



**Idaho State
University**

**School of
Nursing**

Undergraduate Nursing Student Handbook

Bachelor of Science in Nursing

2024-2025

**Addendum Effective
January 1, 2025**

Table of Contents

Introduction	4
College of Health	5
Mission	
Vision	
Values	
School of Nursing	6
Mission	
Vision	
Program Objectives	
Outcomes	
Pathways	
Commitment to Diversity, Equity, and Inclusion	8
Professional Nursing	9
How We Nurse	
Evidence Based Practice	
Code of Ethics	
Culture of Safety-Just Culture	
Roles and Responsibilities	15
Rights of all, Respect, and Safety	
Responsibilities of the Nursing Department	
Responsibilities of Nursing Faculty	
Responsibilities of Students	
Student Opportunities	26
Student Class Representatives	
Student Nurse Association (SNA)	
Scholarships	
References	28
Appendices	
Appendix A Nursing Code of Ethics	29
Appendix B Incomplete Grade Request Policy and Contract	30
Appendix C Alternate Plan of Study Form	31

Appendix D Health and Safety Requirements	36
Appendix E Media Release Student Agreement	45
Appendix F Student Expectations for Success	46
Appendix G Experiential Education Confidentiality Understanding	47
Appendix H Student media release	48
Appendix I Clinical Education Information and Assumption of Risk	50
Appendix J Blood Borne Pathogen Management	53
Appendix K Title IX Notice of Non-discrimination and Accommodations of Students with Disabilities	58
Appendix L Student Handbook Receipt	62

Introduction

All students enrolled in the School of Nursing (SON) are subject to the policies and procedures of Idaho State University (ISU), the Kasiska Division of Health Sciences, and the College of Health. The Undergraduate Nursing Student Handbook is the official communication of the policies and procedures for undergraduate students in the School of Nursing. Students applying to or accepted to the SON who have not yet begun courses should refer to the general University policy and procedure.

Faculty and staff review and approve this handbook biannually. Upon orientation to the nursing program, all new students are provided a digital link to this Handbook and an overview of its contents. Students are given time to review the Handbook and ask questions and are required to document their understanding and acknowledgment of this process. Students are encouraged to provide constructive feedback and suggestions for improvement via class representatives.

Any updates or changes made in between official revisions will be communicated to all enrolled students, with an effective date via Moodle/Canvas Homeroom announcements. Students are responsible for reviewing all changes and will be held accountable for the information contained herein and any updates.

College of Health

The School of Nursing is a part of the College of Health. The College of Health shares the following:

Mission

Empowering students to create healthy and safe communities.

Vision

To be the preeminent College of Health in the nation, focused on advancing the health and safety of our communities.

Values

Professional Integrity: We are committed to honesty, trust, and accountability. We do the right thing and demonstrate accountability.

Community: We promote partnership and teamwork towards collaborative initiatives that embrace cultural humility and strengthen the communities surrounding our program areas.

Inclusion: We value and welcome our differences. We trust the unique experiences and perspectives of others to ensure accessibility and improve our holistic approach and efforts.

Compassion: We use thoughtful approaches that embody kindness and caring in the development and delivery of our programs and services.

Agility: We are comfortable and flexible in evolving environments. We embrace change and are ready to grow and adapt to meet student needs and regulatory requirements.

Discovery and Innovation: We explore our curiosity and seek innovative solutions to problems in the spirit of lifelong learning.

Excellence: We are dedicated and passionate, continuously striving to be better and know more. We pursue excellence in our combined efforts and advocate for the greater good.

School of Nursing

Mission

Prepare exemplary nurse leaders who integrate education, service, and scholarship through practice and research to enhance the quality of life for rural and diverse populations.

Vision

Be a distinguished School of Nursing committed to being as humanistic and compassionate as we are scientific and innovative.

Program Objectives

The conferring of a BSN denotes the ability to fulfill all expectations of a Registered Nurse to utilize the critical thinking model of the nursing process to:

- Integrate the art and science of caring
- Protect, promote, and optimize health and human functioning
- Prevent illness and injury
- Facilitate healing
- Alleviate suffering through compassionate presence
- Advocate in the care of individuals, families, groups, communities, and populations in recognition of the connections of all humanity
- Apply principles of ethical practice

Program Outcomes

The School of Nursing baccalaureate graduate is prepared to:

- Integrate theories and concepts from education into generalist practice.
- Apply critical thinking and clinical decision-making through the nursing process to facilitate healing, treat human responses, and alleviate suffering through compassionate presence.
- Communicate effectively with individuals, families, communities, and other interprofessional team members using a variety of verbal and written approaches to optimize health outcomes.
- Facilitate a culture of inquiry, analyze health data and research findings, and utilize informatics through interprofessional collaboration to deliver high-quality care,
- Integrate knowledge of healthcare policy, finance, and regulatory environments to influence change in the healthcare system and improve the health of diverse populations.
- Engage in ethical and professional practice to promote health equity, collaboration, and inclusivity and excellence by advocating for individuals, families, and diverse

populations in recognition of the connections of all humanity.

- Lead and promote high-quality, safe, ethical, evidence-based practice that is culturally intelligent, holistic, and person-centered.

Undergraduate Pathways

Students enter the undergraduate nursing program with a variety of educational backgrounds. All students must meet minimal application requirements, fulfill course requirements of both the university and the School of Nursing, and are awarded a Baccalaureate of Science, Nursing (BSN) degree upon completion.

The three undergraduate pathways are:

1. Completion Pathway (C-BSN) for students already licensed as an RN completing a BSN.
2. Accelerated Pathway (A-BSN) for students with a prior baccalaureate degree in a different field.
3. Traditional Pathway (T-BSN) for students earning their first baccalaureate degree.

Commitment to Diversity, Equity, and Inclusion

As leaders in nursing, we are deeply committed to preparing nurses of the future to meet the needs of our diverse and evolving community. Our commitment to diversity, equity, and inclusion is at the core of our educational philosophy.

By 2030, the nursing profession will look vastly different and will be caring for a changing America. Nursing school curricula need to be strengthened so that nurses are prepared to help promote health equity, reduce health disparities, and improve the health and well-being of everyone. Nursing schools will need to ensure that nurses are prepared to understand and identify the social determinants of health, have expanded learning experiences in the community so they can work with different people with varied life experiences and cultural values, have the competencies to care for an aging and more diverse population, can engage in new professional roles, are nimble enough to adapt continually to new technologies, and can lead and collaborate with other professions and sectors. And nursing students – and faculty – not only need to reflect the diversity of the population but also need to help break down barriers of structural racism prevalent in today's nursing education. (National Academy of Science Engineering and Medicine, 2021)

We embrace nursing candidates, students, staff, faculty, and all community members with equal acceptance, encouragement, and respect to reach this goal. We seek to build a diverse community that reflects the communities around us. We recognize the unique contribution of every human and provide compassionate care built on a foundation of respect. We continuously learn about our peers, ourselves, and our patients. We intentionally challenge ourselves to ask nonjudgmental questions, exercise humility, and expand our understanding with forgiveness, acceptance, and encouragement. We recognize the unique trust given to us as nurses and honor our sacred obligation to nurse all. We are leaders in words and action in the continuous evolution to a more just society, committed to lifelong learning, self-awareness, and cultural humility.

Professional Nursing

How We Nurse

Nursing is both a noun and a verb. It is who we are and what we do. Nurses define professional nursing. We define the knowledge, values, and actions that collectively are the nursing profession. We are recognized for this effort in numerous ways, including being voted the most trusted profession in America for over 20 years. (American Nurses Association, 2024)

All faculty, staff, and students are expected to behave per professional standards and expectations. Professional standards guiding the practice of nursing are generated from professional organizations, including but not limited to the American Nurses Association (ANA) and American Association of the Colleges of Nursing (AACN), from peer-reviewed literature, and from practice guidelines from state, national and international sources, including but not limited to the World Health Organization, Idaho State Board of Nursing, federal, and state regulators.

Evidence-Based Practice

Nursing science is founded on evidence. Nursing education both utilizes and creates evidence. The systematic use of evidence forms the basis for nursing practice, curriculum designs, and department practices. The curriculum evolves to stay current, reflect up-to-date evidence, and incorporate the needs of both students and the community. Standard levels of evidence and processes for evidence-based decision-making are utilized for department and course changes.

Code of Ethics

The SON is a community of nurses. As such, we share common expectations for our behavior and choices. In addition to complying with all ISU policies and standards for Student Conduct (<https://www.isu.edu/deanofstudents/student-conduct/>), all nurses, faculty, and students are minimally expected to adhere to the Code of Ethics for Nurses (ANA, 2015), found in Appendix A and at (<https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/>).

Culture of Safety – Just Culture

Patient safety is a central and key attribute of all healthcare. A culture of safety is an organizational culture that intentionally promotes safety at all levels, defining behaviors that contribute to ongoing safety enhancements (Agency for Healthcare Research and Quality, 2019). For the undergraduate SON, the safety culture is incorporated in all aspects of work, including

the approach to violations of this handbook. The principles of Just Culture in Health Care are utilized to respond to all student behavior concerns.

Just Culture is grounded in the reality that people work within flawed systems. Errors, near misses, and policy/procedure/standards violations occur within an environment. Just culture aims to learn from these experiences to improve and reduce the risk of future problems. With the goal of restorative justice, designed to heal people and improve conditions, Just Culture starts by asking **what** is responsible for the variation in policy/procedure or standard.

Restorative justice “acknowledges the existence of multiple stories and points of view about how things could have gone wrong (and how they normally go right)” (Dekker, 2013). It fosters dialogue, autonomy, safety, and continuous improvement. Just Culture is built on four foundational elements.

1. Individuals are not held accountable for system failings.
2. Individuals make mistakes.
3. Competent people will develop behavioral “drift,” developing shortcuts, workarounds, and skipping steps without awareness.
4. Reckless behavior or intentional decisions to not comply with established practices will not be tolerated.

Just Culture decision-making will guide the response to all variations, violations, or perceived violations of a SON standard of behavior, including, but not limited to, a clinical error or near-miss event, cheating, harassing, abusive or unsafe speech, discriminatory behavior, deviations from the handbook, or possible violations of the code of ethics for nursing made by any member of the undergraduate community, student, faculty, or staff within the undergraduate SON. Nothing in this process supersedes ISU policies, procedures, standards, or processes. Issues covered by ISU policies (e.g., academic dishonesty or harassment) will be managed according to the university's standards. This Just Culture standard will address only events specific to nursing that are not covered by ISU standards.

Events or concerns occurring within a class or course are first managed by the faculty applying the Just Culture standards. Faculty have seven (7) calendar days from the time they are aware of an event to investigate and determine the next steps. For each investigation, faculty will seek to identify environmental and system factors that contributed to, impacted, or made the event possible. Faculty will adjust these factors when they are contained within an individual course. Identified factors that do or might extend or repeat beyond a single class will be brought to the Undergraduate Director and undergraduate faculty council to assess and determine action plans. Faculty will use the following algorithm to assess the individual's contribution to the event and decide if it was a mistake, negligence, recklessness, or malevolent behavior.

Faculty will provide direct support for mistakes.

Negligent errors will be documented. Documentation will include a summary of events, evidence supporting the determination of “negligence,” the coaching provided, and a follow-up plan.

Follow-up plans will specify the corrective action, how success will be evaluated, and the timeframe for completion. If the issue is identified in the course syllabus, it may impact a grade.

Faculty will notify the Director of Undergraduate Nursing of the event and the action steps. A student may appeal a faculty determination of negligence to the Director of Undergraduate Nursing within 5 working days of the determination. The Director may have five (5) working days to investigate and communicate a decision in writing. Subsequent appeals progress to the Associate Dean School of Nursing and ultimately to the Dean of the College of Health. The director will maintain documentation of the event until the student graduates.

If a faculty believes there may have been a reckless or malevolent act, they will bring the event to the Director of Undergraduate Nursing.

