Division of Nursing
Student Handbook
2025- 2026

NOT TO BE MINISTERED UNTO
BUT TO MINISTER

PREFACE

Welcome to the Berry College Division of Nursing

The faculty at Berry welcome you to the Division of Nursing. Your decision to become a Berry nurse will open doors for your future. Friends you meet while at Berry will last a lifetime and your nursing colleagues will always be remembered as you go through your life.

The profession of Nursing is exciting! Opportunities for care in numerous settings are in your future. Berry nurses are in high demand!

You are continuing your journey at Berry, first completing the necessary foundational and prerequisite courses and now embarking on your final two years of focused study for a baccalaureate degree. Once you graduate, you will challenge and hopefully pass the National Licensing Exam for Registered Nurses (NCLEX-RN) on your first attempt. The Berry nursing faculty and staff are dedicated to helping you achieve this goal. However, you will need to set priorities as the program is demanding of your energy and time. You will need to make good decisions in your study habits. Your responsibility is to stay informed about degree requirements, enroll in the arranged coursework, and do your best. Your strong foundation of liberal arts will provide you with the knowledge needed to promote intellectual, moral, and spiritual growth and challenge you to devote your head, heart, and hands to help our community.

But from here, learning to give the best possible care to those you serve will never end. We encourage you to pursue further education and certifications. Above all, we want you to contribute, leaving the world a better place. We will endeavor to support you now and, in the future, as you work to make a difference.

This handbook, prepared by our faculty, has extremely important information you will need throughout your journey through the Berry Division of Nursing. This handbook supplements other Berry College documents such as the College Catalog and the Viking Code. I am honored to offer you a solid prelicensure education. We take pride in our students and their ability to be passionate about their call to serve others through such an honorable profession. Know that I am always available to you at creilly@berry.edu or 404-502-0585.

Dr. Reilly

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Communication and Collegiality Between Faculty and Students

The Berry College Division of Nursing values open communication as essential to the teaching and learning process. Faculty are available for individual appointments via booking platforms and office hours. Students can expect email responses within 48 hours or the next business day on weekends and holidays.

The classroom is a respectful, inclusive environment where all voices are heard. Learners should come prepared, engage actively, and support one another. Participation and respectful listening foster intellectual growth and readiness for the world beyond. Communication and collegiality are fundamental to the BSN academic experience, ensuring both meaningful learning and lasting positive memories.

Communication via E-mail

E-mail is an important communication tool used in the Division of Nursing. Upon admission to Berry, all students are assigned an e-mail address that is accessible from any computer via webmail at https://vikingweb.berry.edu/ics/. The Berry assigned e-mail address is the **only** address used by the Division of Nursing faculty to communicate with students via e-mail. Students are responsible and accountable for information sent via this e-mail address and should frequently check e-mails. Faculty in the Division of Nursing may use e- mail to communicate information, announcements, and memoranda. Course information such as assignments, handouts, and schedule changes may also be communicated through the email function in Canvas. Students should communicate any problems with e-mail directly to a faculty member and/or Berry College Help Desk by calling 706-238-5838. The ability to receive and read e-mail, open attachments, and access online information is vital to success in the Division of Nursing program.

Institutional Purpose and Mission Statements

From its inception, Berry has pursued a bold and distinctive approach to meeting the challenge of preparing students for life. Our entrepreneurial founder, Martha Berry, understood that intellectual skills and practical skills could be combined to shape people into those known for their work ethic, integrity, resourcefulness and willingness to serve. She believed in the wisdom of helping students to help themselves, and she used the intensity of a residential community as a rich context for teaching life lessons.

Building on this foundation, Berry today combines challenging academics with character-enhancing and career-building practical experiences. The college's academic programs rival other top residential universities in the region, but its commitment to eight semesters of paid professional development experience is one of a kind. The Berry Journey emphasizes equally the importance of ownership and mentoring – it is what defines our culture and propels our collective success.

VISION

For students to graduate as self-motivated learners – knowledgeable, responsible and resilient – leaving Berry with a sense of direction, conviction about what matters and confidence moving forward.

PURPOSE
To provide an integrated education of the head, heart and hands as the means by which to graduate responsible adults with the knowledge, experience, character and passion to improve the communities in which they live, work and serve.

MOTTO
"Not to be ministered unto, but to minister."

MISSION
We educate the head, heart, and hands – to inspire leaders of integrity who cultivate thriving communities.

Combining academic exploration with meaningful work responsibilities in a residential setting, our approach emphasizes firsthand experiences and mentoring. We invest in the personal growth and professional preparation of talented students from varied backgrounds, with an enduring commitment to help those hindered by financial need. Guided by Christian principles, we value the dignity of individuals, the search for truth tempered with grace, and the well-being of our neighbors.

Division of Nursing Mission Statement
In accordance with the Mission and Purpose of Berry College, the Mission of the Division of Nursing is to engage in exemplary education for the advancement of health and wellness through clinical excellence and scholarship. Faculty, staff, and students will positively impact local and global communities through leadership and service.

Core Values
Our core values support the mission and vision of the Division of Nursing. We are committed to:
- **Caring** for the needs of all people with **cultural humility** and **compassion** in a holistic manner;
- **Collaborating** with the interdisciplinary team for the promotion of person-centered care;
- Achieving **competence** while striving for **excellence;**
- Fostering **creativity** and **innovation** in our nursing practice; and
- **Serving** others by ministering with **integrity** and **respect.**

Vision Statement
The Division of Nursing at Berry College will be recognized for our commitment to excellence in nursing education and passion for health, leadership, and service in our community and profession.

Division of Nursing Goals
1. Prepare excellent nurses to deliver care in areas of prevention/promotion of health and wellbeing, chronic disease care, regenerative (critical/trauma) care, and hospice/palliative care.

2. Invest in faculty who serve others through actively participating in an innovative learner-centered, caring, academic community built on moral, ethical, and spiritual values.
3. Embrace interprofessional collaboration, scholarship, creativity, and nursing professional practice to improve health.
4. Facilitate the application of knowledge from a liberal-arts education into practice of professional nursing.
5. Incorporate evidenced based practice and professional engagement to promote safe, high-quality, and cost-effective care.
6. Embrace a learning environment that supports the service aim of Berry College, "Not to be ministered unto but to minister."

Program Philosophy and Belief

The Division of Nursing faculty at Berry College support the college's mission and educational principles. By emphasizing high academic standards based on interdenominational Christian values within a caring community, students develop professional competence and acquire the knowledge, skills, and attitudes necessary for professional nursing roles. Berry College and the Division of Nursing are dedicated to meeting the intellectual, moral, and material needs of students, fostering an environment of academic integrity and mutual respect.

Nursing is both an art and a science, grounded in liberal arts education. Critical thinking, clinical reasoning, communication, problem-solving, and decision-making are essential for nurses to meet the health care challenges of the twenty-first century. Competent nursing practice requires the ability to provide safe and effective care to individuals, families, groups, communities, and populations. Person-centered care demands awareness and non-judgmental acceptance of diversity, allowing nurses to practice with compassion and respect for the inherent dignity and worth of every individual.

Nurses assume roles as providers of care, managers of care, members of the profession, and leaders of interdisciplinary teams. They are responsible for coordinating and managing nursing care, collaborating with other health team members, and being aware of socio-political-economic factors affecting health care delivery. The Division of Nursing believes students must acquire the knowledge, skills, and attitudes defined by the American Association of Colleges of Nursing (AACN) and the American Nurses Association (ANA) Code of Ethics.

Person-centered care requires a cultural change in communication, including a no-blame approach essential for providing safe care and achieving goals and outcomes. Nurses must be committed to person-centered care that considers various political, social, economic, cultural, religious/spiritual, technological, and historical issues influencing health care. Principles of compassion, respect for others, altruism, social justice, free will, veracity, and protection from harm are fundamental to nursing.

Safe, quality care that minimizes harm and mitigates error depends on collegiality, open communication, mutual respect, and skills in collaboration, negotiation, and conflict resolution. Nurses must integrate critical thinking, clinical reasoning, problem-solving, decision-making, and evidence-based practice while incorporating patient preferences to deliver optimal, safe health care and improve outcomes. Proficiency in technology, informatics, economics, and

genetic information is key to improving health care quality locally and globally.

Faculty are responsible for designing, implementing, and evaluating a curriculum that helps students acquire the knowledge, skills, and attitudes necessary for professional nursing. Nursing is best taught in a caring, learner-centered academic environment. Faculty facilitate learning, encourage student control, and value their needs. They utilize evidence-based teaching strategies to enhance learning and meet educational outcomes. Nursing education demands attention to classroom activities, virtual and simulated activities, and clinical learning opportunities. Faculty must understand and use technology and informatics to enhance teaching, monitor quality, and manage data.

To ensure the curriculum remains current, faculty must consult best practices, national standards, and health care priorities. They work with local, national, and global health care providers to select and evaluate clinical learning experiences in various settings. Faculty evaluate the effectiveness of the curriculum by collecting and analyzing data and assessing educational outcomes.

The faculty values collaboration with Berry College's core faculty to provide a balanced education in the sciences, arts, and humanities. They share the responsibility of creating a learning environment that embraces Berry's motto, "Not to be ministered unto, but to minister."

Program Learning Outcomes

At the completion of the program, the graduate of the Berry College Division of Nursing will be able to demonstrate competence in:

1. Applying knowledge for nursing practice and clinical judgement involves the integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, knowledge from other disciplines, and the foundational knowledge provided by the liberal arts and natural and social sciences.
2. Delivering person-centered care focused on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate.
3. Providing population health care that spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and non-traditional partnerships from affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes.
4. Advancing the scholarship of nursing, integrating best evidence of nursing practice to provide person-centered and population-focused care, and promoting the ethical conduct of scholarly activities.
5. Employing established and emerging principles of safety and improvement science through application of quality improvement principles in care delivery, contribution to a culture of patient safety, and contribution to a culture of provider and work environment safety.
6. Collaborating intentionally across professions to facilitate partnership with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes.

7. Coordinating resources effectively and proactively to provide safe, quality, and equitable care to diverse populations.
8. Utilizing information and communication technologies and informatics processes to provide, manage and improve safe, high-quality, and efficient care in accordance with best practice and professional and regulatory standards.
9. Formulating and cultivating a sustainable professional identity, including accountability, perspective, collaborative disposition, and comportment, that reflects nursing's characteristics and values.
10. Employing activities and self-reflection to foster personal health, resilience, and well-being; contributing to lifelong learning; and supporting the acquisition of nursing expertise and the assertion of leadership.

Organization of the Curriculum

The Philosophy of the Division of Nursing guides the organizing framework for the BSN curriculum. In organizing a future-oriented curriculum to prepare nurses to work in an increasingly complex and ambiguous world, many references and reports were consulted. Among these were AACN The Essentials: Core Competencies For Professional Nursing Education, AACN Impact of Education on Nursing Practice, AACN Recommended Baccalaureate Competencies and Curricular Guidelines for the Nursing Care of Older Adults, AACN Cultural Competency in Baccalaureate Nursing Education, the IOM Reports, *Teaching IOM: Implications of the Institute of Medicine Reports for Nursing Education*, sources on the QSEN (Quality and Safety Education for Nurses) web site and reports and the Georgia Board of Nursing Rules and Regulations.

The baccalaureate nursing curriculum is built on two years of foundation/core courses that provide the graduate with the advanced analytical skills of critical thinking and clinical reasoning, communication, problem-solving, and decision-making essential for the professional nurse to meet the health care realities of the twenty-first century. The baccalaureate nursing graduate will use the liberal arts foundation courses such as English, Communication, Psychology, Sociology, Life-span Developmental Psychology, History, Government, and Fine Arts to provide a foundation for the diverse complex health care needs of today. The in-depth knowledge acquired from selected courses in natural sciences, statistics, arts, humanities, social and behavioral sciences, communication, and rhetoric and writing courses will prepare the graduate for the increased complexity of practice. Liberal arts and basic science courses are incorporated and serve as the base for professional nursing course work. The BSN at Berry requires attaining 55 hours of foundational and prescribed prerequisites followed by 65 hours of nursing content, to total 120 hours. Some foundational courses are required of all students while in other domains, students have a choice of courses that fulfill the requirement. Requirements and choices are presented in the following Table.

All students must take:	
• RHW 102 (3 hours)	• MAT 111 (3 hours)
• COM 203 (3 hours)	• BCC 100 (1 hour)
Additional prerequisites for nursing include:	
• BIO 111 (4 hours) Cell Biology	• BIO 206 (4 hours) Human Anatomy & Phys I
• CHM 150 or CHM 108 (4 hours) Chemistry	• BIO 207 (4 hours) Human Anatomy & Phys II
• PSY 101 (3 hours) Introduction to Psychology	• BIO 201 (4 hours) Microbiology
	• PSY 221 (3 hours) Life-Span Development Psychology
Students need to take courses from the following domains as described:	
Take 3 Humanity Courses, each 3 credit hours: (each of the 3 courses must be from a different discipline):	
• ENG 201, 210, 211, 214, 220, 221, 240	• SPA 310, 311, FR 303, GER 303
• HON 201	• HIS 120, 154, 155
• REL 100, 101, 103, 200, 202, 207 OR/PHL 150, 152	
Take 2 Social & Behavioral Sciences in addition to PSY 101, each 3 credit hours (each of the 2 courses must be from a different discipline):	
• ECO 110, 150, 160, 170, 190	• HON 203
• EDU 201	• SOC 200 or ANT 200, 210 *(not req but encouraged)*
• ESS 150	• KIN 230 (Leisure, Health and Aging)
• POL/GOV 207, 211, 217	•
Take 1 Arts Course for 3 credit hours	
• ART 201, 202	• MUS 215, 240, 246, 111,121,130, or 131
• CRW 250 (must have completed RHW 102)	• THE 201
• DAN 206	
Take 1 Physical Wellness Course	
• PAC Activity (1 hr) 100, 110, 120, 130	

The nursing curriculum of Berry College Division of Nursing is uniquely futuristic, preparing nurses to work in an increasingly complex and ambiguous world. The overall aim of the baccalaureate program is to prepare nurses with the knowledge, skills, and attitudes necessary to assume the role of the professional registered nurse and improve the quality and safety of health care systems. The curriculum follows the **American Association of Colleges of Nursing (AACN) Essentials**, which provide a framework for preparing individuals as members of the nursing discipline. These Essentials introduce 10 domains representing the essence of professional nursing practice and the expected competencies for each domain:

1. Knowledge for Nursing Practice
2. Person-Centered Care
3. Population Health
4. Scholarship for Nursing Practice
5. Quality and Safety
6. Interprofessional Partnerships
7. Systems-Based Practice

8. Information and Healthcare Technologies
9. Professionalism
10. Personal, Professional, and Leadership Development

Each domain outlines specific competencies that are applicable across various care settings and patient populations, ensuring nurses are well-prepared to meet diverse healthcare needs.

In line with the New Essentials, Berry's Nursing program emphasizes care that is delivered within the four spheres of care: 1) disease prevention/promotion of health and well-being, which includes the promotion of physical and mental health in all patients as well as management of minor acute and intermittent care needs of generally healthy patients; 2) chronic disease care, which includes management of chronic diseases and prevention of negative sequelae; 3) regenerative or restorative care, which includes critical/trauma care, complex acute care, acute exacerbations of chronic conditions, and treatment of physiologically unstable patients that generally requires care in a mega-acute care institution; and 4) hospice/palliative/supportive care, which includes end-of-life care as well as palliative and supportive care for individuals requiring extended care, those with complex, chronic disease states, or those requiring rehabilitative care (Lipstein et al., 2016; AACN, 2019).

Our curriculum integrates essential concepts within professional nursing practice, organized to enhance learning and application. These concepts are embedded throughout the Essentials, appearing in introductions, domain descriptors, contextual statements, competencies, and sub-competencies. Each concept acts as a hub for transferable knowledge, fostering cognitive links and enhancing learning.

Key Concepts:
- **Clinical Judgment:** Decision-making based on nursing knowledge, critical thinking, and clinical reasoning, directly impacting care outcomes.
- **Communication:** Central to nursing, involving various forms of interaction and essential for high-quality, individualized care.
- **Compassionate Care:** Relating to others with empathy and respect, crucial for patient satisfaction.
- **Diversity, Equity, Inclusion, and Belonging:** Embracing diverse characteristics and ensuring fairness and inclusivity in educational and professional environments.
- **Ethics:** Guiding principles for behavior, including autonomy, beneficence, non-maleficence, and justice.
- **Evidence-Based Practice:** Integrating current evidence, clinical expertise, and patient preferences for optimal health care.
- **Health Policy:** Nurses' role in advocating for policies that impact health outcomes and the profession.
- **Social Determinants of Health:** Factors affecting health, such as economic stability and access to care, closely linked with diversity, equity, inclusion, and belonging, health policy, and communication.

These concepts are crucial for the comprehensive education and practice of nursing, ensuring that learners can apply their knowledge effectively in various contexts.

In addition to preparing a nurse for quality safe practice, the educational experience of Berry College Nursing students will include preparing them for service, leadership, and person-centered care that exemplifies the interdenominational Christian values of Berry College. The nurses of the future must be prepared to look beyond the acute health care environment and traditional roles of the nurse.

To enrich the education of students studying nursing, a short-term cross-cultural immersion is required after the second or third semester of the nursing program. Through this experience, students continue the Martha Berry tradition of "the head, heart and hands" approach to education, participate in valuable clinical and cultural learning, and directly experience community nursing in diverse cultural settings.

The nursing curriculum is designed to ensure the professional nurse of the twenty-first century is prepared to contribute to transforming the health care system to one focused on safety and quality care. The nursing curriculum introduces and expects the student to apply to nursing practice the eight key concepts and 10 AACN domains, the broad distinguishable areas of competence that, when considered in the aggregate, constitute a descriptive framework for the practice of nursing. These 10 domains have been adapted into the program outcomes and are threaded throughout the curriculum as follows:

Knowledge for Nursing Practice: The Bachelor of Science in Nursing (BSN) program is built upon two years of liberal arts, natural sciences, and social sciences education, emphasizing the application and translation of this knowledge into practice. The Foundations curriculum allows students to select courses from four learning goals: Effective Communication (including Writing Communication and Critical Literacy, and Oral and Visual Communication), Mathematical Inquiry, Intercultural Knowledge, and Foundations of Knowledge (covering Humanities, Arts, Social & Behavioral Sciences, Natural Sciences, and Physical Wellness). Required courses for nursing students include BIO 111 Biology, CHM 108 or CHM 150 Chemistry, BIO 206 and BIO 207 Human Anatomy & Physiology I and II, BIO 201 or BIO 301 Microbiology, MAT 111 Elementary Statistics, PSY 101 Psychology, and PSY 221 Life-Span Development. Additionally, students must complete elective hours and Berry College Courses (BCC) focused on the first year. The BSN Program of Study outlines the courses that fulfill Foundation requirements, necessary prerequisites, and the typical sequence based on entry status.

