Dear Student:

Your enrollment in the nursing program at Wheeling Jesuit University affirms your choice to participate in the program and privileges it offers. The policies contained herein are specific to you, the nursing student. They in no way negate, but are an addition to, the policies of the Wheeling Jesuit University Catalog and Student Handbook. Every nursing student is held responsible for knowing the regulations, expectations and information contained in this handbook.
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MISSION

The Department of Nursing, an integral part of Wheeling Jesuit University, seeks to fulfill the Jesuit tradition of educational excellence and service to others. The mission of the Department of Nursing is to provide baccalaureate and graduate nursing education and service to the community. Through an integrated program of classroom and clinical practice, the graduate is prepared as a professional nurse to promote health/wellness in a variety of settings.

GOALS

The goals of the Department of Nursing are:

1. To provide the following educational programs based on professional nursing standards and guidelines.*
   
   A. A baccalaureate program that prepares graduates to enter professional nursing and function competently at the entry level.
   
   B. A baccalaureate program that is accessible to registered nurses in the community and builds upon their knowledge.
   
   C. A graduate program which enhances the graduate’s skill and ability to contribute to nursing knowledge.

2. To serve the campus community, the local community, and the nursing community.

*The baccalaureate program reflects the AACN Essentials of Baccalaureate Education and the standards of the West Virginia Nurse Practice Act. These standards were developed from those of the American Nurses Association. The graduate programs reflect the AACN Essentials of Master’s Education. The Family Nurse Practitioner Program also follows the National Organization of Nurse Practitioner guidelines and the American Academy of Nurse Practitioner’s Standards of Practice.

THE PHILOSOPHY OF THE DEPARTMENT OF NURSING

The philosophy of the Department of Nursing is consistent with the Wheeling Jesuit University mission statement and guides the implementation of the department’s goals.

The faculty believe that:

Each person is a uniquely created living system with inherent worth and dignity. Each individual is an integral member of many systems, including the family and community. Each of these systems interfaces with other complex, changing systems creating the unique fabric of each individual’s environment.

The environment includes all those persons, objects, and phenomena that can potentially permeate the boundary of the individual. A variety of stimuli interact with the individual and arise from the environment’s components, such as its physical and social dimensions. Cultural values, norms and beliefs arise within the environment and give meaning to the human life experience. Communities reflect their cultural diversity and serve members’ needs including their entry and progression through the health care system.

Health/wellness is a dynamic state involving balance among each person’s integrated dimensions: body, mind, and spirit. The person always possesses health/wellness in some form, from the time of conception through the experience of death. Health/wellness is fostered through the collaboration of the person with health care professionals.

Nursing is a part of a health care system influenced by political, cultural, economic, legal, historical, ethical, and other environmental variables. The professional nurse influences healthcare by incorporating research, theory, and technology into practice, by being politically active, and by utilizing leadership attributes. The nurse is accountable for
professional development and practice consistent with professional standards and ethical codes.
Education is a dynamic life-long process which takes place in a variety of settings. Organized and planned experiences are directed toward assisting the learner. Learning is nurtured in an environment which fosters critical thinking, creativity, accountability, and compassion. Both teacher and learner should be involved in the planning, implementation, and evaluation of the educational program. This relationship fosters the capacity to learn and to develop both personally and professionally throughout life.

**THE ORGANIZING FRAMEWORK OF THE BACCALAUREATE CURRICULUM**

The faculty accepts a general system framework within which concepts from selected theories are utilized to organize the baccalaureate curriculum.

**CURRICULAR THREADS**

The faculty identifies four threads which form the basis of the organizing framework and run through each level of the program. The four threads are person as a living system, state of health/wellness, nursing process, and professional role development.

Person as a Living System (Client)

People may become clients of nursing care when they need assistance in achieving balance (health/wellness). Clients may include individuals, families, groups, and communities throughout the life span.

State of Health/Wellness

The person always possesses health/wellness in some dimension. Health/wellness is a dynamic state involving balance among each person’s integrated dimensions-body, mind, and spirit. The health state is affected by one’s ability to adapt to environments. Change in health state results from internal or external factors which exceed the system’s ability to maintain balance.

Nursing Process

The nursing process is the framework for facilitating health/wellness. This process requires critical thinking and is a systematic method of assessment, analysis, planning, intervention, and evaluation. Assessment identifies client behaviors reflecting strengths and limitations in relation to system balance. Analysis culminates in the formulation of nursing diagnoses. Assessment and analysis are utilized to formulate expected outcomes. A plan is developed in collaboration with clients and other health care providers for the achievement of health/wellness. Implementation of the plan may involve the client, nurse, and interdisciplinary team to achieve the expected outcomes. Evaluation involves measurement of client outcomes and may indicate the need for further care.