Concerns, events, or near misses not fully managed within a course or classroom, identified by any student, staff, or faculty member, or events faculty believe to be reckless or malevolent, are brought forth to the Director for Undergraduate Nursing. University standards are applied first. If no University standards or processes apply, the Just Culture Process will be used.

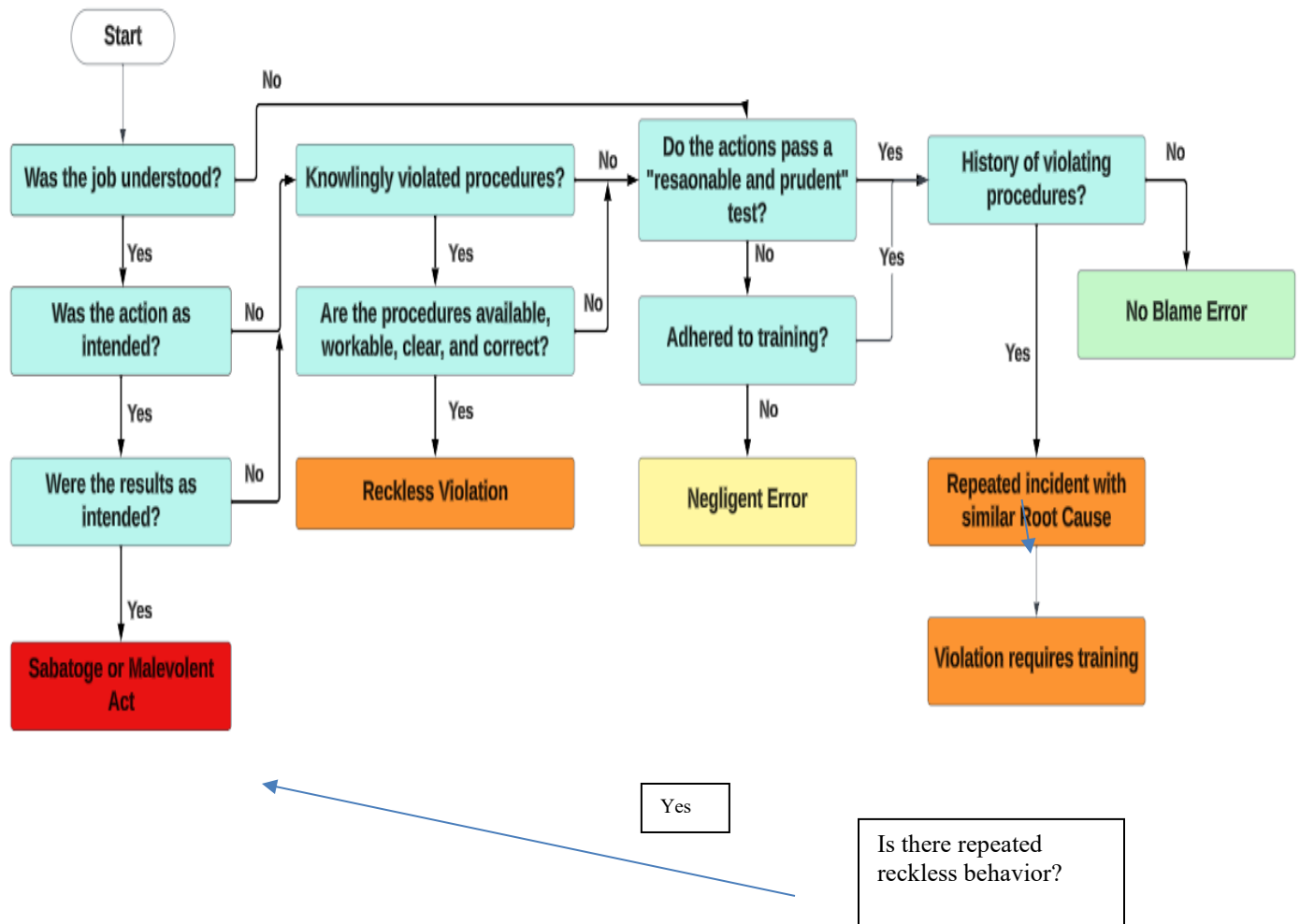
A concern brought to the Director for Undergraduate Nursing will be investigated in seven (7) calendar days. If the Director is the first investigator, a determination of a mistake or negligence will be handled as defined for a classroom event.

If the Director or faculty assesses there may have been reckless or malevolent behavior, an ad hoc faculty committee of three (3) uninvolved faculty members will be convened within five (5) working days. The Director will facilitate this committee but not vote. The person under investigation and witnesses, as appropriate, will be invited to speak to the committee. Those being investigated may invite witnesses or bring a person for support. Only the faculty committee and Director will be present for deliberations. The evidence presented to the committee, the committee's determination, an explanation supporting the conclusion, and the resulting plan will be documented. Deliberations of the committee are not part of the record. If the determination is negligence, see the steps above. If the committee determines reckless behavior, the committee will establish a re-training plan. This may include re-taking a course to ensure safe practice. A determination of malevolent behavior will result in dismissal from the nursing program without the option to reapply. If the concern about reckless or malevolent behavior is about a member of the faculty or staff, this process will not apply, and the issue will be referred to leadership and human resources at the university.

The student in question can appeal the committee's outcome within five (5) working days to the Associate Dean, School of Nursing, and subsequently to the Dean of the College of Health. During this time, they will not be permitted to participate in any School of Nursing activities.

Regardless of individual responsibility being determined, the undergraduate faculty council will identify, track, and review system issues contributing to the event. Action steps will be determined to reduce the risk of a repeated event.

Just Culture Algorithm





Roles and Responsibilities

Learning is a partnership between faculty and students. Both parties have rights and responsibilities. All University rights and responsibilities are upheld. Additionally, the undergraduate SON defines the following rights and responsibilities to support open communication and shared accountability within the SON.

Rights of All, Respect, and Safety

All faculty, staff, students, and everyone involved in the learning process share equal rights to respect and safety. The SON is committed to creating and maintaining a learning environment free of discrimination and harassment for all people. The nursing profession is dedicated to caring for all without barriers or limitations. We strive to recruit, retain, and educate a culturally diverse community committed to increasing inclusivity and understanding.

Exploring differences between individuals and groups for personal and professional learning and growth is critical to the practice and development of nurses. To this end, we are committed to respectful discourse and inquiry. As a professional community, challenging conversations are critical to growth. Together, we will navigate difficult and uncomfortable dialog. If anyone feels a situation is disrespectful or unsafe, they are supported to seek a remedy, which may take the form of personal support, accessing university resources, and/or requesting an investigation with the Director of Undergraduate Nursing, the Associate Dean School of Nursing, the Dean of the College of Health, the Kasiska Division of Health Sciences, or the University (<https://www.isu.edu/title-ix/>).

Students or faculty found to be willfully, intentionally, or repeatedly engaging in disrespectful speech or actions or willfully, deliberately, or repeatedly posing a physical, emotional, or spiritual safety risk to any member of the SON nursing community on campus at a clinical site, online, or in any event organized, led or representing the undergraduate SON program may be dismissed from the program and unable to reapply per the Just Culture Process for Safety and University standards.

Grading

Students have the right to review grades. Students with concerns regarding the grade for an assignment or course should start by requesting clarification from the grading faculty. Questions or concerns remaining after this are brought to the Undergraduate Director for review. Issues unresolved at this stage may be escalated to the Associate Dean and Director of SON. Students can consult with an Academic or faculty Adviser anytime for guidance and support.

It is the student's responsibility to earn the desired grade. Appealing a course grade will be managed according to ISU policy.

Responsibilities of the Nursing Department

1. Maintain student records per university policy and procedure.
2. Make student records available for review upon request per university procedures.
3. Maintain a safe and working environment supportive of learning.
4. Provide access to each course per university standards (via a Learning Management System, such as Moodle or Canvas).
5. Communicate with students via Moodle/Canvas homerooms for general announcements.
6. Maintain student privacy according to federal, state, and university policy.
7. Provide malpractice insurance coverage for students following all department and university policies and procedures.
8. Ensure adequate clinical sites and experiences for learning.
9. Provide estimated costs for program requirements on admission and as early as possible when changes occur.
10. Provide adequate learning environments and supplies
11. Provide direction and support for the use of all required systems and equipment. This includes, but is not limited to, those owned and operated by the school (e.g., simulation mannequins, and lab supplies) and those required by partners (e.g., My Clinical Exchange, and hospital charting systems).
12. Assign each student a home campus.

Responsibilities of Nursing Faculty

Faculty are responsible to create an environment conducive to learning for all students.

1. Post in Moodle/Canvas all required course material, including but not limited to
 - a. Syllabus, including but not limited to
 - i. Course description
 - ii. Course goals
 - iii. Meeting times, dates, places, and login information when needed
 - iv. Method for grading
 - v. Late submission policy - separate from dire and extraordinary circumstances.
 - b. How and when to reach faculty
 - c. Identification of required texts and learning resources and where to access them
 - i. Digital resources may be used in classes requiring added costs in addition to textbooks
 - ii. List of graded assignments and due dates

- d. Expected response time for graded assignments (when will grading be completed)
2. Adhere to the syllabus policy for late assignments. Faculty reserve the right to waive the point reduction for late submissions in emergency or extenuating circumstances.
**Emergency or extenuating circumstances are considered conditions beyond the student's control, influence, or choice. Students are expected to communicate with faculty as soon as it is reasonable and safe. Ex. Jury duty is known in advance, and accommodations will only be made in advance. A car accident is unforeseen, and accommodations will be made when it is safe.*
3. Notify students of changes from the syllabus and course plans in writing with adequate advance notice to be successful.
4. Use standard formatting for all assignments OR communicate when deviations are acceptable.
 - a. **Standard 1-inch margins**
 - b. **Font size 11 or 12**
 - c. **Typeface Calibri, Times New Roman, or Arial**
 - d. **Use of American Psychological Association Style Guide latest edition**
5. Adhere to the standard grading scale.

Grading Scale for the Undergraduate Nursing Program

100 - 93 = A	76.9 - 75 = C Lowest passing grade
92.9 - 90 = A-	74.9 - 70 = C-
89.9 - 87 = B+	69.9 - 66 = D+
86.9 - 83 = B	65.9 - 63 = D
82.9 - 80 = B-	63.2 - 60 = D-
79.9 - 77 = C+	less than 63 = F

5. Role model all professional and general behavioral standards expected of students.
6. Post all course announcements to Moodle/Canvas.
7. Partner with students to adjust due dates in emergency or extenuating circumstances
**Emergency or extenuating circumstances are considered conditions beyond the student's control, influence, or choice. Students are expected to communicate with faculty as soon as it is reasonable and safe. Ex. Jury duty is known in advance, and accommodations will only be made in advance. A car accident is unforeseen, and accommodations will be made when it is safe.*
8. Adhere to all appropriate health and safety prerequisites, infection control, and safety standards for clinical courses.
9. Use respectful verbal, written, and non-verbal communication.
10. Adhere to the Nursing Code of Ethics at all times.
11. Communicate in writing directly to students at risk of failing at a minimum by mid-semester

Responsibilities of Nursing Students

Nursing students will take responsibility for their progression and successful completion of the nursing program. Students are responsible for learning all material defined in each course. This requires extensive work outside the classroom. Numerous learning supports are utilized; some require individual costs (ex., health requirements, NCLEX practice exams, and study material). Specific responsibilities are grouped by academic and professional standards.

Disability Services & Religious Accommodations

Standards must be met with or without accommodations. Students may follow university standards to request accommodations as needed.

