Semester (NRSG 447)
To be successful in passing the NCLEX exam, remediation is a very important strategy all students should engage in following any exam (Mee & Schreiner, 2016). Informally, students are encouraged to remediate on their own using a wide variety of materials and resources to help them expand their understanding and application of the content they are learning. Remediation is a formal process and is outlined in the following policy:

Remediation Policy for HESI Specialty Exams
This document describes the Remediation Policy for nursing students taking HESI Specialty Exams. Remediation is defined as, “The process of identifying the need to take action to remedy a situation that, if left unresolved, will result in unfavorable outcomes, whereas implementing intervention strategies will successfully address the situation” (Cullieton, 2009). The remediation requirements are dependent on each individual student’s HESI score for each exam. HESI Exam Scores can be indicative of the student’s level of risk for success in the program and on NCLEX. Students with lower HESI scores require more intense remediation.

When students must retake specialty exams
Students will be required to retake the HESI Specialty exam if their score is equal to or less than 849. The table below outlines the required time for remediation prior to the 2nd attempt of a specialty exam. The student will receive the higher score of the two attempts.

Students who score at or above 850 have the choice of retaking a specialty exam, but it is not required. If the student wishes to retake, they will be required to remediate as outlined in the table below before the 2nd attempt. The student will receive the higher of the two attempts.

Students, no matter their 1st attempt score, will not be eligible for admission into the second attempt of the HESI Specialty Exam unless they complete the specified remediation time. Remediation must be completed 24 hours before their next scheduled attempt of the HESI Specialty Exam. Remediation hours and activity will be monitored within Evolve to verify the required hours and activity details. Only online study time within Evolve for that specialty exam counts for remediation. If the student has not completed the required remediation 24 hours prior to the scheduled retake exam, they will not be allowed to take the repeat exam.

For remediation to be considered complete, the student must spend the required time as follows:

<table>
<thead>
<tr>
<th>HESI Grade after taking 1st attempt of Specialty Exam</th>
<th>Amount of time required before taking 2nd attempt of the specialty exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>100.00%* (greater than or equal to 1000)</td>
<td>2 hours minimum if student chooses to retake the exam</td>
</tr>
<tr>
<td>95.00% (950-999)</td>
<td>2 hours minimum if student chooses to retake the exam</td>
</tr>
<tr>
<td>90.00% (900-949)</td>
<td>2 hours minimum if student chooses to retake the exam</td>
</tr>
<tr>
<td>85.00%* (850-899)</td>
<td>2 hours minimum if student chooses to retake the exam</td>
</tr>
<tr>
<td>student required to retake exam (800-849)</td>
<td>4 hours minimum</td>
</tr>
<tr>
<td>student required to retake exam (750-799)</td>
<td>4 hours minimum</td>
</tr>
<tr>
<td>student required to retake exam (700-749)</td>
<td>6 hours minimum</td>
</tr>
<tr>
<td>student required to retake exam (650-699)</td>
<td>6 hours minimum</td>
</tr>
<tr>
<td>student required to retake exam (600-649)</td>
<td>8 hours minimum</td>
</tr>
</tbody>
</table>
If student scored equal to or greater than 850 on the first attempt, they may choose to repeat the exam after completing the required remediation.

**HESI Grade after taking 2\textsuperscript{nd} attempt of a Specialty Exam**
For any student completing a second attempt of the specialty exam, the student will receive the higher of the two specialty exam scores.

<table>
<thead>
<tr>
<th>Highest HESI Score after 2 attempts</th>
<th>Grade Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td>greater than or equal to 1000</td>
<td>100.00%</td>
</tr>
<tr>
<td>950-999</td>
<td>95.00%</td>
</tr>
<tr>
<td>900-949</td>
<td>90.00%</td>
</tr>
<tr>
<td>850-899</td>
<td>85.00%</td>
</tr>
<tr>
<td>800-849</td>
<td>80.00%</td>
</tr>
<tr>
<td>750-799</td>
<td>75.00%</td>
</tr>
<tr>
<td>700-749</td>
<td>70.00%</td>
</tr>
<tr>
<td>650-699</td>
<td>65.00%</td>
</tr>
<tr>
<td>600-649</td>
<td>60.00%</td>
</tr>
<tr>
<td>550-599</td>
<td>55.00%</td>
</tr>
<tr>
<td>equal to or lower 549</td>
<td>50.00%</td>
</tr>
</tbody>
</table>

**HESI Grade if student did not complete the required remediation prior to retaking the specialty exam**
If a student score is equal to or under 849 on their first attempt of the HESI Specialty exam and the student does not complete the required remediation to sit for the 2\textsuperscript{nd} attempt of the specialty HESI exam 24 hours prior to the scheduled retake, the student will receive 50% of the grade from their first attempt.

<table>
<thead>
<tr>
<th>HESI Score on 1\textsuperscript{st} attempt of a Specialty Exam</th>
<th>Grade Earned (which is 50% of original exam score as appropriate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>greater than or equal to 1000</td>
<td>100.00% (Grade based on first attempt as student was not required to retake exam)</td>
</tr>
<tr>
<td>950-999</td>
<td>95.00% (Grade based on first attempt as student was not required to retake exam)</td>
</tr>
<tr>
<td>900-949</td>
<td>90.00% (Grade based on first attempt as student was not required to retake exam)</td>
</tr>
<tr>
<td>850-899</td>
<td>85.00% (Grade based on first attempt as student was not required to retake exam)</td>
</tr>
<tr>
<td>800-849</td>
<td>40.00% (Grade 50% of first attempt since remediation not completed)</td>
</tr>
<tr>
<td>750-799</td>
<td>37.50% (Grade 50% of first attempt since remediation not completed)</td>
</tr>
<tr>
<td>700-749</td>
<td>35.00% (Grade 50% of first attempt since remediation not completed)</td>
</tr>
<tr>
<td>650-699</td>
<td>32.50% (Grade 50% of first attempt since remediation not completed)</td>
</tr>
<tr>
<td>600-649</td>
<td>30.00% (Grade 50% of first attempt since remediation not completed)</td>
</tr>
</tbody>
</table>
References


12/19.

Credit by Examination Policy
Selected undergraduate nursing courses are available to eligible students for credit by examination. Credit for a maximum of two clinical nursing courses may be earned by examination. Prerequisite courses must be completed prior to pursuing credit by examination. Each clinical nursing course examination will include instructor observation of student clinical performance, along with other examinations, check-offs, or portfolio reviews, as needed. Objective and/or essay components of the examination must be completed successfully before assignment, clinical examination, and/or portfolio evaluation are attempted. Students interested in receiving credit by examination for nursing courses should see their faculty advisor or the chair of the department in which the course is offered for more information.

Eligibility for Graduate Courses
Upon the recommendation of the student's advisor, course instructor, and Nursing Department Chair, a senior may be allowed to enroll in a limited number of graduate courses. Consult the *University Catalog* under "Academic Policies and Regulations" and the *Graduate Catalog* for information. To be eligible for this privilege, students must have earned a 3.0 cumulative grade point average. Permission must be received from the Nursing Graduate Programs Director to enroll in a nursing graduate course.

Flexibility in Progression through Undergraduate Program
The structure of the undergraduate curriculum offers limited flexibility for students with special needs that might affect ability to complete a typical program plan. Such needs may result from study abroad experiences, participation in University athletics, personal circumstances, and academic difficulty.

The nursing faculty agree every effort will be made to support flexibility in program progression in order to facilitate successful completion of the degree. If a student needs to alter progression through the typical sequence of courses, a progression plan will be developed by the student in collaboration with the advisor (or Associate Dean/Marshfield Site Coordinator in the absence of the advisor) to ensure integrity of the curriculum for the individual student. The plan, signed by the student and the advisor, will be submitted to the Associate Dean for approval. The Associate Dean will consult with the Student Affairs and Undergraduate Admissions Committee and the Department Chair as indicated. Program progression change forms are available on the department website (see Blugold Insider). Students who wish to study abroad will need to begin the approval process a year in advance of the proposed travel.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>550-599</td>
<td>27.50% (Grade 50% of first attempt since remediation not completed)</td>
<td></td>
</tr>
<tr>
<td>equal to or lower 549</td>
<td>25.00% (Grade 50% of first attempt since remediation not completed)</td>
<td></td>
</tr>
</tbody>
</table>
Flexibility in Progression in Clinical Courses

Numbers of students in clinical courses must be monitored carefully to ensure effective teaching and patient safety. If students need to delay progression through the sequence of clinical courses, careful planning for the student’s return to clinical course work needs to be accomplished with the student advisor in collaboration with the Department Chair and the Associate Dean. Return to clinical courses must be on a space available basis.

Attending Eau Claire and Marshfield Sites

Students admitted to a primary site, either Marshfield or Eau Claire, will register for course sections according to the site to which they are admitted. Students are required to attend clinical at the primary site and are expected to attend classes at the primary site. Class site attendance (not clinical attendance) may be negotiated with the course faculty based on the individual student need.

Clinical Group Sections – Subject to Change

The Department of Nursing attempts to provide information regarding clinical sections prior to course registration. However, due to unexpected staffing or clinical site alterations, the locations, dates, times, and instructors may need to be modified and are subject to change. Because of these and other circumstances as well as student progression issues, it occasionally happens that the Nursing Department Chair must also adjust clinical group sizes and make-up. An appropriate clinical group size must be maintained for a given clinical site. Although efforts are made to honor student wishes, it is possible that students may be required to change clinical sections, times, locations, etc. Our goal is to provide meaningful, supportive, and safe clinical experiences that will enable all students to learn and grow and for patients to heal and receive optimal care.

Information Reported to National/State Nursing Organizations/Accrediting Bodies

The American Association of Colleges of Nursing (AACN) is a national nursing organization of which we are a member. An arm of the organization serves as our accrediting body. AACN and other state and national organizations require that we periodically submit basic directory-type and employment information regarding our students, graduates, and faculty. AACN collects the data to address issues related to nursing faculty and health care access shortages. If an individual objects at any time to having their information released to AACN or other national/state organizations, please notify the Associate Dean of the College so that we ensure the information is not submitted. The Registrar’s Office also has an electronic form in which one may request to restrict the release of directory information.

