

SIMMONS COLLEGE

NURSING DEPARTMENT
PROGRAMS

STUDENT
HANDBOOK

For Off-site Programs

Revised August 2008

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THE NURSING PROGRAMS

OVERVIEW OF SIMMONS COLLEGE

Simmons College is a private, nonsectarian institution for undergraduate women and graduate women and men. The College was founded through the will of John Simmons, a Boston merchant, who believed that women should prepare themselves for lifelong careers in professional fields, as well as receive a comprehensive education. Simmons was chartered in 1899, welcomed its first class in 1902, and today has more than 56,971 alumnae and alumni throughout the world. For 109 years, Simmons has provided a high quality education for women and for graduate women and men, but with a difference: the Simmons philosophy of comprehensive education enables a student to combine the arts, sciences, and humanities with professional preparation in a variety of fields.

Among colleges founded at the turn of this century, Simmons was unusual in that its mission was to educate women “to earn an independent livelihood.” Women were to support themselves by careers that derived from women’s roles in the home, family and community: such as nursing, social work, teaching, and home economics. The strength in this mission was that it provided students with both professional skills and a strong foundation in the liberal arts.

Since its founding, Simmons has expanded beyond a limited vision of women’s work and roles in society. It has kept pace with rapid social and economic changes by adding strong programs in the liberal arts, and by modifying its undergraduate curriculum so that its graduates compete in all professional fields. In addition, the Dorothea Lynde Dix Scholars Program offers undergraduate education to women older than traditional college students, providing them with the opportunity to complete or supplement their education on a flexible basis.

As the largest urban women’s college in the United States, Simmons has consistently been rated as one of America’s Best Colleges in the North by *U. S. News & World Report’s* annual survey. In 1996 Simmons College became one of the founding members of the Colleges of the Fenway. This innovative cooperative agreement of five colleges has frequently been cited in the press as one of the creative responses to the high cost of education.

THE SIMMONS LEGACY

Like the undergraduate program, the graduate schools and programs celebrate a rich history of excellence in curriculum. Graduates emerge as self-directed learners dedicated to excellence and leadership. Simmons graduate education is coeducational, with the exception of the School of Management. The School of Social Work, which offers both an MSW and a PhD program, was the first academically affiliated school of social work in the nation. The Graduate School of Library and Information Science ranks among the world's top library science programs. It offers a master's degree as well as a doctorate in library science. The School of Health Sciences offers master's degrees in health care administration, nursing, and nutrition, as well as a doctor of physical therapy degree, and a doctorate of nursing practice. Simmons also offers graduate programs in a variety of other professional and liberal arts areas, such as children's literature, communications management, education, English, Spanish, and gender/cultural studies. In addition, a number of exciting five-year master's programs provide increased opportunities for students interested in nursing, education, special education, nutrition, gender/cultural studies, and children's literature.

SCHOOL OF HEALTH SCIENCES

The coeducational School of Health Sciences was established in July 1989, underscoring Simmons' commitment to the interdisciplinary preparation of students for positions of leadership in health care. The School brings together the College's health-related programs in health care administration, nutrition, physical therapy, and primary health care nursing, in addition to the post-baccalaureate Dietetic Internship Program in nutrition. In 2001, the School was realigned to include the undergraduate programs in nursing, physical therapy, and nutrition. In the AY 2007-8 the name of the school was changed to the School of Health Sciences to more adequately reflect the fact that the disciplines within the school are science-based programs. The goal of the school is to prepare individuals for clinical and administrative leadership positions in a rapidly changing health care environment. Its programs are committed to educating students to be sensitive to human needs in terms of access and quality of health care, and to also understand the organizational, institutional, and policy constraints that dominate the health care system. Because it incorporates both clinical and administrative programs in one organization, the School is uniquely positioned to

respond to the critical need for well-prepared health care professionals, to enhance the opportunities for interdisciplinary cooperation, and to expand the resources available to faculty, graduate students, and the health care community.

THE NURSING DEPARTMENT

Simmons College has provided higher education programs for nurses since its beginning in 1902 and for nurse practitioners since 1978. In 2007 The Department celebrated the 100th anniversary of the first graduating class of Simmons' Nurses. In response to a growing interest in nursing and the development of a direct entry program and accelerated baccalaureate program, enrollments in nursing have increased significantly, reflecting the commitment of the faculty and administration to the advancement of professional education. Continued feedback from graduates and employers speaks to the rigor and success of the program. The Nursing Department consists of baccalaureate (generalist/pre-licensure), master's (specialist) degree granting curricula, and several post-masters certificate programs including a Doctorate of Nursing Practice.

Pre-licensure programs include the following:

- The traditional baccalaureate program for women 18-22 years of age
- Dix Scholars programs: an 18- month program for individuals with a previous BA/BS who wish to accelerate, and a two or three year option for those without a baccalaureate degree or those desiring a part-time program
- The RN-BS Program for nurses without a baccalaureate degree
- The 5 Year BS- MS program: pre-licensure curriculum
- The Direct Entry Program: pre-licensure curriculum

The Graduate Program in Primary Health Care Nursing was established in 1978 and was one of three graduate health-related programs joined in the establishment of the School of Health Sciences in 1989. The graduate programs prepare nurses for the advanced practice role as nurse practitioners in the specialty areas of adult health, parent-child health, school health, family health, geriatric health, women's health, and occupational health. Several flexible learning options are available, including full and part time study and web based courses.

The master's programs include the following:

- The traditional master's program for nurses with a baccalaureate in nursing or related field
- The RN-MS program for nurses without a baccalaureate degree
- The Direct Entry Program: post RN licensure curriculum
- The 5 Year BS- MS program: post RN licensure curriculum
- Certificates of Advanced Graduate Study for nurses with a master's degree in nursing including Family and Occupational Health
- Certificate of Health Professions Education
- MS completion program for nurse practitioners without a master's degree in nursing
- Dual degree programs offered in occupational health and maternal-child health with the Harvard School of Public Health.
- Post-Master's Doctorate in Nursing Practice

In 2007 the Master's Degree in Nursing Administration was approved by the faculty and started at Winchester Hospital for hospital employees. The program will soon be accepting applications from nurses from four Longwood Medical Area Hospitals for a collaborative program to be taught starting January 2009 on the Boston campus.

Nursing at Simmons has consistently been proactive in its curriculum development and has sought partnerships with other health care and higher education institutions to provide the highest quality nursing education.

Highlights of the history of nursing at Simmons College

1902 Developed articulation agreements with Children's Hospital and Massachusetts General Hospital to provide college level science courses to their diploma students.

1906 Established a Public Health Nursing Program in collaboration with the Boston Instructive District Nursing Association (later to become the Boston Visiting Nurse Association).

1915 Established a Department of Public Health Nursing.

1933 Implemented a five- year baccalaureate program in nursing, and became a charter member of the National League for Nursing.

1952 In collaboration with the Harvard School of Public Health, established a master's program in Public Health Nursing. The Rockefeller Foundation supported this program.

1978 Developed the graduate program in Adult Primary Health Care Nursing in collaboration with the Peter Bent Brigham Hospital, funded by the Division of Nursing.

1983 Expanded the Primary Care graduate program to include Occupational Health.

1989 Initiated the RN-MS program. Developed the 2nd baccalaureate degree program for individuals seeking a career in nursing (Dix Scholars Program).

1990 Expanded the Primary Care Core to include Parent-Child Health and Geriatric Health. Developed dual degree program in Maternal-Child Health with Harvard School of Public Health.

1993 Established the undergraduate evening/weekend program for Dix Scholars. Initiated the School Health and Women's Health concentrations in the graduate Nursing Department. Developed dual degree program in Occupational Health with Harvard School of Public Health funded by NIOSH.

1994 Established the Simmons/Westbrook Partnership in Primary Health Care Nursing, an off-site weekend program for graduate nursing in cooperation with Westbrook College, Portland, Maine.

2000 Established the five- year BS to MS Program and Direct Entry Program for non-RN college graduates.

2003 Established an 18-month accelerated BS in Nursing for non-RN college graduates.

2003 Established collaboratively with the School of Education and other programs in SHS an MS and CAGS in Health Professions Education, with plans for a PhD in Health Professions Education. Developing collaboratively with the SHS Health Care Administration Program a post-baccalaureate certificate program to develop nurse managers.

2006 Established an off-site RN-BS program at Winchester Hospital for nurses with an associate degree.

2007 Established off-site RN-MS and BS-MS programs in Nursing Administration at Winchester Hospital.

2006 Established an off-site RN-BS program at South Shore Hospital for nurses with an associate degree.

2006 Established an off-site RN-BS program at Faulkner Hospital for nurses with an associate degree.

2008 Admitted first cohort of Post-Master's Doctorate of Nursing Practice students on the Boston Campus.

January 2009 will admit first cohort of Longwood Area Hospital Students to MS in Nursing Administration Program

The reputation of the Department and of its graduates is exceptionally strong. Graduates are well known for their clinical expertise and knowledge. This is a result of not only a rigorous curriculum but also the fact that all nursing faculty practice at least one day per week. Additionally, since our last accreditation site-visit in 2003 the number of faculty who have completed their doctoral degrees has increased from 8 to 11 and the number enrolled in doctoral programs from 2 to 12. Scholarly presentations and publications have also significantly increased by more than double.

The Department has been recognized by donors for its ongoing excellence. In 2007 we received an anonymous \$1M gift for the development of a Faculty Scholars Legacy Fund. In 2008 we received a \$2M gift from an alumna of the class of 1962 for the development of a bridge and tutoring program for academically at risk students and also for simulation lab upgrades. Total recent programmatic funding well exceeds \$4M.

PHILOSOPHY OF NURSING

The faculty of the Nursing Program believes that a liberal education is essential for the development of professional nursing practice in a culturally, racially and ethnically diverse community. The quality of this practice is enhanced by, and dependent on, knowledge acquired from the liberal arts and sciences. The process, as well as the content of the liberal education, is fundamental to the development of critical thinking, decision-making and communication skills, as well as facilitating the individual student's development of an appreciation of the global society. The faculty believe that learning is a unique, life long process, moving from the simple to the more complex, and encompassing the domains of personal, empirical, aesthetic and ethical knowledge (Carper, 1975). The science of nursing requires the acquisition of knowledge in each of these domains that the learner integrates and utilizes in her/his growth as a professional nurse. Growth is evidenced as the learner gains an understanding of the profession of nursing by acquiring knowledge in each of these domains.