Professional Technical Standards

A candidate for admission to the School of Nursing program must possess, or be able to achieve through a reasonable accommodation, certain intellectual, emotional, and physical abilities that would enable the individual to acquire the knowledge and technical and clinical skills needed to complete, successfully, the curriculum in order to pursue a career in Nursing practice. Upon matriculation to the program, the student must continue to possess, or be able to achieve through a reasonable accommodation, the personal competencies outlined below throughout their progression in the program. The practice of Nursing requires the performance of specific functions outlined below. Under all circumstances, a candidate or student should be able to perform the following in a reasonably independent manner, with or without a reasonable accommodation.

Academic Standards

All students will:

1. Ensure contact information in Moodle/Canvas (name, phone, address, and email) is accurate and current.
2. Use isu.edu email for **all** academic communication.
3. Adhere to the university's academic standards, rules, and procedures, including, but not limited to, issues of academic honesty, disability services, and learning accommodations.
4. Utilize Moodle/Canvas to receive class-based communications. **Students must ensure class announcements and discussions are read regularly. All information posted in Moodle/Canvas is the responsibility of the student. Do **NOT** turn off notifications or subscriptions.*
5. Read and seek clarification when needed for all course syllabi and grading requirements.
6. Be responsible for understanding and meeting course expectations.

7. Communicate with faculty and staff to resolve questions, seek clarity, and request personal plans or changes related to extenuating or emergency circumstances.
8. Maintain a minimum grade of “C” in all required nursing, nursing prerequisite, and corequisite courses. Grades below “C” do not demonstrate mastery of the material and readiness for subsequent, dependent courses. See section *Failure to progress*.
9. A student unable to complete the requirements of a course during the semester may request an incomplete grade, per university policy (<https://coursecat.isu.edu/undergraduate/academicinformation/creditandgradingpolicies/>) and contract for completion (Appendix A.) The student must request the contract before final grades are submitted and provide faculty with an adequate explanation of emergency or extenuating circumstances interfering with the timely completion of the course. A contract to complete the course must be on file with the Undergraduate Director before the end of the semester. Failure to complete the contract within the agreed-upon time will result in the grade being calculated based on what was done in the course. An incomplete grade and contract for completion are not automatic, and faculty may reject requests. Students may appeal the rejection to the Undergraduate Director before the final grades are due. Incomplete grades in pre or corequisite courses must be completed satisfactorily before starting any subsequent course.
10. Students will enroll and progress through the standard curriculum schedule unless emergent personal or academic circumstances warrant the submission of a Petition for an Alternative Plan of Study (Appendix C).

Professional Standards

1. Health and Safety Prerequisites
 - a. All students are required to meet all health and safety requirements (Appendix D). Health and Safety requirements are determined by federal state, university, and clinical site requirements and/or national professional standards of practice.
 - b. Students are responsible for all costs associated with meeting these requirements.
 - c. Health and Safety requirements are defined and recorded in either or both the Moodle/Canvas Homeroom and the digital management system used by clinical sites. Each item is acknowledged as complete or incomplete. * *Students are responsible for providing all required documentation for all clinical sites and experiences as directed.*
 - d. Failure to complete or provide all Health and Safety requirements as required and directed to both school and clinical site by the designated due dates will result in immediate removal from all lab and clinical courses. Students may have one (1) calendar week (late week) to fulfill the requirements. During this week, they may NOT attend or participate in clinical or lab classes in any way. All experiences and assignments in the clinical courses for the missed week will be graded zero (0) with

- no make-up options. If required orientation time is missed, faculty will coordinate with clinical sites to attempt to schedule a make-up to ensure safety at the site. This is not guaranteed. If site-required orientation cannot be made up, the student will be forced to leave the class. A Petition for an Alternative Plan of Study will be required for approval to continue in the nursing program. See section *Failure to Progress*.
- e. Failure to complete all health and safety requirements in the late week will result in dismissal from all lab and clinical courses for the entirety of the semester. University policy will determine what, if any, tuition refund is available to the student. A Petition for an Alternative Plan of Study will be required for approval to continue in the nursing program. See section *Failure to Progress*.
 - f. Students exposed to or experiencing symptoms of infectious illness are responsible for communicating with all faculty involved and determining a plan to limit exposure to others. Options include:
 - i. Notifying faculty of illness and not attending class.
 - ii. Coordinating with faculty to join the class via technology (i.e., Zoom) as appropriate.
 - iii. Wearing a mask while on campus.
 - iv. Students with a clearly known risk for infecting others (ex. known strep infection, COVID chicken ox) are not allowed in clinical sites with patients and may be asked to use PPE in the classroom.
 - v. Faculty with concerns may ask students to address risk and leave the class, lab, or clinical setting.
 - g. Students are bound to the standards of confidentiality in practice.
 - h. All information relating to a client's health or personal status per the Health Information Privacy and Accountability Act (HIPAA) is confidential. All nursing students will complete HIPAA training before their first clinical contact with patients and annually as required by the ISU Division of Health Sciences.
2. Safety and Infection Control Practices
- a. Patient safety is a priority. Students must adhere to clinical site standards and policies at all times.
 - b. Faculty direction is final in clinical and lab settings. Students refusing to comply with faculty directives will be asked to leave the setting. No make-up options will be offered, and all assignments related to the day will be graded zero (0). Further action may be taken per the Just Culture algorithm.
 - c. In all lab and clinical settings, students must follow all safety and infection control protocols, including but not limited to:
 - i. Use of personal protective equipment as required for the task/environment
 - ii. Hand hygiene per standard protocols

- iii. All facial/head hair will be secured so as not to obscure vision or, come in contact with or interfere with the performance of nursing practice, skills, or procedures.
 - iv. No artificial fingernail products of any variety, length, or material will be worn. All fingernails will be natural, unpainted, trimmed to the top of the finger, and without sharp edges.
 - v. Visible jewelry, scarves, ties, or other clothing accessories, including stethoscopes (e.g., items worn about the face, neck, arms, hands, or hair) are discouraged. NO item will dangle, hang away from the body or otherwise pose a risk of interfering with the performance of nursing practice, skills, or procedures or pose a risk to the student by getting caught or being used to hold or strangle. Pull-away rings are strongly suggested for those wearing them. Faculty assessment and determination of risk will be honored by students. Students refusing to adhere to faculty directions to remove risky items for reasons other than religious or cultural commitments will be sent out of the lab/clinical environment. No make-up option will be made, and any assignments associated with the missed time will be automatically a zero (0).
 - vi. University-issued SON name badges are worn, secured to the upper chest, and always visible.
 - vii. No perfume, cologne, creams, ointment, aftershave, or other sources of odor or aromas in lab or clinical spaces.
 - viii. Cultural or religious-based head coverings are allowed and must be worn consistently with safety and infection control standards.
 - ix. Students in clinical courses must adhere to the minimum physical standards required for clinical placement. Typical expectations include the ability to stand for long periods and walk unaided (no crutches, canes, or other assistive devices requiring the use of hands) or posing a risk to stability (medical boots) or infection control risk (casts, slings, or bandages) and the ability to squat, sit, turn, reach, and carry. The ability to lift, turn, or move a weight of 50 lbs. and see and hear within standard ranges is generally expected. Reasonable accommodations will be made following all university, state, and clinical site rules and requirements. Students missing clinical days due to temporary physical restrictions will be allowed to make up the work when they are cleared for duty by provider note. This may require an Incomplete or course withdrawal depending on the missed time.
3. Timeliness and attendance
- a. Students must be on time and fully present for all nursing courses, including classroom, online, lab, and clinical experiences.
 - b. Students in clinical experiences have patient responsibilities and are expected to be on time. If a student is unexpectedly or unavoidably delayed or going to be absent, they

will follow the guidelines for the course to notify the appropriate faculty and make arrangements. Failure to notify faculty may result in a reduced grade. Arriving more than 30 minutes late may result in being sent home for the day at the faculty's discretion. No make-up option will be made available, and any assignments associated with the missed time will be automatically a zero (0). Emergency or extenuating circumstances will be considered, and accommodations made by the faculty.

4. Transportation
 - a. Students are responsible for personal transportation at all times. Lack of transportation is not a reason to limit, exclude, or change an assigned clinical site.
 - b. Clinical sites may be up to 200 miles from the designated home campus.
 - c. Students *may* be offered overnight accommodations for clinical sites between 100 and 200 miles from the home campus. Accommodations may be at a cost to the student.
 - d. During the program, the student has opportunities to request preferred clinical sites. Choices are not always available, and preferences will be honored as much as possible. The department reserves the right to assign students to clinical sites when it is not possible to offer choices.
5. Smartphones/watches and other personal devices
 - a. Smartphones may only be used in clinical sites following site-specific expectations. If worn in clinical sites or labs, use for personal communication is not allowed. Students engaging in non-course activities on a smartphone, watch, or other digital device can be dismissed from the site by faculty and receive a zero (0) for the day without the opportunity to make up the day.
 - b. Smartphones in the classroom are used only with faculty approval.
 - c. Pictures and/or recordings are prohibited in the clinical setting unless express approval is granted by both ISU faculty and clinical site leadership.
6. Dress code in labs and clinical courses
 - a. All students wear scrub tops and bottoms, only in Caribbean blue, with an ISU SON logo patch on the left shoulder facing to the side. Pants may have an open or closed ankle. Yoga-type scrubs are not permitted.
 - b. White or Caribbean blue waist-length lab coats or collared scrub coats may be worn over scrubs. SON logo patches must be adhered to the left shoulder facing to the side.
 - c. Individuals may request to wear scrub-type head coverings from the course faculty. Faculty determination is final. Students refusing to adhere to faculty direction regarding scrub-based head coverings will be sent out of the lab/clinical environment. No make-up option will be made, and any assignments associated with the missed time will automatically be a zero (0).
 - d. Hair must be clean, neat, well groomed, and secured for proper safety and infection control. Facial hair must comply with safety standards and be able to accommodate an N-95 mask or other PPE (used for COVID-19 and other airborne diseases).

- e. Fingernails will be short and clean, cut or filed so the nail does not extend beyond the fingertip to minimize potential client injury and maximize cleanliness. No artificial nails or tips are allowed.
 - f. No jewelry will be worn that could potentially injure a client and/or the student and/or compromise any person's safety in any manner.
 - g. Students with tattoos may be asked to cover the tattoo to comply with the clinical site's policies or if anyone in the lab or clinical environment finds the display offensive, disrespectful, or contributing to an unsafe space. Students refusing to adhere to faculty direction to cover a tattoo under these conditions will be sent out of the lab/clinical environment. No make-up option will be made, and any assignments associated with the missed time will be automatically a zero (0).
 - h. Any appeals can be submitted to the Director of Undergraduate Nursing and addressed on a case-by-case basis within the Just Culture framework as described in this handbook
7. Communication
- a. All verbal, written, and nonverbal communication with all people will always be respectful in word, tone, and action.
 - b. the KDHS Social Media Guidance Document governs digital media use.
<https://www.isu.edu/healthsciences/social-media/> governs (Appendix E)
8. Health Insurance Portability and Accountability Act (HIPAA)
- a. HIPAA is a federal law passed by Congress in 1996. These privacy regulations define appropriate and inappropriate disclosures of health information and define the process used to ensure patients' rights. HIPAA was intended to ensure patient confidentiality while maintaining the ability of the healthcare system to share patient information, improve communication between healthcare providers, and improve patient care. Students enrolled in the program are involved in patient care activities throughout the curriculum. Student pharmacists receive HIPAA training to assure experiential practice sites that students understand the HIPAA requirements prior to participating in patient care activities. A summary of the Privacy Rule is available [here](#).
 - b. Students may not, under any circumstances, place identifiable electronic protected health information on personal laptops/jump drives or send this information via any email program. Violating HIPAA may result in repercussions ranging from grade reduction to potential dismissal from the program, in addition to university-level consequences.
 - c. Any suspected violation of HIPAA policies will be investigated by the ISU HIPAA Compliance Officer in collaboration with the facilities Privacy Officer. The investigation will assess the scope and severity of the breach. During a clinical rotation, students must comply with all the policies and requirements for HIPAA as well as ISU's policies and the facility policies. If the student becomes aware of or suspects a breach of protected health information, they must notify their supervisor and ISU's HIPAA Compliance Officer immediately.