Professional Role Development

The professional nurse brings knowledge, skills, beliefs, and values to the relationship with clients. The nurse functions in many roles, including practitioner, manager, advocate, health educator, leader, researcher, resource person, and facilitator of change in various environments. Roles are dynamic in nature. Socialization to roles develops in response to expectations of self and others.
CONCEPT EMPHASIS WITHIN THE CURRICULUM

Systems Interaction

Different aspects of systems interaction are developed at each level within the curriculum. The sophomore year emphasizes the person maintaining subsystem balance. This involves promoting health/wellness. Emphasis during the junior year is on the client subsystem interaction in physical or emotional crisis. The focus is in the early recognition of health deviations and prompt interventions to restore health/wellness. The senior year focuses on interactions with, and modification of, multiple complex systems and/or long term dysfunction. The senior year concentrates on activities which limit deficits and promote balance within the client and the client’s environment.

Terminal and Level Objectives of the Baccalaureate Curriculum

The graduates of the BSN nursing program will be expected to:

1. Synthesize knowledge from the sciences and the humanities as a basis for theory and practice in nursing within a systems framework.

2. Synthesize knowledge and skills in applying the nursing process in patient-centered care with patients in various stages of health-wellness.

3. Assume accountability for evidence-based nursing practice consistent with professional standards and ethical codes.

4. Communicate effectively with patients and with members of the interprofessional team in the promotion of health/wellness.

5. Provide leadership for decision making related to safe, quality care.

6. Integrate knowledge of multidimensional care into evidence-based practice.

7. Integrate information management and patient care technologies into the delivery of safe, quality care.

8. Assume responsibility for personal and professional development.


Senior Level Objectives

1. Integrate knowledge of the sciences and the humanities as a theoretical basis for decisions in relation to the patient experiencing multiple, complex system interaction.

2. Synthesize knowledge and skill in applying the nursing process for patient-centered care with patients with
multiple, complex needs.

3. Assume accountability for evidence-based performance within the boundaries of the student role, professional standard, and ethical codes.

4. Collaborate with the patient and with members of the interprofessional team in the planning and delivery of services to selected patients,

5. Implement decision making skills in beginning leadership roles related to the provision of safe quality care.

6. Integrate historical, ethical, cultural, spiritual, legal, and economic aspects into evidence-based practice.

7. Incorporate information management and patient care technologies in the delivery of safe, quality care.

8. Seek independent learning experiences consistent with professional objectives.

9. Explore professional organizations that contribute to the development of nursing.

10. Integrate altruism, autonomy, human dignity, integrity and social justice in nursing practice.

**Junior Level Objectives**

1. Correlate knowledge from the science and the humanities in a nursing approach to meet health needs of the patient in physical/emotional crises.

2. Implement patient rights and professional codes in evidence-based practice with selected patients.

3. Incorporate patient rights and professional codes in evidence-based practice with selected patients.

4. Participate in the delivery of health services with the patient and members of the interprofessional team.

5. Utilize appropriate resources in decision making in beginning leadership roles related to safe quality care.

6. Incorporate ethical, legal, spiritual, and economic aspects in the evidence-based care of selected patients.

7. Use information management and patient care technologies to deliver safe, quality care.
8. Initiate learning experiences for professional growth.


**Sophomore Level Objectives**

1. Identify knowledge from the science and the humanities as it relates to basic nursing care.

2. Demonstrate use of the nursing process for patient-centered care with patients at their level of wellness.

3. Function within professional codes and standards of care while recognizing patient rights inherent in evidence-based practice.

4. Develop a beginning professional relationship with the patient and with members of the Interprofessional team.

5. Identify the decision making process for leadership roles related to safe, quality care.

6. Identify historical, ethical, political, cultural, spiritual, legal and economic aspects of evidence-based nursing practice.

7. Explore the role of information management and patient care technologies in the delivery of safe quality care.

8. Identify experiences needed for professional growth.

9. Reflect one's own belief and values as they relate to professional practice.
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### Accelerated BSN Program Curriculum Plan Summer Start

Students complete the prerequisite courses of BIO 128,129, PSY 110, 212, CHE 105, CLS 215, NUR 227, and MAT 105 prior to beginning junior level courses. NUR 227 may be taken as pre-requisite or during Summer Session I. The curriculum is as follows:

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### PROFESSIONAL COMPROMTMENT

Jesuit colleges and universities are places of intellectual integrity, critical inquiry, and mutual respect, where open dialogue characterizes an exciting environment of teaching, research and professional development (http://www.ajcunet.edu/The-Mission-of-AJCU). To that end faculty expects respectful behavior in classroom, online and clinical experiences.