In most cases, students complete this prerequisite study, entering the nursing program for their final 2 years of study. Knowledge for nursing practice builds upon this scholarly foundation, as evidenced though first semester courses, where students translate knowledge into application in caring for patients and their family in NUR 315 and 316 Foundations of Nursing Practice Practicum and Didactic. In these courses, they are involved in the first critical step of providing and managing care. This is undergirded through learning Nursing Physical Assessment (NUR 317), building upon foundational anatomy and physiology, and coupled with NUR 318-Pathophysiology and Pharmacology, which provides students with necessary knowledge of basic classifications and administration of drugs, and other information necessary to assume the role of provider of care. In the second year of the program, emphasis in NUR 418-Pathophysiology and Pharmacology II continues to reinforce the basic knowledge as a provider of care applied to family care and vulnerable populations. The nurse's role as a member of the health care team and

member of an interdisciplinary team is reinforced, as well as concepts related to safe, effective care and the measurement of quality of care and patient outcomes.

Person-Centered Care: is introduced in NUR 315 & NUR 316-Foundations of Nursing Practicum and Didactic and is included in each of the nursing practicum courses (NUR 325, 415, and 425) as students are expected to create a safe and compassionate environment for patients, their families, groups, and population areas. Students gain competence in developing and delivering care that is holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate. Foundational clinical experiences include practicums in skilled nursing care and adult acute care facilities providing management of minor acute and intermittent care needs of generally healthy patients; chronic disease care, which includes management of chronic diseases, prevention of complications, and regenerative or restorative care. The principles of these courses are reinforced in NUR 325 Adult Health Practicum, NUR 326 and NUR 416 Adult Health I and II through the continuation of nursing care and management in acute and chronic patient populations in a variety of clinical settings. The principles of person-centered care are ultimately demonstrated in NUR 425 Senior Practicum in the last semester with an extensive 180-hour nursing care experience of patients in all clinical settings managing acute and chronic disease processes.

Population Health: Participation in the healthcare delivery continuum from public health prevention to disease management of populations and collaborative activities with our clinical and community partners is integrated throughout the curriculum. In NUR 327 Nursing Care of Vulnerable Population didactic course, students are introduced to the planning and evaluation of care to those with special needs that is then delivered in the practicum component of NUR 410 Cultural Immersion and NUR 415 Nursing Care of Special Populations with practicums in a variety of diverse community clinical sites. In NUR 426 Nursing Care of the Inclusive Community students will demonstrate competence through planning and implementing community health promotion and prevention programs by collaborating with local community resource personnel.

Scholarship for Nursing Practice: The generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care is discussed in every course starting in NUR 316 but is the focus of NUR 328: Nursing Research and Evidenced Based Practice, with final competency demonstrated in NUR 428 Nursing Evidence Based Practice Capstone. Within these two courses, students learn to critique research, complete an EBP project, and explore a variety of databases, integrative studies, and technological support systems for managing data and nursing care.

Quality and Safety: The process of Quality Improvement is introduced in NUR 316-Foundations of Nursing Didactic as a major responsibility of the registered nurse. Students are introduced to the major processes of quality improvement and key terms used in the quality improvement process. As students progress through all courses, education and emphasis are placed on Nurse Sensitive Quality Indicators as part of the evaluation process of nursing care in all didactic courses and further reinforced and demonstrated in NUR 427 Leadership and Management. Case studies include the occurrence of adverse events so that students can complete variance reports, generate root cause analysis, and identify changes needed to improve

care and mitigate error. NUR 428- Nursing Evidence Based Practice Capstone provides an opportunity for students to complete a senior thesis project focusing on the impact of quality improvement on the health care system and or patient outcomes.

Interprofessional Partnerships: Communicating and collaborating as a member of an interdisciplinary team is introduced in NUR 315 & NUR 316-Foundations of Nursing Practicum and Didactic and reinforced through all practicum courses. Students communicate and collaborate with health team members when providing care in clinical agencies and are introduced to the responsibility of the roles of a variety of health care team members. Interdisciplinary work also occurs in NUR 410 Cultural Immersion in a wider scope as students communicate with healthcare team members of diverse populations. The case studies and simulations used in NUR 315 provide opportunities for students to work with an interdisciplinary team including the physician and other team members. All nursing practicum courses include simulated experiences which incorporate interdisciplinary communication and collaboration. In NUR 425-Senior Practicum, students have an advanced opportunity to improve their interdisciplinary communication, collaboration, and delegation skills through 180 hours of direct patient care team interaction.

Systems-Based Practice: Students will be introduced to the concepts of Systems-Based Practice in NUR 315 and 316 Foundational Nursing to understand how nurses effectively coordinate resources to ensure safe, quality, and equitable care for diverse populations. This importance of understanding organizational structures, including macro-, meso-, and microsystems, and the financial and payment models that impact reimbursement and healthcare costs are introduced. Evidence-based and innovative solutions to address complex health problems and optimize care delivery are introduced in NUR 328 Nursing Research and EBP. In NUR 410 Cultural Immersion, students consider the influence of local, regional, national, and global systems and regulations on patient outcomes, assessing first-hand the impact of socioeconomic factors, including structural racism and discrimination, on health outcomes. In their final semester, students in NUR 426 Inclusive Community, NUR 427 Leadership and Management, and NUR 425 Senior Practicum evaluate systems-based practices for ethical care, employing improvement strategies, exercising fiscal prudence with system awareness, innovation, and design to tackle systemic inequities.

Information and Healthcare Technologies: As information and healthcare technologies are integral to nursing education, enabling nurses to provide care, gather data, and support decision-making is an essential component of our program from the first day of NUR 315 and 316 Foundation Nursing. Promoted and assessed in all clinical courses (NUR 315, 325, 415, and 425), technologies help manage and improve the delivery of safe, high-quality healthcare services. Students are taught how to use informatics tools in various care settings, impacting data collection, decision-making, and knowledge generation. Evaluation of how students best utilize these technologies as advocates for equitable access and assist patients in engaging with their care and managing health conditions effectively is demonstrated in NUR 425 Senior Practicum and NUR 427 Leadership and Management.

Professionalism: The role as a member of a profession is emphasized in the second semester in NUR 327 Vulnerable Populations. In this course, students explore health care problems related

to population areas and health care problems associated with mental health, poverty, lack of resources, and death and dying. Students begin to identify their role as a member of a global community and explore the concept of "one's place in the world." Students explore the concepts of respect, human dignity, and social justice for all humans as well as volunteerism and service. Professional obligations are also explored in NUR 427- Leadership and Management, as students examine a variety of political, socio-economic, technological, ethical, legal, and professional issues. Legal and ethical issues of care are included in appropriate areas of the curriculum. For example, issues related to end-of-life decision making and care giving are discussed in NUR 327 Vulnerable Populations as well as ethical and socioeconomic issues related to homelessness and poverty. In NUR 417 Nursing Care of Families, ethical and legal issues related to conception, family violence, and community violence are included in case studies.

Personal, Professional, and Leadership Development: Professionalism is a core value of nursing, as articulated by the American Nurses Association Code of Ethics Provision 9, which emphasizes the profession's responsibility to uphold nursing values, maintain integrity, and integrate social justice into health policy. The Division of Nursing supports this standard by committing to it as a Program Learning Outcome Goal, specifically aiming to formulate and cultivate a sustainable professional identity that includes accountability, perspective, collaborative disposition, and comportment reflecting nursing's characteristics and values. Junior and senior nursing students will engage in various activities each semester to develop a professionalism and service portfolio, which can enhance their resumes when seeking their first positions. Professional Service Points are accumulated by the student each semester tied to specific courses (NUR 316, NUR 326, NUR 415, and NUR 427). Using a rubric, students devote a minimum of 10 hours per semester (1 hour per point) in personal, professional, and leadership development activities, creating a digital portfolio in their final semester to showcase these activities. This initiative will serve as a measure for Institutional Effectiveness, with goals set for point accumulation by juniors and seniors. Faculty will report student compliance to the Director of Nursing for annual tabulation and college reporting.

Curriculum Plan for Pre-Nursing and Nursing Students

After the Foundations and required courses are complete, students may take Nursing courses if they are accepted by the Division of Nursing. **Current Foundations Curriculum and courses offered meeting the foundations requirements can be seen at the following link:** https://catalog.berry.edu/preview_program.php?catoid=14&poic=1066
The following is a traditional BSN Curriculum Course Sequence

Requirements for acceptance into BSN Program:
1. Completed all required prerequisites with C- or better in each course.
2. GPA must be ≥ 3.0
3. Meet with Director of Nursing to assure above and complete application semester prior to entry.
4. Commit to Immersion program during summer or over winter break, depending upon tract.

Fall Entry Track for Traditional Junior Students: Graduation May of Senior Year

Course Number	Title	Didactic- Clinical- Credit Hr
	First Semester- Fall	**16 Credit Hours**
NUR 315	Foundations of Nursing Practicum	0-6-2
NUR 316	Foundations of Nursing Didactic	6-0-6
NUR 317	Nursing Physical Assessment	3-3-4
NUR 318	Nursing Pathophysiology/ Pharmacology I	4-0-4
	Second Semester- Spring	**16 Credit Hours**
NUR 325	Nursing Care of the Adult Practicum	0-12-4
NUR 326	Nursing Care of the Adult I Didactic	5-0-5
NUR 327	Nursing Care of Vulnerable Populations	4-0-4
NUR 328	Nursing Research and Evidence Based Practice	3-0-3
	Summer Semester	**3 Credit Hours**
NUR 410	Nursing Cross Cultural Immersion (Foundations F3a) (WI Course)	1-4-3
	Third Semester- Fall	**16 Credit Hours**
NUR 415	Nursing Care of Special Populations Practicum	0-12-4
NUR 416	Nursing Care of the Adult II Didactic	6-0-6
NUR 417	Nursing Care of Families	4-0-4
NUR 418	Nursing Pathophysiology/ Pharmacology II	2-0-2
	Fourth Semester- Spring	**14 Credit Hours**
NUR 425	Senior Nursing Practicum	2-12-6
NUR 426	Nursing Care of the Inclusive Community	3-0-3
NUR 427	Nursing Leadership & Management	2-0-2
NUR 428	Nursing Evidence Based Practice Capstone (WI Course)	3-0-3
	Total Credit hours	**65**

Spring Entry Track for Dual or Transfer Junior Students: Graduation December of Senior Year

Course Number	Title	Didactic- Clinical- Credit Hr
	First Semester- Spring	**16 Credit Hours**
NUR 315	Foundations of Nursing Practicum	0-6-2
NUR 316	Foundations of Nursing Didactic	6-0-6
NUR 317	Nursing Physical Assessment	3-3-4
NUR 318	Nursing Pathophysiology/ Pharmacology I	4-0-4
	Second Semester- Fall	**16 Credit Hours**
NUR 325	Nursing Care of the Adult Practicum	0-12-4
NUR 326	Nursing Care of the Adult I Didactic	5-0-5
NUR 327	Nursing Care of Vulnerable Populations	4-0-4
NUR 328	Nursing Research and Evidence Based Practice	3-0-3
	Third Semester- Spring	**16 Credit Hours**
NUR 415	Nursing Care of Special Populations Practicum	0-12-4
NUR 416	Nursing Care of the Adult II Didactic	6-0-6
NUR 417	Nursing Care of Families	4-0-4
NUR 418	Nursing Pathophysiology/ Pharmacology II	2-0-2
	Summer Semester	**3 Credit Hours**
NUR 410	Nursing Cross Cultural Immersion (Foundations F3a) (WI Course)	1-4-3
	Fourth Semester- Fall	**14 Credit Hours**
NUR 425	Senior Nursing Practicum	2-12-6
NUR 426	Nursing Care of the Inclusive Community	3-0-3
NUR 427	Nursing Leadership & Management	2-0-2
NUR 428	Nursing Evidence Based Practice Capstone (WI Course)	3-0-3
	Total Credit hours	**65**

120 credits and 3 CE's for each full time semester are required for graduation (Typically 24 if enrolled for 8 semesters).

American Nurses Association Code of Ethics for Nurses

- **PROVISION 1: Dignity and Respect** The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
- **PROVISION 2: Primary Commitment** A nurse's primary commitment is to the recipient(s) of nursing care, whether an individual, family, group, community, or population.
- **PROVISION 3: Trust and Advocacy** The nurse establishes a trusting relationship and advocates for the rights, health, and safety of recipient(s) of nursing care.
- **PROVISION 4: Responsibility and Accountability for Practice** Nurses have authority over nursing practice and are responsible and accountable for their practice consistent with their obligations to promote health, prevent illness, and provide optimal care.
- **PROVISION 5: Duties to Self** The nurse has moral duties to self as a person of inherent dignity and worth including an expectation of a safe place to work that fosters flourishing, authenticity of self at work, and self-respect through integrity and professional competence.
- **PROVISION 6: Ethical Work Environments** Nurses, through individual and collective e ort, establish, maintain, and improve the ethical environment of the work setting that a ects nursing care and the well-being of nurses.
- **PROVISION 7: Knowledge Development and Social Policy** Nurses advance the profession through multiple approaches to knowledge development, professional standards, and the generation of policies for nursing, health, and social concerns. **PROVISION 8: Collaborative Relationships** Nurses build collaborative relationships and networks with nurses, other healthcare and nonhealthcare disciplines, and the public to achieve greater ends.
- **PROVISION 9: Commitment to Society and Social Justice** Nurses and their professional organizations work to enact and resource practices, policies, and legislation to promote social justice, eliminate health inequities, and facilitate human flourishing.
- **PROVISION 10: A Global Nursing Community** Nursing, through organizations and associations, participates in the global nursing and health community to promote human and environmental health, well-being, and flourishing.

Source: American Nurses Association. (2025). Code of ethics with interpretative statements. Silver Spring, MD: Author. Retrieved from https://codeofethics.ana.org/home

Glossary of Terms

Altruism: A concern for the welfare and well-being of others. In professional practice, altruism is reflected by the nurse's concern and advocacy for the welfare of patients, other nurses, and other healthcare providers.

Autonomy: The right to self-determination. Professional practice reflects autonomy when the nurse respects patients' rights to make decisions about their health care.

Caring: Caring is a total way of being, of relating, of acting; a quality of investment and engagement in the other-person, idea, project, thing as "other" – in which one expresses the self fully and through which one touches most intimately and authentically what it means to be human. (Roach, 2002, pg. 39). To care for another person is to help them to grow and through caring for others meaning is given to one's own life (Mayeroff, 1971).

Christian values: Are the values included in the teachings of Christ and include but are not limited to compassion, respect for others, altruism, service, social justice, freewill, veracity, and protection from harm.

Collaboration: Functioning effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality person-centered care. (Cronenwett et al, 2007)

Compassion: The awareness of and sympathy for suffering of another coupled with a desire to offer help.

Competence: The ability to do something well and includes having necessary knowledge (cognitive ability), skills (psychomotor abilities), and attitudes (commitment to or valuing of something).
Competence is usually judged by identified or understood standards.

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.

Clinical Judgment: The outcomes of critical thinking in nursing practice. Clinical judgments begin with an end in mind. Judgments are about evidence, meaning, and outcomes achieved (Pesut, 2001).

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

Cultural humility: one construct for understanding and developing a process-oriented approach to competency. Hook, Davis, Owen, Worthington and Utsey (2013) conceptualize cultural humility as the "ability to maintain an interpersonal stance that is other-oriented (or open to the other) in relation to aspects of cultural identity that are most important to the [person]" (Hook, J. N., Davis, D. E., Owen, J., Worthington Jr., E. L., & Utsey, S. O., 2013, p. 2.)

Cultural Sensitivity: Cultural sensitivity is experienced when neutral language, both verbal and non- verbal, is used in a way that reflects 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 in ways that may be interpreted as impolite or offensive (American Academy of Nursing Expert Panel on Cultural Competence, 2007).

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.

Evidence-based Practice: Care that integrates the best research with clinical expertise and

patient values for optimum care (IOM, 2003b).

Health Care Economy: Addresses how societies allocate resources to meet health care needs of the individuals and communities. In an era of rising medical costs and concerns, how to reform health care systems, tame costs and cover the uninsured becomes a critical component on health of the individual and populations.

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.

Human Dignity: The respect for the inherent worth and uniqueness of individuals and populations. In professional practice, concern for human dignity is reflected when the nurse values and respects all patients and colleagues.

Integrity: Acting in accordance with an appropriate code of ethics and accepted standards of practice. Integrity is reflected in professional practice when the nurse is honest and provides care based on an ethical framework that is accepted within the profession.

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).

Inter-professional: 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).

Intra-professional: Working with healthcare team members within the profession to ensure that care is continuous and reliable.

No-blame environment: Refers to belief that identifying root causes for a practice variance (e.g., medical mistake, medication error, re-admission to the hospital, or student's failure of an exam) is more effective than assigning blame.

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 influenced by nursing personnel, but for which nursing is not exclusively responsible (National Quality Forum, 2003).

Outcome: Broad performance indicator, related to the knowledge, skills, and attitudes, needed by a baccalaureate graduate.

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).

Person-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).

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 Improvement: Refers to the use of data to monitor outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems (Cronenwett et al, 2007)

Respect: To show consideration or thoughtfulness in relation to somebody or something, to refrain from violating something or someone.

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 Justice: Acting in accordance with fair treatment regardless of economic status, ethnicity, age, citizenship, disability, or sexual orientation.

Spirituality: Speaks to what gives ultimate meaning and purpose to one's life. It is that part of people that seeks healing and reconciliation with self or others (Puchalski, 2006).

Unique nature of individuals: Refers to the belief that all human beings are different and are greater than the sum of the parts. Although human beings have mutual experiences, i.e., pain, happiness, love, loneliness, each individual responds to these experiences in a distinctive way.

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 Division of Nursing, 2008.

Academic Policies

Nursing Program Admission Process

Admission is competitive and based on available space. The minimum GPA for all BSN applicants is 3.0. Students are eligible to apply to the nursing program when they have successfully completed a minimum of 41 semester credit hours. Transfer students should complete at least 12 credit hours in residence at Berry College before applying to the nursing program. One of the courses taken at Berry must be from the required science courses and all science courses required in the Nursing Foundations Core must have been completed within 6 years of the application date. Students must earn at least a C- grade in all biology, chemistry, mathematics and rhetoric and writing courses prior to beginning the nursing sequence, even following formal admission to the program. Students should complete the required prerequisite courses at the time of enrollment in the first clinical nursing course.

General education courses provide a foundation to the nursing program and serve as a basis for learning and applying nursing concepts. However, an additional program application is required prior to enrolling in nursing courses. A meeting with the Director of Nursing or nursing faculty is required prior to submitting an application. At a scheduled appointment, the Director of Nursing or nursing faculty will review the student's academic record, explain the requirements and process for admission to the BSN Program, review the plan to complete the remaining prerequisite courses and provide access to the Nursing BSN application. The student submits the Nursing application and resume outlining healthcare interest/experience, campus/community involvement, leadership, and employment to the Division of Nursing Office by the application deadline. Applications are accepted twice a year, on February 1 for the fall semester entry cohort and June 1 for the spring semester entry cohort. Each cohort completes the 4 traditional semesters of course and clinical work and the cultural immersion program described below, with graduation in May for the fall entry cohort and December for the spring entry cohorts. All grades (Berry and other colleges/universities) from previous terms must be posted on the applicant's Berry College transcript by the application deadline.