9. Skills
 - a. Students will ONLY perform skills in clinical areas on patients AFTER they have been approved by faculty to perform them.
 - b. Students are responsible for contacting faculty before actively participating in any skill on a patient that they have not explicitly been cleared to perform.
10. Students must adhere to the Nursing Code of Ethics.

Special Circumstances

1. Student on-campus activities (i.e., sports, ROTC, voluntary service trips, double majors)
 - a. Nursing students are encouraged to pursue personal interests. Efforts will be made to accommodate student commitments.
 - b. Students must request special scheduling before the conflict arises and for each course separately, following all university policies.
 - c. Faculty will evaluate requests following the university policies, emergency and extenuating circumstance standards, course learning goals, and extent of the request. (For example, a one-time conflict is more likely to be accommodated than an every-week conflict).
 - d. Requests not explicitly identified in university policy may be denied by faculty.
2. Military service
 - a. Students withdrawing from nursing to fulfill military service orders will be readmitted at the start of the first semester after notifying the Undergraduate Director of their availability. Readmission does NOT require re-application unless the absence has been over three (3) years.
 - b. Returning students will meet with the academic and/or faculty advisor to review the length of time away and any curriculum changes made during the absence and to assess appropriate learning plans to return. Significant time away (greater than one year) or major curriculum changes may necessitate repeating a course or sequence of courses. Military service in a nursing or nursing-like role may qualify for a petition to be exempted from a course or to challenge the course per university standards.
3. Jury Duty is considered a required government service activity that permits a student to be absent from a class. See ISU Official Student Absence ISUPP 5040
<https://www.isu.edu/policy/student-affairs/>
4. Personal withdrawal
 - a. Students in good academic standing who withdraw from the nursing program and who desire reentry within 12 months must request permission to return by submitting a Petition for an Alternative Plan of Study. After a gap of 12 months or greater, the student must apply for readmission.
5. Failure to progress
 - a. Students who do not pass a nursing program prerequisite course with a C or better cannot proceed with subsequent, dependent courses.

- b. Students who do not pass one or more classes can submit a Petition for an Alternative Plan of Study. If an Alternative Plan of Study is not submitted, students will be dismissed from the program and must reapply if entry is desired later.
- 6. Violations
 - a. Violations of the ISU Code of Conduct will be managed according to ISU policy <https://www.isu.edu/deanofstudnets/studnet-conduct/>
 - b.** Violations of any components of the Undergraduate SON Handbook, including but not limited to the Code of Ethics for Nurses, professional or academic responsibilities, and all other sections without specific direction for managing variations, will be handled per the principles of Just Culture in Nursing as previously described.

Student Opportunities

Student Class Representatives

The Undergraduate School of Nursing is committed to providing outstanding education for nursing students. Each nursing school cohort elects one class representative to facilitate student leadership and shared governance. At the discretion of the undergraduate director, additional positions can be created, and these additional positions may be appointed or elected.

Responsibilities of Class Representatives

- Attend and participate in undergraduate SON council and agreed-upon committee meetings
- Collect student input and report to SON committees and councils.
- Participate in and lead school activities, including new student orientation, the pinning ceremony, homecoming, and other events.
- Relay information to their class from their meetings.

The class representative communicates concerns, ideas, and requests that impact the cohort and student body. It does not include collecting individual concerns and grievances from classmates and acting as a spokesperson to convey them to class instructors. All students are encouraged to advocate for themselves in personal situations, following the procedures outlined in this handbook.

Elections of Class Representatives

One class representative per cohort will be elected by majority vote of their classmates within one month of starting the nursing program. The positions will continue until graduation or until the representative cannot fulfill duties for any reason. If they cannot complete this term, a new election will be held to select a new representative or a replacement may be designated by the Undergraduate Director. Elections are coordinated by the representative already in office.

Student Nurse Association (SNA)

All undergraduate nursing students are encouraged to join the Student Nurses Association, which aids their professional development and growth and provides a closer bond among students.

Election of SNA officers

The following SNA Officer positions are available: President, Vice President, Secretary, and Treasurer.

- Incoming fall cohorts will nominate and select two students to serve as President and Secretary. First-year elected student officers will serve in shadowing positions to the second-year officers and assume complete duties for an additional year after the graduation of second-year officers.
- Incoming Spring cohorts will nominate and select two students to serve as Vice President and Treasurer. First-year elected student officers will serve in shadowing positions to the second-year officers and assume complete duties for an additional year after the graduation of second-year officers.

Scholarships

School of Nursing scholarships are available to students admitted to a BSN program. These are typically awarded for one or two semesters, beginning in Fall. Information may be accessed, and applications for these are available in the Bengal Online Scholarship System (BOSS).

https://isu.academicworks.com/users/sign_in

References

- Agency for Healthcare Research and Quality. (n.d.). *culture of safety*. Culture of Safety.
https://psnet.ahrq.gov/primer/culture-safety?_gl=1%2A13xhpzs%2A_ga%2AMTMYNzMzODUwMi4xNzE5OTM4MzY5%2A_ga_45NDTD15CJ%2AMTcxOTkzODQxNy4xLjEuMTcxOTkzODU3MC42MC4wLjA
- American Nurses Association (ANA). (2015). *Code of ethics for nurses with interpretive statements*. Washington, DC: American Nurses Publishing.
- American Nurses Association (ANA). (2024). America's Most Trusted: Nurses continue to rank the highest. Retrieved from <https://www.nursingworld.org/news/news-releases/2024/americas-most-trusted-nurses-continue-to-rank-the-highest/>
- Dekker, S. (2013). A new Just Culture algorithm. *Hindsight*; Winter (18). Retrieved from <https://skybrary.aero/sites/default/files/bookshelf/2558.pdf>
- National Academies of Sciences, Engineering, and Medicine. (NASEM) 2021. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*. Washington, DC: The National Academies Press. <https://doi.org/10.17226.25982>.

Appendix A

Nursing Code of Ethics (ANA, 2015)

Provision 1: The Nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

Provision 2: The Nurse's primary commitment is to the patient, whether an individual, family group, community or population.

Provision 3: The Nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

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

Provision 5: The Nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.

Provision 6: The Nurse, through individual and collective efforts, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.

Provision 7: The Nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

Provision 8: The Nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Provision 9: The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Appendix B

<https://www.isu.edu/media/libraries/early-college/CourseCompletionContract-October-2019.pdf>

Incomplete Grade Request and Incomplete Coursework Contract

A student unable to complete the requirements of a course during the registered semester may request an incomplete grade and contract for completion.

Incomplete grades are awarded only at the discretion of the instructor (see [ISU credit and grading policies](#)).

The student must request the contract before final grades are submitted and provide faculty with an adequate explanation of emergency or extenuating circumstances interfering with the timely completion of the course. A contract to complete the course must be on file with the Undergraduate Director prior to the end of the semester. Failure to complete the contract within the agreed-upon time will result in the grade being calculated based on what was done in the course.

An incomplete grade and contract for completion are not automatic, and faculty may reject requests. Students may appeal the rejection to the Undergraduate Director before final grades are due. Incomplete grades in prerequisite *or* corequisite courses *must be completed satisfactorily prior to starting any subsequent course*.

Procedure:

1. Student identifies emergency or extenuating circumstances interfering with their ability to complete a course.
2. Student requests an appointment with the faculty of each course involved.
3. Student requests an Incomplete grade.
4. If the faculty agrees, the contract is filled out, filed with the Undergraduate Director's office, the faculty and the student.
 - a. Faculty enters "I" for the course grade.
 - b. Student fulfills the contract.
 - c. Faculty completes a change of grade form with the revised grade and sends it to the Undergraduate Director, who will file it according to university policy.
5. If the faculty rejects the request for an Incomplete grade, the student may appeal to the Undergraduate Director and/or follow the university process to appeal a grade (see [Appeals and Dismissals](#)).

Appendix C

SCHOOL OF NURSING UNDERGRADUATE ADMISSION & ADVANCEMENT COMMITTEE PROCEDURE

Petition for an Alternative Plan of Study Procedure

Purpose

- a. To define the process for students to request a change from the standard plan of study

Introduction

To facilitate timely progression and success in the nursing program, students are typically required to enroll and progress through the published curriculum.

There are personal and academic circumstances when a student may request an alteration to the standard plan of study by completing a Petition for an Alternative Plan of Study.

Students may request a Petition for an Alternative Plan of Study when they experience a personal situation interfering with academic progression. Examples include but are not limited to military deployment, birth of a child, or serious illness. Students who fail one or more NURS courses can request a Petition for an Alternative Plan of Study. Students are responsible for initiating a petition for an Alternative Plan of Study.

Students with less than a C in any class, choosing not to file a Petition for an Alternative Plan of Study, will be dismissed from the program. Students withdrawing for personal reasons have 12 months to file a petition. Students withdrawing for active military duty deployment may use this petition for up to three (3) years.

Petitions for Alternative Plan of Study are reviewed by the Admission and Advancement Committee. All decisions are final within the School of Nursing. Appeals may be made to the Associate Dean and Director of the School of Nursing.

Procedure:

1. Students considering a Petition for an Alternative Plan of Study are encouraged to consult with the academic advisor, faculty advisor, Director of the Undergraduate Program, and/or the faculty in the failed course for support and guidance.
2. Students complete the Petition for an Alternative Plan of Study document and submit it via email to the Program Admission and Records Specialist (PARS). In the absence of a PARS person, the Director of Undergraduate Nursing will fulfill the responsibilities.
3. Petitions for an Alternative Plan of Study must be filed with the PARS no later than 9 a.m. on the first day of faculty prep week each semester, which is typically the week before classes begin. The PARS provides specific dates for each semester.
4. The committee will convene no later than the third day of prep week to review Petitions for an Alternative Plan of Study. All committee decisions will be communicated to students no later than one day after the meeting.
5. PARS collects all the Petition for an Alternative Plan of Study forms, organizes a meeting of the Admission & Advancement Committee within the required timeline, and distributes the petitions to the committee's voting members. Only voting members will review the petitions.
6. The Admission & Advancement Committee may consult the course faculty, faculty advisor, academic advisor, and/or Director of Undergraduate Nursing during deliberations. The committee is responsible for determining a viable alteration in the plan of study (i.e., specific courses per semester). All revisions need to be formalized in writing with a vote from the committee.

7. All Petitions for an Alternative Plan of Study, approved or not, are maintained in the committee records and protected for student privacy.
8. Students will be provided a written vote result, including but not limited to the outcome of the vote and if there is an approved alternate plan of study.
9. A student may request a meeting with an AA Committee member or Director of Undergraduate Studies to discuss the alternative plan of study
10. Students rejecting the approved plan of study are dismissed from the program.

Measures of success

PARS will track the following each semester:

1. Students with a failing grade by course
2. Students submitting a Petition for an Alternative Plan of Study
3. The acceptance or rejection of the petition
4. The success or failure of the plan in the subsequent semester.
5. Student outcome on first-time NCLEX (pass or fail)

Data will be reviewed each semester by the Admissions and Advancement Committee and will be used to inform the process and monitor for trends by course.

****This form is subject to change. Consult with the PARS for an up-to-date form.**

Petition for an Alternative Plan of Study

Undergraduate School of Nursing

This petition is to be used to request the opportunity to continue in the undergraduate nursing program after earning less than a "C" (75%) in a course.

Student name _____ ID # _____

Failed course: (if more than one course was failed, please list all of them)

Semester _____ Faculty _____

Course name _____

Is this a prerequisite to other courses?

NO

YES, which ones _____

Please describe the barriers you encountered and conditions which led to the failed grade in this course.

Please describe the steps, interventions and strategies you will implement to change the conditions described above.

What supports, considerations or actions are you requesting from faculty, staff or university to be successful and overcome the barriers?