The Simmons College Nursing Faculty believe that professional nursing is practiced according to the nursing metaparadigm, which includes beliefs about person, health, nursing, and environment. Each *person* is unique. Human beings are holistic in nature, yet they have interacting biophysical, cognitive, social, spiritual and developmental dimensions. Persons have their own perceptions, values, beliefs and goals. Individuals have the ability to be self-directive, to adapt to change, to achieve their potential, and to ascribe personal meaning in their lives.

Health may include states of wellness and illness. It has subjective and objective perspectives viewed from both the standpoint of the client and the health care system. Wellness is a dynamic state of integrity whereby the person repatterns life toward optimal functioning. *Health* is recognized as a multidimensional and dynamic state of wellness and illness, and is defined as "the actualization of inherent and acquired human potential through goal-directed behavior, competent self-care, and satisfying relationships with others while adjustments are made as needed to maintain structure, integrity and harmony with the environment." (Pender, 1987, cited in ANA Social Policy statement, 1995). The faculty believe that the professional nurse assists persons in identifying health needs, utilizing a holistic framework that recognizes the uniqueness and complexity of each individual.

Nursing is the diagnosis and treatment of human responses to actual or potential health problems. It involves an interaction between the client and nurse, which is designed to promote, restore, and maintain health or support a peaceful death. The nurse uses knowledge from the natural and behavioral sciences, aesthetics including caring and empathy, and ethics, which involve making moral choices. Nurses are ethically and legally accountable for their actions. The *Environment* includes biophysical, psychosocial, cultural and spiritual dimensions that interact and influence health. Each person lives and interacts within an ever-changing environment. The environment can be modified to have a positive impact on health.

The nurse independently utilizes the nursing process in the practice of professional nursing in accordance with the standards of nursing practice and the ANA Code of Ethics. The nurse collaborates with clients, families and other health care professionals who are members of an interdisciplinary team in assessing, planning, delivering and evaluating health care. The professional nurse functions as an advocate for person and focuses nursing practice on person within the context of family and community. The professional nurse is an active participant in the social and political processes that influence the health care delivery system. The nurse utilizes critical thinking and clinical judgment to analyze the client needs, determine and implement appropriate, therapeutic nursing interventions, and coordinate the activities of other health care providers involved in the care of the client.

Graduates of the Undergraduate Nursing Program are prepared as generalists who are able to incorporate professional nursing standards and research in their practice, collaborate as members of an interdisciplinary health care team, apply the concepts of diversity and community service in their practice and utilize leadership skills to influence change in the health care delivery system. The program provides the prerequisite knowledge base essential for graduate study.

The graduate program in Nursing at Simmons College is designed to prepare professional nurses for careers in advanced clinical practice, academics and administrative leadership. Students in the program are mentored in a variety of clinical settings which range from primary health care to diverse specialty and acute settings. Knowledge acquired in their undergraduate education is applied and synthesized to the advanced study of natural, behavioral and applied health sciences. Advanced practice nursing in the graduate program means specialization, expansion and advancement in the professional role of the nurse practitioner, nurse scientist and nurse executive. Excellence in scholarship, clinical practice and service spans the curriculum. The essence of advanced practice nursing consists of the purposeful relationship created between the individual professional nurse and the patient, community or system at large. A multidisciplinary practitioner-mentoring model is applied to guide students in the personalized development of clinical practice which both improves systems of care and ultimately influences patient outcomes. The program emphasizes the development of excellent skills and acquisition of tools necessary to integrate evidence, including safety quality care measures, into practice across the lifespan. The advanced practice nurse builds on an in-depth knowledge of the individual, family and the community as a complex system and begins to expand interventions to include not only a response to immediate health care needs, but the promotion of health and prevention of illness in these aggregates. Our students value the patient and the system from which these arise. The quality of the therapeutic relationship between nurse and patient reflects collective competencies in clinical assessment, intervention and innovative strategies for care. The foundation of practice expands across diverse political, ethical and cultural populations, establishing opportunity to respond to the health care needs of our community

Professional Standards that guide the programs include:

- The American Nurses Association Standards of Clinical Practice
- The American Nurses Association Nursing Code of Ethics
- The American Nurses Association Social Policy Statement

NURSING PROGRAM MISSION

The Simmons College Nursing Department supports the college mission by educating professional nurses to assume roles in clinical practice, leadership, advocacy, scholarship and health care policy. Simmons College graduate nurses provide expert and compassionate care, adhering to the highest ethical and professional standards, to client populations in all health care settings.

NURSING PROGRAM VALUES

Support those of the college and include:

- Community
- Excellence
- Diversity (cultural competence)
- Scholarship
- Leadership
- Professionalism
- Compassionate caregiving (humanism)
- Respect for others
- Evidence based practice
- Ethical practice
- Life-long learning

NURSING PROGRAM VISION

- To expand clinical academic partnerships locally, regionally, nationally, globally
- To expand program offering
 - a. to respond to the shortage of nursing and nursing educators
 - b. To respond to continuing education needs of practicing nurses.
 - c. To respond to the explosion of nursing knowledge.
 - d. To respond to service partner's needs for new advanced practice options.
- To academically support all learners with varied needs and learning styles

OUTCOME OBJECTIVES FOR THE RN-BS CURRICULUM

To evaluate the use of the nursing process to assess and interpret client needs in the prioritization of nursing intervention and evaluation of client outcomes.

To evaluate the effectiveness of the communication process in the promotion of health of diverse clients within the existing socio-cultural, political, and health care delivery systems.

To synthesize the nursing, biological, behavioral, and social sciences and humanities as a basis for developing assessments and making therapeutic clinical decisions.

To evaluate the effectiveness of collaboration with diverse client systems and members of the health care delivery team in the promotion of client health.

To evaluate the cultural competence of nursing care with peoples of a multi-cultural world.

To synthesize empirical and theoretical evidence into the practice of nursing.

To evaluate the effectiveness of the leadership and management process in the coordination and promotion of quality health care.

To evaluate the effectiveness of the role of caregiver, advocate, and teacher in the delivery of nursing care.

To support principles of accountability through adherence to professional standards of practice, and ethical decision making.

To support the values of continuing education and professional and community activities.

To evaluate how changes in historical, social, political, economic, and scientific systems have impacted the profession of nursing.

To evaluate the use of technology and information systems in managing client care.

Professional Standards that guide the RN-BS programs include:

The American Nurses Association Standards of Clinical Practice

The American Nurses Association Nursing Code of Ethics

The American Nurses Association Social Policy Statement

The American Association of Colleges of Nursing Essentials of Baccalaureate Education for Professional Nursing Practice

Outcome Objectives for the Master's in Nursing Administration Degree

Synthesize theoretical, scientific, and contemporary clinical knowledge of research, policy, organization and financing of health care, ethics, professional role development, theoretical foundations of nursing practice, human diversity and social issues, and health promotion and disease prevention.

Demonstrate competency in communication and relationship building, through effective communication, relationship management, influence of behaviors, interdisciplinary collaboration, and shared decision making.

Demonstrate effective oral presentation skills, making effective presentations on nursing, health care, and organizational issues.

Synthesize theoretical and contemporary knowledge of health care economics, demonstrating competency in business skills to include health care financing, human resource management, strategic management, marketing, information systems, and technology management.

Apply knowledge of federal and state laws and regulations which affect the provision of patient care, leading to the ability to provide safe patient care and to act as agents of change, providing advocacy for issues affecting health care issues.

Apply knowledge of federal and state payment systems and regulations, as well as private insurance issues in managing organizations' finances.

Conduct nursing research related to nursing leadership topics, particularly those that are related to the design and improvement of the health care system.

Demonstrate cultural competence as evidenced by a commitment to champion a diverse workforce and the delivery of patient care that embraces the concept of multiculturalism.

Articulate a vision for nursing practice in the context of nursing leadership in the evolving world of health care.

Exhibit leadership skills that include: foundational thinking skills, personal journey skills, the ability to use systems thinking, succession planning, and change management.

:

Professional Standards that guide the specialist programs include:

The American Nurses Association Standards of Clinical Practice

The American Nurses Association Nursing Code of Ethics

The American Nurses Association Social Policy Statement

The American Association of Colleges of Nursing Essentials of Master's Education for
Advanced Practice Nursing

The American Organization of Nurse Executives Nurse Executive Competencies

GENERAL NURSING POLICIES

CODE OF CONDUCT AND DISCIPLINE

The faculty of the Nursing Department adheres to the standards and codes developed by the American Nurses Association. It is expected that all students will adhere to this professional code in all of their nursing activities. The faculty reserves the right to recommend the withdrawal of a student at any time without prejudice, who does not maintain an acceptable level of behavior as defined in the ANA Code of Ethics (2002).

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, or community.
3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.
4. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.
5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
6. The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.
8. The nurse collaborates with other health care professionals and the public in promoting community, national, and international efforts to meet health needs.
9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

PROFESSIONAL BEHAVIORS

The classroom is similar to any and all professional settings. As in all professional environments, the following behaviors demonstrate commitment to professional standards of conduct:

- Attending each class
- Arriving on time and being well-prepared for class
- Staying in the classroom for the entire class period
- Turning off all pagers and cell phones
- Refraining from side conversations with classmates
- Being attentive to and respectful of the faculty presenting the class
- Being attentive to and respectful of classmates discussing questions, cases or issues raised during class
- Notifying the professor well in advance in the unusual circumstance that you will be late, unable to attend class, or unable to meet class requirements
- Adhering to the Simmons College Honor code at all times in clinical and classroom situations
- Being respectful of all department staff

Additional Expected Behaviors

Classroom	Clinical
Is On time for class	On time for clinical
Completes assignments on time, typed	Sets goals for clinical experiences
Actively seeks feedback and help	Actively seeks feedback and help
Receptive to feedback	Receptive to feedback without becoming defensive
Incorporates feedback into work	Incorporates feedback into work
Communicates with faculty in respectful manner	Communicates with faculty in respectful manner
Identifies learning needs, educates self	Identifies learning needs around client issues, educates self, uses professional literature, electronic sources, self evaluates with weekly journals
Listens actively, is courteous	Listens actively, is courteous
Is culturally sensitive	Self aware re: cultural differences. Demonstrates respect for/is nonjudgmental about cultural, ethnic and personal differences in patients and health care team members
Collaborates with and respects the work of classmates	Collaborates with and respects the work of classmates
Maintains confidentiality of clinical information	Maintains confidentiality of clinical information Researches policies and procedures relevant to the clinical setting Nursing care and documentation meet legal requirements Identifies steps around processing an ethical issue
Is accountable for own learning	Organizes work. Completes assignments and documentation in a timely manner

Student Advisement

Each student in the Nursing Department is assigned an advisor at the beginning of his/her academic program (see advisee list). During orientation, a form listing degree requirements is distributed which identifies the status of students as well as the advisor. Faculty members and students should review the forms and then meet to discuss course selection and workload. The student may meet with his/her advisor at any time. Faculty should meet with students at least once a semester prior to registration.