Admission decisions are competitive and based on the applicant's academic record, supporting documents, and BSN application at the time of the application deadline. Applicants for admission will be ranked according to number of hours earned, overall GPA, and an adjusted GPA calculated from the math, science, and English, rhetoric and writing courses required in the BSN core. _(MAT 111, BIO 111, BIO 206, BIO 207, BIO 201/BIO 301, CHM 108/CHM 150_ and _ENG 101, ENG 102 or RHW 101, RHW 102)_. Applicants will receive an admissions decision approximately four weeks after the application deadline.

Student Types

Part-Time Study

Students may enroll in part-time study while completing the core courses. Once admitted and enrolled in nursing courses, students are encouraged to commit to full-time study. If a situation precludes full-time study, the student may appeal to the Admission, Progression, and Retention Committee (AC) to develop a specialized part-time plan of study. Part-time study requires further approval by Financial Aid and the Registrar. Regardless of plan, all courses must be completed within 4 years of beginning the nursing curriculum.

Traditional Student

First-time college students who complete the first two years at Berry College and then apply for admission to the Division of Nursing for the upper-division nursing curriculum are considered traditional students. To accomplish this, they will:

- Work with an Academic Advisor during the first year at the college. They will be assigned a Nursing Advisor in their first or second year at Berry.
- Students who complete their prerequisites at Berry College are eligible for priority consideration for admission to the upper-division nursing curriculum.
- Admission to the nursing curriculum is either in the fall or spring semesters, with the application due February 1 for fall, and June 1 for Spring as outlined below.

Accelerated Student

First-time college students who have sufficient foundational course credits earned through Dual Enrollment or AP testing with scores of 4 or 5 may complete the foundations requirement in 3 or less semesters at Berry College and may apply for admission to the Division of Nursing when all foundation requirements are nearly met. They may apply to join either the fall or spring cohorts and then complete the full 2-year nursing curriculum. To accomplish this, they will:

- Work with a Nursing Academic Advisor during the first year at the college.
- Commit to completing all foundation courses in the first 2-3 semesters and may be required to take classes over the summer.
- Accelerated students at Berry College are eligible for priority consideration for admission to the upper-division nursing curriculum.

Transfer Student

Students who transfer from another university or two-year community college and complete all foundation and prerequisite courses elsewhere, must gain admission first to Berry College and then make application to the Division of Nursing for the upper-division nursing major.

- BSN foundational and general studies courses are the same as those taken by students who complete all coursework at Berry College.
- Two separate applications are required: One to Berry College and the second to the Division of Nursing.
- After meeting with the Academic Advisor for the initial meeting, students will be assigned a Nursing Advisor who will assist them in determining eligibility for application into the upper- division nursing major.
- In most cases, transfer students will need to take 1 semester of prerequisite and foundation courses at Berry College before being matriculated into the nursing program.

Second Degree

Students who have completed a previous undergraduate degree outside of the nursing discipline and who meet the Berry College criteria for regular undergraduate admission.

- Applicants must have at least a baccalaureate degree in a non-nursing major that was earned at an accredited school or university, and the first degree must have been based upon at least 120 semester hours of earned credit.
- Necessary prerequisites for nursing include <u>MAT 111</u>, <u>BIO 111</u>, <u>BIO 206</u>, <u>BIO 207</u>, <u>BIO 201</u>/<u>BIO 301</u>, <u>CHM 108</u>/<u>CHM 150</u> and <u>RHW 102</u>. These must be taken within 5 years of

application and passed with a minimum of a C-. A composite 3.0 GPA must be demonstrated for these classes.
- Students in this option must first gain admission to Berry College and meet with the Academic Advisor for an initial meeting. They will be assigned a Nursing Advisor who will assist them in determining eligibility for application to the upper division major.

Direct Admission

The opportunity for direct admission to the Division of Nursing is available for highly qualified students. Direct admission will require a Berry calculated high school GPA of 3.75. Students who are a direct admit are guaranteed space in the nursing program. Direct admit students must still complete a nursing application and attest to the information contained therein, maintain a Berry GPA of 3.5, and meet all other admission requirements for nursing. (See Berry Catalog) If a direct admission nursing student does not maintain a Berry GPA of 3.5 while enrolled in core courses, the student will need to apply to the Division of Nursing by following the standard nursing admission process.

ADVISING PROCESS

Academic advising by designated Division of Nursing faculty is provided to maintain the standards of the Program and to guide each student. All students are assigned a Division of Nursing faculty advisor. The purpose of academic advising is to assist the student in his/her academic progression throughout the program. The role of the advisor is to assist students with adjustment to the Division of Nursing and facilitate a smooth progression through the program.

Responsibilities of the Academic Advisee
- Advisees are responsible for knowing and complying with the academic policies and procedures of the college which will be learned through orientation sessions, correspondence, newsletters, meetings, and through information found in the College Catalog, the Viking Code, the Registrar's website, and VikingWeb.
- Students must also regularly check their campus e-mail accounts and postal boxes to ensure they receive communication from their advisors, faculty and/or administrative staff. The final responsibility for meeting requirements for a degree rests with the student.
- Follow scheduling directions posted by your advisor to meet with them every semester.
- Obtain the necessary forms and signatures from the advisor(s) and other academic officers as needed and keep a copy of all forms returned to you that document your academic activity.
- Comply with the requirements of one College Catalog, either the catalog in effect at initial registration or the catalog in effect when you declare the major, provided that the catalog is no more than seven years old.
- Complete the Undergraduate Degree Plan with the registrar and your advisor once 60 hours are attained and complete an Application for Graduation once 90 hours have been attained.
- Consult the advisor and others as needed when considering academic decisions such as course selection or change, declaration of major and/or minor, withdrawal from a course or institution, application for internship or special program, or completion of the undergraduate degree plan and application for graduation.
- Seek advice and referral from the advisor and other academic officers as needed.

Responsibilities of the Academic Advisor
- Learn academic policies and procedures and communicate them to advisees. *Consult the Berry College Catalog, Viking Code, Viking Web, and this handbook for information. The Registrar's Intranet site and Internet sites offer helpful information as well.*
- Meet with advisees every semester during the advising period.
- Guide advisees toward satisfactory academic progress. Current information about your advisees' progress may be found on the Berry College Viking Web. Completion of the Undergraduate Degree Plan and the Application for Graduation forms will offer specific checkpoints for progress.
- Maintain electronic documentation for each advisee to include:
    - VikingWeb and registrar's reports
    - Academic standards correspondence
    - Undergraduate degree plans
    - Graduation application
    - High-school or other academic transcripts
  If an advisee withdraws from the college, his/her folder should be returned to the Associate Provost's office.
- Comply with requirements of the Federal Education Rights and Privacy Act and other college regulations. *A FERPA overview is available in this handbook; additional information is available from the Registrar.*
- Approve all designated academic procedures, such as course changes, declaration or change in advisor or major/minor status, and so forth, after consultation with the student, and clear the advisee for registration.
- Refer advisee to appropriate resources as needed.
  The handbook offers detailed information about the variety of academic and student-life resources available.
- Strengthen advising skills by regularly participating in training activities.
  You will be notified by email and campus mail about the opportunities.
- Support the growth and development of advisees through active advising habits.

PROGRAM REQUIREMENTS FOR UPPER-DIVISION NURSING COURSES

Upon acceptance into the nursing program students will need to meet additional program requirements prior to enrollment in upper-division nursing courses. Students must demonstrate the following:

1. Clinical education is a requirement of the nursing curriculum obtained through Clinical Facilities such as Atrium Floyd and Advent Redmond Medical Centers. As we are guests at these facilities, **we are required to meet their contractual requirements for nursing students which include:**
    a. Legal authorization to work in the United States;

  b. Compliance with Medical Clearance and all vaccinations requirements* as listed below;

  c. Satisfactory completion of all background, criminal checks, and drug screening;

  d. Maintenance of certification American Heart Association's Healthcare Provider Course (Course C or BLSC); and

  e. Maintenance of health and accident insurance.

2. Medical clearance is required prior to enrollment in all upper-division nursing courses. To be cleared, the following health documentation must be on file in the Division of Nursing prior to 2 months prior to program start:

  a. physical exam,

  b. TDAP,

  c. proof of varicella vaccine*,

  d. two doses of MMR vaccine or proof of positive immune titers,

  e. Hepatitis B vaccine (series of three or two depending upon manufacturer)*, **AND** positive immune titer,

  f. Hepatitis A vaccine (series of two)*,

  g. Tuberculosis (Mantoux) skin test or blood test (MUST BE PROVIDED ANNUALLY),

  h. Varicella vaccine, history of disease with proof of immunity *.

  i. Influenza vaccine (annually) *.

  j. Covid vaccine* per current CDC recommendations
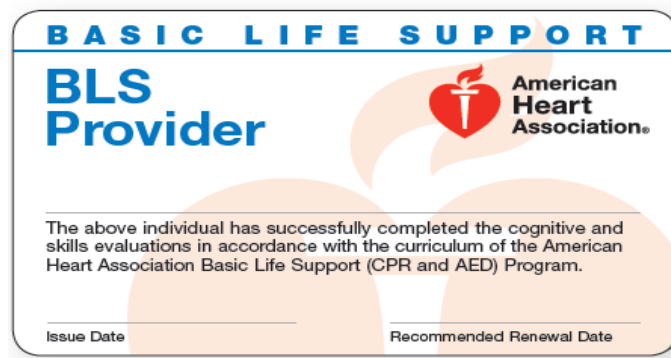
*Documented exemptions for any vaccinations are granted only by our clinical agency partners based upon their rules and exemptions. As we are guests, Berry College has no influence with the clinical partners who provide clinical practicums. Should the clinical partner deny the exemption, the student will not be able to complete the program and will be dismissed. There is no appeal and no other alternative to clinical practicum per state law.

CORE PERFORMANCE STANDARDS FOR ADMISSION AND PROGRESSION

Nursing students must possess certain abilities and skills, deemed Core Performance Standards for the care of patients. Students must be able to meet all of the performance standards outlined below, with or without reasonable accommodation, in order to be admitted and progress in the program:

Observation: Applicants and students enrolled in the nursing program must be able to observe demonstrations and simulations required by the nursing curriculum established by the faculty and be able to participate in such activities with adequate vision and other sensory modalities, including the senses of hearing and smell. A student must be able to observe a patient accurately at a distance and close at hand.

Communication: Students must be able to speak intelligibly, and to hear sufficiently to allow for

an adequate exchange of information with patients, family members, and other health professionals. A student must be able to read and write English effectively in order to fulfill academic requirements and to maintain accurate clinical records on patient care.

Motor: Nursing students are required to possess motor skills sufficient to elicit independent information from patients by palpation, auscultation, percussion, and other manually based diagnostic procedures. Students should be able to conduct laboratory and diagnostic tests and carry out physical assessments. Students must possess motor skills required for their scope of practice, as determined by the relevant accrediting organization. The student must also be able to coordinate fine and gross muscular movements to treat patients in emergencies. Emergencies include any circumstance requiring immediate remedy.

Intellectual-Conceptual, Integrative, and Quantitative Abilities: These abilities include an aptitude for rapid problem solving, the capability to assess and interpret medical files independently and evaluate physical examinations, and to formulate a logical plan of care. Students must possess good judgment in patient assessment and the ability to incorporate new information, describe relationships, and retain and recall pertinent information in a timely fashion. The student must also be prepared to provide an indepth rationale for the plan of care.

Behavioral and Social Attributes: Students must possess the physical and emotional health required for the application of his/her intellectual abilities and the use of sound judgment in an appropriate and prompt manner. Students must be able to function effectively under physically taxing workloads and in times of physical and mental stress. Students must display compassion, sensitivity, and concern for others, and maintain professional integrity at all times.

Reasonable Accommodations

If an applicant or student self-reports that he or she cannot meet one or more of the core performance standards without accommodations, the nursing program in consultation with the Academic Success Center, will determine what accommodations can reasonably be made. Applicants and students are responsible for making disabilities known and formally seeking accommodations. The Division of Nursing is committed to accommodating the needs of students with documented disabilities and will do so to the extent possible without compromising the essential components of the curriculum. Address any questions or concerns regarding these Core Performance Standards to the Director of Nursing.

Sequential Progression Policies

1. Enrollment in entry level nursing courses will be permitted only if the student:
    a. Completes all pre-requisite courses and earns a grade of C- or above in all required science, English, rhetoric and writing, and mathematics courses; and
    b. Maintains a minimum cumulative grade point average of 3.0.
2. Students may continue to progress according to the curriculum plan if they:
    a. Complete all pre-requisite courses prior to enrollment in any senior nursing course; unless an exemption is made by the Director of Nursing;
    b. Earn a grade of C- (75) or above in all nursing major courses;
    c. Report a cumulative GPA of 2.5 prior to enrolling in 400 level nursing courses;

  d. Demonstrate satisfactory performance of designated nursing skills (with or without accommodation);

  e. Earn a satisfactory grade in both the theory and clinical components of the nursing courses; In the event that the earned clinical grade is unsatisfactory, the course grade assigned will not be higher than the letter grade of D;

  f. Pass the medication calculation competency test at 90% accuracy each semester;

  g. Demonstrate full compliance with all standards of the nursing profession as defined by the ANA standards of practice, the ANA Code for Nurses, and Georgia Nursing Practice Act; and

  h. Maintain current health requirements/CPR.

3. If a student fails or withdraws from any nursing course, he or she must petition the Admission, Progression, and Retention Committee (AC) of the Division of Nursing to be re-admitted.

4. Students having withdrawn from or earned less than a C- (75) in a nursing course may be evaluated to be readmitted to the program two times only.

5. Students are accountable to follow all policies in the current handbook.

6. All program requirements must be completed within five (5) years of first enrollment of the nursing program. Due to curriculum changes, a student not progressing in the program in a continuous manner may be required to complete additional courses.

Baccalaureate program policies that describe standards for progression are listed in detail in the *Division of Nursing Student Handbook.* The handbook is distributed at the beginning of each academic year and is also available in an online format. It is the students' responsibility to obtain a copy of the policies and to be familiar with the policies. The policies are a guide as the student progresses through the program.

Nursing Program Dismissal Policy

Failure to achieve the established academic standards shall constitute reason for the student to be dismissed from the program. The faculty and administration of the Division of Nursing reserve the right to dismiss any student enrolled in the program from the program for unethical, dishonest, unprofessional, or illegal conduct that is inconsistent with the ANA Code for Nurses.

Academic Appeal Process

Undergraduate students who wish to appeal an academic-related decision are referred to the Academic Appeals Process of Berry College.

Nursing Program Re-Admission Policy

The Division of Nursing acknowledges the responsibility of readmitting to the program those students who, in the judgment of the faculty, satisfy the requirements of scholarship, health, and professional suitability for nursing. Students requesting readmission to the program must apply in writing to the Nursing Admissions and Progression Committee. Each student's situation is reviewed on an individual basis. Requests for readmission for fall must be submitted 2 weeks prior to term start. Readmission is not guaranteed to any student. Students following the curriculum plan without interruption have priority for course enrollment. Specific guidelines for readmission include the following:

1. Course repetition policies:

  a. Only two nursing courses may be repeated, each only 1 time.

      b. The courses must be repeated successfully with a grade of B or better (3.0) prior to taking other nursing courses.

      c. The courses must be repeated within the next academic year following the original course.

2. Any student readmitted to the program will be required to:

      a. Meet Berry College readmission criteria.

      b. Demonstrate a satisfactory level of knowledge from nursing courses in the previous successfully passed semester as determined by all course level faculty and with the approval of the Director of Nursing. This demonstration of knowledge and skills must be done prior to resumption of clinical courses and can be repeated three times to achieve success (see 1d). If additional expense is incurred during the process of demonstrating knowledge, the student will assume the additional costs.

      c. Successfully validate prior medication calculation competency and clinical skills.

3. A readmitted student must meet graduation requirements in effect at the time of readmission and follow the baccalaureate degree nursing policies in effect for that academic year.

4. Students must complete all program admission requirements prior to readmission.

Program Fees for Nursing Students

A nursing program fee is charged to all enrolled nursing students. The program fees cover assessment testing, computer learning programs, approximately 90% of the required books, and standardized exams. In addition to the program fees, the student can expect to incur fees for a background and drug screening each year, physical examinations, immunizations, costs of books not bundled in fees, the cost of obtaining CPR certification, required uniforms, shoes, stethoscope, graduation cost, cross cultural immersion (listed below) and NCLEX fees.

Cross Cultural Immersion

An immersion trip consisting of 60 cultural and clinical hours will be required of all nursing students during the summer break after completion of the second or third semesters. Students will earn three semester hours of credit while advancing their understanding of world cultures, uniqueness, and similarities. The required cultural immersion trip will cost approximately $4000-5000 dependent on location. Final costs will not be known until approximately 10 months prior to travel so price is approximate until that time but includes tuition for NUR 410.

Graduation

Admission to and graduation from the Berry College Division of Nursing does not guarantee eligibility for licensure (see Board of Nursing Policies). Prior to Division of Nursing approval for the candidate's licensure (NCLEX) application, an exit interview with the Division of Nursing is required. Additionally, all student financial accounts must have a zero balance.

Board of Nursing Policies

After completion of the program and graduation, students are eligible to apply for licensure by examination (National Council Licensure Examination for Registered Nurses- NCLEX-RN). Licensure to practice as a Registered Nurse is granted by the Board of Nursing in the state of intended practice and governed by specific rules and regulations. In the state of Georgia, these are the **Department 410 - RULES OF GEORGIA BOARD OF NURSING** (located at https://rules.sos.ga.gov/GAC/410). All students and graduates should read and understand all aspects of their state practice act and licensing requirements.

Academic Integrity

The Berry College policy on Academic Integrity is located in the Berry College Catalog.

Grievance Policy

A student complaint is essentially an expression of dissatisfaction or concern by a student regarding various aspects of their educational experience. This could be related to academic issues, such as grading disputes, course content, or teaching methods, or it could involve non-academic concerns, like administrative services, campus facilities, or even interpersonal conflicts with faculty or other students.

Students at Berry College are guaranteed all the rights, privileges, and freedoms granted to a citizen of the United States. Two documents available to students provide information to assist the students, 1) Berry College Catalog online and/or 2) Berry College's Viking Code.

Berry College nursing students have the right and the responsibility to keep open communications with the faculty, staff, and administration. A variety of options have been established to facilitate these lines of communication: Student/faculty dialogues, student/advisor meetings, faculty evaluations, course evaluations, electronic communications, and student representation on committees.

Students with concerns are encouraged to speak with their faculty first. They may additionally seek assistance from their advisor or another member of the faculty or staff in evaluating the nature of their concerns or deciding on an appropriate course of action. Any concern should first be addressed with the person(s) whose actions have given rise to the problem and should be initiated within two weeks of the incident. If the concern or problem cannot be resolved, please complete a Division of Nursing Concern/Grievance form provided and submit it to the Director of Nursing. All concerns will be investigated within 3 business days, with a goal of resolving within 2 weeks.

Berry College - Division of Nursing
Concern/Grievance Form

Submitted by_____Date: ____

Please describe the concern: _____

_____

_____

_____

_____

What actions have you taken to resolve the concern? _____

_____

_____

_____

What were the results of your actions/intervention? _____

_____

_____

_____

What recommendation do you have to resolve the concern? _____

_____

_____

_____

_____

_____

Chemically Impaired Student Policy

Berry College and the Division of Nursing require that students provide safe, effective, and supportive client care. Students who are chemically impaired are less capable of making important judgments and maintaining a safe environment for clients under their care. Students who are chemically impaired in the clinical setting may in fact jeopardize the lives of their clients. In addition, chemical impairment has a negative effect on the personal health of the student.