Guidelines for Video Recording of ITV Classes

1. The instructor(s) will determine for what purpose, for whom, and at what location their class may be video recorded.
2. Instructors are responsible for decisions regarding video recording in student absence situations. Taping of an ITV class for a student should be an exception and permission for the taping must be granted by the instructor (not the facilitator, student, or technician). All students are expected to attend all sessions of nursing courses in which they are enrolled.
3. In the case of emergencies or technical difficulties involving the transmission of a class, the class will be video recorded only with the instructor’s permission.
4. Instructors are asked to address the video recording policy in the course syllabus.
5. Students will be informed if video recording occurs.
6. Recordings will be managed by the Media Specialist/DE Coordinator in Eau Claire and by the ADA in Marshfield. The recordings can only be checked out by the student(s) who made the recording request. The recordings will be erased upon their return.
Nursing Learning Environment Visitation Policy

This visitation policy applies to all College of Nursing and Health Sciences nursing programs. It has been developed due to the potential sensitive nature of content shared in the nursing programs, as well as learning distractions posed by visitors. A visitor is defined as an individual not enrolled in the respective course. A visitor, either in person or via distance education technology (i.e., BlueJeans or Skype) is not allowed in College of Nursing and Health Sciences learning environments. This includes classrooms, clinical laboratory spaces, and clinical sites. Rare exceptions may be made under extenuating circumstances only. Permission to bring a visitor must be received from the course instructor(s) for that day prior to the start of each class. Approved by Dept. 12/1/16.

Essential Abilities for Students in Undergraduate and Graduate Nursing Program

Preamble - The University of Wisconsin–Eau Claire, College of Nursing and Health Sciences, welcomes and invites persons with disabilities into professional nursing education whenever possible, making modifications and accommodations as possible within the capacities of our resources and expertise. While there are limitations on the extent of modifications and accommodations that can be provided within a program that does not specialize in disability education, we are committed to facilitating baccalaureate and graduate nursing education for qualified individuals whenever possible, including individuals with disabilities. For circumstances in which we are not able to accommodate an individual’s needs due to disability status, we will do our best to refer students to appropriate support services.

The following Essential Abilities of UW-Eau Claire Nursing Students apply to students in the UW-Eau Claire Nursing programs. Students who, due to documented disability or other limitation, do not fully meet these abilities, may request accommodations consistent with requirements for meeting course and program objectives. When possible the UW-Eau Claire Nursing programs will work with university services and clinical partners to assist students in meeting course and program requirements while maintaining student and patient safety and effectively facilitating highest quality client health outcomes.

Essential Abilities: Safe and Effective Care - The University of Wisconsin–Eau Claire, College of Nursing and Health Sciences, represents to its internal and external constituents that recipients of the baccalaureate or higher degree from a UW-Eau Claire Nursing program have been educated to practice professional nursing safely and effectively in a wide variety of healthcare settings, and that pre-licensure BSN graduates are eligible to apply for RN licensure in the State of Wisconsin. In light of this, UW-Eau Claire’s Nursing programs leading to licensure or advanced clinical practice require students to engage in a variety of complex and specific experiences. Successful completion of these experiences is necessary in order for the nursing student to demonstrate integration and application of the broad body of knowledge and skills essential for safe and effective professional nursing practice, across a wide spectrum of health and illness conditions and settings for the provision of care.

To this end, in order to practice safely and effectively, nursing requires a combination of physical abilities, motor skills, and sensory abilities; affective, interpersonal, and communication skills; cognitive abilities, behavioral and emotional sensitivity; and professionalism. These skills and abilities are essential not only to ensure the safety and effectiveness of professional nursing care for patients, but also to ensure the health, safety, and well-being of the nursing student, fellow nursing students, faculty, other healthcare providers, and the community. As such, nursing students are expected to demonstrate skills and behaviors consistent with the following essential abilities in order to successfully complete the Nursing programs at the UW-Eau Claire College of Nursing and Health Sciences. Students who demonstrate a pattern of behaviors that is not consistent with the essential abilities and their professional application may be removed from the teaching-learning setting or may be required to participate in remedial activities, as appropriate for the circumstances and to preserve safe and effective care. Students who, due to documented disability or other limitation, do not fully meet these abilities, may request accommodations consistent with requirements for meeting course and program objectives.

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Essential Abilities: Physical and Motor Skills - Nursing students should have sufficient physical abilities and motor function so that they are able to execute movements required to provide general care and treatment for patients in all health care settings. For example: For the safety and protection of individuals, the nursing student must be able to perform basic life support, including CPR, and function physically in an emergency situation, both independently and with professional colleagues. The nursing student must have the ability, within reasonable limits, to safely assist an individual in moving, for example, from a chair to a bed, or from a wheel chair to a commode, using appropriate bioengineering equipment consistent with national guidelines (e.g., the National Institute of Occupational Safety and Health), and to hold or otherwise care for infants and small children to meet their healthcare, emotional, and developmental needs. Fine motor skills and other psychomotor skills, including the use of one or both upper extremities, hands, and fingers, are needed for some essential activities. Students requiring uniform or clinical attire accommodations for personal religious beliefs must be able to perform all of the above activities safely, effectively, and in accordance with healthcare agency policy, while wearing the accommodated uniform.

Essential Abilities: Sensory - The nursing student must have sufficient biological or accommodated: visual acuity to see details near and at a distance, as well as be able to discriminate colors adequately for the clinical setting; auditory acuity to hear conversation and other sounds in order to assess and protect the health and safety of individual patients and others in the vicinity; and intact tactile sensation to assess (e.g., hot/cold; rough/smooth) and perform appropriate professional nursing functions. Sight and hearing are also necessary to communicate accurately and effectively. Auditory-visual-tactile perception and integration are needed to perform most essential nursing functions.

Essential Abilities: Situation-Appropriate Affect, Communication, and Interpersonal Skills - A nursing student must be able to communicate effectively with others. Effective communication requires consistency of message, integration of information, synchrony with circumstances and other data, and effective interpersonal skills. Situation-appropriate affect and judgment are necessary to convey emotions appropriate for the circumstances, to engage in interpersonal communication effectively and sensitively, and to respond appropriately to a wide variety of interpersonal circumstances and demands. The nursing student must express their ideas clearly and appropriately. (See also Behavioral/Emotional section below.) A nursing student must be able to convey or exchange information to establish and maintain patient-centered relationships; conduct an appropriate health history; identify problems presented; explain alternative solutions; give directions during treatment and post-treatment; and work effectively with all professional colleagues and team members. The nursing student must be able to communicate effectively in oral and written forms and interpret non-verbal communication. They must be able to process and communicate information on the patient’s status with accuracy and in a timely manner with other members of the healthcare team.

Essential Abilities: Cognitive - A nursing student must have sufficient cognitive abilities to be able to measure, calculate, reason, analyze, integrate, synthesize, and make appropriate clinical judgments in the classroom and in a wide variety of clinical settings. The nursing student must be able to quickly read and comprehend extensive written material, as well as comprehend oral communication. The student must be able to enter and process electronic information using a variety of current technologies. They must also be able to effectively gather information to assess and evaluate individuals, families, groups, and community/environmental situations, and act in a timely fashion using critical thinking. Likewise, the nursing student must be able to select from a wide array of existing information, to assess and evaluate that information and take action that shows evidence of intact integrative functions and critical thinking. Effective clinical judgment requires the integration of information that results in rational, timely, and informed action, and the appropriate anticipation of consequences associated with those actions (or inactions). They must be able to engage in critical self-evaluation, including demonstrating a willingness and ability to give and receive feedback and to make a correct judgment in seeking supervision and consultation in a timely manner. English-language ability in all of the above is required.

Essential Abilities: Behavioral/Emotional Sensitivity - Nursing students are expected to have the psychoemotional ability required to fully use their cognitive abilities, employ good judgment and carry out responsibilities in a timely manner with respect to professional nursing practice. In addition, nursing students must be able to quickly develop and
maintain professional, sensitive, and effective relationships with individual patients, families, students, team members, faculty and others with whom they have professional contact, regardless of circumstances. In the practice setting these circumstances can frequently be stressful and require immediate appropriate response. Nursing students must be able to control impulsive behaviors and act in a socially responsible way regarding their own behavior, recognize the same in others, and take appropriate action as warranted. The nursing student is expected to have the psychoemotional stability to function effectively under stress and to adapt to the healthcare environment, which can change rapidly and unpredictably. The nursing student must be able to experience empathy for the situations and circumstances of others and effectively communicate that empathy. Nursing students must be cognizant of their values, attitudes, beliefs, affect, and experiences, and how these attributes or experiences may influence their own perceptions, behaviors, and relationships with others. Nursing students must be able and willing to examine and change their behavior when it interferes with relationships with others so that they can function effectively and collaboratively in diverse academic and professional work environments.

**Essential Abilities: Professional Conduct** - The nursing student must be able to practice nursing in an ethical and professional manner at all times, adhering to the professional code of ethics, professional standards, and workplace/academic ethics and standards, including those standards related to the use of social media. They must possess characteristics including integrity, honesty, compassion, empathy, altruism, responsibility, maturity, respect and acceptance of differences. Nursing students must be able to engage in healthcare delivery in all settings and be able to provide care to all client populations, including but not limited to children, adolescents, adults of all ages, all genders, developmentally disabled persons, medically compromised individuals, individuals from all socioeconomic strata, and other vulnerable populations. Professional conduct is expected in both academic and clinical/community environments. Behaviors demonstrating acceptance of and respect for diversity are expected, including but not limited to race/ethnicity, gender, sexual orientation, religion, national origin, and ability/disability. Nursing students are expected to meet UW-Eau Claire’s attendance requirements in all courses and clinical activities. Academic integrity must be maintained in all clinical and classroom experiences.

Reasonable Accommodation for Disabilities

UW-Eau Claire provides reasonable accommodation to qualified students with a disability. Upon admission, a nursing student who discloses a disability and requests accommodation may be asked to provide documentation of their disability for the purpose of determining appropriate accommodations. The UW-Eau Claire College of Nursing and Health Sciences will make every attempt to provide reasonable accommodations whenever possible, but is not required to make modifications that would substantially alter the nature or requirements of courses or programs, or to provide auxiliary aids that present an undue burden. To progress in the curriculum, the nursing student must be able to demonstrate satisfactory achievement of course and program objectives, either with or without negotiated accommodations. The student is responsible for disclosing the need and engaging in the process to determine appropriate accommodations prior to the academic or other activities and is responsible for providing documentation to substantiate the disability and need for accommodations in a timely manner.

Requests for accommodation should be directed to:

**UW-Eau Claire Services for Students with Disabilities**
Centennial Hall 2106
(715) 836-5800
http://www.uwec.edu/ssd/index.htm

**Acknowledgements and References** - This policy has been significantly modified from Katz, J.R., Woods, S. L., Cameron, C.A., & Millam, S. (2004). Essential qualifications for nursing students. *Nursing Outlook, 52*, 277-288, as well as informed by these other key sources:


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Other Available Resources

Study Skills
Students are urged to seek assistance early if they encounter difficulties in such areas as writing skills, mathematics, reading speed and comprehension, note taking, and preparing for or taking examinations. The course instructor or your academic advisor can often help you to correct the difficulty; some students will wish to make use of special study helps such as tutoring or short courses. Ask your advisor to refer you, or simply go to the Academic Skills Center and ask for evaluation of your problem and assistance.