Health Policies

The College adheres to the philosophy and the standards of the American for Disabilities Act (ADA). All educational programs at Simmons College are dedicated to the principle of nondiscrimination. This includes a commitment not to discriminate against qualified disabled applicants and students. As part of its effort to ensure that all students are given the opportunity to participate fully in the nursing program, the faculty has outlined essential functions of students entering the program. The nursing program requires cognitive, affective, communications and psychomotor functions. The nature of the nursing profession requires students to participate in clinical and laboratory course work that is at times physically demanding and requires certain physical strength, agility, endurance, perceptual skills and other attributes. A copy of the essential functions is included in your course packet. If for any reason you are unable to or need accommodations for any of these skills please inform your instructor or the Chairperson for Nursing so that we may develop a plan to facilitate your successful completion of the program.

Specific Health Policies

1. Students with chronic health problems may be admitted to the department with prior consultation with the Director of the Health Center at the College and notification of the Chairperson for Nursing
2. Handicapped Students ...The College subscribes to Section 504 of the Rehabilitation Act of 1973 (PL 93-112) as amended (PL 92-156), which mandates equal opportunity for qualified handicapped persons in educational programs.
3. Pregnancy is recognized as a special health need. Early notification of the faculty is recommended so that consideration for appropriate clinical rotation can be planned. The department is guided by the student's physician and the policies of the agency in which she is working.
4. Prior to entering the first clinical course (Nur 225/425, Nur 580/560), the student must receive health clearance from the Simmons College Health Center which includes the following information:

- a) A careful history regarding communicable diseases and immunizations.
- b) A TB skin test within one year. All new nursing students must complete the Two Step Test (TST). Some agencies we partner with require a PPD more frequently.
- c) Rubella Status: All students must show evidence of a positive rubella titer.
- d) Tetanus Toxoid within 10 years.
- e) Two doses of measles vaccine and one dose of mumps and rubella vaccines required.
- f) Hepatitis B vaccine, **3 doses**; if not previously vaccinated, the sequence of 3 doses must be initiated prior to clinical practice and may be completed during clinical practice. Evidence of a titer must be presented at the end of the immunization sequence.
- g) Varicella Vaccination: the year contracted is required or proof of immunization. If varicella status is unknown a titer is required

All Students must have appropriate immunization and health clearance two weeks prior to the first day of classes. Without such evidence and clearance by the Director of the Health Center, students will not be allowed to engage in clinical practice. Obtaining health clearance is the **responsibility of the student**. The specific form for nursing students should be obtained from the Health Center or from the Department of Nursing. Completed forms must be returned to the Health Center three weeks prior to the first day of class. If requested by the affiliating agency, immunization status will be released to health care agencies.

IMMUNIZATION INFORMATION

Hepatitis B

The Centers for Disease Control (CDC) now recommends that people who are likely to come into contact with needles or blood products, whether in professional or household settings, receive immunization against the Hepatitis B virus. Immunization is completed with a series of three injections: two doses one month apart, and the third given six months after the second. The three doses should be followed by an antibody titer taken at least one month after the final dose to insure that immunization has raised the recipient antibodies sufficiently to offer effective protection. The Health Center charges the student a fee to cover the cost of the immunization materials.

Measles

Immunization for measles requires two doses of vaccine. For many persons, a first dose was given at 12 months of age; a second dose may or may not have been given. If unsure of your measles status, two doses are required to insure protection. If the titer is positive, no

immunization is needed. If the titer is negative, two doses of vaccine are needed. The Health Center charges the student a fee to cover the cost of the immunization materials.

Mumps

One dose of mumps vaccine is required. Many people were vaccinated as children and therefore need only provide documentation of vaccination. If you are unable to find any documentation, you may have another dose of the vaccine or have an antibody titer drawn. If the titer is positive, you do not need immunization. If the titer is negative, you will need one dose of vaccine. The Health Center charges the student a fee to cover the cost of the immunization materials.

Rubella

Students must have an antibody titer that documents immunity to rubella. **A history of receiving the rubella vaccine is not sufficient.** The titer need not be a recent one as immunity is lifelong, and once the antibody titer is positive there is no need later in life for re-immunization. If the titer is negative, the Health Center can give rubella vaccines alone or in combination with measles and mumps vaccines. One month after receipt of the rubella vaccine, the recipient must have an antibody titer to document immunity. The Health Center charges students a fee to cover the cost of the immunization materials.

Tuberculosis and the PPD (purified protein derivative) test

For INITIAL clearance you must complete the "TWO STEP Tuberculin Skin Test (TST) Method (per CDC Guidelines). You will receive your 1st PPD and then repeat it (after least three weeks and in less than one year) with a 2nd PPD. If both are negative, the TST is complete and you will then require an annual PPD while in clinical courses.

If you have a positive history of ppd (mantoux) you will need documentation of: the year of conversion, treatment received and/or date of a negative chest x-ray. You must also complete an **annual/symptom review** with an RN at the Simmons College Health Center.

The Health Center charges students a fee to cover the cost of the immunization materials.

Note: Some clinical agencies may require a PPD more frequently, students will be notified of this prior to placement in that particular agency.

Varicella (Chickenpox)

All students must give a history (year of disease) of having had chickenpox. If they are unsure of history students must have a varicella titer. If the varicella titer is negative, 2 doses of varicella vaccine are required given four to eight weeks apart. The Health Center charges students a fee to cover the cost of the immunization materials.

COMPULSORY CARDIOPULMONARY RESUSCITATION CERTIFICATION

All nursing students are required to have current certification of Cardiopulmonary Resuscitation and AED training for Adults, Infants and Children prior to clinical courses. Evidence of current certification must be in each student folder.

COMPLIANCE WITH HIPAA REGULATIONS (HEALTH INFORMATION PORTABILITY AND ACCOUNTABILITY ACT)

All students at the beginning of each new academic year must complete the HIPPA certification course linked to the nursing web-page. A certificate of completion must be sent to the course coordinator and kept in the student file. Depending on specific agency regulations, students may be required to complete HIPPA training on site at the agency as well.

CLINICAL INCIDENTS

Students who experience a health incident/occupational accident such as a needlestick injury should follow all agency specific policies and processes.

DRESS CODE

Professional appearance is required in all health care settings. Nursing students are required to purchase and wear the Simmons College student uniform. In agencies not requiring the school uniform, students must adhere to the dress code of the agency.

Uniform: The undergraduate uniform consists of indigo blue scrub pants and top and a white scrub jacket. The school emblem is placed on the left sleeve of the scrub top and jacket. Tightly knit white cotton T shirts with short or long sleeves may be worn under the scrub top.

Name Pins: Must include full name, status (student nurse) and the name of the college.

Sweaters: Because of their tendency to retain pathogens, sweaters are not allowed in the clinical agency.

Shoes: Clean, white in good condition. Platform shoes are unacceptable but white clogs with backs are acceptable. All white sneakers are acceptable. Knee high white hose are to be worn only with pants; full length white stockings or pantyhose are to be worn with skirts. Ankle socks are unacceptable.

Piercings: For safety and professional appearance purposes, all piercings should be studs only.

Nails: Artificial/Acrylic Nails are not allowed as research has shown them to harbor increased bacteria.

TRANSPORTATION

Students are responsible for all transportation costs related to clinical experience. Costs will Vary with the clinical placement. Students need to plan for costs ranging from less than \$100 to \$300 per year.

COMPULSORY PROFESSIONAL LIABILITY INSURANCE

Professional liability insurance for all students in the nursing concentration is required. Without insurance students cannot participate in clinical practice. The cost of the policy is a set fee and is paid by the College.

BOARD OF REGISTRATION POLICY ON GOOD MORAL CHARACTER

Effective January 1, 2000 the Board's revised policy, *Initial Licensure by Examination or Endorsement; Determination of Good Moral Character* now identifies specific criminal Convictions which will permanently exclude an individual from initial nurse licensure in Massachusetts due to the egregious nature of the crime. The policy also requires initial nurse licensure applicants to be conviction-free for minimum of five years before the submission of an application for initial nurse licensure. In addition, the disposition of any criminal conviction must be closed for a minimum of one year before the submission of a nurse licensure application; any other criminal case must also be closed at the time of application. Please refer to the most current (Spring 2007) policy at

<http://mass.gov/dph/boards/rn>

Click on Licensing and then on Good Moral Character Licensure.

This policy applies to all applicants for initial licensure by examination effective 1-1-00. However, the Board will evaluate compliance with the good moral character requirement by Licensure applicants who were enrolled as declared nursing majors in a Board approved program on January 1, 2000 provided the applicant has had no further convictions since 12-31-99.

If you have any questions about this policy and how it may affect your ability to become licensed as a registered nurse in Massachusetts, please see the Chairperson immediately.

SIMMONS COLLEGE NURSING DEPARTMENT CRIMINAL OFFENDER RECORD INQUIRY (CORI) POLICY

Where Criminal Offender Record Information (CORI) checks are part of a general background check for placement in clinical rotations and for independent preceptorships by the Nursing Department of Simmons College the following practices and procedures will generally be followed.

I. CORI checks will only be conducted as authorized by as part of the Massachusetts Criminal History Systems Board (CHSB). All students will be notified that a CORI check will be conducted. All students will be provided with a copy of the Simmons College Nursing Department CORI Policy. A copy of the Simmons College Nursing Department CORI Policy is also included in the *Simmons College Nursing Department Student Handbook (revised 10/2007)*.

II. An informed review of a criminal record requires adequate training. Accordingly, all Simmons College Nursing Department faculty and staff authorized to review CORI in the decision-making process will be thoroughly familiar with the educational materials made available by the CHSB.