The Division of Nursing defines the chemically impaired student as a person who, while in the classroom, laboratory, or clinical setting, is under the influence of, or has abused, either separately or in combination: alcohol, over-the-counter medication, illegal drugs, prescribed medications, inhalants, or synthetic designer drugs. Abuse of the substances includes episodic use or misuse, or chronic use that has produced psychological and/or physical signs and symptoms. This includes the abuse of impairment using prescription medication. It is the position of the Division of Nursing that chemical dependency is a treatable disease. With the proper treatment, monitoring, and support, students can become safe, competent professionals. The American Association of Colleges of Nursing (AACN) has issued a position statement on substance abuse in nursing education (AACN, 1996). Among their assumptions and principles are the statements that:

- Substance abuse compromises both the educational process and patient care and must be addressed by schools of nursing.
- Academic units in nursing have a commitment to and a unique role in the identification of abuse intervention, referral for treatment, and monitoring of recovering individuals.
- Addicted persons need help to recognize the consequences of their substance use.
- Addiction is a treatable illness, and rehabilitative and therapeutic approaches are effective in facilitating recovery; and
- Individuals with addictive illnesses should receive an opportunity for treatment in lieu of, or before, disciplinary action. (AACN, 1996, p.254)

The American Physical Therapy Association's Position on Substance Abuse (HOD 06-93-25-49) recognizes that alcoholism and other drug addictions adversely affect health and professional roles. The House of Delegates encourages the identification and supportive assistance of professionals who experience substance abuse and recommends treatment so that re-entry into the profession is possible.

It is the policy of the Division of Nursing that students must be free of chemical impairment during participation in any part of their program including classroom, laboratory, and clinical activities. The Division of Nursing faculty members will intervene with a chemically impaired student as outlined in the established procedure of the school. Until the problem has been satisfactorily resolved, the student will not participate in any clinical or field activities where they would have patient/client contact. It is the policy of the Division of Nursing that students may be required to leave the clinical/fieldwork setting immediately if chemical impairment is suspected. Students may be required to undergo a urine drug screen and evaluation by an outside professional expert to assess for chemical impairment. Treatment as indicated by the substance abuse professional will be required as well as follow-up, aftercare, and ongoing monitoring.

Failure to abide by the treatment plan as outlined will result in suspension and/or dismissal from the program. Procedure: If, in a faculty member's professional judgment, a student participating in any classroom, laboratory, or clinical activity is exhibiting signs of chemical impairment, the following procedure will be implemented.

1. The student will be removed to a private area to discuss the behavior(s) observed. The student will be allowed to provide a verbal explanation of the behavior. The faculty member will specifically inquire about the use of any substances and, if used, what, when and how much was used and what route it was taken. The faculty member may require a urine drug screen test to be done immediately. Transportation will be arranged to take the student home if dismissal from the classroom, laboratory, or clinical experience is deemed necessary.

2. The faculty member will prepare a written report carefully documenting the observed student behaviors indicative of chemical impairment and submit it to the Director of Nursing, Dean, and Vice President of Student Affairs within one working day or as soon as possible. The Director will inform other appropriate faculty members also involved with the student during that semester on a "need to know" basis. A copy of this report will be placed in the student's academic file.

3. A meeting will be arranged with the student, the faculty member(s) who identified the problem, the Director of Nursing or one additional appropriate faculty member in the Director's absence. At this meeting, the faculty members will:
   a. Review the documentation of the alleged chemical impairment.
   b. Provide the student an opportunity to explain her or his conduct and to provide any other relevant information.
   c. Discuss the procedures that will be followed if the decision is made to carry forward with the policy.
   d. Discuss the academic consequences related to the alleged policy violation.

4. The Director of Nursing and involved faculty member(s) will then meet separately to decide based on the meeting with the student and the faculty member's professional observations as to whether to carry forward with the policy.
   a. If the student's explanation is satisfactory and no further process is deemed appropriate at this time, the student will be notified, and all records of the alleged event will be removed from the student's file. The Director of Nursing will be responsible addressing students who are confronted more than once.
   b. If there is evidence of possible chemical impairment, the student will be notified that the policy will be carried forward and the Director of Nursing or involved faculty member will secure the student's written agreement to seek a comprehensive substance abuse evaluation. A written, individualized agreement will be drawn up for each student involved in this process (see sample contract attached). The substance abuse evaluation will be at the student's expense and a copy will be provided to the Division of Nursing, Dean and referred to the Vice President of Student Affairs.

5. The student may not participate in any part of the nursing program until the substance abuse evaluation is obtained. If the student refuses to obtain an evaluation, he or she will be administratively dismissed from the Division of Nursing.

6. Possible outcomes from the substance abuse evaluation include:

    a. The substance abuse evaluation does not substantiate the alleged substance abuse by the student. If this occurs, all documentation related to the alleged incident is removed from the student's file and the student may return to all courses without negative academic consequences.

    b. The substance abuse evaluation does substantiate the alleged substance abuse by the student, but the student refuses to abide by the policy of enrollment in a treatment program and ongoing monitoring. If this occurs, the student is dismissed from the Division of Nursing.

    c. The substance abuse evaluation does substantiate the alleged substance abuse by the student and the student agrees to abide by the policy. If this occurs, the student signs an agreement to participate in a treatment program and to have his or her progress monitored by the Division of Nursing. The student may not participate in any Division of Nursing learning activities until the treatment program is successfully completed.

7. Once the treatment program is successfully completed, the student may return to classes in the subsequent semester while continuing to have his or her progress monitored by the Division of Nursing or an appointed affiliate. Monitoring (through blood, urine, or other testing) will continue during the student's enrollment in the Division of Nursing.

8. Following graduation, information about the student's diagnosis and treatment program will be shared with the Professional Assistance Program in the state in which the student seeks licensure.

Reporting Form for Alleged Chemically Impaired Student

Date: _____

Faculty: _____

Student: _____

Observed behaviors: (see attached checklist)

Faculty comments:

_____

_____

_____

Student comments:

_____

_____

_____

Faculty recommendations:

_____

_____

_____

Conference date and time with student and faculty member filing report: _____

Faculty signature: _____

Student signature: _____

(Adapted from Clark, C. Boise State University, Boise, Idaho University of health Sciences, Department of Nursing Policy Statement Regarding the chemically Impaired Nursing Student)

Specific Observations to Support Reporting Form for Alleged Chemically Impaired Student Nurse

Review the following list of overall behaviors of chemically impaired student nurse and make a check mark next to each situation that applies to the student about whom you are concerned.

Appearance
- ☐ Decreasing attention to personal appearance and hygiene
- ☐ Odor of alcohol on breath
- ☐ Glassy, red eyes
- ☐ Altered pupil dilation or constriction
- ☐ Tremors
- ☐ Flushed complexion
- ☐ Slurred or rapid speech
- ☐ Diaphoresis
- ☐ Unsteady/staggering gait
- ☐ Persistent rhinorrhea
- ☐ Altered mental status
- ☐ Other (please describe): _____

Absenteeism
- ☐ Instances of leaving without permission
- ☐ Excessive sick days
- ☐ Frequent Monday and/or Friday absence
- ☐ Repeated absences, particularly if they follow a pattern
- ☐ Lateness to clinical/class, especially on Monday morning; and/or returning from lunch/break
- ☐ Leaving clinical/class early
- ☐ Peculiar and increasingly unbelievable excuses for absences or lateness
- ☐ Absent more often than other students for colds, flu, gastritis, etc.
- ☐ Frequent unscheduled short-term absences (with or without medical explanation)

Clinical Absenteeism
- ☐ Continued absences from the clinical area more than job requires
- ☐ Long coffee breaks, lunch breaks
- ☐ Repeated physical illness while in the clinical area
- ☐ Frequent trips to the restroom
- ☐ Unexplained absences during clinical shift

High Accident Rate
- ☐ Accidents while on the clinical unit
- ☐ Accidents off the clinical unit (but affecting job performance)
- ☐ Horseplay, which causes unsafe conditions

Difficulty in Concentration
- ☐ Work requires greater effort
- ☐ Jobs take more time
- ☐ Repeated mistakes due to inattention
- ☐ Making bad decisions or poor judgment
- ☐ Errors in charting
- ☐ Forgetfulness

- Blackouts
- Inappropriate responses

Confusion
- Difficulty following instructions
- Increasing difficulty handling complex assignments
- Altered mental status or cognition

Problems with Memory
- Difficulty in recalling instructions, details, conversations, etc.
- Difficulty recalling one's own mistakes

Poor Relationships in the Clinical/Class Area
- Failure to keep promises and unreasonable excuses for failing to keep promises
- Over-reaction to real or imagined criticism
- Borrowing money from fellow students/staff/faculty
- Unreasonable resentments
- Avoidance of associates
- Lying and exaggerating
- Complaints from students, staff, patients, others
- Blames other for problems
- Isolation/withdrawal from the group

Reporting to Clinical/Class
- Coming to/returning to the clinical area/class in an obviously altered condition

General Lowered Job Efficiency
- Missed deadlines, unreliable
- Complaints from patients, family members, other students, faculty
- Improbable excuses for poor job performance
- Cannot be depended on to be where he/she said or do what he/she said he/she would do
- Shuns job assignments, incomplete assignments
- Is found on units where he/she does not belong
- Frequent medication errors or errors in documentation
- Excessive use of PRN medications
- Frequent un-witnessed medication wasting or loss
- Frequent complaints from patients of inadequate pain relief

Uneven Work Pattern
- Alternate periods of high and low productivity

Other Behaviors
- Sleeping in the clinical area or class
- Withdraws from others isolates self
- Mood swings
- Increasing irritability
- Relates problems at home, with relationships, with finances, etc.

The Student Who May Be Diverting Drugs
- Always volunteers to give medications
- Patient complaints of no relief-discrepancies on records
- Always give IM (PRN) and maximum dose when other nurses do not
- Has frequent wastage, such as spilling drugs or breaking vials, etc.
- Un-observed wastage or no co-signature

    ☐ Is working on a unit where drugs are missing or have been tampered with
    ☐ Frequently volunteers for additional shifts and on unit where not assigned

Others

_____
_____
_____
_____

Review the items checked. The student's work performance and behaviors may be affected using alcohol/other drugs or a personal/emotional problem. Document each occurrence in an anecdotal note, and when appropriate, conduct a conference. When the performance deficit or adverse situation cannot be attributed to a management problem, follow the WSON of Nursing Policy for the Chemically Impaired Student. Interventions need to include discussion and referral to an experienced professional who can assist the nurse to obtain the appropriate help. (Adapted from Catanzarite, A. (1989) and Dunn, D. (2005)

Criminal Background Check/Drug Screen

All students are required to complete a criminal background check and drug screen both years of the nursing program prior to the fall semester. This may not be waived by an employing institution. Students 21-years or older prior to the junior or senior year must also complete an employment verification for an additional fee. This requirement is based on recommendations from the Georgia Hospital Association and the clinical agencies regarding the safety of patients and the liability risk if a student harms a patient in a clinical setting. All students are responsible for ordering and paying for the criminal background checks and drug screens. The student will be required to give access to the results of the background check and drug screen to clinical facilities to gain clinical placement. If a student is denied clinical placement for any reason relating to the facility's review of the background check and drug screen, a Division of Nursing faculty member will make an attempt to place the student in another facility. If the student is denied placement by the second facility, the student cannot progress in the nursing program.

Student Employment Policy

Students pursuing a degree in nursing will find the program demanding and time consuming. The faculty of the Division of Nursing neither encourages nor discourages students from seeking employment either in the health care setting or elsewhere. Some students find this beneficial; others do not. The amount of time spent at work is the prerogative of the student. Full-time employment is discouraged. Opportunities for clinical placements frequently occur at non-traditional times of the day and week requiring the nursing student to be very flexible. This flexible non-predictable schedule makes employment difficult. Class and clinical schedules will not be arranged to "fit" student needs because of employment. Students who decide to work do so at their own risk and are encouraged to limit outside employment to no more than 16 hours per week.

In addition, the Georgia Board of Nursing has very specific rules regarding student nurse employment. "Students, who are not otherwise licensed or certified, shall be employed only as unlicensed nursing personnel. They shall not represent themselves as nursing students nor assume responsibilities within the scope of practice of a registered nurse." (GBON Rules and Regulations 410-3-.08)

The faculty and the college assume NO RESPONSIBILITY for students working as paid employees of any institution. While working as employees, Berry College students should never wear the Berry College student uniform or name pin. The student should follow the employer's policy and procedure regarding activities which may be performed assumed by an unlicensed employee. When charting, the student should never sign the chart as "SN."
Likewise, the student should never administer any kind of medications, take physician's orders, be "in charge," or do any other activity usually assumed by a licensed person. The student should chart only if other unlicensed personnel chart or if the job description explicitly states this is expected. When charting, the student should never sign the chart as "SN." For the health and safety of our students and those we provide care for, students are prohibited from working within 8 hours of an assigned class or clinical.

Estimated Program Expenses

The following list of estimated costs is designed to allow students to anticipate and plan for them

in a timely manner. We hope this information will be helpful.

a. Travel to clinical activities - Students are individually responsible for obtaining transportation to and from clinical activities. At times this may require travel to cities other than Rome. Students are reminded that this is an additional expense, and they must arrange their own transportation to these distant facilities. Please keep in mind that carpooling is a cost-effective option.

b. Books –Most of the required textbooks are electronic, purchased by the college through student fees, however, a few additional textbooks are required to be purchased before the first day of class for the semester. These requirements will be shared with the student and failure to purchase these additional resources may result in a grade penalty. All texts may be needed during the time the student studies for the registered nurse licensing exam (NCLEX). It is recommended that students keep nursing textbooks until after graduation.

c. A laptop computer updated to be compatible with testing software will be required for testing and clinical assignments.

d. A cross-cultural immersion experience during the summer after the second or third semesters is required of every nursing student. Students will earn three semester credit hours required in the nursing program while completing the immersion experience. The cost of the three semester hours of tuition is included in the expected cost of the trip. The projected cost is approximately $4,000- $5,000 dependent on location. This will provide air transportation, hotels, travel insurance, and all meals in country. The cultural immersion is billed to the student's account and payments can be made by the student at the business office in installments as set up each year.

e. Syllabi and handouts are available on Canvas. Students will be expected to have access either online or printed for class.

f. Uniforms, stethoscope, scissors, shoes, blood pressure cuff, hemostat, and penlight. - Approximately $300.

g. Course fee- $1300 per semester. Fee includes liability insurance, assessment testing, practice exam questions, clinical applications, bundled books (approximately 90%), and Electronic Medical Records.

h. National Student Nursing Association (NSNA-$25) and Georgia Association of Nursing Students membership (GANS-$10) for first year students is $45/year for new members and $50/year for renewals. Berry Nursing students are strongly encouraged to participate in this pre-professional organization.

i. Nursing pin (optional) - About $60

j. Licensure expenses - Application fee to Georgia Board of Nursing and NCLEX registration fee (due at graduation) $340.

k. iPads or tablets are encouraged for note taking in class but are not required.

Grading Policies

Students must satisfactorily complete all clinical learning activities and associated written assignments to pass the course. Students with unsatisfactory clinical performance will receive an "F" or "U" in the course (as appropriate for the course), regardless of grades earned on exams. Students may also be required to "make up" clinical absences that compromise their ability to meet learning goals.

Students must achieve a 75% average on examinations before collaboration points. Only if a 75% average on examinations obtained will other assignments such as written assignments, group work, or posters be added to the calculated final course grade. Students must have a course average of 75% to earn a "C-" in all nursing courses. Numerical averages below 75 will not be rounded up. If a 75% is not achieved, the student will receive the exam average score as their final grade for the course.

Exams

If a student must miss an examination, he/she must notify the instructor prior to the examination and have an excused absence for the exam period. If excused, he/she may be given an alternative exam in an altered format. Exams will be given the first hour of class. If the student arrives late, the exam must still be completed within the first hour. Once the exam is attempted, the exam will be graded.

Beginning with test three in the junior year, each exam will have four clinical calculation problems. If a student answers more than one clinical calculation problem incorrectly, the student will be required to complete a total of 50 clinical calculation problems and submit them to the instructor. The student will be required to answer 90% (45 problems of these problems) correctly. If less than 90% are answered correctly, then the student must complete 50 additional problems. The student will repeat this process until he/she correctly completes 90% of he problems. The final exam schedule will be posted with the course schedule in Canvas.

Collaborative Testing

For increased ability to critically think about test items in each exam, a collaborative testing method will be used. After each exam is taken individually, students will have the opportunity to increase their individual grade by 1-2 points with a collaborative group test grade. Students will complete their individual test and then stay seated until all students have completed the individual testing. The professor will assign collaborative testing groups. There should be no talking between groups, only within groups. Each group will complete the exact same test taken as an individual. In small groups, using critical thinking and collaboration within the group to select best answers, one student from the group will take the exam again for the entire group. If a student is unable to attend the scheduled exam time, he/she will forfeit the option of collaborative testing.

If the group together makes an A, 2 points will be awarded to each group member's individual score. If the group makes a B, 1 point is awarded to each group member's individual score. If below a B is made by the group, no points are awarded. A student does not receive collaborative points if they score less than 75% on an exam or are absent from the scheduled exam date.

Collaborative testing scores will not be included in the required 75 examination average; however, they will be calculated into the final grade if the student's individual examination average is 75 or above. The final exam will be taken individually with no collaborative testing. Upon completion of the collaborative exam, students will have an opportunity to review any questions answered incorrectly by accessing the ExamSoft review with rationales.

Mastery Level Quizzes

The purpose of PrepU Mastery Level Quizzes (MLQ) is to encourage students to stay current in reading and review content prior to class. MLQ will not be included in the examination average; however, they will be calculated into the final grade. To ensure success in this course and on NCLEX, the student must complete ALL PrepU Mastery Level Quizzes to a mastery level of 4 or higher as assigned prior to class. These quizzes will NOT be the only content covered in class or on the course exams. If a mastery level of 4 or higher is not reached prior to the assigned date/time, the student will receive a zero for that quiz grade. No quiz grades will be dropped, and no make-up quizzes will be given.

Classroom Preparation

Students will be expected to be prepared for class by completing the assigned readings, PrepU questions, or case studies as instructed. Reading assignments are consistent throughout the semester. To actively participate in classroom activities and maximize your individual learning, it is vital that the classroom preparation be done. Also, it has been shown that if PrepU questions are utilized, the questions prepare students for excellence on the National Licensure Exam.

Clinical Calculations Exam:

Before clinicals each semester, students must pass a clinical medication calculation examination and/or ATI. Specifics related to the exam, attempts, and necessary remediation will be described in the syllabus.