Services for Students with Disabilities
Academic accommodations are sometimes available for students with disabilities including learning disabilities. Admitted students seeking accommodations must provide disability documentation and should make their special needs known in advance to insure that appropriate accommodations can be arranged prior to the beginning of classes. Information about necessary documentation and obtaining services is available from the Coordinator of Services for Students with Disabilities located in Centennial Hall.

Study Abroad Opportunities
In addition to the University’s international education programs, the Nursing Program is expanding opportunities for international education. The University and faculty continue to evaluate coalitions with international colleges and universities that may result in study-abroad opportunities. Many of these experiences are affordable and funding may be available. For further information regarding study abroad through the Nursing Program, contact your faculty advisor or the Office of International Education. Students planning to study abroad must work with their advisor to complete the Nursing Program Plan Change form (see Blugold Insider on Nursing Website). This form must be completed early in the process, concurrent with making application to the center for International Education.

Office of Multicultural Affairs
The UWEC Office of Multicultural Affairs, located in Centennial Hall, Room 1106, coordinates services for multicultural and ethnically diverse students. Support for academic needs, financial assistance, personal support, and cultural resources are available through this office. See https://www.uwec.edu/multicultural/.

Financial Aid Office
The Financial Aid Office, https://www.uwec.edu/finaid/index.htm, is located in Vicki Lord Larson Hall 1108 (see Blugold Central Office). Besides information regarding different types of financial aid, the website also provides scholarship listings. Emergency grants are available through the Dean of Students Office; the grants are intended for emergencies such as a house burning down. Contact the Dean of Students Office when these circumstances occur. Emergency short-term loans are available through the Financial Aid Office, funded by the Foundation Office. These must be repaid in 30 days and therefore are only a Band-Aid for financial difficulties. The loans are meant for circumstances such as when a car breaks down or a paycheck is delayed and the student is expecting to have money for repayment within a month.

Campus Harvest Food Pantry
The Campus Harvest Food Pantry is located in Schofield Hall, Room 4. The food pantry is available to students that self-identify as in need of supplemental food assistance. It is open exclusively for university students.
Center for Awareness of Sexual Assault (CASA)
CASA is located in 2119 Vicki Lord Larson Hall, http://www.uwec.edu/CASA/, and is a sexual assault support service that maintains a victim centered approach. Services are free and confidential. 715-836-4357.

Gender & Sexuality Resource Center
The Gender & Sexuality Resource Center, https://www.uwec.edu/equity-diversity-inclusion/edi-services-programs/gender-sexuality-resource-center/, is located in Davies Student Center 220M, 715-836-2693, and provides resources, information, programming, events, and training to foster an inclusive atmosphere on campus and in the greater community. Of particular note is the Safe Space Training it provides. Under its umbrella are the following additional resources that provide a safe space and an informal lounge/study space for students to gather:
   - Women’s Resource Center, located in Hibbard 311C.
   - The Bridge: LGBTQIA+ Resource Center, located in Davies 229 (2nd floor, next to the Bookstore).

TRANS at UWEC
As part of the Gender and Sexuality Resource Center, resources specifically for Transgender students can be found on this website: https://www.uwec.edu/equity-diversity-inclusion/edi-services-programs/gender-sexuality-resource-center/trans-at-uwec/, including information on changing one’s gender identity and preferred name in CAMPS, gender inclusive housing, and health care.
   - The following website provides information on the use of personal pronouns: https://www.mypronouns.org/

Bias Incident Reporting Tool (BIRT)
The Bias Incident Reporting Tool, https://www.uwec.edu/DOS/resources/birt.htm, is available for anyone who is aware of and would like to report a bias/hate incident.

Veterans Center
The Veterans Center, http://www.uwec.edu/dos/programs/veteran/, located in Schofield 20, is a meeting and information place for veteran students, faculty, and staff. It provides information about resources specifically for veterans, including access to support groups and a telehealth network through a partnership with the Veterans Administration Hospital in Minneapolis.

Campus Student Organizations
A variety of student organizations are available at UWEC and are listed on the following website: https://www.uwec.edu/Activities/organizations/searchorgs.htm. Organizations specifically involving nursing students are the Eau Claire Student Nurses Association, the American Assembly for Men in Nursing, and the Sigma Theta Tau International Nursing Honor Society-Delta Phi Student Advisory Board. However, there are many student organizations related to Culture and Identity, including the Black Student Alliance, Chinese Students and Scholars Association, International Student Association, Student Organization of Latinos/Latinas, Hmong Student Association, Inter-Tribal Student Council, and Pride, among others. A Veteran’s Club also exists.

Eau Claire Student Nurses' Association
ECSNA provides an excellent opportunity for students to prepare for professional activities beyond graduation. Students have opportunity to develop leadership skills through accepting offices in ECSNA. See Appendix for further information.

Learning Resource Center
Information on the Learning Resource Center and computers available in the Nursing building is contained in the Appendix of this handbook. The Appendix contains information about the Eau Claire campus nursing LRC description and procedures, information on other libraries available, and information about the Marshfield site library resources.
Dean of Students Office
The Dean of Students Office, Schofield 240, provides a wide variety of essential services relating to academic and non-academic conduct, military leaves of absence, extended absences, and university withdrawals.

Health Services
Main Campus: The Student Health Services clinic on the main campus is located in Crest Wellness Center and provide acute, chronic and preventive health care for registered students. Please see their website for hours of operation. In addition to caring for students who are ill, Health Services also provides health education and programs oriented toward wellness, exercise nutrition, stress management, high-risk behaviors, reproductive health, and family planning.

There is no charge for student visits to the Student Health Service, but students must pay for prescriptions, special tests, any emergency room or other hospital charges, and medical care that is beyond the scope of Health Service practice. All nursing students (Eau Claire and Marshfield) are required to carry health care insurance if not covered by family policy. More information on the health services available is located on the UW-Eau Claire website at www.uwec.edu/shs.

All expenses associated with health surveillance and care are borne by the student unless the Student Health Service specifically indicates otherwise. Students are not covered by health or accident insurance by UW-Eau Claire, the practicum facility, or the practicum institution. In addition, workers’ compensation insurance does not cover students. For example, if a student suffers a needle stick or is injured while in practicum, they are personally responsible to pay for medical bills. Nursing students are required to maintain health insurance for the duration of their education. Students must be able to provide proof of health insurance coverage if requested by clinical agencies. Students are under a continuing obligation to notify the dean’s office of the college of any lapse in personal health insurance coverage.

Marshfield Site: Marshfield site students are able to use the Eau Claire main campus student health services as described above.

Counseling Services
Main Campus: Counseling services, located in Vicki Lord Larson Hall 2122, are available to assist students with a variety of issues such as family or personal emergencies, alcohol and/or drug difficulties, eating disorders, depression, anxiety, major stressors, or emotional concerns. Assistance can be provided in evaluating and managing mental health concerns, as well as counseling and education to assist in preventing mental health concerns. If medications are required, counselors and licensed psychologists are able to provide services in collaboration with Student Health Services or the student’s own health care provider, as desired by the student. The Dean of Students’ office is also a resource for students.

Marshfield Site: Students at the Marshfield Site may obtain counseling services by contacting the Marshfield Site Coordinator who will be in touch with the Director of UWEC Counseling Services.

The Rest Nest
The Rest Nest is located in Room 5011 of McIntyre Library and is a place for students to relax and de-stress.

Advising, Retention & Career Center (ARCC)
ARCC is located in Vicki Lord Larson Hall 2100 (https://www.uwec.edu/academics/academic-support/advising/) and is the location of centralized advising on campus. It houses the academic advisers for the Life and Health Sciences cluster. All pre-nursing and traditional undergraduate program nursing students are assigned an academic adviser from the Life and Health Sciences cluster. Second degree students, BSN Completion students, and Marshfield Site students do not have ARCC advisers and instead are advised by faculty/IAS in nursing. ARCC also includes Career Services. Of note, Handshake is a Career Service recruiting platform for finding jobs and internships and for networking. The ARCC website provides a number of advising resources.
Student Rights and Opportunities

Student Academic Grievance Procedures
The Department of Nursing recognizes the value of student concerns and therefore addresses student complaints or grievances in the following manner:

The University of Wisconsin-Eau Claire has an appeal and grievance policy governing academic matters. This policy defines the general rules regarding what issues may be appealed and the procedure to be followed for filing a grievance. The College of Nursing and Health Sciences operates in conformity with the University academic grievance procedures and policies.

The University defines an academic grievance as an allegation by a student of substantial and unjustified deviation, to the student’s detriment, from any of the following:

1. Officially announced or published policies, procedures, and/or requirements regarding admission into programs, schools, or individual classes;
2. Officially published grading policies of the University;
3. The instructor’s requirements for a course as announced to the class at the beginning of the semester;
4. The instructor’s own grading policies as announced to the class or as demonstrably applied to other students in that same class.

Before submitting a formal grievance, the Informal Resolution Procedures of the College of Nursing and Health Sciences are to be followed. The Informal Resolution Procedures must be initiated within 30 days of the conclusion of the term when the alleged deviation occurred and prior to submitting a formal academic grievance.

The informal resolution procedures include the following steps:
1. The student should first meet with the person (i.e., respondent) to whom the grievance is directed (e.g., instructor or department chair).
2. If resolution is not achieved at any level, the student may consult with the person at the next level of decision making. Students should follow the appropriate consultation protocol sequence: instructor, course coordinator, department chair (undergraduate)/program director (graduate), associate dean. Students enrolled in online degree programs should consult their program director.

If resolution is not achieved through the informal resolution process, and the student wants the grievance to be considered further, the student must file a Formal Student Academic Grievance and follow that procedure. The student will be directed by the associate dean with whom they have been working.

Formal Student Academic Grievance Procedure
If the student is not satisfied with the results obtained by following all of the above applicable procedures for informally resolving the concern and wants the grievance to be considered further, the student may file a Formal Academic Grievance according to the procedures established in the UW-Eau Claire grievance policy (available at the Dean of Students Office website).

Other information of interest that can be found at the UWEC Dean of Students website includes university policies on codes of conduct, affirmative action, and sexual harassment. Students are encouraged to familiarize themselves with this information.

Approved 12/5/19.
General Suggestions
If students have a complaint about or a suggestion for improvement of a course or some aspect of the Nursing program, they are encouraged to make those thoughts known to the Nursing Department faculty/IAS and administration. The department faculty/IAS strive to improve the educational experiences for students in the programs. Students are encouraged to talk about their ideas with academic advisors, course instructors, the department chair, Assistant or Associate Deans, or the CONHS Dean. Student concerns may be referred to student representatives on department committees, who may talk with committee chairs about putting the item on a meeting agenda. Students are permitted to attend department meetings, which are open, to present requests or ideas. They may also wish to include their ideas for course/program improvement on course evaluation forms or as part of their response to student surveys.