III. Prior to the beginning of clinical nursing coursework, each student will be required to request a CORI check by the CHSB. For undergraduate students, the CORI is run prior to the beginning of the sophomore year and again before senior independent preceptorships. For graduate students CORI is run at the beginning of the primary care sequence.

IV. If a criminal record is received from CHSB, the authorized Nursing Department faculty or staff will closely compare the record provided by CHSB with the information on the CORI request form and any other identifying information provided by the applicant, to ensure the record relates to the applicant.

V. Unless otherwise provided by law, a criminal record will not automatically disqualify a nursing student. Rather, determinations of suitability based on CORI checks will be made by the Chair for Nursing. A student with any criminal convictions, or past court appearances for any reason, or pending criminal cases (including misdemeanors) or past or pending disciplinary action against a professional license is advised that the Simmons College Nursing Program may not be able to secure a clinical placement. Students have an obligation to notify the Chair for Nursing if any new complaints occur after the initial CORI is obtained or if there is an incidence which changes CORI status while a student.

a) Some clinical agencies will require the actual data obtained from a CORI. In this case, the agency will require a CORI performed by the CHSB of students placed in their agency. Students will be informed before the CORI is done and will be asked to sign a CORI release form. All student clinical placements are at the discretion of the agency; therefore, agencies do not have to accept students with CORI issues. The Nursing Department at Simmons cannot be responsible for alternate clinical placements for students who are withdrawn from a clinical placement or who cannot be placed in an agency because of background checks.

VI. A student challenging the accuracy of the policy shall be provided a copy of CHSB's *Information Concerning the Process in Correcting a Criminal Record*. If the CORI record provided does not exactly match the identification information provided by the student, Simmons College Nursing Department will make a determination based on a comparison of the CORI record and documents provided by the student. Simmons College Nursing Department may contact CHSB and request a detailed search consistent with CHSB policy.

VII. If Simmons College Nursing Department is inclined to make an adverse decision based on the results of the CORI check, the student will be notified immediately. The student shall be provided with a copy of the criminal record, a copy of the Simmons Nursing Program's CORI policy, advised of the part(s) of the record that make the student unsuitable for the position of student nurse, and given an opportunity to dispute the accuracy and relevance of the CORI record.

VIII. If Simmons College Nursing Department reasonably believes the record belongs to the student and is accurate, based on the information as provided in section IV on this policy, then the determination of suitability for the position or license will be made. Unless otherwise provided by law, factors considered in determining suitability may include, but not be limited to the following:

- (a) Relevance of the crime to the proposed clinical practicum;
- (b) Nature of the proposed clinical practicum;
- (c) Time since the conviction;
- (d) Age of the student at the time of the offense;
- (e) Seriousness and specific circumstances of the offense;
- (f) The number of offenses;
- (g) Whether the student has pending charges;
- (h) Any relevant evidence of rehabilitation or lack thereof;
- (i) Any other relevant information, including information submitted by the student or requested by Simmons College Nursing Department.

VIII. Simmons College Nursing Department will notify the student of the decision and the basis of the decision in a timely manner.

FELONY CONVICTIONS EXCLUDING INDIVIDUALS FROM LICENSURE AS A REGISTERED NURSE OR PRACTICAL NURSE BY EXAMINATION OR ENDORSEMENT

The criteria for permanent ineligibility for initial nurse licensure as a Registered Nurse or Licensed Practical Nurse in Massachusetts are:

- a. Intentional submission of false information on an application for licensure directly related to the qualifications required for licensure;
- b. Cheating on the National Council Licensure Examination (NCLEX);
- c. Conviction of a violent crime against a person exhibiting intentional or deliberate extreme disregard of human life;
- d. Conviction of a sexual crime;
- e. Conviction of a crime involving trafficking or manufacturing controlled substances;
- f. Conviction of any of the following crimes:
 1. Administering drugs to obtain sex
 2. Aggravated sexual assault
 3. Armed assault with intent to murder with felony intent
 4. Armed assault with intent to rob
 5. Assault with intent to rape
 6. Assault and battery, dangerous intimidation, race, color, religion
 7. Breaking and entering, day/night, with intent to commit a felony, fear
 8. Burglary, armed assault of occupant
 9. Burning a building
 10. Burning a dwelling house (attempt)
 11. Exploitation or criminal mistreatment of a vulnerable individual including but not limited to a minor, elder, and/or disabled person.
 12. Indecent assault and battery on a child under 14
 13. Indecent assault and battery on a child over 14
 14. Induce sex, minor
 15. Kidnapping
 16. Murder
 17. Rape
 18. Unnatural acts with a child under 16

FELONY CONVICTIONS EXCLUDING INDIVIDUALS FROM AUTHORIZATION TO PRACTICE AS AN ADVANCED PRACTICE REGISTERED NURSE (Effective 2-07)

Any Registered Nurse seeking authorization to practice as an advanced practice nurse is subject to the Good Moral Character requirements.

When the Board determines that an applicant for APRN authorization is not eligible for such authorization based on the applicant's failure to demonstrate compliance with the Good Moral Character requirement, the Board will open a complaint against that nurse's Registered Nurse licensure.

Simmons College

Essential Functions for Nursing Students

Section 1.01 - JOB SUMMARY

Under the supervision of a licensed nurse the student nurse has responsibility for direct patient care for those assigned individuals during a scheduled shift. A shift varies in duration from 4 to 12 hours and may be during the day, night or weekend. They are also responsible for communication with families, caregivers, and other staff, be it written, verbal, electronic demonstration or other media in relation to their assignment. Duties may require sitting, standing, walking, lifting, bending, twisting, squatting, carrying, pushing, pulling, reaching writing, typing, pinching, gripping, bimanual dexterity. **If a student should present with any limitation to performing the following essential job functions, s/he should speak with the Disability Director in the Academic Support Center.**

Section 1.02 - KNOWLEDGE AND ABILITY

- Follow policies and procedures of the school and facility
- Comprehend and follow instructions
- Perform repetitive tasks
- Maintain an appropriate pace for the workload
- Relate to other people beyond giving and receiving instructions
- Influence other people
- Perform complex and or varied tasks
- Make generalizations, evaluations, and decisions without direct supervision
- Accept and carry out responsibility for direction, controlling, and planning patient care
- Assess patients' physical condition
- Eye hand coordination

Section 1.03 - ESSENTIAL FUNCTIONS

(a) Standing or sitting

(b) Perform CPR

(c) Listening to the patient, family, other health care workers, and applicable monitors

(d) Pushing

- Beds, gurneys, and wheelchairs, IV or monitor poles
- Laundry and trash containers
- Doors

(e) Pulling

- Beds, gurneys, IV and monitor poles
- Objects from shelves such as linen, supplies monitors
- Laundry and trash containers
- Doors

(f) Bimanual dexterity

- Draw blood
- Give "injections"
- Put on gloves while maintaining sterile field
- Administer medications (oral, rectal, eye drops, ear drops, nose drops, topical, or via feeding tube)
- Collect specimens (urine, sputum, stool, blood)
- Insert / maintain / remove urinary catheters
- Insert / maintain / remove nasogastric tubes
- Insert / maintain / remove intravenous catheters
- Use oxygen equipment including moving canisters
- Empty drains
- Remove sutures/staples

- Computer charting
- Hygiene care--brushing patients teeth, hair, shaving patient, bathing patient, other hygiene measures
- Maintain sterility of needles, catheters, dressings, etc. when performing complex procedures
- Set and maintaining pumps, monitors etc.
- Check and record vital signs
- Change dressings
- Place and maintain catheters
- (g) **Lifting**
 - Patient transfers
 - Floor--kneel or sitting
 - Sitting--standing
 - Wheelchair--bed or gurney
 - Sitting--standing
 - Sitting or standing--lying
 - Bed--gurney
 - Bed mobility
 - Position in bed
 - Position in chair
 - Objects
 - Linen
 - Monitors

- Adaptive equipment- including CPM machines, walkers crutches, canes, wheelchairs, braces, splints, eyeglasses, contact lenses, hearing aids, prostheses, etc.
- Patient personal belongings
- Food trays
- Patient supplies
- Mannequins
- Pumps
- Fluid bags (IV, urinary, drainage bags, etc)
- Bedside Commodes

(h) Visual Acuity

- Patient skin color, nail bed color, eye color, tissue appearance
- Eye, ear, nose, throat, structures with and without ophthalmoscope, otoscope
- Read temperatures on various thermometers
- Read vital signs on various monitors
- Venous location and size
- Anatomical landmarks
- Read orders and notes on computer and/or paper
- Read labels on medications
- Note markings on medications
- Reading measurements on syringes, medication cups, droppers, pumps, drainage bags etc.

(i) Hearing Acuity

- Heart, lung, and bowel sounds; blood pressure, and fetal heart sounds using stethoscope

- Respiratory sounds without stethoscope
- Pulses and fetal heart sounds with doppler
- Patient verbalizations--speech, crying, moans, etc.