Division of Nursing Grading Scale

A= 90-100	C = 76-77
B+ = 87-89	C- = 75
B = 83-86	D = 65-74
B- = 80-82	F = <65
C+ = 78-79	

Didactic Attendance

Each course in the Division of Nursing contains significant academic content that builds on previous content, making attendance at each class meeting essential to the student's success. Students are expected to attend every didactic session punctually and prepared to discuss the day's assignment. Attendance will be taken; however, no points will be assigned for attendance alone. It is the student's responsibility to keep current notes from class meetings or obtain notes from a classmate in the event of an absence. Absences are excused for sanctioned academic and sporting events (and rarely, unavoidable personal life events) in consultation with the Course Coordinator ideally at the beginning of the semester so that any scheduled graded assignments or tests can be administered prior to the event. Except in the case of death of a family member or illness of the student or of a student's minor child, all absences not discussed and planned for with the Course Coordinator will be considered unexcused or "unsatisfactory". The consequence of unexcused absences may result in deduction of points from tests or assignments, additional written assignments, and loss of clinical preference.

Career Day

- o Complete the Career Day Visit Form in Viking Web
- o Student and faculty signatures are required on the Career Day Visit form.
- o Signature of potential job site is required, along with a copy of pertinent emails from potential job site confirming interview.
- o Visits will be at the faculty's discretion.

<div align="center">Career Day Visit Form</div>

Part I – To be completed by student.

Date_____
Student Name_____
Student ID_____
Course_____
Potential Job Site:

_____

_____

Date of Visit_____
Student Signature_____
Faculty Signature_____

Part II – Student secures the appropriate signature from the potential job site and returns this form to the course faculty.

Potential Job Site Contact Printed Name_____
Title_____
Potential Job Site Contact Signature_____
Date of Visit_____

Civility Policy

Respect for persons is an ethical principle and is very important in becoming a professional nurse. Each individual, whether a patient, friend, colleague, fellow student, or faculty member has moral worth and deserves to be treated with respect. Lack of respect sometimes leads to incivility. The nursing curricula includes evidence-based strategies so students can learn about aspects of respect and civility.

Collegiality is defined as respect for others and treating others with civility. Further explanation of civility can be seen in the items of The Clark Civility Index for Students and Classmates (2017). These items are discussed in detail in the orientation and students sign a contract for civility at that time. Also, faculty discuss civility at the beginning of each course as a reminder of actions that are respectful and civil toward others. The need for civility among students will be required during all types of teaching and learning environments including clinical settings, classroom, and teamwork participation.

Incivility will not be tolerated. Students who are showing acts of disrespect to others by being uncivil toward others will first be notified of this behavior as disrespectful in a conference note with the faculty who experienced the behavior. If the action does not change, the Professional Behavior Counseling and Contract for Change process will begin with incivility as the concern. If a pattern of this behavior continues, the student may be subject to probationary letter and/or dismissal from the DON program.

Student Civility Contract

I, _____, understand respect for persons is an ethical principle and is very important in becoming a professional nurse. Each individual, whether a patient, friend, colleague, fellow student, or faculty member has moral worth and deserves to be treated with respect. Lack of respect sometimes leads to incivility. The nursing curricula includes evidence-based strategies so I can learn about aspects of respect and civility.

I also understand: one objective in every nursing course states that I will *Demonstrate collegiality when interacting with peers and faculty and participating in creating a caring, learner-centered academic community environment in the classroom.* Collegiality is defined as respect for others and treating others with civility. Further explanation of civility can be seen in the items of The Clark Civility Index for Students and Classmates (2017) which are listed below. These items were discussed in detail in the junior orientation, and I will sign this document to show I will act with civility. The need for my civility will be required during all types of teaching and learning environments including clinical settings, classroom, and teamwork participation.

I also understand: Incivility will not be tolerated. If I show acts of disrespect to others by being uncivil toward others, I will first be notified of this behavior as disrespectful in a conference note with the faculty who experienced the behavior. If I do not change my actions, the Professional Behavior Counseling and Contract for Change process will begin with incivility as the concern. If my pattern of uncivil behavior continues, I may be subject to probationary letter and/or dismissal from the DON program. The Clark Civility Index (2017) lists items that I will be expected to use regularly. They are:

- Role-model civility, professionalism, and respectful discourse.
- Add value and meaning to the educational experience.
- Communicate respectfully (by email, phone, face-to-face) and really listen.
- Avoid gossip and spreading rumors.
- Avoid making sarcastic remarks or gestures (staged yawning, eye-rolling).
- Pay attention and participate in class discussion and activities.
- Use respectful language (avoid racial, ethnic, sexual, gender, religiously biased terms).
- Avoid distracting others (misusing media, devices, side conversations) during class.
- Avoid taking credit for someone else's work or contributions.
- Co-create and abide by classroom and clinical norms.
- Address disruptive student behaviors and promote a safe, civil learning environment.
- Take personal responsibility and stand accountable for my actions.
- Speak directly to the person with whom I have an issue.
- Complete my assignments on time and do my share of the work.
- Arrive to class on time and stay for the duration.
- Avoid demanding make-up exams, extensions, grade changes, or other special favors.
- Uphold the vision, mission, and values of my organization.
- Listen to and seek constructive feedback from others.
- Demonstrate an openness to other points of view.
- Apologize and mean it when the situation calls for it.

_____   _____
Student Signature   Date

_____
Student printed name

Revised 12/4/24

Classroom Conduct

Please do not allow your cell phone or other electronic device to disrupt the class. If these devices are brought into the classroom, they must be turned off and put away for the duration of the class. You will be asked to leave the class if you cannot comply with this policy. You are encouraged to take written notes during class and may use a tablet to take notes in classes where permitted. Please <u>DO NOT</u> play games, surf the internet, etc., during class.

Practicum Attendance

Students must successfully complete all assigned clinical laboratory experiences (e.g. healthcare system, community site, skills lab, simulation) and associated written assignments to pass the clinical course. Failure to satisfactorily meet the objectives of the clinical rotation listed on the Clinical Evaluation Tool will result in failure of the course regardless of the course grade. Specific criteria necessary to successfully complete clinical laboratory experiences are explained on the Clinical Evaluation Tool (CET) Guidelines. Attendance and punctuality are required for clinical and post-clinical conferences. Any unexcused absence will result in clinical failure for the course. A pattern of tardiness will also result in clinical failure. All clinical absences are to be made up noting that 1 clinical makeup day is scheduled at the end of the semester. Greater than 1 absence will most likely result in an incomplete for the semester requiring completion over the break period between semesters with a faculty member as available. All students must provide appropriate documentation for any clinical absence. This would include, but is not limited to, health care provider excuse, legal documents, or professional documents. Determination of an excused absence is at the discretion of the faculty.

Clinical Conduct

It is imperative that Berry College Division of Nursing students demonstrate a positive professional appearance to our valued community supporters. This means dressing in clean and neat professional attire, being alert, and engaged (as addressed in the Uniforms and Personal Attire section of this handbook). If students are not interested in a particular clinical site, they are to be gracious and keep opinions to themselves. Students will have the opportunity to evaluate all the clinical sites at the end of the semester. We depend on the good will of the community contacts to make this the best program possible. What one student does today will impact what future Berry nursing students will be allowed to do tomorrow.

If students have a problem while in clinical in an acute care site or a community clinic site or are lost, cannot connect with assigned nurses, and or any other issue not listed here, students are expected to contact assigned faculty member on their cell phone immediately. The faculty member will help resolve the issue. If direct contact with the assigned faculty cannot be made, the next step is to call the Division of Nursing.

To successfully meet student learning outcomes, students must care for all patients. Patients are defined as men, women, and children.
- **DO NOT** handle a crisis without help.
- **DO NOT** leave a clinical assignment without permission.
- **DO NOT** arrive late and **DO NOT** leave early.
- **DO NOT use phone in public locations in clinical. If reference material needs to be looked up, do so in a private area. If there are other professional staff around, make**

sure they understand the phone is being used to look up clinical reference information. Other staff members using their phones for private use does not give students license to do the same.
- **DO NOT** send text messages while in clinical unless it is to the instructor.
- **DO NOT** answer personal phone calls while in clinical.
- **DO NOT** smoke or use smokeless tobacco or chew gum while in clinical.

Medication Administration or Skills Performance in Clinical

Students who have demonstrated satisfactory proficiency in nursing skills, including medication administration, may be allowed to perform these skills in the clinical setting with the supervisor and/or approval of the clinical faculty. To ensure patient safety, the clinical faculty or the licensed healthcare worker must supervise any nursing skills performed by the student which are usually performed by a licensed person. The student should NEVER independently perform any activity usually performed by a licensed person, including medication administration. Students who perform any activity usually performed by a licensed person, including medication administration, without the supervisor and/or approval of the clinical faculty will be subject to disciplinary action at faculty discretion and per the student handbook's nursing program policy.

Confidentiality Policy

Nursing students and faculty are frequently privileged to confidential information during clinical and classroom experiences. Students and faculty have access to medical records, obtain personal information from patients and families, and participate in formational assessments, personnel issues, continuous quality improvement and financial or strategic planning. Faculty are often privileged to personal information about students during advisement and during clinical conferences. Because confidentiality is a legal and ethical expectation of students and faculty, the Berry College Division of Nursing has developed the following policy to clarify the scope and significance of maintaining confidentiality. All nursing students and faculty in the Division of Nursing at Berry College are expected to abide by the following guidelines:

1. All written, verbal electronic information regarding a patient or institution is to be kept in strict confidence.
2. Verbal or written disclosure of information about patients or agencies including pictures and postings to social media to any unauthorized person is prohibited.
3. Any written information about a patient must only contain the patient's initials and should be secured and shared only with students and faculty participating in the care of the patient.
4. The reporting of information specific to agencies may include the department or individual titles; however, it may not include the names of agencies or persons involved. Data must be summarized and reported collectively to ensure confidentiality for the participants.
5. Any written communication (proposal or report) between the student and preceptor/agency must be approved by the faculty before it is presented to the preceptor.
6. Any verbal or written communication whether in the classroom, seminar, lab, or clinical settings is for the sole purpose of learning and is also considered under this confidentiality policy.
7. Students and faculty participating in teaching/learning activities are expected to maintain

confidentiality regarding personal information shared. Relevant academic information regarding a student may be shared on an "as needed" basis within the Division of Nursing to provide the support and assistance to enhance the student's potential for success in the program.

8. Students and faculty should continue to keep all privileged information obtained during enrollment or employment at Berry College confidential, even after graduation or termination.
9. Students in violation of this policy will be reviewed by the faculty and the Director of Nursing and may receive a failing course grade. Faculty in violation of the policy will be reviewed by other faculty and the Director of Nursing and a plan of action will be decided at that time.
10. Students will renew this contract annually after review of the policy by faculty. Relevant academic information regarding a student may be shared on an "as needed" basis within the Division of Nursing to provide the support and assistance to enhance the student's potential for success in the program.
11. Students and faculty should continue to keep all privileged information obtained during enrollment or employment at Berry College confidential, even after graduation or termination.
12. Students in violation of this policy will be reviewed by the faculty and the Director of Nursing and may receive a failing course grade. Faculty in violation of the policy will be reviewed by other faculty and the Director of Nursing and a plan of action will be decided at that time. Students will renew this contract annually after review of the policy by faculty.

Unsafe Practices

Nursing students are legally responsible for their own acts, commission, or omission, in the clinical area. It is the responsibility of the nursing faculty to evaluate unsafe student behavior and initiate dismissal from the clinical setting when appropriate. Unsafe clinical behavior is any act, practice, or omission that fails to conform to the accepted standards of nursing care which result from a disregard for the health and welfare of the public and of the patient under the student's care, and includes, but is not limited to, the following offenses:

1. Violation of safety in patient care
   a. Falsification of patient records
   b. Commission or omission of patient care that endangers a patient's life or negatively impacts a patient's recovery and/or wellbeing
2. Violation of confidentiality
3. Physical/verbal abuse of patient, peer, faculty, or clinical staff
4. Evidence of substance abuse (possession, use, sale, or delivery)
5. Theft from patient, clinical sites, or school

A student who is unsafe in nursing practice by a panel of nursing faculty may be asked to, but is not limited to, the following outcome(s):
   a) Remediation
   b) Academic withdrawal
   c) Counseling

d) Dismissal from the course, nursing program, or Berry College

Procedure

When a student's behavior endangers the safety of a patient, peer, staff member, **or** clinical faculty, the instructor will immediately dismiss the student from the clinical setting. The student is to meet with the Course Coordinator, Clinical Coordinator, and/or Director of Nursing within 48 hours of the event. The Professional Behavior Counseling Form and a Contract for Change will be completed with date for reassessment established.

Clinical Evaluation Tool (CET) Guidelines

In most clinical courses, students will document their developing competencies using the Clinical Evaluation Tool (CET). These competencies are divided into **professional behaviors** based upon the American Nurses Association Standards of Practice, and **AACN Essentials**. Students will complete these according to the following guidelines:

1. Under the professional behaviors, the competencies are listed and the student is asked at the beginning of the rotation to complete their definition of what observing it looks like. This is not a reflection, but their interpretation of what it means to demonstrate the competencies. As an example, "to accept responsibility for one's own actions and attitudes" could be *I see accepting responsibility for my own actions and attitudes is assuring that I am responsible for making sure I triple check myself before any high risk procedures like giving medications. I will follow the 5 rights. I will always be mindful of patient safety. I will show up with a smile on my face and song in my heart.*
2. This initial self-generated definition is evaluated by the Clinical Instructor, offering feedback, and if necessary a second definition can be generated by the student.
3. Each week, the student will document clinical location and the date(s) as an attestation for demonstrating these professional behaviors.
4. The AACN Essentials CETs are to be well-constructed exemplars addressing how the student nurse exemplified the competency. Students should document on some of these each week with a goal of documenting 1 exemplar per competency by midterm and then a second exemplar by their final clinical day of the semester. These will be graded each week by the clinical instructor.
5. Both midterm and final evaluations are to be completed by the student and the clinical instructor noting strengths and opportunities for development.
6. Final CET's are to be filed in the student file by the Division Administrative Assistant when approved by the course coordinator.

Social Media Policy

Social networks and the Internet provide unparalleled opportunities for rapid knowledge exchange and dissemination among many people, but this exchange does not come without risk. Nurses and nursing students have an obligation to understand the nature, benefits, and consequences of participating in social networking of all types. Online content and behavior have the potential to enhance or undermine not only the individual nurse's career, but also the nursing profession. Berry College Division of Nursing will follow the recommendations provided by the American Nurses Association.

ANA's Principles for Social Networking
1. Nurses must not transmit or place online individually identifiable patient information.
2. Nurses must observe ethically prescribed professional patient — nurse boundaries.
3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm a patient's privacy, rights, or welfare to the attention of appropriate authorities.
6. Nurses should participate in developing institutional policies governing online conduct.

6 Tips to Avoid Problems
1. Remember that standards of professionalism are the same online as in any other circumstance.
2. Do not share or post information or photos gained through the nurse-patient relationship.
3. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
4. Do not make disparaging remarks about patients, employers, or co-workers, even if they are not identified.
5. Do not take photos or videos of patients on personal devices, including cell phones.
6. Promptly report a breach of confidentiality or privacy.

Student Illness

Students should not participate in any clinical activities if they are experiencing any of the following: elevated temperature, diarrhea, vomiting, open wound drainage, respiratory infections, or active and visible Herpes Simplex. Clinical instructors should be contacted concerning any of these problems. If an injury should occur in a clinical facility during a clinical activity, the student can be seen in the nearest emergency room. The student is responsible for any expenses incurred for treatment received in a clinical facility.

Purpose: To establish effective practice and policy for the use of Assessment Technology Resources, LLC ("ATI") resources and standardized preparation for the NCLEX examination. The ultimate purpose is to improve student knowledge for successful mastery of content and challenge of standardized exams. To assure the highest probability of success in passing NCLEX, the faculty will integrate study preparation activities throughout the curriculum. Prior to forwarding graduates' names to the licensing boards, the School of Nursing requires each student demonstrate proficiency and a high probability for passing the NCLEX-RN examination. Proficiency determination includes, but is not limited to, achieving the predictor score benchmark on the ATI Comprehensive Predictor examination, course grades, and satisfactory ratings in all clinical practicum courses. Full implementation of the ATI Content Master Series with a Level 2 or greater scored on each of the proctored examinations, completion of all focus review, and completion of the ATI review course enhances the students' probability to pass the NCLEX-RN exam.

Policy:
- ATI is a comprehensive suite of products that should be used to prepare for lecture/ simulation/ clinical, used by students to understand their learning needs and areas of mastery, used by faculty to assess individual student and cohort knowledge in a standardized manner, and allow for student remediation (Focused Review and dynamic quizzing).
- The placement of the Content Mastery Series (CMS) practice and proctored assessments support curriculum goals and learning objectives, using the following schedule to assure at least 90% of the content to be tested has been taught. The ATI CMS Practice Assessments Topic Descriptors support optimum placement in the curriculum.
- ATI products will be implemented consistently across the curriculum with expectations communicated clearly to students and faculty.
- Beginning in the second semester, each CMS assessment (practice- remediation- proctored assessments) will account for 2.5-10% of the student's grade, with the bulk of this grade originating from robust use of Focused Review (FR) and/or dynamic quizzing.
- The goal for the proctored CMS assessments is for students to achieve a Level 2 proficiency on the first attempt, per evidence that this predicts future performance and NCLEX success. The following procedures have been adopted to support this goal.

Procedures:
1. Readings from the ATI Review Modules in eBook format and assignments from the Tutorials (Nurse Logic, etc) should be assigned for all individual classes and topics.
2. Targeted Medical Surgical Practice Assessments should be opened for students to practice with while they are learning specific content (e.g.: the cardiovascular practice assessments should be opened when covering cardiovascular content in Adult 1.)
3. Proctored Assessments are to be scheduled:

   Semester 1:
   - NUR 316: Critical Thinking
   - NUR 316: Fundamentals Dosage Calculations
   Semester 2:

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- NUR 327: Fundamentals midterm; mental health end of semester
- NUR 325: Med Surg Drug Calculations

Semester 3:
- NUR 416: Nutrition; Med Surg
- NUR 418: Pharmacology
- NUR 417: Maternal Newborn, Nursing Care of Children
- NUR 415: ATI Med Calculations: Maternal Newborn, Mental Health Drug Calculations, Pediatric Drug Calculations

Semester 4:
- NUR 426: Community
- NUR 427: Leadership
- NUR 425: Critical Care Drug Calculations; Comprehensive Predictor;
- NUR 428: Critical Thinking Exam

4. All Practice Assessments and FRs linked to a scheduled Proctored Assessment are to be assigned *according to the demands of the semester*, such that each assessment is followed by a time for focused review:
   a. General format is Practice A followed by focused review and completion of ALT or dynamic quizzing as assigned by the instructor, Practice B followed by focused review and completion of ALT/ dynamic quizzing, and then the proctored exam.
   b. Rationales are to be kept **off** until all focused reviews are complete given the possibility that questions are repeated on practice A and B. Rationales for both Practice A and B are to be turned on at least 3 days prior to the Proctored Assessment, only AFTER the focused reviews/dynamic quizzing have been completed as outlined above.
   c. Focused Reviews are to be done for both Practice A and B according to the following guidelines:
      i. Students are to review the electronic review, going to the specific questions missed as well as scrolling through the entire chapter, reviewing the content. (Focusing in on 1 question only assures mastery of that question, and the next test may have questions from different sections of this chapter so it is to focus remediation to master the content, not to master the question.)
      ii. Complete dynamic quizzing by:

         1. Create a dynamic quiz through ATI and complete a Loma Linda evaluation chart for each question missed.

            a. Go to "Assessments" tab in ATI
            b. Select "Dynamic Quizzing Learning System 3.0"
            c. Select "Dynamic Quizzes (1)"
            d. Select "Quizzes and Assignments"
            e. Select "New Custom Quiz"
            f. For Quiz Interface select "Enhanced Learning" for Quiz Mode select "Study"
            g. Choose additional settings: Question status- all, difficulty- all, question type- all, select subject- (nursing specialty

area), (amount of questions), untimed

    h. Name quiz- First initial, last name, (nursing specialty area)Remediation (example- NTracyMSRemediation)

    i. Submit a screenshot of a completed quiz to Canvas (**no minimum score**) WITH a completed Loma Linda chart for each question missed. This chart aids students in determining WHY they missed a question so they can be more aware of what their weaknesses are in test taking or test content.

    j. Submit the ATI exam report showing score and level.

    iii. Complete the post study quiz if available.