Please propose a course schedule for each future semester impacted by this failure. Remember the prerequisites and course sequencing and propose a plan for each semester from now until you are either back on the standard course plan or graduate. You may include summer semester if it is applicable. The standard course plan is included with this petition. Make sure all required courses are accounted for in your proposal.

Is there anything else you would like to share with the committee in support of this petition and your proposal?

I acknowledge that the opportunity for an Alternative Plan of Study is my choice and responsibility. I accept any added costs as a result of this plan. I am willing and available to work with the committee to develop a mutually acceptable plan.

_____ (student signature)

Admissions and Advancement Committee Review

Meeting date _____

Members involved:

If anyone was consulted for input, please list them.

The committee voted to:

- ☐ Accept plan as written
- ☐ Revise in partnership with student, student to resubmit new form
- ☐ Reject plan and dismiss student

Signed by committee Chairperson

Appendix D

Health and Safety Requirements

All students will provide proof of completion of all the following health and safety requirements before the start of the first semester or according to the deadlines listed. Evidence of each item will be loaded in the corresponding assignment in the Moodle/Canvas Homeroom. Each item must have two identifiers: student name and date of birth. Students are responsible for all costs associated with these requirements.

Students may request an exemption to vaccine requirements for valid medical or religious reasons. If a student chooses not to be vaccinated for a medical or religious reason and seeks an exemption, further documentation may be required by the clinical site. Some sites may facilitate the exemption process themselves or they may ask the university to help facilitate the process. Decisions to accept an exemption request are up to the clinical site. For a medical exemption, the student should work with the ISU Office of Disability Services. For a religious exemption request, the student should work with the ISU Office of Equity and Inclusion. Students must be aware that vaccination may be a requirement for clinical placement at many clinical sites and delays in progression and/or graduation may occur if the student is unable to be placed at a site for required clinical education components. See Appendix I for details.

1.	Tetanus and Pertussis Booster Required: <ul style="list-style-type: none"> • Tdap Vaccine (contains pertussis booster) AND <ul style="list-style-type: none"> • TD booster (does not contain pertussis booster) within the last 10 years 	Required: upload to Moodle proof of your Tdap Vaccination and current TD Booster The <u>TD booster</u> you receive every 10 years <u>does not</u> contain the pertussis or “whooping cough” antibodies. The <u>Tdap vaccine</u> protects against (<u>Tetanus, Diphtheria, and Pertussis</u>). The <u>TD booster</u> protects against (<u>Tetanus</u> and <u>Diphtheria</u>) <small>Centers for Disease Control and Prevention. (2020, January 22). Summary of pertussis vaccination recommendations. Centers for Disease Control and Prevention. https://www.cdc.gov/vaccines/vpd/pertussis/recs-summary.html</small>
2	Measles, Mumps, Rubella Required: <ul style="list-style-type: none"> • Proof of MMR Vaccine series (2 doses) OR <ul style="list-style-type: none"> • Positive MMR titer (recommended) 	Required: upload to Moodle, proof of two MMR vaccinations or proof of a positive MMR titer. <i>What if you can't find your vaccination records?</i> Then you must get a titer drawn. If the titer is non-responsive, or equivocal; you will need to be revaccinated and upload new vaccination proof to Moodle. <small>Centers for Disease Control and Prevention. (2021, January 26). Measles, mumps, and rubella (MMR) vaccination. Centers for Disease Control and Prevention. https://www.cdc.gov/vaccines/vpd/mmr/public/index.html#who-gets-mmr</small>

3	<p>Hepatitis B Required:</p> <ul style="list-style-type: none"> ● Positive Hepatitis B-titer ● If your titer comes back <u>negative</u>, or shows you <u>lack immunity</u>. You will need to get <u>revaccinated and have another titer drawn</u>. <p><u>Hepatitis B Vaccination Routine</u> Age 19 through 59 years: complete a 2- or 3- or 4-dose series</p> <ul style="list-style-type: none"> ● 2-dose series only applies when 2 doses of Heplisav-B* are used at least 4 weeks apart ● 3-dose series Engerix-B, PreHevbrio*, or Recombivax HB at 0, 1, 6 months [minimum intervals: dose 1 to dose 2: 4 weeks / dose 2 to dose 3: 8 weeks / dose 1 to dose 3: 16 weeks]) ● 3-dose series HepA-HepB (Twinrix at 0, 1, 6 months [minimum intervals: dose 1 to dose 2: 4 weeks / dose 2 to dose 3: 5 months]) ● 4-dose series HepA-HepB (Twinrix) accelerated schedule of 3 doses at 0, 7, and 21–30 days, followed by a booster dose at 12 months 	<p>Required: Students must provide an initial titer for Hepatitis B and upload this into Moodle. If immune, all requirements are met.</p> <ul style="list-style-type: none"> ● If not immune, the student must proceed to start a new series of vaccinations before the immunization verification deadline uploading each one into Moodle as they receive it. This shows compliance with the requirements. ● Upon completion of the 3-vaccination series or the new 2-vaccination series, a titer must be drawn after 4 weeks but not greater than 6 weeks following the last dose in the series. ● If the student has a negative titer after 6 doses of the vaccine, the student is considered a non-responder. ● Non-responders are considered susceptible to Hepatitis B, and the student should take appropriate precautions to prevent exposure and infection to Hepatitis B. Testing for Hepatitis B surface antigen should be considered. Students found to be Hepatitis B surface positive should be medically evaluated. The student is responsible to have the titer drawn in the event of clinical exposure to blood or other potentially infectious body fluids as stated in the SON Blood Borne Pathogen Policy. <p><u>Required Hepatitis B Documentation at admission must be submitted to the SON on Moodle</u> Undergraduate students who have completed the Hepatitis B vaccine series (either the 3 dose Hepatitis B vaccine or 2 dose Heplisav-B) must submit the post-vaccination serologic (anti-HBs) test result that demonstrates immunity to Hepatitis B. (This is a “positive titer,” which indicates immunity.)</p> <p><u>Students who have not completed the Hepatitis B vaccine series, at minimum, must submit</u> Documentation of completing the first vaccination of the series before the immunization verification deadline.</p> <p>Documentation of post-vaccination serologic test result that demonstrates immunity to HepatitisB must be completed and submitted to the SON within 7 months of the student’s acceptance to the program. If documentation of the progress of the vaccination series and/or post-vaccination serologic test result are not received in the SON within 7 months of the student’s acceptance to the program, he/she will not be allowed to proceed in the program and/or receive a formal written warning.</p> <p><u>Series completed while growing up or greater than 8 weeks before the verification deadline:</u></p>
---	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	<p>Students must submit the post-vaccination serologic test showing immunity to Hepatitis B.</p> <p><u>Series completed within 8 weeks of the verification deadline:</u> Students who have completed the vaccination series within 8 weeks of the immunization verification deadline must submit the postvaccination serologic test showing immunity. The test must be drawn after 4 weeks, but not greater than 8 weeks following the last dose in the series. Submit the post-vaccination serologic test as directed.</p> <p><u>Series initiated but not completed by the verification deadline:</u> Students must submit evidence of initiation of the series by the deadline. Students are required to submit verification of initiation of the series by the deadline. Students are required to submit verification of subsequent doses of the vaccination series as they are received.</p> <p>AND Upon completion of the vaccination series, the post-vaccination serologic test results showing immunity, must be drawn after 4 weeks but not greater than 8 weeks following the last dose in the series.</p> <p><u>Students with non-immune post-vaccination serologic test result with NO documentation of Hepatitis B vaccine series</u> in the SON, students are required to submit documentation of a second series of either the two (2) dose Hepilisav-B Vaccine OR the three (3) dose Hepatitis B vaccination series.</p> <p>PLUS, Upon completion of the vaccination series, the post-vaccination serologic test is performed after 4 weeks but not greater than 8 weeks following the last dose of the vaccine. Result of the post-vaccination serologic test must be submitted by the student. If the post-vaccination serologic result demonstrates immunity to Hepatitis B, no further action is needed.</p> <p><u>With documentation of Hepatitis B vaccine series in SON,</u> students can get a 'booster' (one dose) of Hepatitis B vaccine. Four weeks but not greater than 8 weeks following the vaccine, the post-vaccination serologic test is performed and the student submits the result.</p> <p>If the post-vaccination serologic test result demonstrates immunity to Hepatitis B, no further action is needed. If the post-vaccination serologic test demonstrates non-immunity result to Hepatitis B, students are required to submit documentation of a second series of either the two (2) dose Hepilisav-B Vaccine OR the three (3) dose Hepatitis B vaccination series.</p>
--	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

		<p>PLUS upon completion of the vaccination series, the post-vaccination serologic test is performed after 4 weeks but not greater than 8 weeks following the last dose of the vaccine.</p> <p>Result of the post-vaccination serologic test must be submitted by the student. If the post-vaccination serologic demonstrates immunity to Hepatitis B, no further action needed.</p> <p>Students with non-immune post-vaccination serologic test result after re-vaccination (either 6 doses of Hepatitis B 3-dose series OR 4 doses of Heplisav-B OR one of each of the 2 series), the student is considered a non-responder.</p> <p><u>Non-responders are considered susceptible to Hepatitis B infection.</u></p> <p>The student should take appropriate precautions to prevent exposure and infection to Hepatitis B.</p> <p>If a non-responder experiences an exposure to Hepatitis B, CDC recommends they be tested for HBsAg and anti-HBc for Hepatitis B evaluation. It is the student's responsibility to follow through with CDC recommendation.</p> <p>Other Hepatitis B test results will not be accepted under ordinary circumstances.</p> <p>If the student has an unusual circumstance regarding their Hepatitis B status, they are to contact the Administrative Assistant (AA) for the SON Program the student enrolled in. Contact the AA for Traditional Program in Pocatello or the AA for Accelerated Program in Meridian.</p> <p>The student is responsible to have the required post-vaccination serologic test drawn in the event of clinical exposure to blood or other potentially infectious body fluids as stated in the SON Blood Borne Pathogen Policy</p> <p>Centers for Disease Control and Prevention. (2023a, April 27). Adult immunization schedule – healthcare providers. Centers for Disease Control and Prevention. https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html#note-hepb</p>
4	<p>Varicella (Chicken Pox)</p> <ul style="list-style-type: none"> ● 2 doses of Varicella vaccine <p>OR</p> <ul style="list-style-type: none"> ● Positive titer 	<p>Required</p> <p>Upload to Moodle documentation of <u>2 doses of Varicella vaccination</u></p> <p><i>What if you <u>cannot find your vaccination record</u> or have <u>had chicken pox before?</u></i></p> <p>You will need to have a titer drawn that shows you have immunity.</p>