(j) **Touch**

- Locate and count pulses in various sites
- Palpation of abdomen
- Palpation for edema
- Palpation for fetal position
- Temperature of tissue

(k) **Speech/Communication**

- Communicate face to face with individuals
- Communicate via call system with individuals
- Communicate via telephone with individuals
- Read, write, speak and understand the English language
- Read and interpret nonverbal cues

Section 1.04 - EQUIPMENT

(a) **Tools**

- Stethoscope
- Sphygmodynamometer
- Scissors
- Pens
- Syringe
- Ophthalmoscope
- Otoscope
- Reflex hammer

- Tuning fork
- Thermometers
- Scales
- Gloves (sterile and non sterile)
- Eye protection
- Clamps
- (b) Machines**
- Computer
- Vital sign monitors, BP, SATS
- Pumps: IV, PCA, Insulin, etc
- Patient lifts
- Monitors such as ECG, Glucose, Fetal
- (c) Tool belt**
- Fanny packs or pockets commonly used
- (d) Vehicles**
- Automobile or public transit to and from clinical sites, including home visits
- (e) Work aides**
- Transfer boards
- Standard office tools including stapler, tape dispenser
- Computers
- (f) Safety equipment**
- Glasses, gloves, gowns, masks, face shields, HEPA respirators, per universal precautions

Section 1.05 - ENVIRONMENT

Senses	Extent	Comments
Near vision	Frequent	Computers, monitors, and patient care
Far vision	Frequent	Room call lights
Color discrimination	Occasional	Skin color, medications, blemishes, rashes
Depth Perception	Occasional	Direct patient care
Hearing Sensitivity	Frequent	Direct patient care, and monitors
Feeling	Occasional	Direct patient care
Proprioception	Occasional	
Taste	Infrequent	
Smell	Occasional	Smoke, infections, burning
Balance	Frequent	

Exposures	Extent	Essential Function	Comments
Chemicals--Contact	Occasional	Yes	Dispensing medications
Chemicals--Consumption	Never	No	
Chemicals--Inhalation	Rare	No	Mixing powdered medications, room sprays, skin cleansing agents
Confined	Spaces	Occasional	Yes
High elevation	Never	No	
Smoke	Never	No	
Moving Objects	Occasional	No	
Fumes	Occasional	No	
Slippery Surfaces	Rare	No	When making home visits
Wetness	Rare	No	When making home visits
Dust	Rare	No	When making home visits

Odor	Occasional	Yes	
Wind	Rare	No	Escorting patients leaving the hospital, making home visits
Rain	Rare	No	Escorting patients leaving the hospital, making home visits
Snow	Rare	No	Escorting patients leaving the hospital, making home visits
Pathogens	Occasional	Yes	

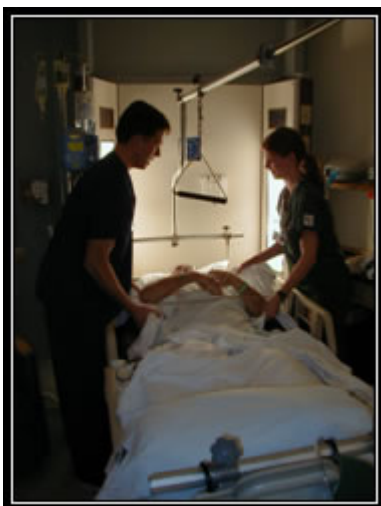
Section 1.06 - ESSENTIAL FUNCTIONS

(a) Patient Transfers

Direct patient care involves assisting the patient into various positions and functions. The transfers can be divided into a few categories: bed mobility, sitting, standing, wheelchair, floor, and walking.

Physical Demands: Ability to bend, squat, twist, lift, pull, push, as well as guiding/standing by in case assistance is needed. Varied assistance is required depending on the ability of the patient. Lifting forces vary with patient weight and level of ability to assist in the movement. Generally no more than 30% of the patient body weight is required. Pediatric nursing often requires the child to be lifted, or positioned independently; these forces would be up to 50 lbs. Draw sheets, transfer boards, lifts and other transfer equipment may be used.

Bed Mobility--A two-person lift to move the 240lbs. patient up in bed with no assistance requires 28 lbs. force from each nurse.



Rolling the patient on to the side requires an approximate force of 10% of the patient's body weight. Trunk flexion of up to 50 degrees with a return to an upright posture occurs during positioning. Static holding of the patient with one upper extremity while manipulating/tucking sheets against the patient may be required during sheet changing, or bed baths. The

process of rolling, holding the patient, and pulling sheets across the bed would be required to complete the process.



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Supine to Sit--Assisting a 251 lbs. patient from lying supine to sitting with Moderate assistance (50% help) requires 26 lbs. of force, and movement from trunk flexion to an upright posture during load. Dynamic standing with 16 pounds of force is required to assist the patient in a sustained sitting posture.



Bed to Wheelchair--In the sitting position, the nurse can sit or stand to assist the patient in a bed to wheelchair transfer with standing pivot transfer as described below, or a sitting pivot transfer, including the use of a sliding board. The use of the sliding board requires the use of one upper extremity to stabilize the patient and shift the body weight to one side, while using the contralateral upper extremity to place the board under the patient's hip. Minimal force is then exerted to slide the patient from one surface to another.

Sitting to Standing--Assisting a 251 lbs. patient from Sitting to standing with Moderate assistance (50% help) requires 26 lbs. of force, and movement from trunk flexion to upright standing during the dynamic lift. Dynamic standing with 16 pounds of force is required to assist the patient in a sustained standing posture.

Standing Pivot--A standing pivot transfer to the wheel chair is accomplished with full body rotation and controlling the patient to sitting. The nurse will end with approximately 50 degrees of trunk flexion, although squatting during the patient descent will minimize the trunk flexion.

Floor Transfers--Floor transfers are accomplished with a minimum two person lift, and generally occur only when a patient has fallen. The patient may be lifted directly, placed on a backboard, or pulled into a chair. Trunk flexion to 40°, full knee flexion, and hip flexion of 90°-120° may be required for a floor lift. Arms are in an extended elbow position. Assistance is sought as the need dictates. This transfer would be rare in occurrence.

Wheelchair Mobility--Wheelchairs are generally pushed or pulled, and require 20 to 30 pounds of pulling force on industrial grade carpet, 15 pounds force for turning, and 5 pounds force pushing on tile. Minimal trunk flexion is required, generally to lock or unlock brakes. Squatting or kneeling may be required to manipulate the footrests. Tight or confined spaces such as bathrooms may be encountered, and require flexibility of the torso, and extremities.

(b) Patient Care



Vital signs monitoring requires bimanual upper extremity use for positioning the blood pressure cuff, and trunk flexion to 40 degrees, with slight rotation. The nurse position can be altered with adjusting the bed height or patient position. Minimal grip strength is required.

and trunk flexion to 40 degrees. The position may be altered with bed height and patients upright

posture.



Extremities may be supported during such activities as dressing changes, pillow positioning, or placing CPM (continuous passive motion) devices. The force may be 10% of the patient's bodyweight. A dynamic lift followed by a static hold is required. The elbow may be maintained with 90 degrees of flexion. A unilateral static hold may be required while positioning heavy and/or awkward objects, such as CPM machines, under, on or around the extremity.



Bedside monitors require reaching and visual acuity. Reaching is occasional to head

height, with shoulder elevation. Dexterity is required to operate the push Buttons of the monitors. Minimal sustained posture of the reaching extremity is required.





IV poles are commonly used and may be fixed to the wall, ceiling, or on a portable stand. Hanging the IV bag or bottle requires an overhead reach with shoulder elevation and a placing a weight of up to 5 pounds on the pole. Occasional reaching to shoulder height with finger dexterity and pinch grip is needed to adjust the flow of fluid. The contralateral upper extremity is often used to hold the tubing, or bag for control. Injections are made into the IV tubing portals, or into the bag. Dynamic pinching of various force less than 12 pounds is required to push the fluid through the syringe.

The IV pole is moved with the patient. Moving the pole requires 5 to 10 pounds of force to initiate movement. This varies with the number of monitors, pumps and hanging fluids. Approximately 20 pounds of dynamic grip strength is required to keep the pole stable during movement. Upper extremity reaching at waist height, and static holding at the shoulder and elbow occur. The IV stand may be pushed or pulled requiring less than 5 pounds of force. Greater grip, wrist and forearm force may be required with top-heavy IV poles to avoid tipping.



Opening IV bags requires a bimanual grip and pinch force of 5 pounds to rip/tear the container. Spiking and priming the IV bag requires 16 pounds of force. The bag is held with one hand while the other hold the spike at the end of the tubing, and the spike is driven into the bag.



Foley catheters are positioned at the side of the bed and need to be emptied as needed, which can be as frequent as every hour. While squatting or kneeling the bag weighing on average 4 to 5 pounds is held in one hand while the other hand pinches and releases the clamp and then guides the tubing into the urinal. The clamp is then replaced and the bag hung on the bed. Drainage back may leak causing wet or slippery floors. The urinal is grasped and the nurse rises to a standing position. The volume is

read from markings on the urinal, and then is poured into the toilet. Minimal walking is required, generally less than 10 feet.

(c) Material Handling



Supplies including linens and various medical products are retrieved from their respective cabinets. Posture and forces include squatting, reaching overhead with shoulder elevation, forward reaching to full arm extension while manipulating forces less than 5 pounds.





Soiled linen is taken in rolling hampers to the appropriate closet, average less than 100 feet. The hamper may be pulled or pushed and requires approximately 10 pounds of force to manipulate while walking, with average grip. Two hampers may be moved at the same time. The linen bag is removed from the hamper frame with minimal trunk flexion to 30 degrees. The bag weighing up to 35 pounds is carried into the closet and placed in the bin with lifting including waist, shoulder and overhead heights.



(d) Chart Review

Each shift charts are reviewed and a report on each of the assigned patients is given. At the beginning of the shift the nurse receives a report from the exiting shift member, then at the end of the shift the nurse gives a report to the incoming shift. The report is generally verbal. The nurse may sit, stand, or alternate positions during reporting. The report process generally lasts 20-30 minutes. Charts may also be reviewed throughout

the shift, which can be performed sitting or standing. Minimal paper handling is required.

(e) Documentation



Documentation is ongoing during the shift. Charting is done via computers, or on paper. Typical duration is less than five minutes writing or typing and occurs regularly throughout the shift.

(f) Inserting Catheters

Various catheters are placed; these include nasogastric, oralgastric, tracheal suction, urinary, and intravenous. Visual acuity, reaching and dexterity are required to place the catheter, in addition some require maintaining a sterile field throughout the insertion. Trunk flexion to 30° may be required depending on patient positioning. 5-10 lbs of pinch grip is needed to hold and guide the catheter. Trunk flexion may be maintained 1-2 minutes with catheter placement for bladder drainage. Fine motor control in the distal upper extremities is needed to place the catheters. The patient position may be changed by adjusting the bed height. The patient may or may not be cooperative alert, or responsive.

(g) Perform CPR

Communicate with individual to assess responsiveness, communicate with others in the immediate area to give directions, and seek assistance. A standing or kneeling position at the side of the individual is required to perform CPR. Performing kneeling chest compressions require a position of trunk flexion 30 to 40°, hip flexion 90°, knee flexion greater than 90°, full elbow extension and wrist extension to 75°. Chest compressions will require 40-60 lbs of force to compress the chest 1-2 inches.

Infant CPR can be performed with the infant on a supported surface, or with the infant resting on the forearm of the individual performing CPR, or airway clearing procedures. Infants are defined as birth to 1 year old, with an average weight from 3 ounces to 30 lbs. In airway obstruction remedies, the infant is supported on the forearm, while chest compressions are performed with the opposite arm. The infant is then turned over, and back blows are performed. The forearm is in a position of flexion to 90° for compressions, lacking 25° extension during back blows, with full forearm supination, and wrist flexion or extension less than 20°.