5. For any proctored assessment, the goal is a Level 2 (or a >90% chance of passing NCLEX for the Comprehensive Predictor) or greater. Failure to achieve a Level 2 (or 90%) will necessitate completion of a focused review for a documented time of at least 2 hours, assigned ATI dynamic quizzing, and a retake of the proctored assessment during finals week.

6. Each CMS assessment (practice- remediation- proctored assessments) will account for 2.5-10% of the student's grade, depending upon the course, and be earned through the following grading schema:

ATI Activity (All ATI's except **Comprehensive Predictor**)	Points Scoring
Practice A is completed with Individual Performance Report and Dynamic quizzing • Take Post Study Quiz if available	20 points
Practice B completed with 90% with Individual Performance Report and Dynamic quizzing • Take Post Study Quiz if available	20 points
Proctored Exam:	
-Level 3	40 points
-Level 2	30 points
-Level 1	10 points
-Below level 1	0 points
Focused Review	20 points for: • <u>If you earned level 3</u>: 1 hour of focused review with dynamic quizzing for questions missed • <u>If you earned level 2:</u> 2 hours of focused review with dynamic quizzing for questions missed • <u>If you earned level 1</u>: 3 hours of focused review with dynamic quizzing for questions missed • <u>If you earned below level 1:</u> 4 hours of focused review with dynamic quizzing for questions missed

Retakes After Proctored exam are required for level 1 or below after completing the focused reviews. Students earning a Level 2 are allowed to retake the exam with a goal of making a Level 3 but this is not required. Retakes will be offered during finals week.	• 10 points added if score improved to a level 2 or above on first retake.
Failure to take the retake for Level 1 or below will result in 0 total points for entire assessment.	0 points
TOTAL	**100 Points**

7. Students not achieving Level 2 on the prescribed retaken Proctored Exams listed above will be required to take the remediation courses outlined below:
   d. The junior level remediation course is NUR 330. The credit hours required for the remediation course will be dependent upon the number of CMS assessments the student needs to remediate. If 2 or less, a 1 semester course will be required. If 3 or more, a 2-semester course will be required to allow for the proper amount of instruction and remediation time. NUR 330 will include remediation plan of self-study utilizing the ATI and Lippincott NCLEX review and PassPoint materials will be created, culminating with a retake of the Proctored Exam. This will be taught in the summer between the 2nd and 3rd semesters for fall cohorts and during the third semester for spring cohorts.
   e. For last semester seniors, NUR 430 provides individualized remediation based upon senior level nursing student's needs and identified weaknesses. The intent of this course is to focus students' knowledge in preparation for the NCLEX examination. The course will utilize the ATI Capstone Content Review that involves completion of pre-assignment quizzes, weekly tips, weekly content assessments, and individualized post-assessment assignments, using a structured process of review. This will be required of all students who do not achieve Level 2 on the retake Proctored Exams listed above for Semester 3 courses or have less than an 85% predicated probability of passing NCLEX per ATI at the end of semester 3.
8. In the final semester of the program, students are required to:
   f. Attend the entirety of the 3-day ATI Review;
   g. Complete both Practice A and Practice B for the Comprehensive Predictor as described above; and
   h. Complete ATI Comprehensive Predictor Test, attempting to score a 90% predicted pass rate. A student failing to achieve the 90% predicted pass rate (score of 71.3% on 2019 Comprehensive Predictor) will meet with the faculty to develop an individualized plan of remediation that may include completion of an alternative review course and prescribed focused review. They will rechallenge the exam until this score is achieved, no sooner than 5 days after each unsuccessful attempt. If the >90% predicted pass score is not achieved prior to the semester ends, students will receive an earned course grade of an incomplete (I) until the 90% can be achieved.

PROMOTING STUDENT SUCCESS

Students are responsible for developing a plan for improvement when successful coursework and ATI results are lower than expected in the junior year. Students should use the following steps: Identify strengths and weakness based on ATI testing, class examinations, or clinical performance.

Students are responsible for completing Student Self-Assessment for ATI Content Mastery Exams and PassPoint Remediation form (see below). Percentage scores include the competency areas of management of care, safety and infection control, health promotion and maintenance, psychosocial integrity, basic care and comfort, physiological adaption, reduction of risk, and pharmacological and parenteral.

Remediation is completed by all students twice during the nursing program, between second and third semesters and third and fourth semesters. Students complete this remediation independently in PassPoint according to student performance on ATI exams in the previous semester. If a student scores below 65% in any content area on any two ATI exams, the student must remediate that category in PassPoint. If a student scores a Level 1 or below on one ATI exam, they must remediate on every category of the exam in which the student scored a Level 1 or below.

Berry College Class of	Student Self-Assessment for ATI Content Mastery Exams and PassPoint Remediation Student's name:									
	Community	Mental Health	Maternal Newborn	Children	Funda-mentals	Pharma-cology	Leadership	Adult MedSurg	Predictor	NCLEX Result
Year taken										
Level reached										
Competencies below 65%										
Management of Care										
Safety and Infection Control										
Health Promotion and Maintenance										
Psychosocial Integrity										
Basic Care and Comfort										
Physiological Adaptation										
Reduction of Risk										
Pharmacological and Parenteral										

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Course Exams and Remediation

Students who score below 80% on any course exam before collaborative points should schedule an appointment with the course faculty for a course specific student success plan. Students are responsible for completing the success plan.

Student Conference-Remediation Note

The Student Conference-Remediation Note (SCRN) is intended to help the student identify and correct areas of academic or clinical proficiency concern. When a faculty member deems it necessary for a student conference-remediation meeting, the student will attend the conference to discuss the issue(s) and the appropriate form will be completed and signed. The student is required to complete any areas addressed in the SCRN as instructed by the faculty, including but not limited to, any established deadline and/or proficiency level. In the event the student does not comply with the requirements on this form, the Professional Behavior Counseling and Contract for Change may be initiated in consultation with the Director of Nursing.

Berry College Division of Nursing
Student Conference Remediation Note

Student:_____Date:_____

Reason for Conference
____Test score under 80%
____Other

Notes:

Faculty Recommendations:
____Policy review
____Doctor's note required
____Study habits reviewed
____Remediation required
____Recommend the Academic Success Center as needed

Notes:

_____
Student Signature

_____
Date

_____
Faculty Signature

_____
Date

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PROFESSIONAL BEHAVIOR COUNSELING AND CONTRACT FOR CHANGE

The Division of Nursing has established a process for the counseling of students regarding several of the expectations and admonishments cited in this Handbook such as incivility, sleep deprivation, or other Professional Behavioral Issue. It is our belief that professional behavioral issues should be addressed in a timely and factual manner to allow for the development of a plan for growth and change.

Policy:
- Nursing students at Berry College are expected to maintain professionalism and adhere to the ANA Code of Ethics for Nurses at all times. Failure to adhere to these ethics and/or behave in an unprofessional manner is unacceptable in a professional nurse.
- The counseling form employs the Nursing Process in Ethical Situations and is to be completed in entirety.
- Not all behaviors require immediate Behavioral Counseling. Sometimes a warning or simple discussion granting grace can be effective. The form should only be used for egregious incidents or sustained unprofessional behavior.
- The form may be completed by any faculty member in consultation with the Director of Nursing.
- Follow-up is a key component of the counseling which includes a contract for change and then re-evaluation.

Procedures:
1. Unprofessional behavior is identified by faculty that may need to be addressed by the policy.
2. Faculty should discuss appropriate measures with coordinators and/or the Director of Nursing. Handling of the student situation is determined at the discretion of the appropriate faculty/Director.
3. The faculty facilitating this process completes pages 1-3 of the form with the student.
4. Plans for behavior change should include the student's recommendations.
5. Student signature confirms counsel but does not confer agreement. Students may not agree with the counseling and may not sign the form. Student declination should be noted. The form is to be scanned and forwarded to the Director of Nursing for review and filed in the student's permanent record.
6. Advise students of the consequences for continued unprofessional behavior.
7. Page 4 is to be completed during the follow-up session, scanned, and forwarded to the Director.
8. The Director of Nursing is available to assist with any preparation, meetings, or follow-up upon request.
9. Subsequent issues with the same student require additional professional and behavioral counseling documentation.

<p align="center">Berry College Division of Nursing</p>
<p align="center">Professional Behavior Counseling and Contract for Change</p>

Nursing students at Berry College are expected to maintain professionalism and adhere to the ***ANA Code of Ethics for Nurses*** at all times. Failure to adhere to these ethics and/or behave in an unprofessional manner is unacceptable in a professional nurse. This form employs the Nursing Process in Ethical Situations and is to be completed in entirety.

Student Name: _____ Date of occurrence: _____
Location: _____

Facts of Situation:
_____
_____
_____
_____
_____

Assessment/ Analysis of the Situation:
_____
_____
_____
_____
_____

Identification of the problem/ violation:
Provision 1: The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person. Unprofessional behavior observed includes:

    Argumentative or disrespectful behavior or conversations
    Nonparticipation or inattentiveness in class
    Other_____

Provision 2: The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population. Unprofessional behavior observed includes:

    Tardiness to clinical
    Unexcused absence from clinical
    Patient abandonment
    Other_____

Provision 3: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.   Unprofessional behavior observed includes:

    Impairment of any form in the academic or clinical setting
    Failing to assure patient safety
    Violations of the patient's privacy including postings to social media
    Engaging in unprofessional relationships with patients
    Other_____

Provision 4: The nurse has authority, accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal patient care.   Unprofessional behavior observed includes:

    Unprepared for clinical
    Failure to deliver care
    Working outside of the scope of practice

Appendix A: All Admission Forms
    Other_____

Provision 5: The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth. Unprofessional behavior observed includes:
    Unprofessional attire, failure to adhere to dress code policy
    Unexcused absence from class
    Unprepared for class or failure to complete academic assignments
    Disrupting class or clinical
    Other_____

Provision 6: The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care. Unprofessional behavior observed includes:
    Dishonesty or cheating on an assignment or examination
    Other_____

Provision 7: The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy. Unprofessional behavior observed includes:
    Failure to follow policies and procedures of Berry College or partner clinical facilities
    Other_____

Provision 8: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities. Unprofessional behavior observed includes:
    Engaging in discriminatory conversations or actions
    Other_____

Provision 9: The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy. Unprofessional behavior observed includes:
    Failure to report unprofessional behavior of others
    Failure to assist others in delivering care when requested
    Other_____

Source: American Nurses Association. (2021). Nursing: Scope and Standards of Practice, 4th Ed. Silver Spring, MD. ANA

Student Statement:

_____
_____
_____
_____

Consequence of Unprofessional Behavioral (depending upon severity)
    Policy Reviewed   Academic or Clinical Failure
    Referral to _____   Make-up clinical with student payment of
    Deduction of points from assignments or   the clinical faculty
    tests after 3 behavioral notes

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Appendix A: All Admission Forms
    Behavioral penalty for Senior Practicum
    (25%, 50%, 75%)
    Other:

    _____
    _____
    _____

Planning for Change with Identified Outcome Measures:
Contract for Expected Behavior Going Forward:

_____
_____
_____

Attendance:
Student Signature: _____ Date: _____
Faculty Signature: _____ Date: _____
Director of Nursing Signature: _____ Date: _____

Evaluation:
A follow-up meeting with the student, faculty, and Director of Nursing are to be held on
_____ to re-evaluate the student's progress and adherence with the contract.

Documentation of this meeting:
_____
_____
_____
_____

Consequences for not adhering with contract:

    Academic/ Clinical Failure in NUR _____
    Make-up clinical with student payment of the clinical faculty
    Behavioral penalty for Senior Practicum (25%, 50%, 75%) Refer to Senior Practicum Ranking Policy.
    Permanent amendment of file to be reflected in future recommendations
    Referral to nursing faculty to discuss dismissal from Nursing Program
    Other:

    _____
    _____
    _____

Resolution:
_____
_____
_____

Follow-up Attendance:
Student Signature: _____ Date: _____
Faculty Signature: _____ Date: _____
Signature: _____ Date: _____

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Transportation

Students provide their own transportation or decide to share this expense with fellow students in the same course/clinical.

1. Tickets and Fines
   a. Tickets and/or fines received are the driver's responsibility.
   b. Georgia law requires that seatbelts be worn by drivers and passengers.
2. All students owning/driving autos for clinical experiences must have automobile liability insurance.

Pregnancy Disclosure Policy

A student who is pregnant is strongly encouraged to notify the Director of Nursing of the Berry Division of Nursing as soon as possible. By doing so, the student and Berry DON administration can collaborate and develop an appropriate plan for the continuation of the student's education. Pre-planning can also help with challenges a student may face while pregnant or when recovering from childbirth (e.g., missed classes, make-up work, etc.). However, the choice to declare a pregnancy is voluntary, and a student is not required to disclose this information to the College. Voluntarily disclosing a pregnancy by a nursing student may be particularly beneficial due to the unique nature of the nursing program and its clinical requirements.

Options After Disclosure: Once a student has voluntarily decided to disclose a pregnancy to Berry College, the student will have several options, as described below.

- Continue at the College: If a student decides to continue in her program and desires to have any adjustments to her academic program due to the pregnancy, the student should contact the Director of Nursing to discuss any reasonable adjustments that may be necessary to continue in the program. Adjustments that have been agreed upon, if any, will be documented and signed by both the student and a College representative.
- Request a leave of absence: A leave of absence due to pregnancy may be for various amounts of time depending on a student's particular circumstances. Such a leave may be extended if deemed medically necessary by the student's doctor. Due to the structure of the Berry nursing program, the timing and/or length of a student's leave of absence may result in the student being required to re-take or finish course(s) in a future term. If taking a leave of absence due to a pregnancy, an Education Plan will be discussed and signed by the student and a college representative.
- Withdraw from the College: The student may, in her sole discretion, determine that she must withdraw from the College for an indefinite period of time or permanently due to her pregnancy. Normal College withdrawal procedures, and readmission procedures (if applicable), apply.

Questions or Concerns: A student who has questions about this policy or who is concerned about its implementation should contact the Director of Nursing.

Pathogens Exposure Policy

This policy is necessary for the education and prevention of the spread of blood-borne pathogens to students. These recommendations are based on the most current information from the Center for Disease Control (CDC), the Georgia Department of Human Resources (GDHR), the American Hospital Association (AHA), and the Occupational Health and Safety Administration (OSHA). The Code for Nurses states, "The nurse provides services with respect for human dignity and the uniqueness of the client unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems." In accordance with the Code, the Division of Nursing believes nursing professionals, including faculty and students, have a fundamental responsibility to provide care to all patients assigned to them and that refusal to care for patients with infectious diseases is contrary to the code of ethics of the nursing profession especially in light that strict adherence to isolation of blood and body fluids is considered sufficient to substantially reduce client/patient nurse and nurse client/patient transmission.

Just as nursing professionals have a moral commitment to care for all patients; faculty members have a special responsibility to exemplify the standards of ethical behavior and compassion as role models for their students. In addition, faculty members have an obligation to stay informed about new developments in infectious disease. No prospective student, faculty member, or staff member will be refused admission or employment solely because of positive results on diagnostic tests for a blood-borne infectious disease. Further, no screening of potential candidates will be required for either admission or employment.

The primary goal of blood-borne pathogens education is prevention; therefore, it is expected that upon entry into the Division of Nursing that each person will participate in the initial and annual education plan.

In the event of an exposure to a blood-borne pathogen, the Blood and Body Fluid Post-Exposure Plan will be stringently followed. Situations which arise, will be handled individually to provide maximum support to the affected individual. There are certain situations that may warrant the relief of student and or faculty responsibility from working with a client with an infectious disease. They are as follows:
1. A student with an infection that can be communicated to a patient with AIDS or any immunosuppressed patient,
2. An immunosuppressed student, and
3. Other situations not covered by the above. In such a case, the faculty and student will determine the assignment.

The following guidelines will be adhered to when working in a clinical facility and the College laboratory setting for students.

Blood and Body Fluid Post-Exposure Management
Blood/body fluid exposure is defined as any of the following:
    Percutaneous inoculation (needle stick or sharp injury).
    Non-needle percutaneous exposure (open cuts and/or abrasions).
    Direct mucous membrane contact (accidental splash).

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Direct contact with large amounts of blood and/or body fluids without glove protection (hands frequently have small nicks or cuts, which act as a portal of entry for microorganisms).

Clinical learning sites include hospitals, clinics, physicians' offices, patients' homes, schools, skills labs, and other settings where students may learn and apply nursing care/skills.

All students are responsible for obtaining their own health insurance and are responsible for the costs of medical/health care assessment, treatment, and follow-up that are not covered by the student's health insurance. Students should be aware of the coverage on their health insurance policy, as most may not cover the total cost of required medical treatment and services in the case of a needle stick or hazardous exposure to blood or blood products.

Students exposed to needle sticks or potentially infectious blood or blood products, or body fluids should be evaluated and have treatment initiated within 2 hours according to established criteria that conform to federal and state law and Center for Disease Control (CDC) standards.

The treatment/management guidelines are as follows:
  1. Wash human bites with soap and water.
  2. Wash needlesticks and cuts with soap and water.
  3. Flush splashes to nose, mouth, or skin with water.
  4. Irrigate eyes with clean water, saline, or sterile wash.
  Source: https://www.cdc.gov/infection-control/hcp/guidance/index.html

Immediately upon receiving a contaminated needle stick or exposure to blood, blood products, or body fluids, the student will:
  1. Report the incident to the clinical faculty member/preceptor and the appropriate person in the clinical agency.
  2. Complete the appropriate institutional incident report, plus complete the DON Clinical Incident Report Form attached to this policy. This form is to be completed for incidents in the Simulation Lab as well. The DON Clinical Incident Report Form is for the DON and is not to be given to the Clinical Facility (you will need to complete both forms.)
  3. Follow institutional protocols regarding wound care and reporting procedures. Clinical faculty should be notified as soon as reasonably possible.
  4. Seek treatment intervention from the Campus Health Center, the clinical facility where the incident occurred, or a private health care provider within 2 hours of the exposure incident.

Based on the information provided to the health care provider, baseline lab values and chemoprophylaxis may be ordered. In responding to an incident in which a student experiences a contaminated needle stick or exposure to blood, blood products, or body fluids, the clinical faculty will:

  1. Verify that appropriate wound care has been initiated.
  2. Counsel the student to seek follow-up care at the Campus Health Center or his/her private health care provider.