Student Rights
Evaluating Educational Experiences - Students have the opportunity to participate in the evaluation of their educational experience. The Nursing Program offers this opportunity through a variety of mechanisms. Each semester students have a chance to provide feedback to the Department about each course and the instruction they receive. Normally, evaluations are done at the end of the semester and within the classroom setting. The results of student evaluations of faculty are not shared with faculty until after grades have been turned in for that semester. Course evaluations are reviewed on a regular basis by the department curriculum committee and where needed, recommendations for changes are made to the Department of Nursing faculty.
VI. Clinical Experiences

Health Protection
Each student is expected to promote and maintain their own optimal level of health. Adequate rest, exercise, recreation, and a balanced diet, including an adequate breakfast, are important for both personal health and successful completion of the nursing program. Regular dental care and early treatment for physical and emotional illness are essential.

Students are taught to protect themselves and others from such hazards as radiation and infection, and must assume responsibility for doing so.

Reporting Illness
Procedures for notifying faculty and agency or client are outlined in the course syllabus.

Control of Infectious Diseases (for protection of self and others)
The requirements regarding immunizations and monitoring for infectious diseases are in the nursing section of the University Catalog. These are in conformity with state statutes and local institutional policies regarding persons who work with patients/clients in health care settings. More expectations may be added by clinical agencies. Failure to comply will result in the student's forfeiture to engage in clinical practice activities. Any costs incurred will be borne by the student.

Upper respiratory infections (including colds)
Adequate fluid intake and rest are advised. Medical care is recommended for other than simple colds. Students with infection, cough, fever, sore throat, and/or "drippy noses" are not permitted to attend clinical laboratory.

Intestinal infections
Students may be excluded from clinical laboratories if communicable disease organisms are present or suspected. Surveillance is carried out through the Student Health Services.

Requirements for Clinical Experiences

CPR Certification
CPR certification at the Basic Life Support for Healthcare Providers (American Red Cross) or Basic Life Support (BLS) Provider (American Heart Association) level is required. Be sure to recertify before the expiration date indicated on the card. Evidence of current certification must be uploaded to CastleBranch.com.

Background Checks
Based on Wisconsin State law, clinical agencies must have completed background checks for all students. The College of Nursing and Health Sciences requires students admitted to the nursing programs to complete background check materials which are submitted by the students to CastleBranch.com. CastleBranch.com conducts Wisconsin and out of state criminal record and healthcare fraud and abuse searches. Some clinical agencies also require the Wisconsin Department of Health and Family Services (DHFS) Background Information Disclosure (BID), a release for a Wisconsin Department of Justice Criminal Background Check. Further information regarding the Wisconsin Caregiver Law can be obtained from DHFS's Web site: www.dhfs.state.wi.us. Students participating in clinicals in Minnesota may be required to complete added background check(s) (with associated fees). Additional, including out of state, background checks (with associated fees) may be required by the College and by the clinical agencies. Clinical agencies may conduct further background checks. Admission status to the nursing program is contingent upon return of criminal background check(s) with no findings that would prevent participation in the program. Because of background check or BID findings, clinical agencies may refuse placement of students based on the findings. This may prevent progression in or completion of the program. The findings also may affect future licensure, good standing with licensure, and employment. A criminal history is not an automatic
Admitted students are under a continuing obligation to notify the Dean’s Office at the College of Nursing and Health Sciences of any new or pending charges or violations of federal, state, and local laws or the campus student conduct code that occur at any future date and during their tenure as College of Nursing and Health Sciences students. Failure to notify the college may result in loss of good academic standing in the college and an inability to progress in the program.

**Health & Clinical Record Requirements**

Students are not permitted to participate in clinical course work unless all health record information, including immunizations, TB tests, CPR certification, personal health insurance coverage, and background checks are current and cleared/approved. Please refer to the Health and Clinical Record Guidelines on the web. Some clinical sites require students to have proof of personal health insurance coverage; therefore, students must be able to provide proof of personal health insurance if asked. Students are under a continuing obligation to notify the Dean’s Office at the College of Nursing and Health Sciences of any lapses in personal health insurance coverage. All requirements are subject to change as clinical facility requirements evolve.

**Health Insurance Requirement and Health Expenses and Risks**

All expenses associated with health surveillance and care are borne by the student unless the Student Health Service specifically indicates otherwise. Students are not covered by health or accident insurance by UW-Eau Claire, the College, the practicum facility, or the practicum institution. In addition, workers’ compensation insurance does not cover students. If a student suffers a needle stick or is injured while in practicum, they are personally responsible to pay for all medical bills and therefore will need personal health insurance.

Due to occupational exposure to blood or other potentially infectious materials, health care workers are at risk of acquiring Hepatitis B Virus infection and other serious infections. Students are considered to be at increased risk for needle-stick injuries. Such accidents can also be costly (e.g., student and patient testing, ER injury management, chemoprophylaxis, and potential illness care). The student, not the College, University, or clinical agency, is responsible for these expenses should an accidental exposure occur during a clinical experience.

Some clinical sites require students to have proof of personal health insurance; therefore, nursing students are required to maintain health insurance for the duration of their education. Students must be able to provide proof of health insurance coverage if requested by clinical agencies. Students are under a continuing obligation to notify the dean’s office of the College of any lapse in personal health insurance coverage.

**Clinical Immersion Experiences**

Students who participate in international immersion clinical experiences will adhere to the protocol developed by Center for International Education (CIE). Students who participate in Domestic Intercultural Immersions (DII) will adhere to the protocol developed by the DII Office.

Students who participate in domestic immersion clinical experiences through the Department of Nursing must complete the following forms accessed through the Domestic Intercultural Immersion (DII) office: Emergency contact information, Medical Form and Waiver Form. The Deans of Students may be contacted to obtain additional information. These forms must be completed prior to the immersion experience as directed by course faculty. The information provided by self-disclosure will be reviewed by course faculty and may be shared with appropriate administrative offices, including the Dean of Students as needed. Information on the medical self-assessment is confidential.

Approved 5/15/14
Guidelines for Selection of Undergraduate Teaching Assistants
(both for teaching apprenticeship courses and non-credit bearing instances):

1. Minimum overall grade point average (GPA) of 3.00
2. Minimum grade of B in the nursing course for which the student will be a teaching assistant
3. Minimum grade of B in all prior and current (in progress) required nursing courses
4. No past or current clinical contracts
5. No past or current instances of probation within the College
6. Currently in good standing within the College
7. Demonstrated interest in serving as a teaching assistant

Approved by Dept. 12/4/14.

Clinical Guidelines and Policies

Policies Relating to Injuries and Exposure Risk in Clinical and Skills Lab Settings

1. Faculty/IAS and students are responsible for exercising reasonable prudence to prevent injury or risk. This means that faculty/IAS must be aware of risks inherent in situations to which students are exposed and assignments must be structured in a way that takes into consideration the student's capacity and readiness to deal with the risks. Faculty/IAS and students will comply with approved safety precautions so as to not compromise their own safety or that of others in the vicinity. Students having any work restrictions due to surgery, illness, pregnancy, etc., should notify their clinical instructor immediately.

2. Both students and faculty/IAS will refer to "Guidelines to Promote Safety and Prevent Infection with Bloodborne Pathogens for Students and Faculty/IAS in All Clinical Experiences".

3. All accidents, injuries, and exposure incidents (including needle sticks), either to themselves or their patients, are to be reported promptly to the supervising faculty/staff and appropriate agency personnel.
   b. OFF CAMPUS – follow the agency policy(s) for reporting and follow up.

4. The instructor is responsible for recording the event following the procedures of the College of Nursing and Health Sciences and clinical agency.

5. Documentation of injury or exposure to a bloodborne pathogen, occurring to a student or College of Nursing and Health Sciences employee:
   a. ON CAMPUS – complete the UWEC Incident Record of Injury or Exposure Risk form. Reporting form is available on the department website under “forms”. After all signatures are obtained, submit the form to the Dean’s office (Main office at the MF site). This record is not kept in the individual’s personal file.
   b. OFF CAMPUS
      1. Complete the clinical agency incident report. Do not submit this to the CONHS. This is for the clinical agency only.
      2. Complete the UWEC Incident Record of Injury or Exposure Risk. This form is available on the department website under “forms”.
      3. Submit only the UWEC Incident Record of Injury or Exposure Risk. After all signatures are obtained, submit the form to the Dean’s office (Main office at the MF site). This record is not kept in the individual’s personal file.
c. Nursing faculty/IAS and other CONHS employees who are injured or exposed must also complete the UWEC Worker Compensation form. Submit completed forms to the UWEC Human Resources Office, and a copy to the COHNS Deans’ office.

6. Students must be advised that they should notify their health insurance carrier of their academic activities involving bloodborne pathogenic materials. Neither UW-Eau Claire departments nor the Student Health Service will fund post-exposure follow up procedures should the student become exposed to bloodborne pathogens (UW-Eau Claire Exposure Control Plan, April, 2007).


7/88
Reviewed 9/91
Rev: 8/00
Revised 10/09; 7/2012
Revised 1/2015

Policy Regarding Bloodborne Pathogens
Control of Bloodborne Pathogens is a principal concern of the College of Nursing and Health Sciences (COHNS) Department of Nursing, including nondiscriminatory treatment of students and faculty/staff who may have a bloodborne illness, faculty/IAS and student education, and exposure or infection control issues that may arise with nursing students, department faculty/IAS, and clients served in clinical practice.

Objectives
1. Protection of the rights and welfare of patients, employees, students, faculty/staff, and the public who come in contact with each other through various Department of Nursing programs and activities.
2. Continuation of the Department of Nursing’s ability to carry out its mission in the setting of bloodborne pathogen concerns.

Definitions of Bloodborne Pathogens
HIV antibody positive - A person who has serum antibody to Human Immunodeficiency Virus as confirmed by reliable testing.

Bloodborne pathogens - Include, but are not limited to, Hepatitis B, Hepatitis C, Human Immunodeficiency Virus (HIV), Syphilis, Malaria, and Creutzfeldt-Jakob Disease.

AIDS- Acquired Immune Deficiency Syndrome as defined by the Center for Disease Control (CDC).

Direct patient contact- Care or contact with a patient that requires direct physical contact. Contact with mucous membranes, body fluids/excretions, or performance of an invasive procedure are of particular concern.

Admission and retention of students: Nondiscriminatory treatment
The same admission and retention policies prevail with regard to the person who is HIV antibody positive, has AIDS, Hepatitis C, or other bloodborne illness, as for any student admitted to the program with a known medical condition.