(h) Physical Assessment

Assessing heart, lung and bowel sounds placing stethoscope on chest, abdomen and back. Minimal grip is required to hold and place the stethoscope against the body. Hearing sensitivity is essential.

Visual inspection is performed noting changes in color or appearance of structures and areas of the body.

Palpation is performed for temperature, tone of tissue, pulses, structure of the body, as a whole.

Position may be altered by adjusting bed with in-patient settings; home care may require trunk flexion of 30 to 40°, or the student may squat, or kneel. Physical demands are the same as those in the patient transfer section, as the patient may need to be positioned in sitting, standing, and lying positions.

(i) School Based Course Work

Students are in school classes up to 8 hours per day for one to five days per week. The coursework includes classroom instruction via lecture, and media resources. During classroom presentations the student is sitting for periods of 5-6 hours although 10-minute breaks may be given during that time period. The student is able to stand in the rear of the room if needed during these presentations. The seating environment is tables with molded plastic chairs, or chairs with attached desks and side entrance.

Practical application of the material includes laboratory for patient care skills, and computer labs. During patient care labs the student may need to lift or move a mannequin weighing 40-50 pounds. They will position themselves in kneeling, squatting, crouching, bending, sitting and standing postures. They may also act as patient and lay, sit, stand, bend, and twist for simulation exercises. Physical demands will be the same as outlined in the patient care component.



Section 1.07 - POSTURE AND MOVEMENT

Sustained Posture	Max. Consecutive Min. per hour	Total Daily Hours	Optional Possible Change	Essential Function
Sitting	60	5	Yes	No
Static Standing	60	5	Yes	No
Dynamic Standing	60	5	Yes	No
Walking	10	5	Yes	No

Movement/Posture	Frequency	Maximum Sustained Demand
Trunk Bending (<20°)	Occasional	2-5 minutes
Trunk Bending (>20°)	Occasional	1-2 minutes
Trunk Twisting	Occasional	1-2 minutes
Trunk Turning	Occasional	1 minute
Kneeling	Occasional	1 minute
Squatting	Occasional	1-2 minutes
Crawling	Rare	
Climbing	Rare	
Overhead Reaching	Occasional	1 minute
Side Reaching (<90° Abd.)	Occasional	1 minute
Side Reaching (>90° Abd.)	Occasional	1 minute
Forward Reaching (<90° Elev.)	Occasional	5 minutes
Forward Reaching (>90° Elev.)	Occasional	1 minute
Wrist Turning	Occasional	1 minute
Grasping	Occasional	5 minutes
Power Grip	Occasional	1 minute
Pinching	Occasional	1 minute

Finger Manipulation	Occasional	1 minute
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(a) Lifting

Position	Weight/Frequency	Weight/Frequency
Floor to waist	50lbs. occasional	20lbs. frequent
Waist to Shoulder	50lbs. occasional	20lbs. frequent
Overhead	50lbs. occasional	20lbs. frequent
Push	50lbs. occasional	20lbs. frequent
Pull	50lbs. occasional	20lbs. frequent
Carry	50lbs. occasional	20lbs. frequent

Section 1.08 - DEFINITIONS

The following definitions will assist in the interpretation of the exposures outlined in this report. These are in accordance with the U.S. Department of Labor and ADA guidelines.

Essential functions

Tasks that must occur for a given job task to be complete. (Jtech Medical Industries). These are tasks that may not be modified. For example if sitting was an essential task, the individual would have to sit during the specified time, not stand, kneel, lay etc.

(a) Department of Labor Terminology

D.O.L. Term	Percentage of Shift Work	Time in Hours (Of an 8 hour day)	Approximate Exertions Per Time Frame
Never	0%	0 hours	None
Occasional	0-33%	>0 hours <3 hours	1 per half hour
Frequent	34-66%	>3 hours <5 hours	1 per 2 minutes
Constant	67-100%	>5 hours <8 hours	1 per 30 seconds

Never

The activity is never performed.

Occasional

Work done up to 33% of the workday or 0-3 hours of an 8-hour shift or workday excluding breaks. In terms of physical exertion, this is equivalent to approximately one exertion every half-hour or 15 exertions per shift.

Frequent

Work done from 34% to 66% of the shift or workday or 3-5 hours of an 8-hour day excluding breaks. This is equivalent to one exertion every 2 minutes or 200 exertions per shift.

Constant

Work done in excess of 67% of the shift or workday or 5 hours or more during an 8-hour day excluding breaks. This is equivalent to 1 or more exertions every 30 seconds, or 850 or more exertions per shift.

If a student should present with any limitation to performing the following essential job functions, s/he should speak with the Disability Director in the Academic Support Center.

Used with Permission of the Academic Leadership Committee of the Utah Organization for Nurse Leaders: **State of Utah Student Nursing Physical Demands** created by Eric Passey MPT (Intermountain Health Care)

PARTICIPATION NURSING DEPARTMENT ACTIVITIES AND GOVERNANCE

Nursing students are given the opportunity to contribute to the planning, implementation, and evaluation of programs activities and committees. It is highly recommended that students participate. Below is listed a brief description of the committees and their activities.

Evaluation Committee

Involves activities related to the evaluation process. Issues of concern are: student evaluation, faculty evaluation, and course evaluation. The committee works with faculty and students at defining the need for evaluation.

Faculty Committee

Meets monthly to discuss: a) program teaching, policy, evaluation, b) faculty roles, responsibilities, scholarship, c) student satisfaction and issues, d) committee work, e) SHS and college issues, f) professional issues. Students who attend are excused for discussions related to any individual student issue.

Curriculum Committee

Involves the discussion and evaluation of curricular issues, and makes changes necessary for short-term and long-term development. The committee engages in periodic review and evaluation of curriculum and makes recommendations to the faculty concerning ongoing changes in curriculum. Faculty who develop new courses seek review from this committee.

Undergraduate Nursing Student Liaison

Involves students and faculty in assessing the needs and interests of students. The Liaison serves as a bridge for communication between students and faculty. Areas of interest are faculty-student communications, Big Sister-Little Sister Program, Fund Raising, Educational Programs, and Student Policies.

STUDENT EVALUATION OF COURSE AND FACULTY

Course evaluation forms are to be filled out by all students at the end of each semester. These evaluations give students the opportunity to express their opinion about all aspects of the course. This information is extremely useful to faculty in planning for the course. Evaluations are not read or compiled until after the grades are submitted.

Faculty evaluation forms are to be filled out by all students at the end of each semester. These evaluations are carefully read by the faculty persons only after course grades are submitted. Faculty evaluations are used in decision for contract renewal, promotion and tenure, and to help faculty improve their teaching skills.

GRIEVANCE

An individual or group of students who have concerns related to the clinical or classroom components of the course, are expected to follow these steps:

1. **Student-Faculty Level:**

An individual student or group of students should directly discuss with the faculty members involved any misunderstanding or grievance related to the faculty member's performance or expectations. If a satisfactory resolution is not achieved, the student has the prerogative of informing the faculty member of the intention of bringing the situation to the course coordinator. This process should be initiated within two weeks.

2. **Team Level:**

Situations which were not resolved satisfactorily at the individual student-faculty level may be presented by either party for review by the teaching team.

3. **Associate Chair Level:**

Situations which were not resolved satisfactorily by the teaching team should be addressed to either the Associate Chair of Undergraduate or Graduate Nursing.

4. **Chairperson for Nursing:**

A problem which is not satisfactorily resolved by the Associate Chair may be taken to the Chairperson for Nursing. The Chairperson will review the data and act as an arbitrator of the grievance.

5. **School For Health Studies:**

A problem that remains unresolved at the Program level may be taken to the Dean for the School of Health Sciences who will review the issue and act as an arbitrator of the grievance.

6. **College:**

See Simmons College Student Handbook.

7. **Outside Simmons College.**

There may be occasions when individuals outside the program such, as clinical faculty, employers of graduates, patients treated by our students or parents, will pose complaints about the program. All complaints concerning the Nursing Department should be referred to the Nursing Department Chair who will notify the Dean of the School of Health Sciences. The department chair will consult with all parties involved, including students, faculty and outside individuals, to try to resolve the issue to the satisfaction of those issuing the complaint. The department chair will maintain documentation of all interactions related to the complaint. If the issue is not resolved at this level, the department chair will consult with the SHS Dean and/or SHS Department Chairs. If the situation is warranted, College counsel will be notified by the Dean.

Complaints by students related to their individual status or clinical or academic performance should be handled according to grievance procedures outlined in the Student Handbook.

All grievances against the department will be presented by the chair at the SHS Chair's monthly meetings.

ACADEMIC

UNDERGRADUATE
NURSING
POLICIES

POLICIES SPECIFIC TO RN-BS Students

STUDENTS ACCEPTED TO SIMMONS BUT NOT NURSING

COMPETENCY IN MATHEMATICS

The Nursing Department requires all students to demonstrate competency in basic mathematics for the purpose of calculating medication dosages. Undergraduate nursing students must pass the Simmons mathematics competency exam prior to taking CHEM 111, CHEM 112, and NURS 225. Math Competency is further demonstrated by specified examinations in the sophomore year, junior year and senior year nursing courses. Each student must demonstrate competency on a medication quiz at an 80% or above level. Any student not meeting this requirement will be required to withdraw from the nursing course in which the failure occurred. Senior students must demonstrate competency by a passing grade of 90% on medication examinations. Furthermore, each nursing course exam will include medication calculation type questions.

CLINICAL ATTENDANCE

The clinical component of the course consists of three areas; 1) laboratory practice, 2) preparation for clinical practice and 3) direct clinical practice. The laboratory portion of clinical is completed in the Nursing Skills Laboratory and includes practicing procedures under the guidance of the Department Faculty and the Lab Manager. Some procedures will involve using classmates as clients. Students must come to the clinical experience, laboratory or hospital prepared for the assignment. If a student is unprepared for clinical practicum she will be required to leave the clinical setting, complete the required preparation and make-up the clinical time at the discretion of the faculty and the health care facility. The clinical component of the course is met through eight to sixteen hours per week of clinical experience. Students are responsible for careful preparation to assume responsibility for patient care.