3. Advise the student to consult the Campus Health Center's Treatment Protocol (available in the Campus Health Center) or the CDC for follow-up on contaminated needle sticks or exposures to blood, blood products, or body fluids should he/she choose to seek a private health care provider.

4. Assist the student in completing any administrative paperwork that may be required.

5. Send completed DON Clinical Incident Report Form to Director of Nursing.

BERRY COLLEGE

Division of Nursing Clinical/Incident Report Form

Name:_____ **Date of Report**: _____

Date of Incident_____ **Time of Incident**: _____

Instructor Supervising at the Time of Incident:

_____

Location Occurred, Circle One: Clinical/ Simulation/Skills Lab/ Nursing Building/Other: _____

Circle One: Student/ Visitor/ Faculty/ Staff   **Persons Affected:** Single person or Multiple Injury

Type of Incident (Mark all that apply):

- [ ] Injury to Self/Staff (Needle Stick, Fall), Student Exposure (blood, body fluids, etc.)
- [ ] Damage to Lab Equipment
- [ ] Other: _____

Actions Taken:

- [ ] Thoroughly washed site/ Use of First Aid Kit
- [ ] Use of AED
- [ ] Use of Stop the Bleed Kit
- [ ] EMS Called
- [ ] Other

Brief Narrative of Event:

_____
_____
_____
_____
_____
_____
_____

Report Completed By: _____

Student's Instructor Notified: Date: _____ Time: _____

Director of Nursing Notified: Date: _____ Time: _____

Recommended Follow-Up:

- [ ] Additional Instruction, Remediation
- [ ] Schedule Re-Test by: _____
- [ ] Other: _____

Berry Nursing Dress Code

Professional Attire: The purpose of this policy is to provide Berry College's students with guidance for appropriate appearance to maintain the exceptional quality and service associated with the Berry College mission. The student's appearance greatly impacts patients, visitors and the communities we serve.

General Guidelines: Berry College Department of Nursing recognizes the diversity of its students and takes a sensitive approach to dress and uniform requirements. However, priority will be given to health and safety, security and infection control considerations.

Business Casual Attire: BCA (when indicated by faculty) encompasses clothing that is comfortable at work, yet appropriate for a business environment. Acceptable attire includes skirts, dresses, capris, slacks, khakis, blouses, turtlenecks, sweaters, golf-shirts, and shirts with a finished collar or neckline. In general, it is expected that students wear BCA at all times when engaging in learning activities at Berry College.

Uniforms: Students are to wear a complete uniform, which is clean and neat (ironed) during performance of clinical skills (e.g. in lab, checkoffs, skills, clinical, and simulation experiences).

Fit of Clothing: Clothing should fit well and allow for comfortable movement throughout all required work activities without compromising safety or professional image. Professional image includes the requirement of appropriate undergarments. Excessively baggy or tight attire is not considered acceptable in appearance. Shirt length is required to ensure coverage of the torso. Necklines should adequately cover the chest area.

Clothing Condition: An appropriate appearance requires clothes to be neat, clean, wrinkle-free and in good condition. Faded and/or frayed clothing are not considered professional in appearance.

Shoes: Shoes to be worn with the clinical uniform must be safe for working conditions. For safety reasons, students should wear neutral-colored, closed-toe footwear. Clean athletic shoes in a neutral color are acceptable when the role/work being performed requires it. Clogs and sandals may not be worn as part of the clinical uniform.

Fingernails: Fingernails should be clean and short (less than ¼ inch) to avoid injuring the patient, tearing the mannequin latex, or collecting microorganisms. Nail polish, SNS, gel, artificial, and wrapped nails are prohibited.

Hair: If hair length is below the collar, it must be worn pinned up or tied back off of the shoulders during clinical, skill, or simulation experiences. Barrettes and hair combs in neutral colors may be worn. Unnatural hair color (e.g. bright colors) is unacceptable and not permitted. Beards and mustaches are acceptable if neatly trimmed.

Make-up: Make-up should be conservative and neutral in color. Artificial lashes of any type are prohibited.

Jewelry: In the clinical, skills, or simulation environment, since jewelry may collect microorganisms, students should restrict earrings to one pair of small studs, less than one inch in diameter, in the ear lobe, one earring per ear. Simple wedding rings and wristwatches may be worn. No other body jewelry may be visible. Tongue jewelry is prohibited.

Body Art: Tattoos are allowed to be visible if the content is tasteful. Any text or image that would be considered distasteful must be covered and should not be visible at any time. Faculty or facility staff should be consulted for guidance.

Scents: Scents are a highly subjective substance and may be allergenic to some individuals; therefore, they are to be avoided in any form (perfumes, scented deodorant, body lotion, cigarette smoke, etc.) while functioning as a Berry College nursing student.

Standard Equipment
1. Stethoscope, bandage scissors, blood pressure cuff, hemostat, and penlight.
2. Pens, note pad, smart phone, or resource materials (Cell phones may not be used for sending or receiving personal calls or texts.)

Ordering Uniforms
Uniforms can be purchased from a local Rome company, Lynn's Uniforms. The uniform color is steel, with Berry College BSN Nursing monogramed on the front of the uniform top and the white/gray lab coat. Students must purchase a Berry patch and have it sewn onto their nursing top, opposite side of the monogram. We have chosen a design by 'Urbane' for the women and 'Landau' for the men. The required Berry Monogram and patch are an extra cost to the student.

Women's
Ladies Landau Forward #LT101 Pewter Top w/one pocket or #LT100 w/ two pockets
Ladies Landau Forward #LB400 Pewter pants
Women's White Healing Hands Lab coat #5053, White

Men's
Men's Tops 1 Pocket Style#LT111, 3 Pocket top LT110 Pewter
Pant style #LB410 Men's Landau Forward #LB400 Pewter pants
Men's Healing Hands Lab coat #5150, White

Berry Nursing logo on left chest= $4.00
Name Badge= Ordered via Division of Nursing $12-$21
Normal alterations (hem, darts, slits). Lynn's Uniforms will alter for students. Please stop by at your convenience to be fitted.
Monogram fee = $5.00
Uniform Contact information: Daina Silvers- 706-291-7266 244 Broad Street, Rome, GA, 30161
Textbooks are primarily electronic and a link and instructions will be provided to students.

<div align="center">Professionalism & Service Portfolio (PSP) Policy</div>

Purpose: Professionalism a core value of nursing as articulated by the American Nurses Association Code of Ethics Provision 9: "The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy."
The Division of Nursing supports this standard by committing to it as a Program Learning Outcome Goal and developing developmental guidance and accountability for pursuing throughout the nursing program:
Program Learning Outcome Goal #9: Formulating and cultivating a sustainable professional identity, including accountability, perspective, collaborative disposition, and comportment, that reflects nursing's characteristics and values.

Policy:
- Junior and senior nursing students will participate in various opportunities and activities that will let them develop a professionalism and service portfolio. Elements of this portfolio may be useful on their resumes when searching for their first position.
- Using the attached Rubric, students will strive to accumulate 10 points each semester for which a grade will be assigned.
- A Digital Portfolio will be created in their senior year to showcase some of these activities.
- This will serve as a measure for Institutional Effectiveness starting in 2023-24 with a goal of: 80% of the juniors and seniors achieving 20 points by the completion of the academic school year. Thereafter, our goal will be for 80% of the juniors to have achieved 10 points by the completion of their second semester and 100% of graduating seniors will achieve 40 points by the completion of the program.
- The faculty will submit a brief report of student compliance to the Director of Nursing at the end of each semester for annual tabulation and College reporting.

Procedures:
1. Using the attached PSP Semester Points Rubric, students will strive to accumulate 10 points each semester for which a grade will be assigned in NUR 316, NUR 326, NUR 416, and NUR 427. Recognizing that there is variability in opportunities per semester, the goal will be 20 points in the junior year and 40 points by the end of the program. No more than 10% of the final grade will be awarded for the PSP documentation and will be directly tied to the number of points accumulated.
2. Because activities can be variable, points will be assigned with a guide of 1 point per hour of service or instruction, requiring the signature of the faculty advisor for that activity.
3. Evidence is required for service or professional involvement and can include photographs, flyers, membership cards & receipts, and written reflections of the event/service with a max of 150 words. For conference attendance, must provide certificate of attendance with the agenda. Faculty do not need to sign off on any claimed PSP points that are supported by evidence.
4. In NUR 427, students will create a digital PSP ePortfolio utilizing LinkedIn as a component of their course assignments to complement the resume they are developing. The rubric for grading the ePortfolio follows:

Revised 4/22/25

Criterion	2	1	0
Target Audience	The target audience is clearly identified	The target audience is not clearly identified	No audience is identified
Entry Topics	Topics are relevant to target audience	Some topics are relevant to target audience while others are not	Most if not all topics are irrelevant to the target audience
Values Perspective	Values perspectives are clearly identified and respectful of others	Values perspectives are clearly identified but not always respectful of others	Values perspectives are not clearly identified NOR respectful of others
Career Aspirations	Career aspirations are evident and substantiated with related activities, events, service	Career aspirations are evident but not substantiated with related activities, events, or service	Career aspirations are not evident NOR substantiated with related activities, events, service
Visual Content	Portfolio is visually appealing and personalized to the owner	Portfolio is not visually appealing OR lacks personalization	Portfolio is not visually appealing AND lacks personalization
Inclusivity: Content is ADA compliant (https://www.accessibilitychecker.org/)	Portfolio is ADA and WCAG compliant		Portfolio is NOT ADA and WCAG compliant

<div align="center">Partnering agencies where PSP service hours can be achieved</div>

Rome-Floyd Community Kitchen: The Rome-Floyd County Community Soup Kitchen began back in 2000 with just a handful of participants and a minimal budget. We worked hard to grow and develop into the renowned Community Kitchen we are today. Dedication and preparation go hand-in-hand with everything we do.
Our door is always open to new participants, no matter what their experience level. We are proud to bring together people from all over Rome and Floyd County. Come join our next available volunteer hours—we'd love for you to benefit from all that Rome Community Kitchen has to offer.
3 Central Plaza
Suite 384
Rome, GA 30161
info@rocoki.org
(678) 330- 8228

William S. Davies Homeless Shelter: The Davies Shelters Ecosystem is how we bring the ideas of Sacred Worth, Restorative Journey, and Welcome Community together to help our guests build a foundation to support a stable lifestyle.
 3 Central Plaza PMB 391
 Rome, GA 30161
Men's Shelter: (706) 512-1152
Women's Shelter (Ruth & Naomi): (706) 802-6300
daviesshelter@gmail.com

Hospitality House for Women: Hospitality House ends the cycle of intimate partner violence through prevention, shelter, and individualized services to protect and empower survivors.
With its origin as a grassroots effort, in 1978, to combat the growing epidemic that is domestic violence, Hospitality House has persevered in the fight to end the cycle and empower survivors. With an original capacity to fill five beds for seven days, our current facility offers 27 beds to women and their children.
1203 Shorter Ave NW Rome, GA 30165
 (706) 235-4673

Exchange Club Family Resource Center: We provide transformative in-home education and support to Floyd and Polk County families, empowering them to create safe, stable and nurturing homes so that their children can grow and thrive.
 202 East Third Avenue, 3rd Floor
 P.O. Box 168
 Rome, GA 30162-0168
 (Located in the Serve Rome building)
 Phone: (706) 290-0764
kathy@exchangeclubfrc.org

Mercy Senior Care: We strive to be no less than our name. Mercy Care can be described in many ways with many words, but our soul is best known through personal encounter. Ask a patient, client, staff member, board member or volunteer about Mercy Care. Better still, come

see for yourself. Experience our values at work—compassion, commitment to the poor, excellence, integrity, justice, stewardship and reverence for the dignity of each person. We give people hope where before there was no hope. Maybe that's the best medicine of all.
300 Chatillon Road, NE
Rome, GA 30161-4911
Phone: (706) 291-8496
Liz Molina: emolina@mercyrome,org

United Way of Rome: We are Uniting people, organizations and local communities together around a common path forward: a community-level plan that identifies and prioritizes local needs, partners with existing nonprofits to support their role in that plan, creates pilot programs to fill gaps in services, and measures short and long term progress with local data, adjusting as we go.
(706) 622-1990
202 E. 3rd Avenue
Rome, Georgia 30161
info@uwrome.org

Communities in Schools: Our mission is to surround students with a community of support, empowering them to stay in school and achieve in life.
519 Broad St STE 200, Rome, GA 30161
(706) 378-1118

Floyd County Senior Adult Center: The mission of Rome-Floyd Parks and Recreation Authority is to provide high quality, diverse, and accessible programs, services, and facilities that enhance the quality of life for all ages, cultures and abilities.
1325 Kingston Rd NE Rome, GA 30161
(706) 234-0383

American Red Cross: We're in local communities every day, helping people prepare for, respond to and recover from emergencies. Last year, Georgia's Red Cross helped more people following home fires with food, shelter and other essentials than any other region in the country! We teach life-saving skills, provide resources for military families and help international families in crisis.
We also support our Southern Blood Services region in their efforts to ensure a safe and ready blood supply in Georgia. How do we empower so many of our neighbors to respond to emergencies? By mobilizing the power of volunteers and the generosity of donors. We can't turn heartbreak into hope without your help! Our Impact In the past year, American Red Cross in the Georgia Region has been able to make a difference in our local community because of the generosity of our donors and support of our volunteers.
112 John Maddox Dr NW Rome, GA 30165
(844) 536-6226

Professional Service Portfolio (PSP) Form and Rubric You are required to achieve 10 hours per semester.				
PSP Options	**Semester Hours Available Per PSP Option**	**Hours Achieved**	**Description and supporting evidence**	**Initials**
Serve as an Ambassador *	Up to 5			
Participate in a Health-Related Volunteer Service Day/Community Event*	Up to 4			
Membership in a Professional Nursing Organization (PNO)	2			
Serve as an Officer in a PNO or BC Student Government *	Up to 5			
Present at any Nursing/Research Event	5			
Attending any Nursing/Research Event	1 per hour of instruction			
Other: Must be approved by Nursing Faculty *	Up to 5			
*Hours awarded at the discretion of nursing faculty. Signature of faculty required **if supporting evidence is not available**.				
PLEASE NOTE: Being employed in any healthcare capacity does NOT count toward the PSP				
Supporting evidence can include photographs, flyers, membership cards & receipts, and written reflections of the event/service with a max of 150 words.		Additional Information:		

Student Signature: _____   Date_____
Faculty Signature: _____   Date_____
Faculty Signature: _____   Date_____
Faculty Signature: _____   Date_____

References

Ahmadi, J., Maharlooy, N., & Alishahi, M. (2004). Substance abuse: Prevalence in a sample of nursing students. *Journal of Clinical Nursing*, 13(1), 60-4.

American Association of Universities of Nursing (1996). Policy and guidelines for prevention and management of substance abuse in the nursing education community. *Journal of Professional Nursing, 12*, 253-257.

Asteriadis, M., Davis, V., Masoodi, J., & Miller, M. (1995). Chemical impairment of nursing students: A comprehensive policy and procedure. *Nurse Educator*, 20(2), 19-22.

Brown, J. G. (2005). Teaching evidence-based practice skills to undergraduate nursing students: substance abuse projects. *Substance Abuse*, 26(2), 53.

Bruckner, M. (2002, January). Substance abuse among nursing students. *Dean's Notes,* 23(3), 1-3.

Bugle, L., Jackson, E., Kornegay, K., & Rives, K. (2003). Attitudes of nursing faculty regarding nursing students with a chemical dependency: A national survey. *Journal of Addictions Nursing*, 14(3), 125- 32.

Campbell, A. R. & Polk, E. (1992). *Legal and ethical issues of alcohol and other substance abuse in nursing education*. Atlanta, GA: Southern Council on Collegiate Education for Nursing.

Clark, C.M. (1999). Substance abuse among nursing students: Establishing a comprehensive policy and procedure for faculty intervention. *Nurse Educator*, 24(2), 16-19.

Coleman, E.A., Honeycutt, G., Ogden, B., McMillan, D.E., O'Sullivan, P.S., Light, K., & Wingfield, W. (1997). Assessing substance abuse among health care students and the efficacy of educational interventions. *Journal of Professional Nursing*, 13, 28-37.

Dunn, D. (2005). Substance abuse among nurses-Defining the issue *Association of Operating Room Nurses.* 82(4), 572-595.

de Oliveira, E. B., & Furegato, A.R.F. (2008). Nursing students' work, a risk factor for the consumption of alcohol and other drugs. *Revista Latino-Americana de Enfermagem,* 16, 565-71.

Fletcher, C. (2004). Experience with peer assistance for impaired nurses in Michigan. *Journal of Nursing Scholarship*, 36(1), 92-93.

Gnadt, B. (2006). Religiousness, current substance use, and early risk indicators for substance abuse in nursing students. *Journal of Addictions Nursing,* 17(3), 151-8.

Greenhill. E.D. & Skinner, K. (1991). Impaired nursing students: An intervention program. *Journal of Nursing Education*, 30(8), 379-381.

Heise, B. (2002). The nurse habitué: the history of addiction in nurses, 1850-1982. *Windows In Time*, 10 (1), pp. 5-7.

Hook, J. N., Davis, D. E., Owen, J., Worthington Jr., E. L., & Utsey, S. O. (2013). Cultural humility: Measuring openness to culturally diverse clients. Journal of Counseling Psychology®. doi:10.1037/a0032595

Kenna, G. A., & Wood, M. D. (2004). Substance use by pharmacy and nursing practitioners and students in a northeastern state. *American Journal of Health-System Pharmacy,* 61(9), 921-30.

Kornegay K., Bugle, L., Jackson, E., & Rives, K. (2004). Facing a problem of great concern: nursing faculty's lived experience of encounters with chemically dependent nursing students. *Journal of Addictions Nursing,* 15(3), 125-32.

Lambert, V.A. & Nugent, K.E. (1994). Addressing the academic progression of students

encountering mental health problems. *Nurse Educator*, 19(5), 33-39.

Lemos BKJ; Pena DA; Cordeiro BRC; de Lima HB; Lopes GT. (2007). Drugs: Beliefs and attitudes of nursing undergraduates [Portuguese]. *Revista Enfermagem UERJ*, 15(4),538-43.

Murphy-Parker, D., Kronenbitter, S., & Kronenbitter, R. (2003). USA National Student Nurses Association passes resolution: in support of nursing school policies to assist and advocate nursing students experiencing impaired practice. *Drug & Alcohol Professional,* 3(2), 9-14.

Naegle, M.A. (1989). Patterns and implications of drug use by students of nursing. *NSNA/Imprint*, 36(2), 85-87.

Polk, D., Glendon, K., & DeVore, C. (1993). The chemically dependent student nurse: Guidelines for policy development. *Nursing Outlook*, 41(4), 166-170.

O'Quinn-LarWSON, J. & Pickard, M. (1989). The impaired nursing student. *Nurse Educator*, 14(3), 36-39.

Rassool, G. H. (2007). International perspectives: the educational experiences and previous orientation of undergraduate nursing students in alcohol and drug: the English context. *Journal of Addictions Nursing*, 18(1), 47-52.

Rassool, G. H., & Rawaf, S. (2008). Predictors of educational outcomes of undergraduate nursing students in alcohol and drug education. *Nurse Education Today*, 28(6): 691-701.