1. Convey a professional welcoming presence
2. Actively contribute to classroom, online and clinical discussions
3. Listen respectfully when others are talking
4. Share resources and mentor other students, particularly transfer/new students
5. Recognize that others may not interpret your behavior the way you intended it
6. Be aware that actions speak louder than words to convey a message
7. Let others know when and how they can help you
8. Follow the chain of command for complaints: first privately notify the person with whom you have a problem; if someone complains to you about someone else, first ask, “Have you spoken to that person about this?” If the answer is no, encourage the person to do so.
9. For conflict resolution, start a private conversation with whom you have the conflict by, “When you did [cite behavior], I felt [explain feelings]. Please do not do that again.

The following list identifies behaviors that preclude a positive respectful learning environment and are, therefore, prohibited. These behaviors include, but are not limited to:

1. Arriving late, leaving early, or not returning on time after break
2. Rude, sarcastic, loud, inappropriate, or disrespectful verbal or written remarks
3. Inappropriate dress for public environment
4. Talking during lectures, making unrelated commentaries
5. Computer or cell phone use unrelated to learning
6. Inappropriate use of social media
7. Verbal or physical confrontations, argumentative behavior, challenging the teacher’s authority or credentials
8. Arriving unprepared
9. Disruptive eating, noisy interruptions
10. Rolling eyes; heavy sighs; slamming books, doors or pencils
11. Cheating in any way

Demonstrations of prohibited behaviors including those listed above will result in the following consequences. Depending on the nature of the violation, the teacher will notify the Nursing Department Chair, Academic Vice President and/or the WV Board of Examiners for Registered Professional Nurses.

1. First offense: Verbal notification by the teacher and/or being asked to leave class or clinical with one exception – eyes being on someone else’s test/quiz will result in consequences described in the Student Handbook under Academic Dishonesty
2. Second offense: Written notification by the faculty
3. Third offense: Course failure and/or Program dismissal

Note: Looking at someone else’s exam/test/quiz or allowing someone to look at your exam is an indication of academic dishonesty per the WJU Student Handbook. These behaviors will be processed according to the stipulations in the WJU Student Handbook.

Professional Comportment Policy Approved August 17, 2015

STUDENT REPRESENTATION ON DEPARTMENT OF NURSING COMMITTEES

Sophomore, junior, and senior students will select a student representative to participate in nursing meetings. The student representative has the privilege to participate in the committees to which he/she is appointed. However, he/she may not make motions or vote.

GRADING SCALE POLICY

The nursing faculty members agree to adhere to the following scale for grading of all nursing courses. The scale is consistent with the University requirements.

\[
\begin{array}{c|c}
A &= 93-100 \\
A- &= 91-92 \\
B+ &= 89-90 \\
B &= 87-88 \\
B- &= 85-86 \\
C+ &= 82-84 \\
C &= 79-81 \\
C- &= 77-78 \\
D+ &= 74-76 \\
D &= 70-73 \\
F &= Below 70 \\
\end{array}
\]

Grades will not be rounded up or down. Only whole numbers will be considered for a grade.

PERFORMANCE QUALIFICATIONS FOR PROFESSIONAL PRACTICE

Certain physical requirements are necessary to meet minimum qualifications in order to participate in clinical courses and professional practice. Some areas of physical requirements include sensory, communication, mobility and motor abilities. A few specific examples are: the ability to perform CPR, respond to emergencies; transfer patients; hear
monitor alarms, auscultatory sounds, and cries for help; observe patients; use equipment; explain procedures; work in small enclosed areas; perform for 8 to 12 hours mostly in a standing position with frequent walking; and meet the specific requirements of clinical agencies. Individuals should assess their ability to meet these qualifications. Any requests for accommodation will be individually evaluated.

**GRADING OF CLINICAL COMPONENT OF NURSING COURSES**

At the end of a clinical course, students who have satisfactorily met all course objectives will receive a (P) Pass final course grade. Any student who has *not* satisfactorily met one or more course objectives in a clinical course will receive an (F) Fail as his/her final course grade. Students who receive less than a C grade on the Didactic portion of a course “or” an (F) Fail grade in a Clinical course must repeat both C and D courses.

From beginning to end of all clinical courses practice must be deemed safe to receive a satisfactory grade in each criterion listed under course objectives on the clinical evaluation tool. Safe nursing practice includes adequate preparation for experience, obtaining faculty assistance with new procedures, and environmental safety precautions which a reasonably prudent person would take.

**ATI TESTING & REVIEW THROUGHOUT NURSING CURRICULUM**

Assessment Technologies Institute (ATI) standardized computerized testing and remediation is required in select nursing courses for students and faculty to assess student progress. Please refer to course syllabi for details related to ATI. The cost will be billed by the University and is the students’ responsibility.