Clinical absence related to illness may require verification and/or clearance from the Health Center or primary care provider. A student may be allowed to make up clinical practice if, in the opinion of the teaching team, those absences interfere with meeting the clinical objectives. The team will present its recommendation for student make-up time to the Chairperson for approval.

CLINICAL PLACEMENTS

All clinical placements will be made by the clinical coordinator in consultation with the faculty. Due to the high volume of nursing students enrolled in area programs, student requests can **NOT** be accommodated. Any concerns related to clinical placements should be addressed to the faculty course coordinator and not the clinical coordinator.

GENERAL DEPARTMENT POLICIES

1. The classroom is similar to any and all professional setting. As in all professional environments, the following behaviors demonstrate commitment to professional standards of conduct:
 - Attending each class
 - Arriving on time and being well-prepared for class
 - Staying in the classroom for the entire class period
 - Turning off all pagers and cell phones
 - Refraining from side conversations with classmates
 - Being attentive to and respectful of the faculty presenting the class
 - Being attentive to and respectful of classmates discussing questions, cases or issues raised during class
 - Notifying the professor well in advance in the unusual circumstance that you will be late, unable to attend class, or unable to meet class requirements
 - Adhering to the Simmons College Honor code at all times in clinical and classroom situations
 - Being respectful of all department staff
2. Tape recording of lectures can be done only with the permission of the faculty/lecturer. This permission must be obtained prior to class.
3. Grades: The student must receive a C (73) or above overall average in the course exams in order to progress to the next nursing course. Once the student has achieved a C or above average, all other course assignments will be factored into the final grade. If the exam average is less than C, the student will receive an F for the course.
4. Students must pass both the clinical and didactic components of a nursing course in order to pass the course. If the student fails one component and passes the other, she will fail the course.
5. Written Assignments: Assignments are to be handed in prior to class on the date specified. Please see the individual course syllabus for the policy. It is suggested that a photocopy of all assignments be made and retained by the student.
6. The Nursing Department can submit an academic/clinical warning when the students' performance is considered to be marginal and/or unsafe. The justification for a warning includes but are not limited to the following:
 - a. Quizzes or exams with a grade of C or below
 - b. Overdue assignments
 - c. Poor attendance
 - d. Poor or unsafe clinical practice (see course and/or clinical objectives)

- e. Violation of the Honor Code
 - f. Violation of the Professional Code of Ethics
 - g. Other, specify
7. A student can be dismissed from a course in the nursing program at anytime, with cause. Evidence of unsafe practice, failing work, or violation of the Professional Code of Ethics are grounds for failure.
 8. All students will adhere to the Simmons College Honor Code and the ANA Code of Ethics. Refer to Simmons College, Student Handbook for additional information.
 9. We expect full concordance by every nursing student with the Simmons College Honor code. Additionally we will enforce the following testing policies in each course:
 10. During a nursing exam, any discussion among students or sharing of any information once the exam begins will be considered an infraction of the honor code.
 11. During examinations students must leave all materials (notebooks, cell phones, pagers, water bottles, clothes etc at the front of the classroom. Any student suspected of giving or receiving information during an examination will be asked to leave the examination. Students who leave the examination will not be allowed to finish the exam at a later date.
 12. Once a student begins an exam, she must complete the exam during the examination period. If a student leaves the exam before completing the exam, the faculty member will grade the student on the work completed during that exam period only. The only exception would be a medical emergency that occurs during the exam. The situation would be considered emergent only if the student requires immediate emergency medical attention in the emergency room. Documentation from the emergency room physician would be required.
 13. Students who observe cheating by other students are bound by the Honor Code and the ANA Code of Ethics to report such behavior to the faculty.
 14. According to policy, a student will be excluded from the Nursing Program for cheating or failure to report cheating of others.
 15. Only under extenuating circumstances and with prior permission of the faculty are children allowed to attend classroom lectures. Children are not allowed in the Nursing Laboratory at any time.
 16. If a student is unable to complete the course work by the end of the semester, the student and faculty may request an incomplete grade from the Administrative Board.

17. Each student will be assigned a faculty advisor. It is the student's responsibility to meet with their advisor at frequent intervals. It is the expectation that students will meet with their advisor a minimum of once per semester.
18. All written assignments in the nursing major require American Psychological Association Publication format. (APA)

UNSATISFACTORY STUDENT PROGRESS

Progression

1. A student whose grade point average (GPA) falls below a C in any semester will be automatically placed on probation for the following semester.
2. A student will be placed on probation for the following semester if s/he receives a grade below a C (or an F in a P/F course) in any course designated by the student's program as requiring a grade of C or better.
3. A student will be placed on probation for demonstrating behavior inconsistent with ethical, legal, or professional standards as determined by each program faculty.
4. If a student takes a leave of absence after being placed on probation, s/he will be on probation for the semester s/he returns to the program.
5. A student receiving a grade below C in any course designated by the student's program as requiring a grade of C or better will receive an F and must repeat the course for credit. Grades for the initial and repeated course will appear on the student's transcript and both will be used in calculating the cumulative GPA. Students may repeat a given course only once.
6. A student who fails any nursing course must be aware of the courses for which the failed course is a prerequisite. Prerequisite courses must be successfully completed before taking subsequent nursing courses that require the failed course be taken prior to the course. A student who fails a nursing course may proceed into another nursing course only if the subsequent course does not require prior successful completion of the failed course.
7. Repetition of the course may affect a student's ability to progress with her/his class and/or her/his expected date of graduation.

Removal from Probation

A student will be removed from probation if s/he receives a grade of C or better in all courses during the semester s/he is on probation, has a cumulative GPA greater than 2.0 at the end of that semester, and adheres to ethical, legal, and professional standards of behavior.

Exclusion

1. A nursing student who withdraws from a nursing course or begins an approved leave of absence from the College after the eighth (8) week of the term shall be considered to have failed any Nursing course in which she has a failing grade at the time she begins her leave of absence [and her transcript shall reflect a failing grade.
2. A nursing student who has failing grades (less than a C) in any two (2) Nursing courses, under any circumstances including the situation described in Paragraph 1 above, shall be dismissed from the Nursing Department.
3. A student will be excluded from the program if s/he is on probation during more than two semesters over the course of obtaining the degree.
4. A student will be excluded from the program if s/he fails to obtain a grade of C or better in a repeated course.
5. A student will be excluded from the program for demonstrating behavior that is grossly or consistently illegal, unethical, or unprofessional as determined by each program faculty.
6. A student will be excluded from the program if s/he verbally or physically threatens members of the College administration, faculty, staff, students, or clients in the practice setting.

Appeal

A student has the right to appeal the faculty's decision regarding academic standing. The Chairperson should be consulted concerning the appropriate procedures for appeal. Please refer to the policy and procedures for grievance in this Handbook and in the College Student Handbook.

Withdrawal from Nursing in Good Standing

In order to withdraw from either a nursing course or the nursing major in good standing, a student must be passing and meeting all requirements for the nursing major. Any student who withdraws from the major after having been excluded for any reasons, will not be considered in good standing.

Readmission of Excluded Students

All applications for readmission from students who are excluded from the program are referred to the appropriate program. Upon recommendation of the appropriate program, the dean will review the case and take appropriate action. A student who is excluded from the program is considered to be not in good standing and will not be readmitted to the nursing program. Nursing will not accept any student who has been excluded from any other SHS program.

UNDERGRADUATE PROGRAM GRADES AND THEIR VALUES

A	93 – 100	4.0
A-	90 – 92	3.67
B+	87 – 89	3.33
B	83 – 86	3.0
B-	80 – 82	2.67
C+	77 – 79	2.33
C	73 – 76	2.0
F	Grade below 73	

GRADUATE
NURSING
POLICIES

GRADUATE PROGRAM IN NURSING ADMINISTRATION PROGRESSION AND RETENTION POLICIES

1. Students must earn a grade of B or better in all of the core courses and in all of the graduate nursing courses. Students must pass both the classroom and clinical components of the course. If a student fails one component of the course, s/he fails the entire course and must re-take both components of the course.
2. Students must comply with the Simmons College Honor Code, the ANA Standard of Professional Practice, the ANA Code of Ethics, the International Nursing Code of Ethics, and the SHS Statement on Professional Behavior.
3. Students in the RN-MS, Direct Entry, and 5 year BS-MS programs must maintain a 3.0 GPA in undergraduate courses in order to progress to the graduate course.
4. Direct Entry and 5-year BS-MS nursing students must maintain an overall GPA of 3.0 in all nursing courses to continue in the nurse practitioner portion of the program. Students without an overall GPA of 3.0 in nursing will be considered on an individual basis on faculty advisement for admission into the graduate sequence. For the 5-year BS-MS students, GPA will be calculated at the end of year 3. For the Direct Entry students, GPA will be calculated at the end of the pre-licensure curriculum.
5. Students may transfer a maximum of eight credits into the program provided these credits were not used for a degree that was previously conferred. Any such courses must have been taken within the last five years and the student must have achieved a B or better. Approval of the Chairperson of the Nursing Department and the Dean of the School of Health Sciences is required.
6. All graduate students must maintain a 3.0 GPA while in the Graduate Nursing Programs. If a student's average falls below the required 3.0, or s/he demonstrates unsatisfactory clinical performance, s/he may, at the discretion of the faculty, be put on probation. If probation occurs the Chairperson for Nursing will notify the student of the probationary status. This notification will delineate the specific goals the student must meet in order to continue in the program.
7. Any violation of the Simmons College Honor Code, the SHS Statement of Professional Behavior, the ANA Standards, or the other standards of ethical behavior are grounds for dismissal. Students may appeal such a decision through the SHS grievance process.
8. Students are allowed to repeat a failed nursing course only once.
9. Students who fail more than one nursing course will be excluded from the program. If this occurs, students may follow the grievance process identified in the SHS Student Handbook.

10. All graduate students must comply with policies delineated for SHS students in the College Student Handbook

GRADING POLICY

Students in the graduate nursing program must receive a cumulative average of 80 at the end of each semester and a grade of 80 in core courses. A C+ must be achieved in supporting courses. Courses with a clinical component must be passed in both the theoretical and clinical components.

Graduate program grades and their values:

A	93 – 100	4.0
A-	90 – 92	3.67
B+	87 – 89	3.33
B	83 – 86	3.0
B-	80 – 82	2.67
C+	77 – 79	2.33
C	73 – 76	2.0
F	Grade below 73	

Incomplete Policy—See SHS Handbook

Repeating Courses—See SHS Handbook

Honor Code—See SHS Handbook

Grievance—See SHS Handbook

Extension – See attached

The graduate course sequence is specific to each concentration. Students should refer to their course booklets, nursing web-site, and catalogue for requirements of each program. Degree requirements include core courses, support course and elective credits.