		<p><i>What if your titer comes back nonresponsive/ equivocal?</i> You will need to complete the full vaccine series. (2 doses) of Varicella vaccine is required. If the student has had chicken pox, a Varicella titer is required to verify immunity. If the titer is non-responsive, or equivocal, documentation of a repeat series, 2 doses of Varicella vaccine, is required</p> <p>Centers for Disease Control and Prevention. (2023a, April 27). Adult immunization schedule – healthcare providers. Centers for Disease Control and Prevention. https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html#note-varicella</p>
5	<p>Influenza <u>Annual influenza vaccine</u> (Quadrivalent formula is recommended but not required.) Documentation is <u>due October 30th</u>. Unless a Declination Statement is signed and submitted to the SON (see below).</p>	<p>Required Upload documentation of <u>annual influenza vaccine to Moodle</u> or a <u>signed Declination Statement (Appendix I)</u> is due by <u>October 30</u>.</p> <p>Students who decline the Influenza vaccination WILL BE REQUIRED to wear a FACE MASK in the <u>Simulation Lab</u>, all activities that count as <u>clinical hours</u>, AND all clinical facilities REGARDLESS if they have a <u>no face mask policy or not</u>. Clinical facilities may refuse to host students who are not currently on influenza vaccination.</p> <p>Centers for Disease Control and Prevention. (2023a, April 27). Adult immunization schedule – healthcare providers. Centers for Disease Control and Prevention. https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html#note-flu</p>
6	<p>Tuberculosis (TB Test) Required annually · A current negative TB skin test screening to be current at all times while in the SON · Current requires the test to be performed annually and not expired while in the SON · Required Annually</p>	<p>All students enrolled in ISU's SON must be free of active signs and symptoms of Tuberculosis.</p> <p><u>Students with a Positive skin test</u> in the <u>past</u> or received the <u>Bacillus Calmette–Guérin (BCG) vaccine</u>. It is recommended the student have a chest x-ray and submit X-ray interpretation results. (NOTE: This vaccine is not widely used in the USA mostly used in Central and South America where disease is most prevalent)</p> <ul style="list-style-type: none"> ● Student must submit negative chest x-ray interpretation, <u>And/or</u> ● Submit a letter from a health care provider stating the student does not have active Tb. ● <i>These instances will be handled on a case by case basis.</i> <p>Please contact the SON for further instructions</p> <p><u>Students with a baseline positive or a newly recognized positive skin test:</u> It is not recommended that the student receive another Tb skin test. Student must complete the following steps:</p> <p><u>Baseline Testing-QuantiFERON Gold test: One Step Test *</u> <u>recommended</u></p>

		<p>The TB blood test does not require two-step testing unlike the Mantoux TB skin test. Additionally, TB blood tests are not affected by the BCG vaccine.</p> <p>Protocol for TB blood test:</p> <ul style="list-style-type: none"> -Administer TB blood test -Review result -Negative — consider not infected -Positive — consider TB infected and evaluate for TB disease* <p>Document results</p> <p><u>Mantoux tuberculin skin test: Two-Step Test</u></p> <p>If the Mantoux tuberculin skin test (TST) is used to test health care personnel upon hire (preplacement), two-step testing should be used. This is because some people with latent TB infection have a negative reaction when tested years after being infected. The first TST may stimulate or boost a reaction. Positive reactions to subsequent TSTs could be misinterpreted as a recent infection.</p> <p>Step 1</p> <p>Administer first TST following proper protocol</p> <p>Review result</p> <p>Positive — consider TB infected, no second TST needed; evaluate for TB disease. *</p> <p>Negative — a second TST is needed. Retest in 1 to 3 weeks after the first TST result is read.</p> <p>Document result</p> <p>Step 2</p> <p>Administer second TST 1 to 3 weeks after first test</p> <p>Review results</p> <p>Positive — consider TB infected and evaluate for TB disease.</p> <p>Negative — consider a person not infected.</p> <p>Document result</p> <p>Centers for Disease Control and Prevention. (2019, May 16). TB screening and testing of Health Care Personnel. Centers for Disease Control and Prevention. https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm</p>
7	<p>SARA-CoV2 (Covid-19)</p> <ul style="list-style-type: none"> • 2 doses of PfizerBioNTech or Moderna 	<p>Required:</p> <p><u>Primary series:</u></p> <ul style="list-style-type: none"> ● 2-dose series at 0, 4-8 weeks (Moderna) Or ● 2-dose series at 0, 3-8 weeks (Novavax, Pfizer-BioNTech) ● Booster dose (recommended) <p>IMPORTANT:</p> <p>Janssen COVID-19 Vaccine is no longer available in the U.S due the increased risk of blood clots. Students who received the Janssen</p>

ADDENDUM January 1, 2025

The following change is effective January 13, 2025.

Change to page 41

Item 7 SARA-CoV2 (COVID-19)

Students are required to comply with the COVID-19 vaccination standards of the clinical site to which they are assigned. The SON will not collect COVID-19 vaccination information unless required by a specific clinical site.

Change approved by the Undergraduate Faculty Council on December 4, 2024.

A handwritten signature in black ink, appearing to read 'Danielle', with a long horizontal flourish extending to the right.

Danielle Pierotti PhD, RN, Director/Clinical Associate Professor

		<p>COVID-19 Vaccine primary series dose are recommended to receive 1 bivalent mRNA vaccine dose (Moderna or Pfizer-BioNTech) at least 2 months after completion of the primary series dose (for people who have not previously received any booster doses), or at least 2 months after the last monovalent booster dose.</p> <p>-Students are considered fully vaccinated 2 weeks after the 2nd dose for Pfizer-BioNTech or Moderna.</p> <p>-Boosters are highly recommended but not required. Guidelines may change based on CDC recommendations, legal precedent, relevant clinical research, and/or clinical facility protocols. Exemption process must go through KDHS</p> <p>a. Disability-Health Related b. Office of Equity-Religious</p> <p>Centers for Disease Control and Prevention. (2023c, May 10). Administration overview for Johnson & Johnson's Janssen Covid-19 vaccine. Centers for Disease Control and Prevention. https://www.cdc.gov/vaccines/covid-19/info-by-product/janssen/index.html</p>
8	Drug screening- a specific date will be assigned for completing drug screening. Do not submit until requested.	<p>All incoming students will complete a standard 12-item urine drug screen before beginning classes. Students will be notified when the drug screen is to be completed. Subsequent drug screens may be requested for cause by any faculty member or clinical site.</p> <p>Students whose prescription medications result in a positive drug screen must provide evidence of a current prescription with the drug screen results. The facility must utilize a drug testing procedure to test for the following drugs:</p> <ul style="list-style-type: none"> • Opiates • Amphetamines • Benzodiazepines • Barbituates • Methylenedioxymethamphetamine • Oxycodone • Methamphetamines • Methadone • Phencyclidine • Marijuana • Cocaine • Buprenorphine
9	CPR	<p>The SON requires students to be CPR-certified. Proof of current CPR certification is required prior to admission to the nursing program and must be kept current throughout the program. It is the student's responsibility to maintain a CPR certification and to submit a copy to the Undergraduate Nursing office. The Certification Card is the only</p>

		<p>acceptable proof, not proof of payment or the temporary card. Certification will be kept in the student's permanent file. The American Heart Association Basic Life Support for Health Care Providers or CPR with AED training are accepted. Certification from any other organization will not be accepted. The American Heart Association covers all the facilities with which we have agreements.</p>
10	Criminal Background Checks	<p>All students will complete a criminal background check per the Idaho Department of Health and Welfare (IDHW) prior to the first semester of classes. Directions will be issued with the admission information. Select clinical sites MAY require a second background check.</p>

DECLINATION FORM FOR SEASONAL INFLUENZA VACCINE

Name (printed): _____

The School of Nursing has required that I receive influenza vaccination in order to protect myself and the patients I serve.

I acknowledge that I am aware of the following facts:

- Influenza is a serious respiratory disease that kills an average of 36,000 persons and hospitalizes more than 200,000 persons in the United States each year.
- Influenza vaccine is recommended for me and all other healthcare workers to prevent influenza disease and its complications, including death.
- If I become infected with influenza, I will shed the virus for 24-48 hours before influenza symptoms appear,
- Even when my symptoms are mild or I have no symptoms, I can spread severe illness to others.
- I understand that the strains of virus that cause influenza infection change almost every year, which is why a different influenza vaccine is recommended each year.
- I cannot get the influenza disease from the influenza vaccine.
- I acknowledge that influenza vaccination is recommended by the Centers for Disease Control and Prevention (CDC) for all healthcare personnel to prevent infection from and transmission of influenza and its complications, including death, to others.
- I understand that by choosing to decline the influenza vaccine, I will be required to wear a hospital-appropriate face mask for all clinical and classroom experiences during declared flu season. Failure to wear the mask will result in being sent home with no option for make-up. Continued refusal will be considered willful non-compliance and may result in dismissal from the program (see Just Culture).
- I understand I may change my mind at any time and accept the influenza vaccination.

Date _____

Signature _____



Media Release

Instructions: Please review and indicate your agreement to this Release by signing below.

I hereby grant permission to Idaho State University (Idaho State) to use my name, image, voice, and likeness in all forms of physical and digital media for Idaho State's educational, marketing, and promotional purposes in perpetuity. Idaho State shall have the right to photograph, record, publish, re-publish, adapt, exhibit, perform, reproduce, edit, modify, make derivative works, distribute, display or otherwise use or reuse my name, image, voice and likeness in all markets, media, and technology now known or hereafter developed. Idaho State may exercise any of these rights itself or through any assignees, licensees, or other parties including other Universities.

I acknowledge that I will not be compensated for these uses, and that Idaho State exclusively owns all rights to the images, videos, recordings, and any derivative works created by Idaho State or its employees. I waive the right to inspect or approve of these uses. I hereby release Idaho State, its assignees, and its licensees from any claims that may arise from these uses, including without limitation claims of defamation, invasion of privacy, or copyright.

This Release is binding on me, my heirs, assigns, and estate. I understand Idaho State is not obligated to use any of the rights granted under this Release.

FULL NAME (PRINTED)		SIGNATURE	
ADDRESS (STREET)		(CITY)	(STATE) (ZIP)
EMAIL ADDRESS	TELEPHONE NUMBER	DATE	

If you are under eighteen (18) years of age, your parent or guardian must sign below:

I represent that I am a parent/guardian of the minor who has signed the above release and that in that capacity Idaho State has my consent and authorization to use the name, voice and/or likeness as described above.

Parent/Guardian:

FULL NAME (PRINTED)		SIGNATURE	
ADDRESS (STREET)		(CITY)	(STATE) (ZIP)
EMAIL ADDRESS	TELEPHONE NUMBER	DATE	

Appendix F
Student Expectations for Successful Achievement of a BSN at ISU

- I understand Nursing is a rigorous academic program.
- I understand each credit generally expects approximately 3 hours of work per week between class and home.
 - 14-15 credits = 42-45 hours per week
 - 17-18 credits = 51-54 hours per week
- I understand the program requires in-class and clinical experiences, which could require weekends, evenings, and nighttime hours.
- I understand that missing classes or clinical rotations should only happen in extreme circumstances that are out of my control.
- I understand that class may not be made up, and I am responsible for knowing the content taught that day.
- I understand professors may not lecture on all assigned material, and I am responsible for all assignments.
- I understand that clinical time is required and challenging to make up. If I miss a clinical, I may be required to attend makeup sessions at a different time, day, or place.
- I understand that clinical rotations occur in various areas and **could require travel up to 200 miles from my program's campus.**
- I understand that I can be scheduled for clinical rotations, classes, final exams, and other educational activities until the last day of each semester.
- I understand that nursing requires professional fees in addition to tuition. These fees support program-wide needs (e.g., adjunct professors, task trainers, and simulation equipment).
- I understand there are costs every semester for books, exams, and class materials. The SON will provide *estimated costs* in advance, and I am responsible for purchasing supplies and paying fees on time.

Signature _____

Date _____

Appendix G

EXPERIENTIAL EDUCATION CONFIDENTIALITY UNDERSTANDING

By signing and dating this Confidentiality Understanding, the undersigned **STUDENT** indicates an understanding of, and agrees to be bound by, applicable terms and conditions of any agreement between any **FACILITY** and IDAHO STATE UNIVERSITY (“**PROGRAM**”). The **STUDENT** acknowledges that, as a material part of the consideration provided to **FACILITY** in exchange for **FACILITY** allowing the **STUDENT’S** clinical education at **FACILITY**, **STUDENT** agrees that any patient information acquired during the clinical education is confidential and that the **STUDENT** shall maintain the confidentiality of and not disclose this information at all times, both during the clinical education and after it has ended. **STUDENT** further agrees to abide by the applicable rules and policies of **FACILITY** and **PROGRAM** while at **FACILITY**. **STUDENT** understands that, in addition to other available remedies, **FACILITY** may immediately remove the **STUDENT** and terminate the **STUDENT’S** clinical education at the **FACILITY** if, in the opinion of **FACILITY**, the **STUDENT** endangers a patient, breaches patient confidentiality, disrupts the operation of **FACILITY**, or refuses to comply with the requests of **FACILITY** or its supervisory staff.