Rassool, G. H., & Rawaf, S. (2008). Educational intervention of undergraduate nursing students' confidence skills with alcohol and drug misusers. *Nurse Education Today,* 28(3), 284-92.

Rassool GH; Villar-Luis M; Carraro TE; Lopes G. (2007). Undergraduate nursing students' perceptions of substance use and misuse: A Brazilian position. *Journal of Psychiatric & Mental Health Nursing*, 13(1), 85-9.

Health & Professional Requirements Forms

Documentation/Evidence of all the health and professional requirements listed below must be submitted to department secretary by June 3rd via email. These must be as attachments, not part of the email itself. These records are required by clinical agencies prior to your participation in any clinical/practicum activity. **YOU WILL NOT BE ALLOWED INTO THE CLINICAL SITES WITHOUTTHIS COMPLETED DOCUMENTATION.** Please make a file copy as you may need this in the future. **Documentation Deadline: June 3rd for fall cohorts; Nov 3rd for spring cohorts**
Student Name:_____

After initial clinical file is verified for all documents, files will be checked each month for upcoming expiring documents and students will only be notified via email by Kay Simms. Failure to provide this documentation by the expiration/deadline dates will result in the student being dropped from all clinical and co- requisite courses. Also, a registration hold will be placed on the student's record. If completed documents are then received by the first day of classes, the hold will be removed and the student may then register for classes.

1. **PHYSICAL EXAM REQUIREMENTS FORM** - This verifies the student's physical ability to perform clinical activities and to participate in the required Cultural Immersion Experience. This physical form **must be completed and signed** by a nurse practitioner, physician assistant, or a medical doctor and must not expire during the clinical experience.

2. **TUBERCULIN SKIN TEST OR TB BLOOD SERUM TEST** - Proof of a negative TB blood or skin test must be obtained **EVERY YEAR** and must not expire during the clinical experience. Form can be found on in the Student Handbook. Students with positive TB skin tests must receive follow-up assessment and treatment as recommended by the Centers for Disease Control and Prevention (CDC). **Initial documentation for students with a positive PPD must include:** Most recent positive PPD, most recent chest x-ray summary, current and/or past treatment record, as well as a letter from a nurse practitioner, physician assistant, or medical doctor stating that the student is able to participate in clinical activities. A doctor's note must be obtained each year for students with a positive PPD record.

3. **TETANUS, DIPHTHERIA, PERTUSSIS (Tdap)** - ALL adults who did not get Tdap vaccine as an adolescent should get one dose of this vaccine. Once they have had this dose, a Td or Tdap booster shot should be given every 10 years.

4. **VARICELLA (CHICKEN POX)** - If you have a history of varicella, your physician may choose not to vaccinate, therefore you must have a titer drawn showing immunity to the disease. Students must provide one of the following:
    1. Date of disease (year only) AND date of positive titer (blood test) results showing "immunity".
    2. Documentation of two doses of varicella vaccine, at least four (4) weeks apart.
        Dose 1 - Need date of immunization
        Dose 2 - Need date of immunization

5. **MMR (MEASLES, MUMPS, & RUBELLA)** - **Recommend copy of immunization record;**
    For students born 1957 or after, proof of two MMR's is required as in #1, or provide

evidence of measles, mumps, and rubella immunity (titer) as in #2, #3 and #4 below.
1. MMR (Measles, Mumps, Rubella)
Dose 1 - Need date of immunization
Dose 2 - Need date of immunization
2. MEASLES
Had disease, confirmed by nurse practitioner, physician assistant or a medical doctor diagnosis in office record.
Has laboratory proof of immune titer (documentation must specify date of titer)
3. MUMPS
Had disease, confirmed by nurse practitioner, physician assistant or a medical doctor diagnosis in office record.
Has laboratory proof of immune titer (documentation must specify date of titer)
4. RUBELLA
Has laboratory proof of immune titer (documentation must specify date of titer)

6. **HEPATITIS B & POSITIVE TITER** - The Division of Nursing's contracted clinical agencies are requiring all students receive the Hepatitis B (two or three shots depending upon the manufacturer) series **AND** show immunity from a positive titer (blood test). If you have completed the series and you have not had a titer drawn for Hepatitis B, **you must do so, NO EXCEPTIONS!** If you test negative for immunity, you will need to retake the series and provide evidence of immunity after each injection. A positive titer result will be required following the series. Please turn in all supporting documentation to Kay Simms regarding this immunization.

If you have not already received the vaccinations and titer, the series of shots should be received in this order: 1st shot prior to beginning nursing course work, 2nd shot should be received one month after 1st shot, and 3rd shot should be received 5 months after 2nd shot. This is adjusted for the 2-dose regimen. You may start the nursing program if you are in this first 6 months of receiving the vaccinations. The series must be completed 6 months after the first shot in order to continue in clinical activities. **You must also obtain a titer 1-2 months after dose #3 to show immunity to Hepatitis B**.

7. **HEPATITIS A** is required for study abroad/healthcare mission locations.

8. **INFLUENZA VACCINE** will be required before entering clinical areas. *(Must receive when vaccine becomes available in the fall.)*

9. **COVID VACCINE** All students are recommended to have the latest Covid Vaccination; however it is not required at this time. If you have received the vaccination, please include the documentation.

10. **HEALTH INSURANCE** - Proof of personal medical health insurance coverage. A copy (front and back) of a current medical health insurance card is acceptable. *(If you do not have health coverage, you may visit* www.getinsured.com *for individual rates. You are only required to have accidental injury coverage.)*

11. **CPR (CARDIOPULMONARY RESUSCITATION)** - Proof of current certification in "Basic Life Support (BLS) for healthcare providers" by the **American Heart Association**. No other CPR course or certification association will be accepted. A copy of your signed CPR card, front and back is required. You must attain CPR certification from

a certified American Heart Association trainer (www.americanheart.org).

12. **CRIMINAL BACKGROUND CHECK & DRUG SCREENS** - Healthcare facilities are requiring nursing students to have a certified criminal background check and drug screen. Students enrolled at the Division of Nursing must complete the background check and drug screen through Advantage Students. The instructions for this process are at the end of this document. **PLEASE DO NOT TURN IN ANY DOCUMENTATION REGARDING YOUR BACKGROUND CHECK OR DRUG SCREEN RESULYS TO US AT THE DON.** Students will be instructed to "share" their report with health care facilities on an as-needed basis.

13. **LICENSURE** – Any student who is currently licensed by any board in the state of Georgia must provide the official name under which he/she is licensed and area of licensure. (For example: LPN, Respiratory Therapy, etc.)
 Name_____ Licensure type:_____

14. **CONFIDENTIALITY POLICY FORM** – This form is at the back of this packet. Please read the confidentiality policy in its entirety, sign it and turn it in to Kay Simms along with the other forms listed on this checklist. Please be aware that your signature indicates that you understand all confidentiality rules and policies of the Division of Nursing.

15. **HANDBOOK STATEMENT FORM and STUDENT MATERIALS RELEASE** – This form is at the back of this packet. Please read this form, sign it and turn it in to Kay Simms along with other forms listed on this checklist. Please be aware that your signature indicates that you understand the policies and procedures in your Student Handbook. The Handbook is available on the Division of Nursing website.

Individual contracting clinical agencies may impose additional health and professional requirements that the student must meet before participating in clinical activities in that clinical agency. The Administrative Assistant or Director of Nursing will inform the student if additional requirements are needed and will provide instructions on how to complete requirements. The absence of any required document may prevent the student from progressing in the nursing program and may result in student losing his/her placement in the program.
BY SIGNING YOUR NAME, YOU ARE STATING THAT YOU HAVE SUBMITTED ALL REQUIRED DOCUMENTATION TO THE DIVISION OF NURSING.

_____   _____
Student Signature   Date

CERTIFICATE OF IMMUNIZATION (REQUIRED)
You may submit a completed State of Georgia Official Immunization Record if all information requested here is completed on that record.

IMMUNIZATIONS REQUIRED	REQUIREMENT & DATES	REQUIRED FOR:
MMR (Mumps, Measles, Rubella) **combined immunization**	2 Doses 1)_____ 2)_____	All students
- - - - - - - - - - **OR** - - - - - - - -	- - - - - - - - - **OR** - - - - - - - - -	- - - - - - - - - - - - - - - - - - -
Mumps	2 Doses 1) _____ 2) _____ **or** Titer _____	**- -** All students Attach titer results, if no record of immunizations.
- -	- -	
Measles (Rubeola)	2 Doses 1) _____ 2) _____ **or** Titer _____	
- -	- -	
Rubella (German Measles)	1 dose _____ **or** Titer _____	
Varicella (Chicken Pox)	2 Doses 1) _____ 2) _____ **or** History of Chicken Pox or Shingles Year of disease _____ **and** Titer _____	All students Attach titer results if year of disease is noted. If titer is negative, please take the 2 dose vaccine.
Tetanus, Diphtheria, Pertussis (Tdap)	1 dose _____ (within past 10 years)	All students
Hepatitis B	2 or 3 Doses 1) _____ 2) _____ 3) _____ **and** Titer _____	All students Attach titer results, **REQUIRED**. If titer is negative, you must retake series.

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(TB blood or skin test) *if positive, chest x-ray required.*	Date: _____ ☐ Negative ☐ Positive ☐ Chest x-ray included	All students
COVID Vaccine	Current year vaccination _____ ☐ Exemption	**Recommended for a**ll students
Hepatitis A	2 Doses 1) _____ 2) _____	All students

Signature of Physician, Physician Assistant, or Nurse Practitioner REQUIRED

Printed Name: _____

Address: _____

Phone:_____

Signature: _____

Date: _____

Return ALL forms to: Department secretary in the Division of Nursing

Students: **Prior** to visiting a provider, fill in **ALL** blanks on this form. Do not write, "**See attached**." Berry College Division of Nursing requires documentation, and this form must be completed in its entirety and signed.

**Berry College Nursing Practicum, International Experiences Information
& Emergency Medical Treatment Form
<u>Personal Information</u>**

_____
Student Full Name   Date of Birth   Berry ID Number

_____
Home Address   Campus PO Box

_____
Cell phone   Home Phone

Health and Safety Information

(Please note: This information is not required but enables us to deal with any emergencies that may arise. The information will not be used to discriminate against you in any way. It will remain confidential except in a medical emergency.) Berry College requires all nursing students to receive a thorough physical examination before participating in clinical practicums and/or international study and/or travel (see reverse). Discuss with a physician the intent to study nursing and abroad and get advice for managing physical and emotional health during clinical experiences and while in another country.

Has/Does the participant:	Y	N	Has/Does the participant:	Y	N
1. Had any recent injury, illness or infectious disease?			11. Ever had high blood pressure?		
2. Had a chronic or recurring illness/condition?			12. Ever been diagnosed with a heart murmur?		
3. Do you smoke?			13. Ever had back problems?		
4. Ever had a head injury/frequent headaches?			14. Ever had problems with joints (e.g., knees, ankles)?		
5. Ever been knocked unconscious?			15. Have any skin problems (e.g., itching, rash, acne)?		
6. Wear glasses, contacts, or protective eye wear?			16. Have diabetes?		
7. Ever passed out during or after exercise?			17. Have asthma?		
8. Ever been dizzy during or after exercise?			18. Had mononucleosis in the past 12 months?		
9. Ever had seizures?			19. Ever had an eating disorder?		
10. Ever had chest pain during or after exercise?			20. Ever had emotional difficulties?		

General Questions (Explain yes answers below):_____

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_____

Any other disorder/disease not mentioned?

_____

Have you ever been hospitalized or had surgery?   Yes   No

Indicate blood type (if known)_____

Date:	Explanation:
Date:	Explanation:
Date:	Explanation:
Date:	Explanation:

Two Emergency Contact Persons:

(1) Name   Relationship

_____
Phone

_____
Address   E-mail

_____

(2) Name   Relationship

_____
Phone

_____
Address   E-mail

Current Medications

Medication	Dosage	Specific times to be given	Reason for taking

Is this a new medication?

Allergies (list all known medication, food and other allergies)

Known allergies	Describe reaction and management of the reaction.

Family Physician Information

_____

Name   Phone

_____

Address

Concerning the Cultural Immersion in summer of Junior Year: PLEASE SIGN BELOW
AFTER READING: On rare occasions a student participating in an overseas study program
faces a health emergency requiring hospitalization and immediate treatment. To prevent
dangerous delay in such an emergency, Berry College strongly recommends that the student and
her or his parent or guardian sign the following statement. The faculty director should have a
copy at the program site, and another copy will be kept on file with International Experiences at
Berry College. The above-named student is covered by supplementary study abroad insurance
and I have read and understand this policy.

_In the event of an emergency, illness, injury affecting me, I, the undersigned, hereby authorize
immediate hospitalization and treatment recommended by and carried out under the supervision
of a qualified physician including administering an anesthetic and performing necessary
surgery._

_I certify that the information in this document is true and accurate to the best of my knowledge
and acknowledge that it is gathered for reasons of personal safety and health on this program,
and the information may be used in providing medical care to me. I understand that should an
issue arise related to a pre-existing condition that I have not disclosed and should the program
be unable to accommodate the unexpected needs, I may be sent home early at my own expense.
This information will be disclosed to the SIP faculty director(s), Health and Wellness center
staff, and the Director of International Experiences. By signing this document, I give Berry
College permission to contact my parent, legal guardian, or emergency contact during an
emergency situation._

_____

Applicant's Signature   Date

Health Care Recommendations by Licensed Medical Personnel

I examined this individual on: _____

The program for which the student is applying will involve physical exertion including, but not limited to, extensive walking or hiking in the summer heat and exposure to the sun. The program will also require adjustment to different time zones, food, and water.

BP _____   Pulse _____   Weight _____
Height_____

The applicant is under the care of a physician for the following conditions:

_____

_____

Based on my medical examination of this program applicant plus the information they have supplied, I recommend this individual's participation in the above-identified international program through Berry College. In my professional medical judgment, this applicant's physical, mental, and/or emotional condition will not hinder their full participation in such a program.
□ **Agree**   □ **Disagree** – explanation:

_____
Signature of Licensed Medical Professional   Printed name and title
Date

Address   Phone

Forms
Acknowledgement Form – MUST BE SIGNED BY STUDENT

I acknowledge access to a complete copy of the Nursing Student Handbook. I accept that I am responsible for all information provided in the handbook as it relates to the policies and procedures of the Berry College Division of Nursing. The Nursing Student Handbook is available for personal download on Berry's Nursing Webpage.

Print Name: _____

Student ID: _____

Signature: _____

Date: _____

*Please print a copy of this page, sign it, and return to department secretary.

Confidentiality Policy – MUST BE SIGNED BY STUDENT

Nursing students and faculty are frequently privileged to confidential information during clinical and classroom experiences. Students and faculty have access to medical records, obtain personal information from patients and families, and participate in formational assessments, personnel issues, continuous quality improvement and financial or strategic planning. Faculty are often privileged to personal information about students during advisement and during clinical conferences. Because confidentiality is a legal and ethical expectation of students and faculty, the Berry College Division of Nursing has developed the following policy to clarify the scope and significance of maintaining confidentiality.

All nursing students and faculty in the Division of Nursing at Berry College are expected to abide by the following guidelines:

1. All written, verbal electronic information regarding a patient or institution is to be kept in strict confidence.
2. Verbal or written disclosure of information about patients or agencies to any unauthorized person is prohibited.
3. Any written information about a patient must only contain the patient's initials and should be secured and shared only with students and faculty participating in the care of the patient.
4. The reporting of information specific to agencies may include the department or individual titles; however, it may not include the names of agencies or persons involved. Data must be summarized and reported collectively to ensure confidentiality for the participants.
5. Any written communication (proposal or report) between the student and preceptor/agency must be approved by the faculty before it is presented to the preceptor.
6. Any verbal or written communication whether in the classroom, seminar, lab, or clinical settings is for the sole purpose of learning and is also considered under this confidentiality policy.
7. Students and faculty participating in teaching/learning activities are expected to maintain confidentiality regarding personal information shared. Relevant academic information regarding a student may be shared on an "as needed" basis within the Division of Nursing in order to provide the support and assistance to enhance the student's potential for success in the program.
8. Students and faculty should continue to keep all privileged information obtained during enrollment or employment at Berry College confidential, even after graduation or termination.
9. Students in violation of this policy will be reviewed by the faculty and the Director of Nursing and may receive a failing course grade. Faculty in violation of the policy will be reviewed by other faculty and the School Dean, and a plan of action will be decided at that time.
10. Students will renew this contract annually after review of the policy by faculty.

Student: **Witness:**

Print Name: _____   Print Name: _____

Signature: _____   Signature: _____

Date:_____   Date: _____

_

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*Please print a copy of this page, sign it, and return it to department secretary.

Consent Form for Use of Student Materials – MUST BE SIGNED BY STUDENT
Berry College - Division ofNursing

I, _____, give consent to the Division of Nursing at Berry College to collect,
      (Print Name)
Archive and showcase my graded course work for such purposes as accreditation site visits,
student recruitment, and as examples of work for new students and to use these materials
otherwise as the faculty deem appropriate. The faculty may also examine for scholarly purposes
selected course work and report the results in the aggregate, thereby maintaining my anonymity.
This consent is valid until I withdraw it in writing through the Director of Nursing.

Print Name: _____

Signature: _____

Date: _____

*Please print a copy of this page, sign it, and return it to department secretary.

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Use the following information to complete the necessary background check and drug screen with this provider. Follow these instructions exactly.

ADVANTAGESTUDENTS

To Create an Account

- Go to www.advantagestudents.com
- Click Register
- Click Students and fill out required fields
- Click on the link in the email sent to you from Advantage Students to validate your email address

To Place an Order

- Once logged into your Advantage Students account
- Click Get Started and Get Started again under **Affiliated Schools**
- Select **Berry College** and select the **Berry College Program**
- Select the package with background Checks and 11 point Drug Screen
- Enter all required information and certify your information is correct
- Select your method of payment and place your order. Please note that if you are paying via money order, the order will not begin processing until the money order is received.

Acemapp Users: If utilizing Advantage Students with Acemapp; an Advantage Students account must have been created directly from the Advantage Students website prior to linking the two systems.

Drug Screening: Once the order has been processed and payment has been received an email will be sent to you with a link that will direct you to a site to schedule your drug test. Once you are directed to the site, choose a distance radius and select the search button. Choose a collection facility (clinic) convenient to you. This will be where you must go for your drug test. From the clinics list, select the one you want to use. Then confirm your selection. Finally, print or email yourself the "ePassport". Take this with you to the clinic along with a photo ID. It is imperative that you report to the clinic as soon as possible. This link will also be made available in your Needs Attention card within your Advantage Students account.

Order Status: After the request is underway, you can log into the site to view your profile progress. Simply click the status link to view the profile. You will be notified by email when your background check is complete.

Sharing Results: Once your order completes it is automatically shared with the organization/program that you place your order through. However, to share your report with any additional school or hospital in our system; log into your Advantage Students account and click on the blue "Completed Report" box. Then click on the ⬈ icon to select the school/hospital and appropriate program.

For further assistance, please contact the **Advantage Students Team**:
770.984.2727, option 3 advstu@infomart-usa.com
www.infomart-usa.com

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