Decisions regarding admission or retention for the student with a known bloodborne illness are based on the following:
1. The student’s condition is relatively stable and well controlled.
2. The student is able to carry out activities essential to meeting course and program objectives.
3. The student is able to function in the program without significant risk to self or others.
4. The student is regarded as one who will be able to carry out the responsibilities of professional nursing practice after graduation.

Education: Faculty/IAS and Students
Education regarding Bloodborne Pathogens including current OSHA standards is required annually for students and Department of Nursing faculty/IAS. (OSHA 29CFR1910.1030.) Education materials are available electronically on the CONHS D2L/Canvas website and will be updated and maintained by the Director of the Clinical Learning Center.

Bloodborne Pathogen Annual Requirement
Evidence of completing the annual update will be maintained as indicated below.

- Faculty/IAS: It is the responsibility of the faculty/IAS member to view the online materials and pass the quiz. Department Chair or designee will monitor D2L/Canvas site for successful completion of quiz. The bloodborne pathogen quiz must be completed by October 1 of every academic year.
- Students: Annually, it is the responsibility of the student to view the online materials and pass the bloodborne pathogen quiz. This requirement will be met in the following courses prior to the start of on-site clinical experiences: NRSG 267, 357, and 457, CND 310, CND 480, and NRSG 701, 709, 719, 722, 730, 741, 750, 805, 811, 813, 827, 831, 833, and 852. Course coordinators or designees will monitor successful completion of the quiz and inform appropriate course faculty and students.

Approved by Dept. 10/17/13; updated 5/17; edits on 1/19 and 1/20.

Guidelines to Promote Safety and Minimize Risks Associated with the Instruction and Practice of the Technical Skills within the Department of Nursing (On Campus, Skills Lab or Nursing Clinic areas)

1. Items coming in contact with mucous membranes or resulting in breaks in skin or vascular integrity will be considered as potentially infectious and handled with universal precautions to prevent transmission of infectious agents.
2. Puncture-resistant containers will be used for the disposal of potentially infectious disposable items.
3. Potentially infectious reusable items such as thermometers and basins will be cleaned and replaced according to established skills lab protocols.
4. All reusable items used in practice of parenteral procedures (syringes, IV equipment, sponges) will be sterile/clean with first use of each semester.
5. All invasive procedures performed by students require faculty supervision.
6. Practice of technical skills by students in the Department of Nursing will take place during designated lab hours.
7. Condition of equipment and supplies used for practice of technical skills will be monitored by a responsible faculty member.
8. Students are responsible to promptly report any injury sustained during learning experiences to a faculty/IAS member.
9. Completed UWEC Incident Record of Injury or Exposure Risk form will be submitted to the CONHS Dean’s office. The completed form will then be kept in the Dean’ office.

http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm
http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf

Approved 9/91
Revised 10/09
Revised 1/2015
Guidelines to Promote Safety and Prevent Infection with Communicable Diseases
for Students and Faculty/IAS in all Clinical Experiences. ALL CLIENTS WILL BE CONSIDERED POTENTIALLY INFECTED
WITH COMMUNICABLE DISEASES.

1. Barrier precautions must be used to prevent contact with blood and other body fluids
   including potential for splash.
   a. Gloves, whenever contact is likely.
   b. Masks, protective eyewear, face shields, gowns or aprons if potential for generation of droplets of blood
      or other body fluids exists.

2. Following removal of gloves, hands and other skin surfaces must be washed with soap or other cleansing agent
   immediately and thoroughly if contaminated with blood or other body fluids.

3. If a glove is torn it must be removed and promptly replaced with a new glove.

4. Individuals who have exudative lesions or weeping dermatitis should refrain from all direct client care until the
   condition is resolved.

5. Clinical agency policy must be followed when providing immediate newborn care.

6. To prevent needle stick injuries, needles should not be recapped, purposely bent or broken by hand or removed
   from disposable syringes after use. After they are used, disposable syringes and needles or other sharp
   instruments should be placed in puncture resistant containers for disposal according to Institutional procedures.

7. Mouthpieces, resuscitation bags or other ventilating devices must be used in the event that resuscitation becomes
   necessary.

8. Spills of blood or other body fluids must be cleaned with soap and water, then rinsed with a 1:10 solution of 5%
   sodium hypochlorite (household bleach) or an equivalent disinfectant. Housekeeping personnel must be alerted
   immediately if they are to clean the area.

9. Institutional procedures will be followed relative to the handling of soiled or contaminated linen. Gloves must be
   worn whenever handling contaminated equipment or materials.

10. All other agency infection control policies must be followed for students and faculty/IAS in clinical settings.

http://www.cdc.gov/HAI/prepare/prevent_pubs.html

Centers for Disease Control. (2013). Updated U.S. Public Health Service guidelines for the management of occupational exposures to
HIV and recommendations for postexposure prophylaxis. Infection Control and Hospital Epidemiology, 34 (9), 1-48.

Approved 6/91
Revised 10/09
Revised 1/2015

Skills Lab Guidelines for Students

GOAL: Provide a realistic setting in which the student can learn and practice nursing skills in an environment in which
the instructor and student have adequate resources.

AIM: Provide a foundation from which to launch clinical practice, decrease anxiety, and build self-esteem.

GENERAL POLICIES:
1. Skills lab staff will be responsible for orienting faculty to use of the space, equipment, and supplies in the skills
   lab and clinic areas. Faculty are responsible for orienting students to use of the lab and clinic area.
2. Evaluation will be done regularly to assess how effectively these resources support the College of Nursing
   programs.

SAFETY:
1. Gloves will be worn when practicing technical skills involving skin contact with blood or mucous membranes.
2. Disposable syringes, needles and other sharp items which have been used to break skin or vascular integrity will be disposed of uncapped or with a safety cap in puncture-resistant containers. Containers will be removed and processed by the UWEC Environmental Services department.
3. If an injury occurs, refer to “Policies Relating to Injuries and Risk in Clinical and Skills Lab Settings.”
4. If there is a body fluid exposure or spill of blood or other bodily fluid, refer to “Policy regarding Bloodborne Pathogens.”

PRIVACY AND CONFIDENTIALITY:
1. Faculty will be available whenever students are practicing.
2. Signs denoting restricted areas will be posted. Schedule will be posted when lab is in use.
3. Curtains and drapes will be used to provide privacy.
4. Doors will not be locked during practice sessions.
5. Red privacy lights, where available, will be turned on when examination rooms are in use.
6. Whenever videotaping, recording, or photographing, a signed consent from the participant will be obtained. These records will be kept by the media specialist or faculty member.

SPACE:
Each bed space contains the basic items found in a hospital room (*all but 3 bed spaces in room 234):

<table>
<thead>
<tr>
<th>Bed, pillow and linens</th>
<th>emesis basin</th>
<th>bath basin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedside table</td>
<td>fracture or bedpan</td>
<td>glove/sharps container</td>
</tr>
<tr>
<td>Overbed table</td>
<td>call light</td>
<td>hand sanitizer</td>
</tr>
<tr>
<td>Trash can</td>
<td>*suction regulator</td>
<td>*oxygen flowmeter</td>
</tr>
</tbody>
</table>

1. There is no eating or drinking (other than water in closed containers) except by arrangement.
2. Users of skills lab and clinic areas are responsible for maintenance of the area following established procedures. Allow enough time for the students to clean up the lab before leaving. It should look as good as or better than it did when you arrived.
3. Remove shoes when lying on the beds. When using lotions, creams, oils, or any liquid other than clear water, fold back or remove the bedspread.
4. Room requests should be submitted to the Skill Lab Coordinator prior to the end of the previous semester. Room Assignment Guidelines will be utilized. One-time or limited time requests will be accommodated as schedule and space permits. In case of room request conflicts, the conflict will be resolved by the persons involved. College instructional use takes priority over non-instructional use.
5. Keys to the clinic area rooms are available in the LRC for short-term sign-out and must be returned within 24 hours.
6. Faculty responsible for skills lab or clinic room activities will lock those areas when leaving.

SUPPLIES AND EQUIPMENT:
1. There is an alphabetical and categorical listing of supplies on the “S” drive. There is also a paper copy in the Skills Lab Stock Room and in room #164 (wet lab).
2. CDs and DVDs for faculty and students are available for viewing and check-out in the LRC.
3. Contact the Skills/Simulation coordinator for preferences in brand, quantity, additions or deletions of supplies to stay current with your needs. Remember that each institution changes equipment often, suggesting that we have to be flexible.
4. Course faculty who wish to make changes and/or introduce new skills, laboratory experience, or equipment will present a proposal to the Director of the Clinical Learning Center and course coordinator.
5. Course coordinators will inform the Director of the Clinical Learning Center when changes in learning experiences will cause variation in needs for supplies.
6. Equipment will be maintained in working order and cleaned on a regular basis and/or after use by the lab staff.
7. Equipment may be checked out of the Skills Lab using the “Nursing Equipment Checkout Agreement” form. Equipment will be returned in clean and working order within 24 hours or by arrangement.
8. **Lost/Found:** There is a box labeled “Lost/Found” in room 234. Any item(s) left in the lab will be placed in this box.
9. Used linen will be placed in linen bags.
10. Room supplies will be restocked by the skills lab staff. Students are responsible to bring their own stethoscope, penlight, pen, paper, and course specific supplies as directed by course faculty.

**MAINTENANCE**
1. Skills lab and clinic rooms will be clean and stocked with appropriate supplies prior to scheduled lab by skills lab staff.
2. Models and equipment will be operated and maintained according to manufacturer’s directions.

Revised 9/09; 7/2012
Revised 1/2015

**Travel and Parking**
Each student is responsible for transportation to and from, as well as during clinical experience. Community health nursing experiences may require travel; therefore, access to reliable transportation is necessary.

*Parking on the Eau Claire site* - Eau Claire bus schedules and city maps are posted in various areas. For Eau Claire campus students, certain areas are designated by authorities at HSHS Sacred Heart, Mayo Clinic Health System, and Saint Joseph's (Chippewa Falls) hospitals for student and faculty parking of cars and cycles. Temporary permits for parking may be required; if so, instructors will provide information.

*Parking on the Marshfield site* - Marshfield site parking passes and parking lot locations are issued by the hospital security office. Please contact the Marshfield site program office at (715)387-7272 if you will need to acquire a parking permit and directions for the Marshfield site.

**Policies and Guidelines Regarding Professional Relationships**

**Clinical Laboratory Experience**
Students should not be assigned to care for members of their own family or close friends. Inform your clinical instructor if assignments include such persons. Students are requested to refrain from accepting employment and entering into social contacts with clients or a client’s family while maintaining a professional relationship.

**Acceptance of Gifts**
Students are discouraged from giving gifts to faculty or accepting gifts from clients. Faculty are expected to guide students so that a climate of gift giving is not created.