POLICY ON REMEDIATION IN GRADUATE PROGRAMS

Students enrolled in the graduate programs are expected to make progress towards all course objectives throughout the semester. If in the opinion of the faculty, clinical preceptor and/or student, such objectives are not being met, the student may be required to do additional course work in order that objectives be attained. Students will be required to pay for volunteer patients if they are required to assist in meeting objectives. Otherwise no additional

fees will be required for this tutorial. Faculty will evaluate and monitor student progress and determine how long tutoring will be required.

EXTENSION POLICY FOR NURSING DEPARTMENT

Extensions for course work will be granted only with the permission of the course director. Students will negotiate with faculty for extensions in the case of unforeseen circumstances. Specific policies for extensions will be found in course syllabi.

FELONY CONVICTIONS EXCLUDING INDIVIDUALS FROM AUTHORIZATION TO PRACTICE AS AN ADVANCED PRACTICE REGISTERED NURSE (Effective 2-07)

Any Registered Nurse seeking authorization to practice as an advanced practice nurse is subject to the Good Moral Character requirements

When the Board determines that an applicant for APRN authorization is not eligible for such authorization based on the applicant's failure to demonstrate compliance with the Good Moral Character requirement, the Board will open a complaint against that nurse's Registered Nurse licensure.

STANDARDS FOR PROFESSIONAL BEHAVIOR

The School of Health Sciences is a learning community that values the personal and professional development of the individual. Students and faculty should model professional behaviors that enhance the educational environment. In addition, all members of the SHS community adhere to their individual discipline's Professional Codes and, as such, are bound to conduct themselves as individuals committed to providing compassionate and equitable health care. Adherence to the following standards of professional behavior will assure the student an optimal learning experience.

Students enrolled in SHS are expected to provide client-centered care and be advocates for such care in all the health care environments in which they practice. Clients are to be cared for with respect for their dignity. Students are expected to provide access to health care for clients without regard to age, ethnicity, gender, financial status, or setting in which the client resides.

As adult learners, students are expected to engage in the educational process with openness and honesty in their self-assessment. Students cooperate with each other in creating an environment conducive to learning and professional growth. Students are expected to be respectful of each other's learning styles. Students participate with faculty in the learning process and seek appropriate feedback in meeting course objectives and individual learning goals. Students are expected to adhere to course policies as stated in the syllabus and should seek the timely assistance and advice of appropriate faculty when there are concerns regarding the evaluative process.

Faculty and student privacy, professional reputation, and academic freedom are to be respected when disagreements arise in the evaluative process.

CLASSROOM ATTENDANCE

Classroom attendance is viewed as one means by which students demonstrate a commitment to the professional responsibilities of the nurse. Students are expected to attend the designated classroom and laboratory instruction

OFF-SITE Nursing Department Course Sequences

Winchester Hospital
South Shore Hospital
Faulkner Hospital

**Simmons-Winchester RN-BS Program
Two year full time Program**

Course No.	Course Name	Semester/Year Taken	No. Credits
<i>Fall 1</i>			
NUR 404W	Normal and Abnormal Physiology	_____	4
NUR 292W	Health Assessment	_____	4
<i>Spring 1</i>			
NUR 337W	Nursing Care of Indiv/Fam/Comm	_____	4
SHS 450W	Health Care System: Interdisciplinary Perspective	_____	3
<i>Summer 1</i>			
Mode		_____	4
Mode		_____	4
<i>Fall 2</i>			
Nur 454W	Leadership/Management in Clinical Setting	_____	4
SHS xxxW	Health Care Policy	_____	4
<i>Spring 2</i>			
SHS xxxW	Health Care Financing	_____	4
NUR xxxW	The Nurse Manager Role	_____	4
<i>Summer 2</i>			
NUR 390W	Nursing Research	_____	4
NUR xxxW	Ethics in Health Care	_____	4

Simmons College Requirements for a Bachelor of Science Degree

1. Modes of Inquiry provide students with an educational breadth and require the completion of 1 course from 6 different areas of study.
2. Math Competency which requires students to demonstrate knowledge of basic math. This can be met through transfer of a college level math course, exemption examination, or completion of a math course.
3. Two college level writing courses.
4. 127-128 credits to graduate

**Simmons-Winchester RN-BS Program
Three year part time Program**

Course No.	Course Name	Semester/Year Taken	No. Credits
<i>Fall 1</i>			
NUR 292W	Health Assessment	_____	4
<i>Spring 1</i>			
NUR 337W	Nursing Care of Indiv/Fam/Comm	_____	4
<i>Summer 1</i>			
Mode		_____	4
<u>YEAR 2</u>			
<i>Fall 2</i>			
NUR 404W	Normal and Abnormal Physiology	_____	4
<i>Spring 2</i>			
SHS 450W	Health Care System: Interdisciplinary Perspective	_____	3
<i>Summer 2</i>			
Mode		_____	4
<u>YEAR 3</u>			
<i>Fall 3</i>			
Nur 454W	Leadership/Management in Clinical Setting	_____	4
SHS xxxW	Health Care Policy	_____	4
<i>Spring 3</i>			
SHS xxxW	Health Care Financing	_____	4
NUR xxxW	The Nurse Manager Role	_____	4
<i>Summer 3</i>			
NUR 390W	Nursing Research	_____	4
NUR xxxW	Ethics in Health Care	_____	4

Simmons College Requirements for a Bachelor of Science Degree

1. Modes of Inquiry provide students with an educational breadth and require the completion of 1 course from 6 different areas of study.

2. Math Competency which requires students to demonstrate knowledge of basic math. This can be met through transfer of a college level math course, exemption examination, or completion of a math course.

3. Two college level writing courses.

4. 127-128 credits to graduate

**Simmons-South Shore Hospital RN-BS Program
Three year part- time Program**

Course No.	Course Name	Semester/Year Taken	No. Credits
<u>YEAR 1</u>			
<i>Fall 1</i>			
NUR 292W	Health Assessment	_____	4
<i>Spring 1</i>			
NUR 337W	Nursing Care of Indiv/Fam/Comm	_____	4
<i>Summer 1</i>			
Mode		_____	4
<u>YEAR 2</u>			
<i>Fall 2</i>			
NUR 404W	Normal and Abnormal Physiology	_____	4
<i>Spring 2</i>			
SHS 450W	Health Care System: Interdisciplinary Perspective	_____	3
<i>Summer 2</i>			
Mode		_____	4
<u>YEAR 3</u>			
<i>Fall 3</i>			
Nur 454W	Leadership/Management in Clinical Setting	_____	4
SHS xxxW	Health Care Policy	_____	4
<i>Spring 3</i>			
SHS xxxW	Health Care Financing	_____	4
NUR xxxW	The Nurse Manager Role	_____	4
<i>Summer 3</i>			
NUR 390W	Nursing Research	_____	4
NUR xxxW	Ethics in Health Care	_____	4

Simmons College Requirements for a Bachelor of Science Degree

1. Modes of Inquiry provide students with an educational breadth and require the completion of 1 course from 6 different areas of study.
2. Math Competency which requires students to demonstrate knowledge of basic math. This can be met through transfer of a college level math course, exemption examination, or completion of a math course.
3. Two college level writing courses.
4. 127-128 credits to graduate.

**Simmons-Faulkner Hospital RN-BS Program
Three year part- time Program**

Course No.	Course Name	Semester/Year Taken	No. Credits
<u>YEAR 1</u>			
<i>Fall 1</i>			
NUR 292W	Health Assessment	_____	4
NUR 234S	Transition to Professional Nursing	_____	4
<i>Spring 1</i>			
NUR 337W	Nursing Care of Indiv/Fam/Comm	_____	4
<i>Summer 1</i>			
Mode		_____	4
<u>YEAR 2</u>			
<i>Fall 2</i>			
NUR 404W	Normal and Abnormal Physiology	_____	4
<i>Spring 2</i>			
SHS 450W	Health Care System: Interdisciplinary Perspective	_____	3
<i>Summer 2</i>			
Mode		_____	4
<u>YEAR 3</u>			
<i>Fall 3</i>			
Nur 454W	Leadership/Management in Clinical Setting	_____	4
SHS xxxW	Health Care Policy	_____	4
<i>Spring 3</i>			
SHS xxxW	Health Care Financing	_____	4
NUR xxxW	The Nurse Manager Role	_____	4
<i>Summer 3</i>			
NUR 390W	Nursing Research	_____	4
NUR xxxW	Ethics in Health Care	_____	4

Simmons College Requirements for a Bachelor of Science Degree

1. Modes of Inquiry provide students with an educational breadth and require the completion of 1 course from 6 different areas of study.
2. Math Competency which requires students to demonstrate knowledge of basic math. This can be met through transfer of a college level math course, exemption examination, or completion of a math course.
3. Two college level writing courses.
4. 127-128 credits to graduate.

Simmons -- Winchester
B.S. – M.S. in Nursing Administration

Course No.	Course Name	Semester/Year Taken	No. Credits
* Must get B+ or better to waive GRE			
Summer 1			
	Statistics	_____	4
Fall 1			
*NUR 454W	Leadership/Management in Clinical Setting	_____	4
HCA 500W	Health Care Accounting	_____	2
HCA 501W	Self and Small Group Leadership	_____	2
WinterBreak			
NUR 512W	Nursing Leadership Theory	_____	2
Spring 1			
NUR 513W	Nurse Manager Role	_____	4
NUR 514W	L/M Practicum	_____	4
Summer 2-Session I			
NUR 508W	Scholarly Inquiry	_____	2
HCA 504W	Health Economics I (10 weeks)	_____	3
Summer 2-Session II			
HCA 524W	Health Care Law	_____	2
Fall 2			
NUR 515W	Advanced Leadership	_____	3
NUR 516W	Advanced Nursing Leadership Practicum	_____	2
Spring 2			
HCA 522W	Health Information Systems	_____	2
HCA 505W	The Nature of Groups and the Nature of Work	_____	2
HCA 509W	Health Care Finance I	_____	3
Summer 3			
NUR 509W	Fieldwork	_____	2
	Total Credits		43