I have read and understand this Confidentiality Understanding and agree to abide by its terms. This Confidentiality Understanding shall be effective for the duration of the **STUDENT’S** enrollment in the School of Nursing program.

Student’s Signature Date

Student’s Name (Print)

(Original signed form will be saved in the student’s record.)



Informed Consent and Release

This allows ISU to use and release a student's records for criminal background checks, drug screens, health screens, immunizations, and any other applicable reports

Instructions: This form is to be used when a student is: 1) applying for admission to a program, 2) applying for field-based experience, or 3) requesting to complete a health-related program's clinical requirements. Questions may be directed to Sandi Rich in the Office of General Counsel at sandirich@isu.edu or 208-282-2683.

I am submitting this form in conjunction with my: _____ (check one applicable item and fill in the blank)

_____ 1. Application for admission to the ISU College of _____
(Program).

_____ 2. Application for field-based experience with the ISU College of _____
(Program).

_____ 3. Request to participate in health-related clinical internship experiences for the ISU College of _____
(Program).

- I hereby authorize ISU, its qualified agents, and/or clinical facilities to receive, use, and disclose, in connection with the Program checked above, any applicable information, records, and reports, including, but not limited to, background check information, including copies of any of my past and present law enforcement records; drug screen reports; health histories and screens, immunizations, insurance, Social Security number traces for previous residencies, employment checks, Office of Inspector General (OIG) Sanctions Lists, General Services Administration's Excluded Parties Listing Systems (e.g. GSA/EPLS), violent sex offender and predator registry searches, applicable federal and state exclusion lists, US Treasury Office of Foreign Assets Control (OFAC) checks, and lists of specifically designated nationals. I agree to purchase an ISU approved background check from a designated third-party vendor for the purpose of assisting my Program and/or clinical facilities in evaluating my suitability for admission to the Program or participation in clinical internship and field experiences. The release of my personal information, records, and reports is expressly authorized.
- I understand that information contained in the background check or any additional records and reports may result in: 1) my being denied full admission to the Program and, consequently, dismissal from the Program; or 2) my being denied or dismissed from the field-based experience and, consequently, denied admission to or dismissal from the Program; or 3) my being denied a clinical internship assignment and, consequently, dismissal from the Program. I also understand that I will be afforded the opportunity to be heard before any such withdrawal from the Program.
- I understand that I have online access through the applicable vendor's website to view my background check results which is the same information that the Program receives for my background check. I understand that reasonable efforts will be made by ISU to protect the confidentiality of the information it receives. I further understand that the results of the background check and other reports may be reviewed by the following individuals and entities when evaluating my suitability, including, but not limited to, the applicable dean, chair, program, department, the Office of General Counsel, and clinical facilities.

- If adverse information is contained in my records and results, I understand that I can view my own records and results and may be asked to provide more information in writing to the Program. I understand that admission decisions made by the Program are not subject to appeal.
- I hereby give the Program permission to release my background report and any other records to facilities to which I am assigned for internship/practicum experiences prior to beginning the assignment and regardless of whether such facilities have required the background check or other reports. I understand facilities may refuse me access to their clients or patients based on information contained in my records, background check, or other reports and that facilities' criteria may differ from that of the Program.
- I hereby release, hold harmless, and covenant not to sue the State of Idaho, Idaho State University, its agents, officers, governing board, and employees or clinical facilities from any liability or damage in providing and disclosing my background information or any other records. I agree that a photocopy or electronic version of this authorization may be accepted with the same authority as the original.
- I understand ISU is not responsible for the accuracy and content of the background check information provided by the third-party vendor or any other reports and I hereby further release, hold harmless, and covenant not to sue the State of Idaho, Idaho State University, its agents, officers, governing board, and employees from any and all claims, including, but not limited to, claims of defamation, invasion of privacy, wrongful dismissal, negligence, or any other damages of or resulting from or pertaining to the collection of background information.
- I further understand that 1 - background checks, drug screens, additional reports, program admission, field experiences, and internship/practicum placements are subject to the policies and requirements of ISU, my Program, and/or clinical facilities; and 2 - I am responsible for all costs associated with this process.

By signing below, I acknowledge that I have carefully read this document and I understand and agree to its contents:

Signature: _____ Date _____
(Student or Parent/Legal Guardian if under 18)

Print Student Name _____

Please print or type all names you have used in the past (use other side of page if necessary):

Student Date of Birth _____

ISU Witness _____ Date _____

Print Name _____

College/Department _____

Appendix I

CLINICAL EDUCATION INFORMATION and ASSUMPTION OF RISK

Participation in clinical education, including clinical simulations in didactic (classroom) settings, is required by professional accreditation standards for health sciences programs. Participation in such activities, including any placement in a healthcare facility or clinical site (including hospitals, clinics, pharmacies, or other such entities) for the purpose of clinical education entails certain risks, including the risk of exposure to infectious diseases and other personal injuries. Similarly, there exists some level of risk in didactic settings. While every effort will be made to minimize risks to students, staff, and faculty, the elimination of all such risks is beyond the control of the program or university. Vaccination for many infectious diseases, including COVID-19, may be required by a healthcare facility for placement in clinical education. If unvaccinated, restrictions upon student activities by the program or site may be imposed. Placement at certain healthcare facilities or sites may be contingent on vaccination status and requirements may change without advance notice. Educational opportunities missed due to lack of vaccination may delay graduation and/or result in additional educational expenses.

I freely and voluntarily accept the health risks and potential facility requirements described above to complete my clinical educational requirements. I also understand that COVID-19 and other vaccinations are recommended, but not required by Idaho State University. I understand that some health facilities or clinical sites may require these vaccinations to participate in certain aspects of clinical education. If I choose NOT to be vaccinated for COVID-19 or other diseases, I may be required to adhere to additional guidance based on CDC recommendations and clinical site policy. Before engaging in clinical education, please read, initial, and sign the following:

Initials

- _____ 1. I will not participate in clinical education if I exhibit any signs/symptoms of infection, including but not limited to: runny nose, fever, cough, shortness of breath, head or body aches, sore throat, loss of smell, or nausea/vomiting/diarrhea. If I exhibit any of these signs/symptoms, I will notify the appropriate person(s) at my clinical site and my designated program contact person for instructions.
- _____ 2. If I am exposed to COVID-19 or other communicable diseases, and NOT [up to date](#) on appropriate vaccinations, I will immediately notify the appropriate person(s) at my clinical site and my designated program contact person and may be required to quarantine. I understand that required quarantine time will need to be made up to complete program requirements.
- _____ 3. I will comply with clinical site policies related to facial covering/glove wearing and handwashing and disinfecting procedures before and after all patient encounters and at other times as specified. I will complete any required infection control or personal protective equipment (PPE) training by my program or the clinical facility.
- _____ 4. I will follow all infection control guidelines, policies, and procedures of the clinical facility, program, and/or university. Such guidelines are subject to change as more information becomes available.
- _____ 5. I recognize the dangers to myself and others of acquiring infectious diseases

during clinical education, including the possibility of health-related consequences of such diseases. I recognize that vaccination for COVID-19 and other infectious diseases is recommended to decrease the risk of these consequences.

_____ 6. I have the right to feel safe during clinical education. I have the ability to talk to my clinical instructor regarding any concerns I may have related to breaches in infection control measures or public health recommendations at any clinical education site.

_____ 7. I recognize I have the right not to participate in clinical education because of potential risks to myself and/or members of my household. I recognize that any missed clinical education time due to lack of participation will need to be made up to complete program requirements and may delay my graduation.

_____ 8. If I test positive for COVID-19, I will notify my program's clinical coordinator and complete the self-report form.

_____ 9. I will follow all ISU or health facility-related screening and vaccination requirements.

_____ 10. I acknowledge that screening and vaccination requirements are subject to change and may vary by clinical site.

Documenting Exemptions:

Students may request an exemption to a clinical facility or site's vaccination requirement for valid medical or religious reasons. If a student chooses not to be vaccinated for a medical or religious reason and seeks an exemption from the vaccination requirement imposed by a clinical site, further documentation may be required by the site. Some sites may facilitate the religious exemption request themselves and the student will need to complete the site's appropriate form. Other sites may ask the university to help facilitate this process. Decisions to accept an exemption request are generally up to the clinical site.

Medical exemption requests: Students should work with the ISU Office of Disability Services for disability accommodations. Students can call (208) 282-3599 (Pocatello), (208) 373-1723 (Meridian), or email disabilityservices@isu.edu. Upon the conclusion of the accommodation process, the Office of Disability Services will email a letter to the student with the decision of the medical exemption request for submission to any requesting clinical site.

Religious exemption requests: Students should work with the Office of Equity and Inclusion for a religious exemption. Please refer to <https://www.isu.edu/aaction/religious-accomodations/>. The Office of Equity and Inclusion will email a letter to the student with the decision of the religious exemption request for submission to any requesting clinical site. Students can reach the Office of Equity and Inclusion at (208) 282-3964..

Opt-out Guidelines:

In general, satisfactory progression through professional curricula requires that students complete clinical and didactic course requirements in the semester in which they are enrolled. Programmatic requirements are based on professional accreditation standards and licensing board requirements, and include clinical education activities. Should a

student be unable to complete requirements due to illness or CDC-recommended isolation/quarantine, make-up work may be allowed if congruent with programmatic or university policies for other medically-related absences. Should a student choose not to complete any course or program requirement related to clinical education, the student is responsible for contacting the course instructor and providing a rationale for “opting out.” Opt-out policies may vary between programs; students should contact their individual programs for specifics on process. Delays in progression and/or graduation may occur due to quarantine time and/or if a student chooses to opt-out of any aspect of required coursework or clinical education.

Student Signature Date

Student Printed Name

This assumption of risk is ineffective for the course of the program of study or until a new document is signed, whichever is greater. *(Original signed form will be saved in the student's record.)*

Appendix J
Idaho State University School of Nursing
Bloodborne Pathogen Exposure Incident Report

Student Name _____

Date _____ Time _____

Faculty Name _____

Facility _____

Description of the incident:

Where the incident occurred:

What potentially infectious materials were involved in the incident (blood, amniotic fluid, etc.):

How long was the body part exposed to the infectious materials:

Was decontamination necessary and if so, what was done for decontamination:

Under what circumstances the incident occurred (e.g., type of work being performed):

Personal Protective Equipment (PPE) being used at the time of the incident:

Equipment involved in the incident (e.g., brand, lot #, etc.):

Unusual circumstances (e.g., equipment malfunction, power outage, etc.):

How was faculty, supervising staff, and administration notified and when:

What actions were taken in response to the incident:

Source Name (if known) _____

Source Social Security Number (if known) _____

Source Address (if known) _____

Source Telephone Number (if known) _____

Is the source infected with Hepatitis B, Hepatitis C, Human Immunodeficiency virus (HIV), or other infection?

Yes ___ No ___ Unknown ___

Is the source willing to have his/her blood tested for Hepatitis B, Hepatitis C, and/or Human Immunodeficiency virus (HIV)? _____ Yes _____ No _____ Unknown

If so, complete the "Consent for Hepatitis B, Hepatitis C, and Human Immunodeficiency virus (HIV) testing.

Other people (faculty, staff, family) who were present at the time of the incident:

It is recognized that much of the information involved in this process must remain confidential and the privacy of the student and others will be maintained.

Idaho State University School of Nursing
Bloodborne Pathogen Exposure Incident
Post-Exposure Treatment Recommendations

Directions: This form will be completed by a qualified healthcare professional following as exposure incident and must be provided to the student within 15 working days of the exposure incident.