**Home/Cell Telephone Numbers**
Students should not give their home/cell phone numbers or cell phone numbers to clients. They should have the clients contact them through either the clinical agency or the Nursing Department (contact cards are available through department office). This will help prevent unnecessary, unwanted, or inappropriate contacts.

**Calling of Community Health Clients**
When possible, students should call their clients during the regular workday; unscheduled calls should not be made after 9:00 p.m. or on the weekend.
Confidentiality
Special caution should be taken to maintain client confidentiality. Students should exercise caution concerning any papers that contain information regarding the health needs or other personal information about the client. The client's situation should not be discussed in other than a professional setting.

Liability Insurance
The University maintains general liability insurance that covers students while they are caring for patients or clients as part of a University course. Students should consider carrying their own liability insurance policy if they work in a nurse-related position outside of their student responsibilities.

Witnessing Legal Documents
Students should not sign as witnesses for such legal documents as surgery permits. It is also recommended students not witness wills or other similar legal documents. Refer any such requests to instructor or appropriate nursing personnel in the clinical agency.

Transportation of Clients
Students must not transport clients in their personal vehicle. Students should arrange to meet the client as needed at the health care agency.

Revised 8/12

History of Nursing Attire
Distinguishing attire has been characteristic of the nursing profession even in its pre-professional era. Attire has utilitarian, symbolic, and communicative value.

Nurse’s Cap - The nurse’s cap is a familiar symbol. Its origin was thoroughly utilitarian as well as of religious significance. Women in the religious nursing orders of the Middle Ages were garbed in the habit of their orders to provide for concealment of the hair. Long hair, which women have worn throughout most of history, was washed only occasionally, and in nursing settings was covered to keep it clean and under control. Feminine adornments began to appear on the head coverings—pleating, bands, straps, bars, shirring, and ruffles. Eventually each school of nursing had its own unique cap, serving little or no utilitarian purpose, the presentation of which more or less ushered the student into the profession after a probationary period during which the student’s fitness for the intellectual and physical rigors of nursing was determined.

As men and women began to cross the lines of previously sex-differentiated occupations, some schools of nursing dispensed with the cap. However, it has remained an enduring symbol.

The UW-Eau Claire cap was designed by Nancy Fugate Woods, a member of the first graduating class in 1968 (she later became Dean at the University of Washington). The following is an excerpt from a School of Nursing Student Handbook from the 1980s:

*The caps must be stiffened with a very heavy starch mixture. They may be soaked in the starch and, while wet, smoothed onto a very smooth, flat surface (such as a refrigerator door) to dry; or they may be ironed. The half-inch royal blue velvet ribbon is attached about one inch from the outer edge, using K-Y lubricant jelly as paste, which is readily available from drug stores. Small size tubes are available. Certain commercial laundries launder caps at reasonable cost. (Be certain to remove studs from the caps.)*

**Bars, stripes, and chevrons** - Bars, stripes, and chevrons are also symbols coupled with the nursing profession. They speak to the military part of nursing history that harks back to the Crusades when there were military orders of
men who traveled with and established hospitals for the crusaders who swept down from northern Europe toward the Middle East. Although they are masculine symbols, women nurses subsequently wore them with distinction in various branches of military settings. To that point, modern professional nursing began with Florence Nightingale in military installations during the Crimean War.

_Nursing Pin_ - Another long-standing symbol is the Nursing pin. These were uniquely designed for each school and generally displayed a blend of medical, religious, and heraldic symbols such as the Maltese Cross, Caduceus, Star of David, etc. They too, probably served a useful purpose at one time for securing certain parts of the uniform, but eventually became an acceptable decorative item to be worn on the uniform of a graduate nurse upon completion of their program.

The design for the UW-Eau Claire pin was selected from designs submitted by students and faculty. Most of the designs submitted bore a striking resemblance to the traditional diploma school pins, but Associate Professor (at the time) Bernice Wagner's proposal for an adaptation of the University's official emblem was selected. The design clearly links nursing and higher education with the tree symbolizing knowledge and life, the lamp symbolizing not only enlightenment or learning, but the lantern that had come to be associated with Florence Nightingale, and the word, _excellence_, characterizing what every UW-Eau Claire nursing graduate aspires to.

Information on ordering nursing pins is given to all seniors during the final semester of their senior year. The Nursing pin is to be worn only after the requirements for the degree have been met. Orders are placed through the UW-Eau Claire University Bookstore and the pins are awarded at a special Convocation Ceremony on commencement day. In case of loss or damage to a nursing pin, graduates contact the University Bookstore for replacement.

**UW-Eau Claire Uniform Policy – Clinical Experiences and Skills Lab**

_UNIFORM:_ Traditional and accelerated baccalaureate nursing students engaged in clinical experiences must wear the official College of Nursing and Health Sciences nursing uniform. The uniform visibly differentiates students from clients and others in health care settings. The uniform consists of a royal blue top and pants.

Uniforms are to fit appropriately and be in good condition. Uniforms pants are not to be altered by pinning or rolling and **may not drag on the floor.** No substitutions of color or style are acceptable. The uniform top must have the UWEC nursing patch sewn above the LEFT breast and the name pin is worn above the RIGHT breast.

A plain WHITE tee shirt, short or long sleeve, may be worn under the top. Sleeves must be able to be pushed to the elbow. The uniform is to be laundered after each wearing and ironed, if needed, to provide a neat, professional appearance. The uniform is worn ONLY in clinical settings or in the skills lab.

_lab coat:_ All students will wear the white lab coat **with the UWEC Nursing patch SEWN on the LEFT sleeve** when visiting agencies or carrying out activities not related to direct patient care or in accordance with agency policy. Lab coat is to be laundered and ironed to maintain professional appearance and personal protection.

_name pin:_ A UWEC College of Nursing name pin will be worn during all clinical assignments unless otherwise directed by the instructor or agency. A UWEC name pin will be provided. The designated staff member at either the Eau Claire (Nursing Room 127) or Marshfield site (program office) will order name pins and distribute them. If the name pin is lost, students are expected to order a replacement through the Nursing support staff at either the Eau Claire (Nursing Room 127) or Marshfield site (program office). Requests for replacements also can be made through the following link to a name pin request form:  [https://uweauclaire.qualtrics.com/jfe/form/SV_e9TqFdZX3PWpcHz](https://uweauclaire.qualtrics.com/jfe/form/SV_e9TqFdZX3PWpcHz).
Attire in Skills Lab and Clinical Practice:

**Practice and open lab:** Lab coat and name pin must be worn when in the lab. Hair must be contained as in the clinical setting. Clothing should cover abdomen and torso front and back with no visible cleavage, tattoos, or underwear. Jeans should be intact. **Pant legs may not drag on the floor.** Closed-toed shoes are required.

**Hospital Units:** Attire must comply with College and agency policies. Contact your instructor with questions.

**Community Health Visits and agencies:** Attire is determined by the clinical instructor and the agency, and is expected to be consistent with professional street clothes. Lab coats and/or name pins may be required. Contact your clinical instructor for questions.

**Professional appearance:** Meticulous personal cleanliness, good grooming, and neat appearance are essential.

**Shoes:** Shoes are to be white, cleanable, and worn ONLY in the lab or clinical setting. No open-toed shoes, crocs, or clogs are acceptable. Athletic-type shoes are acceptable if they fit the above criteria and do not detract from professional appearance.

**Hosiery:** Socks or hosiery must be white or neutral (beige) and cover the ankle.

**Jewelry:** Rings other than plain wedding bands are not acceptable for patient care. Other jewelry including pendants, necklaces, dangling earrings, and jewelry for other body parts (i.e. pierced eyebrows, nose, tongue, lip) may not be worn. Some jewelry may scratch clients, serve as a reservoir of infection, or in other ways be offensive. Students with pierced ears may wear ONE small stud earring in each ear lobe. Tattoos must not be visible.

**Nails:** Nails should be clean, smooth, and of a length that does not interfere with client care, scratch, or injure clients. No artificial nails, nail jewelry, or nail polish.

**Hair:** HAIR MUST BE CLEAN AND CONTROLLED so that it remains in place when leaning forward, and so that the hands need not be used to push it back during client care. Extreme hair colors and styles are not acceptable. Plain pins or clasps may be used to anchor the hair. Beards and moustaches must be short, neatly trimmed, well groomed, and if applicable, allow for fit respiratory isolation/protection masks.

**Undergarments:** Required and discreet.

**Equipment:** Beginning with the first clinical laboratory course (NRSG 267), a watch with a second hand and plain band, black pen, bandage scissors, penlight, ruler, OSHA approved eye protection, and a stethoscope are required. Students entering NRSG 317 will purchase a skills bag containing clinical practice supplies and equipment.

**STUDENTS NOT DRESSED APPROPRIATELY OR IN PROFESSIONAL APPEARANCE MAY BE ASKED TO LEAVE THE CLINICAL SETTING OR SKILLS LAB AT THE DISCRETION OF THE CLINICAL INSTRUCTOR.**

1/15

Community-Based Clinical Practicum Guidelines

Guidelines for Clinical Experiences in Public Health Agencies, Residential Facilities, Homes, and Other Community Settings:

Community-based practicums involve specific planning to maximize effectiveness and maintain safety. The following guidelines are designed to help meet the above aims.
Clinical practicums may occur in community-based settings, in order to meet specific program requirements and course objectives. The purpose of community-based practicums is to learn to assess, plan, and deliver care for families, communities and populations (e.g., in schools, correctional facilities) in their natural environment.

**Professional Conduct and Safety Guidelines**

1. Standards of professional conduct and communication, as well as protection of client confidentiality, apply in community settings as in all other clinical settings. Additionally, conduct and communication are expected to be culturally sensitive.

2. Dress code guidelines of the clinical agency, Department of Nursing, and specific syllabus instructions are to be followed.

3. Professional nurse-patient boundaries must be maintained. Only agency contact information is to be shared with clients for follow-up.

4. Visit preparation and communication with the clinical instructor or preceptor is necessary for maximum safety and effectiveness. Most clinical visits are made by students in pairs. Specific timing, goals, and itinerary for the visit must be developed in advance with instructor or preceptor knowledge and approval. For example, students must be familiar with the setting’s geographic location and travel by the safest direct route. Remember that cell/GPS service may not be available in rural areas.

5. Student safety is of highest priority. Maintain alertness to identify hazardous circumstances in the setting. If a student feels unsafe for whatever reason (e.g., alcohol or other substance use in the home, developing altercation, or visible presence of a weapon), withdrawal from the situation is required. Immediate contact with the clinical instructor must be made and documentation completed as instructed.

6. Students are encouraged to practice automobile safety precautions. Examples include being aware of fuel levels, weather conditions, and emergency numbers. Lock automobile doors; do not display valuables. Following a home or community visit, travel to a safe place, such as the agency, university, or local library to complete documentation. Please be aware that student driver authorization may be a requirement, depending upon the circumstances of university related travel.

Approved 4/8/16
VII. Toward Graduation and Beyond

Licensure
Licensure for the practice of professional nursing is mandatory in almost all jurisdictions (generally the States) in the United States. It is, therefore, illegal to engage in professional nursing for pay (or considerations such as room and board) in any part of the U.S. without a current, valid license, or a temporary permit from the jurisdiction, state, or territory in which a person wishes to work.

Once licensed in this country, a professional nurse in good standing can obtain licensure in another jurisdiction through endorsement, which does not require retaking the licensure examination. Information can be obtained by writing the Board of Nursing in the new jurisdiction. The Board of Nursing in the jurisdiction of original licensure forwards necessary information to the new jurisdiction. There is a fee for forwarding such information.

Initial licensure and endorsement fees and procedures vary from one jurisdiction to another. One may practice in Wisconsin with a temporary permit that covers one after graduation, but before results of the State Board examination are known. You must have your supervisor’s signature in order to obtain a temporary permit. Not all jurisdictions permit practice under temporary permit. Failure to pass the State Board examination may result in revocation of the graduate nurse temporary practice permit.

State Board Examination
To be registered (licensed) to practice professional nursing, graduates of approved programs must pass an examination, administered under the authority of the State Board of Nursing. The computer-assisted test, known as the NCLEX, may be scheduled soon after graduation; examinations are given in all jurisdictions throughout the United States. Information on the NCLEX exam and the application is available online at: https://www.ncsbn.org/index.htm

Application for the licensure examination is discussed in the NRSG 487 (TBSN) class. Anyone planning to take the examination in another jurisdiction is advised to write the Board of Nursing in that jurisdiction to obtain an application from that jurisdiction. Addresses for other State Boards are available on the Internet and in the office of the Dean.

It is highly recommended that students study and fully prepare for the NCLEX exam, including developing an effective study plan while progressing through the nursing program. Several standardized examinations are provided during the program, to assist students in gauging their level of preparation for NCLEX. Students who do not pass the NCLEX on their first attempt are strongly advised to seek study assistance and may be eligible for financial support for a review course through the Nursing Student Support Fund (if funds are available). To apply for these funds, the student or a sponsoring faculty member submits a letter requesting support to the Student Affairs and Undergraduate Admissions Committee. A review course registration form completed by the student must accompany the request.

IMPORTANT!
One of the requirements in applying to take the licensure examination is to declare your status with regard to violations of the criminal codes, other than for minor traffic violations. In most states, the Dean must sign a recommendation that your graduation has been certified. Graduations are certified through the Registrar’s Office and may not be completed until two weeks after graduation. Verification of program completion is sent as quickly as possible after the close of the semester, a date by which it is generally safe to assume that you would have your permit given to you. Be certain that all financial obligations have been met or arranged for prior to leaving campus to avoid delays in verification of program completion.
**Employment Opportunities**

Information about specific employment opportunities is posted on bulletin boards in the first floor hallway of Schofield Hall, in a special area for nursing in the Career Services Office, on the bulletin boards in the College of Nursing and Health Sciences LRC, and at the Marshfield site ground floor bulletin board. "Job files" or jobs arranged by region are available for use in the Eau Claire site LRC. Job opportunities received after graduation are also sent to the LRC.

**Career Fairs**

The Eau Claire Student Nurse Association organizes job fairs when either representatives or individuals of hospitals and other health care agencies come to campus for recruiting. Visits are announced in the *Spectator* and/or posted in the College. Notices of visits may be obtained and appointments for interviews made with Career Services.

**Alumni Status**

It is important to keep the Dean’s office aware of your current address. From time to time, the College of Nursing and Health Sciences sends out surveys regarding employment and satisfaction with the nursing program. Survey responses assist with federal funding for the College, accreditation, and ongoing program improvements. The College of Nursing and Health Sciences also maintains a Nursing newsletter in which alumni and Nursing program accomplishments and news is highlighted. Please send your information to the College Dean’s office so we can keep your classmates informed of your accomplishments.

**Checklist for Graduating Seniors**

- Apply for graduation on BLUGOLD no later than the end of the first week of undergraduate priority registration for the semester of intended graduation. Failure to apply for graduation on time may result in the postponement of graduation. Although only two commencement ceremonies are held (May and December) students may graduate in January, May, August, or December. Information about graduation can be found at: [http://www.uwec.edu/registrar/student/graduation.htm](http://www.uwec.edu/registrar/student/graduation.htm)
- Your record will be reviewed for graduation only after you have registered for your final term. At that time, an e-mail will be sent to you indicating your eligibility to graduate. Be **SURE to review your degree audit after your final registration** and address any unmet requirements immediately.
- Order your cap and gown for commencement from the Bookstore. The Bookstore will send specific information to the Marshfield site students in reference to cap, gown, and graduation announcements.
- The nursing pin may be worn only after the requirements for the degree have been met. Order the UW-Eau Claire Nursing pin from the University Bookstore on the Eau Claire campus. Prices vary considerably, depending on whether you order gold case, gold-filled, or gold. If the graduate wishes to delay purchase, the pin may be purchased at any time following graduation by contacting the University Bookstore.
- Attend to mailings/emails sent to you from the Registrar's office. Any problems with your academic record or with graduation requirements should be reported to your academic advisor at once.
- Attend the class (NRSG 487) regarding licensure examination (not required for R.N. students).
- Apply for NCLEX examination and licensure.
- Help to choose a student speaker from both the Eau Claire and Marshfield sites for the Convocation Ceremony. Nursing pins are presented during the convocation ceremony.
- Pay or make arrangements with the Business Office for payment of any money owed to the University. (A hold is placed on transcripts and other records until book and parking fines are paid, exit interview form for loans are filed, etc.)
- Attend graduation and Convocation Ceremonies (not required, but highly recommended). The Convocation Ceremony takes place in Schofield Auditorium between the morning and afternoon graduations.
Appendix A: Sigma Theta Tau (Sigma)

Sigma Theta Tau is the international nursing honor society that recognizes students in baccalaureate and graduate nursing programs who demonstrate superior scholastic achievement, evidence of professional leadership potential, and/or marked achievement in the field of nursing. Six students at the Indiana University Training School for Nurses founded the society in 1922. The name was chosen using the initials of the Greek Words, STORGA, THAROS, TIMA, meaning Love, Courage, Honor.

From a beginning of six members and one chapter in 1922, the organization has grown to more than 12,000 members and 263 chapters. Sigma Theta Tau International is a member of the Association of College Honor Societies and is professional and scholarly, rather than social in its purpose.

The local chapter, Delta Phi, was granted a charter on April 25, 1980.

Membership is by invitation. Undergraduate students must be in the upper one-third of the class to be eligible for membership (please see Sigma Theta Tau website for current information: http://www.nursingsociety.org/default.aspx). A percentage of the class may be elected as juniors with the remainder elected in the spring of their senior year. Graduate nursing students and professional nurses in the community members may also be recommended for membership.

As a member of Sigma Theta Tau, one joins a global community of scholars who perceive their professionalism with a special sense of commitment to research, education, and quality patient/client care.

Active membership in Sigma Theta Tau carries numerous privileges. These include:
- Opportunity to remain abreast of scholarly research developments, social and educational trends, conference, and seminar highlights that are covered in The Journal of Nursing Scholarship, Reflections Online, Worldviews on Evidence-Based Nursing, and other special publications.
- Professional growth through conferences, seminars, and workshops. Members receive reduced conference fees.
- Leadership opportunities in nursing and in the community at large.
- Recognition programs in support of achievement, leadership, service, education, and research.
- Priority when applying for National and Chapter research grants.
- An implicit recommendation in relation to employment and admission to graduate school.

Many faculty and instructional academic staff are Sigma Theta Tau members and officers. Talk with them about the Society.

Delta Phi Student Advisory Board (DPSAB)
In February 2016, the Delta Phi Student Advisory Board (DPSAB) was formed as an ad hoc student standing committee. The goals were to encourage student member assistance with carrying out the duties of the Delta Phi Chapter as well as to promote student engagement and participation in the honor society chapter. In Fall 2016, the UW-Eau Claire Student Organization approved DPSAB as an official student organization at the University. DPSAB provides for leadership opportunities for students both in Eau Claire and in Marshfield and links the Delta Phi Chapter to the rest of the UW-Eau Claire campus, students, and student organizations.
Appendix B: National, Wisconsin, and Eau Claire Student Nurses’ Association

WHAT:  Eau Claire Student Nurses’ Association (ECSNA) is the local unit of the state constituent of NSNA. This organization represents students at both the Eau Claire and Marshfield sites. Officers are elected at both Eau Claire and Marshfield.

WHO:  Membership in NSNA/WSNA/ECSNA is open to all undergraduate students enrolled in state-approved programs leading to licensure as registered nurses; all pre-nursing students enrolled in programs designed as preparation for entrance into an undergraduate program leading to an AD or BS in nursing; and registered nurses enrolled in undergraduate programs in nursing.

WHY:  The purpose of NSNA/WSNA/ECSNA is:
1. To assume responsibility for contributing to nursing education in order to provide for the highest quality health care.
2. To provide programs representative of fundamental and current professional interests and concerns, and
3. To aid in the development of the whole person, their professional role, and their responsibility for health care of people in all walks of life.

HOW:  Members take part by:
1. Supporting the legislative efforts of other nursing and health organizations to obtain funds for health care, environmental protection, school support, scholarship aid, etc., through testimony before congressional committees and state legislature.
2. Organizing community action programs.
3. Recruiting students into nursing and helping keep them there through Project Breakthrough.
4. Working with graduate nurses on committees and programs for improving nursing care.
5. Producing a national magazine—IMPRINT—for all members.
6. Planning and conducting annual conventions.

What does NSNA do for its members?

• Works to develop good student-faculty relationships and promotes student participation in school planning, policies, and curriculum.
• Collaborates with other organizations (ANA, NLN, etc.).
• Negotiates reduced subscriptions to nursing periodicals.

The ECSNA combines the functions of pre-professional responsibility, learning, and community participation with social activities, all as part of the development of the whole person.
Appendix C: Northwestern Wisconsin Chapter of the American Assembly for Men in Nursing

In 2016, the Northwestern Wisconsin Chapter of the American Assembly for Men in Nursing was formed by UW-Eau Claire nursing students with the assistance of faculty advisers. It is part of the larger American Assembly for Men in Nursing (AAMN) organization originally founded in 1971 and is open to all genders. The Northwestern Wisconsin Chapter was recognized as an official student organization on the UW-Eau Claire campus with the 2016-2017 academic year. The goal of the chapter is to increase enrollment of minorities, particularly men, into nursing and create more diverse future cohorts of nursing students at UW-Eau Claire and nationally.