Student Name _____

Date of Exposure _____

Hepatitis B

_____ Hepatitis B vaccination is indicated.

Date Vaccination Received _____

If vaccination is indicated and not received, please explain:

_____ Hepatitis B vaccination is not indicated.

HIV/AIDS

_____ Repeat HIV/AIDS testing at 3, 6, and 12 months

Date Initial Testing Completed _____

_____ Post Exposure Prophylaxis is indicated.

Date Post Exposure Prophylaxis Started _____

Hepatitis C

_____ Repeat Hepatitis C testing at 3, 6, and 12 months

Date Initial Testing Completed _____

Other Recommendations (Please Specify):

I, the undersigned Healthcare Professional, acknowledge the student has been informed of the results of this evaluation for exposure to blood or other potentially infectious materials, and he/she understands the treatment options (if warranted).

Healthcare Professional Signature _____

Healthcare Professional Name (Please Print): _____

Date _____

Post-exposure information is available from the Centers for Disease Control (CDC):

2001 MMWR Report, <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>

2005 MMWR Report, <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>

Idaho State University School of Nursing
Bloodborne Pathogen Exposure Incident
Consent for Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV) Testing

I, the undersigned Source, understand that, _____
 a nursing student in the Idaho State University School of Nursing program was exposed to my blood or body fluids. The Center for Disease and Prevention Control and Prevention (CDC) advises evaluation of the possibility on an infection from my blood or body fluids. I understand that the results of my laboratory blood tests will be helpful in determining treatment options for this student.

If I consent to testing, I understand that I am responsible for the costs of the testing. With my consent, the results of the laboratory blood tests will be provided to the exposed student through his/her healthcare professional.

Please indicate:

_____ I consent to confidential testing for Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV).

_____ I do not consent to confidential testing for Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV).

_____ I consent to share the results of my Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV) test with the healthcare provider caring for the student named above.

_____ I do not consent to share the results of my Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV) test with the healthcare provider caring for the student named above.

Source Name (please print) _____

Signature _____

Date _____

Social Security Number _____

Address _____

Witness Name (please print) _____

Witness Signature _____

Date _____

Instructor Name _____

Idaho State University School of Nursing
Bloodborne Pathogen Exposure Control
Release of Information Form

Student Name: _____

Bengal ID Number: _____ Email address: _____

Statement of Understanding

By signing below on Student's behalf, I acknowledge and affirm the following:
"ISU" means Idaho State University, its governing board, the State of Idaho, and each applicable officer, faculty, agent, employee, subcontractor, representative, volunteer, and student whom ISU employs.

I have read and understand the ISU School of Nursing's Bloodborne Pathogen Exposure Control policy.

I understand that the Student is responsible to follow each instruction outlined in the Bloodborne Exposure Control policy, and that the Student is responsible to:

- 1.) report any exposure incident to the Student's assigned faculty and the nurse manager in the facility where the Student is assigned to undertake clinical experiences;
- 2.) follow-up with medical interventions as directed by the faculty supervising the Student's clinical experiences; and
- 3.) allow the ISU School of Nursing to obtain personal health information from any health care provider who provides assessment, diagnosis and treatment for any bloodborne exposure that the Student incurs as a direct result of participation in assigned clinical activities.

Release

"Liability" means any liability, loss, damage, expense, claim or cause of action – including any reasonable attorney's fee.

By signing this Release of Information form, I indicate that:

- I am at least eighteen years of age and fully competent to sign the Agreement on Student's behalf;
 - I have read and understand the Student's responsibilities upon any Bloodborne Pathogen exposure that the Student incurs while in an assigned clinical experience;
 - whoever signs this document does so of his/her own free will; and
 - I release ISU from any Liability that arises from the Student's failure in a timely and complete manner to seek follow-up care related to any bloodborne exposure, including any Liability that foreseeably arises from that failure.
-

Signature: _____

[Student/ Parent/ Guardian, if Student is a minor]

Legal Name (please print): _____

Date: _____

Address _____

Contact Phone # _____

Appendix K

Title IX Notice of Non-discrimination and Accommodations of Students with Disabilities

Title IX Notice of Non-Discrimination (Sexual Harassment)

ISU is committed to providing a safe educational and work environment. As a university community, we value compassion and the safety of all employees and students. Sex- and gender-based discrimination (including sexual harassment, sexual violence, dating/domestic violence, and stalking) limits access to education and work opportunities. ISU will follow the guidelines set forth in Title IX of the Education Amendments of 1972 to stop, remedy, and prevent negative effects of sex- and gender-based discrimination. ISU is dedicated to ensuring a prompt, effective, and compassionate response to any report of sex- or gender-based discrimination. To report possible discrimination, ask questions, or communicate concerns, contact ISU Title IX Coordinator at 208-282-1439. For more information, see <https://www.isu.edu/title-ix/>

Title VI Discrimination Based on Race, Color, or National Origin

Title VI of the Civil Rights Act of 1964 (Title VI) is the federal law that protects individuals from being discriminated against based on their race, color, or national origin in programs that receive federal assistance. While compliance with the law is the responsibility of all members of the ISU community, the University Director of Equity and Inclusion has the primary responsibility for Title VI compliance. Concerned parties may contact the Office of Equity and Inclusion to make a complaint under the grievance procedures of ISU. ISU is committed to resolving issues through our internal processes. We have programs designed to support and assist victims. Individuals also have the right to file a complaint directly with the Office of Civil Rights (OCR) under the OCR's complaint process. Details about resources and processes can be found [here](#).

Notification of Student Rights Under FERPA

Idaho State University in compliance with the Family Education Rights and Privacy Act (FERPA), is responsible for protecting and maintaining the privacy of student records and judiciously evaluating requests for release of information from those records. FERPA affords students certain rights with respect to their education records.

FERPA authorizes the release of “Directory Information” without the student’s prior consent under certain conditions which are set forth in the Act. Idaho State University has defined its “Directory Information” as follows:

Student name	College
Address listings	Major field of study
Telephone listings	Degree types and dates
Photograph	Club/athletic participation
E-mail address	records
Dates of attendance	Height & weight of members of
Enrollment status	athletic teams
Class level	Scholarships Awarded
Full-Time/Part-Time status	High-School attended

Students may restrict access to their directory information by notifying the Registrar in writing; please note that such withholding requests are binding for all information to all parties other than for educational purposes. Students should consider all aspects of a Directory Hold prior to filing such a request. Although the initial request may be filed at any time, the restriction of information is permanent until you request, in writing, that it be removed. The restriction will remain in place even after you have stopped attending or have graduated from Idaho State University. Students who wish to restrict access to all of their directory information, as listed above, may do so by following the protocol outlined here.

Accommodation of Students with Disabilities

The Americans with Disabilities Act (ADA) is the civil rights guarantee for persons with disabilities in the United States. It provides protection for individuals from discrimination on the basis of disability. The ADA extends civil rights protection for people with disabilities in matters that include transportation, public accommodations, accessibility, services provided by state and local government, telecommunication relay services, and employment in the private sector.

Idaho State University will make every effort to make reasonable accommodations, according to section 504 of the Rehabilitation Act of 1973 and the ADA. ISU will not discriminate in the recruitment, admission, or treatment of students or employees with disabilities. Students with disability-related needs should contact the Director of Disability Services, Mail Stop 8121, (208) 282-3599 (V/TTY). 1-800-377-3529 <https://www.isu.edu/disabilityservices/student-accommodationinformation>

The College is committed to providing an accessible learning environment for students with documented disabilities. Upon acceptance into this program you represent that you have read and understand all the requirements of this program and are qualified to meet those requirements with or without reasonable accommodation. If you are a qualified individual who has a diagnosed disability or if you believe you have a disability (physical, learning, hearing, vision, psychiatric) that might require reasonable accommodation in this Program, please contact Disability Services. If there are aspects of the instruction or design of program courses that result in disability-related barriers to your participation, please contact Disability Services to engage in a confidential conversation about the process for requesting accommodations.

Students need to self-advocate, articulate their needs for services and accommodations proactively, and pursue resources on campus for assistance. Students are encouraged to register with Disability Services as soon as the student begins a course or in the timeliest manner possible as accommodations are not provided retroactively. Students with disabilities must obtain an accommodation letter(s) from the Disability Services office, which outlines the specific accommodations required before accommodations in program courses can be provided. Students are highly encouraged to make sure all necessary parties have received a copy of the accommodation letter to ensure proper implementation. This may include the Office of the Associate Dean for Academic Affairs and the instructor/module coordinator/preceptor. Accommodations are determined on a case-by-case basis and are dependent on an analysis of the task to be performed and the nature of the requested accommodation. Accommodations must be

reasonable in nature and should not fundamentally alter the design of the program/course or learning objectives. If there is a concern about the reasonable nature of an approved accommodation, an interactive process will be initiated with Disability Services to explore reasonable options for equal access.

More information can be found online at [isu.edu/disability services](http://isu.edu/disability%20services), or by contacting Disabilities Services at the following campus locations.

- Pocatello Campus: Phone (208) 282-3599, Fax (208) 282-4617, Video Relay (208) 417-0620, Rendezvous Building, Room 125, Campus Stop 8121, Pocatello, Id 83209-8121, email disabilityservices@isu.edu .
- Meridian Campus: Phone (208) 373-1723, Fax (208) 373-1907, Video Relay (208) 417-0620, Sam & Aline Skaggs Health Science Center, 2nd Floor, Room 841C, 1311 E Central Dr., Meridian, Id 83642, email dsmeridian@isu.edu

Students who feel they have been discriminated against based upon a disability and wish to file a grievance shall file such complaints with the Office of Equity and Inclusion. The investigation and grievance procedures established for acts of illegal discrimination shall apply.

Religious Accommodations

The College of Pharmacy values the rich diversity of spiritual expression and practice found among its campus community and promotes a campus community of unrestricted academic inquiry, free religious expression and an environment in which diverse faith perspectives are practiced with dialogue and respect. It is therefore the policy of Idaho State University that students who miss class, assignments, or exams to observe a religious holiday must be accommodated as follows:

1. Absences may not be counted as a missed class in any course in which attendance is a measure of academic performance;
2. Reasonable extensions of time must be given, without academic penalty, for missed assignments; and
3. Exams must be reasonably rescheduled without academic penalty.

Accommodations for observance of a religious holiday will not be retroactively approved. activated. As such, students must inform the University Office of Equity and Inclusion (OEI) of their need to observe a religious holiday reasonably well in advance of the absence, preferably at the beginning of the term/semester.

Upon receiving the completed form, OEI will review to determine whether to approve the accommodation. OEI will review the request and provide a decision via ISU email to the student and the instructor listed on the exemption form typically within 7 business days of submission of the form. Upon notification of the absence(s), each faculty member shall excuse the student from in-person attendance in class according to this policy and provide an opportunity to complete missed exams, quizzes, and other required work.

Ultimately, the student is responsible for all material covered in class and must work with each individual faculty member as soon as possible, ideally before the absence occurs, to arrange to complete any required work. Any faculty member with concerns regarding the academic

implications of a particular student's religious observance of holidays may seek guidance from OEI, and/or as relevant, Associate Dean for Academic Affairs. If a faculty member fails to follow this Religious Accommodations Policy, the student may appeal the faculty member's decision in writing to, per the College Course Complaint Process.

See the University Request for Religious Accommodations in the Classroom through Idaho State University's Office of Equity and Inclusion. Students should also refer to the College Attendance Requirements and Absences section of this Handbook.

Appendix L

Idaho State University School of Nursing

Received and Read the Student Handbook

Statement of Understanding:

My signature below acknowledges the following statements are accurate:

- I have received and read the ISU School of Nursing's Student Handbook.
- I have had an opportunity to review the handbook with faculty and staff.
- I have the opportunity to ask questions about the handbook at any time.
- I will comply with all aspects of the Handbook at all times throughout my role as a professional nursing student.
- I understand that failure to do so may result in disciplinary actions, including potential dismissal from the nursing program.

LEGAL name (please print):

Student Signature:

Date: _____

ISU ID (Bengal Card #): _____