Membership is open to pre-nursing and admitted nursing undergraduate and graduate students of all genders at UW-Eau Claire, including the Marshfield Site, as well as non-UW-Eau Claire students and practicing nurses. Please see the UW-Eau Claire Blusync website (http://www.uwec.edu/Activities/organizations/) for more information.
Appendix D: University of Evansville at Harlaxton

Harlaxton Study Abroad (University of Evansville at Harlaxton)

HARLAXTON FALL NURSING COURSE EQUIVALENCIES & REGISTRATION

For Students who would be in the 1st semester senior nursing courses in a fall semester.

Eligibility
In order to be eligible, one must:

- Be in the first semester of the senior year of the nursing program during a Fall term.
- Be in good academic standing.
- Have a minimum resident GPA of at least 2.50 and semester GPA of at least 2.25, to be in good standing in the nursing program.

Procedural Notes:
1. Application to the Harlaxton program must be made through the UW-Eau Claire Center for International Education one year in advance of the anticipated semester abroad.
2. Prior to the application to the Harlaxton program, the student completes the Department of Nursing Program Plan Change Form. Please contact your adviser or Dr. Debra Jansen, Associate Dean, for assistance (jansenda@uwec.edu).
3. Arrangements must be made with the traditional undergraduate program director in the spring semester prior to the fall Harlaxton experience for the winterim one credit directed study.
4. Students attending the Harlaxton program will be registered into a specific NRSG 477 clinical section in order to facilitate completion of NRSG 446. They complete the HESI RN Pediatric exam near the end of the Senior 2 semester.

Course Descriptions:

NURS 463 Professional Leadership (3) Focuses on principles of leadership and management as they are practiced in nursing. Concepts of organizational behavior, transformational and transactional leadership are emphasized along with client advocacy, change agency, power, and politics.

NURS 467 Dynamic Integration: Health Promotion within the Community (3) Focuses on individuals, families and groups within the community. Emphasis on vulnerable populations, their health and the provision of health care. Examines health of the community including communicable disease, environmental health hazards, mortality and morbidity and epidemiology. Placement: Senior. Prerequisites: All 300 level nursing courses. Co requisite: Nursing 468. Fall.

NURS 468 Nursing Modalities for the Community (4) Clinical laboratory includes instruction and practice with the modalities of teaching, counseling, alternative health, social support and augmented social support. Focuses on vulnerable groups within the community who require health promotion and/or suffer chronicity. Primary emphasis on teaching and augmented social support. Prerequisites: All 300 level nursing courses. Course includes care of adults and children in the community. Co requisite: Nursing 467. Fall.

ID 282 or ID382 The British Experience from the Celts to the Present Day (6) Two British identity and culture courses, taken at either the 200 or 300 level: A core British Studies course and an interdisciplinary seminar, examining themes such as travel, language, ethnicity, architecture, and communication. Most nursing students register for ID 282. ID 382 is intended for students needing upper division liberal education credit; it involves additional writing assignments in comparison to 282. ID 382 also is available for University Honors credit. These courses typically provide GE-III or LE-K2 elective credit (students need to verify with the Transfer Credit Wizard in CAMPS and with the Center for International Education (CIE) prior to enrollment.)
Course Schedule for Nursing Students who study abroad at Harlaxton

Senior 1 term (fall semester):
U of Evansville at Harlaxton courses, in place of UW-Eau Claire courses NRSG 424, 428, & 447
- Nurs 463 Professional Leadership I (3 cr)
- Nurs 467 Dynamic Integration: Health Promotion within the community (3 cr)
- Nurs 468 Nursing Modalities for the Community (4 cr – clinical)
- ID 282 British Experience LD (6 cr)—substitutes as GE-III, LE-K2 (verify with Transfer Credit Wizard and CIE)
  OR
- ID 382 British Experience UD (6 cr)—also available for University Honors; intended for students needing upper division liberal education credit; involves additional writing assignments in comparison to 282.

Semester Total: 16 credits

Winterim between Senior 1 and Senior 2:
- NRSG 495 Directed Study (1 credit)
  - Objectives pertain to achievement of NRSG 428 Integration (I1), S3 Creativity, and Service Learning requirements. The HESI Exit I Exam is 10% of the NRSG 495 Directed Study course grade.

Winterim Total: 1 credit

Senior 2 term:
- NRSG 446 (4 cr) – a first-semester senior UW-EC nursing course for which the UE/Harlaxton experience does not have an approximate equivalent.
- NRSG 457 Chronically Ill Patients and Families (3 cr)
- NRSG 467 Innovative Solutions to Complex Healthcare Problems (2 cr)
- NRSG 477 Practicum: Leadership II (4 cr)
- NRSG 487 Transition to Practice (3 cr)

Total: 16 credits

It is acknowledged that the students who have the University of Evansville/Harlaxton experience will not take NRSG 447 Practicum: Children & Families (2 cr).

This program plan will insure students have at least 60 nursing credits.

Note: Students should pack their UW-Eau Claire name tags, as these will be used at Harlaxton.

UGCC & Dept: 5/13, 2/17, 1/19, 5/19.
Appendix E: Library Resources and Utilization

McIntyre Library on the Eau Claire campus, Marshfield Medical Center Learning Resource Center at Marshfield, the College of Nursing and Health Sciences Learning Resource Center, and the George E. Magnin Medical Library are the primary library resources for nursing students. Mayo Clinic Health System’s and HSHS Sacred Heart Hospital’s libraries are also available. However, please be sure to bring your student identification when utilizing Sacred Heart resources as they are making efforts to offer their resources exclusively to nursing students.

The librarians can suggest a better resource if you are not able to find the information you seek (i.e. local demographic, community, and/or public health data).

Aids to Library Use
Librarians are a scholar’s best friend when it comes to helping you uncover and access current informational and reference materials. Make the Reference Desk your first stop in the library.

Selecting References
- Select the most current scholarly references. While books over five years old rarely meet this criterion, there are "classics" in each field which are considered appropriate for research and are able to be incorporated into scholarly efforts. Because of the rapidity with which knowledge is accumulating, even sections of newly published books may be obsolete; therefore, expect to rely heavily on professional journals and periodicals in addition to consulting books.
- As a general rule, do not use older editions of books if a newer edition has been published.
- Materials written for the lay public must be used cautiously; information pertinent to scholarly research is generally found in literature made available through professional sources.

Learning Resource Center (LRC): Eau Claire Campus
The Learning Resources Center (LRC) was established in 1985 and integrated into the School of Nursing addition built at that time. A portion of the money for equipping this area, room 154, and the adjacent computer lab in room 155 was obtained from a Helen Fuld Grant. Physically, the LRC is comprised of a circulation and storage area which houses a collection of print, multimedia, audiovisual equipment, medical devices, models, and other equipment specific to the nursing program. Items can be borrowed by students and faculty. The LRC also includes a bank of computer workstations, a small group workstation, shared printer, scanner, and student study and socialization area. Scholarship and internship opportunities are posted in the LRC and job announcements are posted in the hallway nearby. The Eau Claire Student Nurses Association maintains a small area to highlight their activities. The Learning Resource Center Coordinator’s office (room 152) and Distance Education Coordinator/Nursing Building Coordinator’s office (153) are housed within the LRC. The LRC is open Monday – Friday with evening hours during the academic year.

Adjacent to the LRC is the N155 General Access Computer Lab. This lab houses six desktop computers and a printer. The lab is supported by the University of Wisconsin – Eau Claire Learning and Technology Services and LRC staff.

Marshfield Site – Learning Resource Center (LRC) and Other Resources
The LRC has three study rooms available for students to use for private study or small groups. There is a comfortable reading area along with tables and chairs for studying. In addition, there are computers available to students. Monday–Thursday, 9:00 a.m.-5:00 p.m.; Friday 9:00-4:00 p.m. (Closed weekends and holidays)

George E. Magnin Medical Library
The Marshfield Clinic offers the use of the George E. Magnin Medical Library to the Marshfield Site UW-Eau Claire nursing students. The library is located at the Marshfield Clinic, Laird Center for Medical Research. Students are allowed 24/7 library access with an issued Marshfield Medical Center ID badge card.
Tours are scheduled for all students at the beginning of the semester so that students can take advantage of this resource. Library staff provide student orientation to use of the clinic’s electronic resource databases and are able to assist students with literature searches. The library also has multiple study areas for student use. Additionally, the library has nursing textbooks available for student use while in the library.

Marshfield Site—Wellness Center
Marshfield Site nursing students are provided access to the recently renovated Wellness Center at Marshfield Clinic Health System. Incoming students are invited to use of the Wellness Center and will be able to join after participating in a mandatory orientation session held by the Wellness Center staff. Students are able to access the Wellness Center 24 hours a day with their assigned Marshfield Medical Center ID badge card.

Marshfield Site—Security/student badges
All doors (except the main entrance off of Lot #12) to the Marshfield Site College of Nursing (South Building) are accessed with an issued Marshfield Medical Center ID badge card. Student ID badges are used to access the exterior West and East entrances of the South building. The main entrance (glass doors) will be accessible during school hours, but locked after 6 pm (with badge access after hours). Additionally, the fire doors to the main hospital on 1st floor and ground floor are badge access only when returning from the hospital. Badges may be used to access the South Building 24 hours a day/7 days a week.

Each student will be provided a badge at the beginning of the semester. Lost badges have a $10 replacement fee.
Appendix F: Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) Safe Space Resolution

In that it can be assumed that some members of the nursing student body, pre-nursing students, department of nursing faculty and staff, and other members of the Department of Nursing community may be lesbian, gay, bisexual, transgender or questioning (LGBTQ) individuals;

And, in that many of our patients and large segments of society are LGBTQ individuals;

And, in that we have committed, in our Nursing vision/mission/program outcome and University strategic planning documents, to fully promote and aspire to equity, diversity, inclusivity ideals and actions;

And, in that any form of negative bias against lesbian, gay, bisexual, transgender and questioning (LGBTQ) individuals constitutes a form of discrimination;

And, in that we have a responsibility to create a culture, community and physical space free from bias, bigotry, and discrimination;

And, in that the LGBTQ Safe Space concept strives to assure that that each member of every school community is valued and respected regardless of sexual orientation or gender orientation/expression;

Be it resolved that the UW-Eau Claire Department of Nursing, Nursing programs, and School of Nursing Building will be identified as Safe Space for LGBTQ individuals, their partners, family members and allies, in all activities and undertakings associated with UWEC Nursing program and department functions;

And that the UWEC Department of Nursing will strive to uphold and enact Safe Space precepts, actions, and intent in our collective endeavors to create a welcoming, bias-free environment supportive of LGBTQ issues and concerns.

Approved 9/18/09