On all ATI proctored assessment students are expected to meet a certain proficiency level identified by the faculty in conjunction with ATI. For students not meeting the required proficiency level remediation will be required. In some circumstances, a repeat exam with a passing score may be required. All students are to utilize the ATI site for remediation and practice every semester and in the summer months and this remediation includes Nurse Logic, videos, case studies, and practice tests. ATI will typically count as a maximum of 10% of the grade in each course. The specific weight of the ATI grade is left to the discretion of the course faculty.

In NUR 481 students are require to take and ATI NCLEX-RN predictor examination and will have two attempts. For students who passed NUR 481, but have not achieved an 85% on the second attempt at the ATI NCLEX predictor exam, the following plan will be required:

1. The student will receive an incomplete in NUR 481.
2. The student will take the ATI NCLEX predictor exam until a successful predictor score of 85% is achieved. A remediation plan will be developed in conjunction with the nursing faculty. **The student will not be eligible for graduation until the identified score is achieved.**

All identified scores used in by the Nursing Department are dependent upon the most current psychometric exam properties determined by Assessment Technologies Institute (ATI) as articulated in the course syllabus.

As part of the current ATI Complete Partnership students will begin using the ATI Virtual Coach for NCLEX preparation approximately four weeks prior to the end of the final semester. The Virtual Coach is a 12 week program that students may complete in less time. All students are expected to earn a “Green Light” from the coach, indicating readiness to test for the NCLEX exam. Transcripts and paper work required for each state board of nursing will not be sent to the respective state until the student earns the green light within the first 12 weeks. If additional time is needed the student will be responsible for the $75 dollar fee to ATI for continuation of the program.
PROGRAM DISMISSAL FOR UNSAFE CLINICAL PRACTICE

A student may be dismissed from the program or course for unsafe clinical practice at any time during the semester after due process. In such cases an “F” will be given for the course or courses in which the unsafe practice occurred.

Practice may be unsafe for academic or disciplinary reasons. Academic reasons include failure to attain the required level of cognitive or motor skills. A few examples of unsafe practice due to academic reasons are: inadequate preparation, inaccurate documentation, inability to perform motor skills safely, and practice beyond the scope of preparation.

Unsafe practice for disciplinary reasons includes violation of institutional or professional codes of conduct and unethical behavior. In addition, this includes failure to be safe because of attitudinal or physical problems. A few examples are poor hygiene, inability to establish rapport with clients, a lack of integrity, initiative, interest, or dependability and violation of dress code.

Students will be afforded due process in cases of dismissal for unsafe practice. The student will be given verbal or written notice concerning the unsafe practice from the clinical instructor. The clinical instructor may ask for an evaluation from another clinical instructor or request a departmental hearing. If a second instructor is consulted, a departmental hearing will occur after the second instructor completes the evaluation. The student will be given the opportunity to be present during the departmental hearing in order for rebuttal. The department will then make a decision about whether or not dismissal is warranted. The Chairperson of the Nursing Department will determine who will be present for the hearing and who will make the decision.

In cases where there is a time lag between when a clinical instructor deems a student unsafe and when the departmental hearing occurs, the clinical instructor may keep the student out of the clinical area. If, however, the departmental hearing results in the student remaining in the course, the student should be given the opportunity to make up the clinical time if necessary.

Students who are dismissed from the program for unsafe practice may request readmission into the program to repeat the course at a later time. If the student is readmitted into the program, remedial work may be required depending upon the nature of the deficiency.

Students who feel they are treated unfairly may appeal by following the Appeal Process as discussed in the WJU Undergraduate catalog.

ADMISSION TO THE NURSING PROGRAM

The Admissions and Progressions Committee reviews the records of all nursing students to make recommendations to the nursing faculty for admission, progression, and graduation. Any student having concerns or requests in any of the following areas should send a letter to the Chairperson of the Admissions and Progressions Committee (nursing department chair) for consideration and recommendation of the committee.

Declared nursing majors are strongly urged to have WJU CORE requirements completed as per the Nursing Department Program of Study through first semester sophomore year. Completion of these CORE courses will be a consideration for admission to the nursing program.

To enter the nursing program and progress to second semester sophomore year nursing courses, N203 and N230, student must have:

A. an overall, cumulative GPA of 3.2 or higher.
B. completed and achieved a “C” or better in each prerequisite science course, CHE 105, BIO 128, BIO 129, and CLS 215.
C. Achieved a minimum score of 68% on the TEAS test.

PROGRESSION IN REQUIRED NURSING COURSES

The Admissions and Progressions Committee reviews the records of all nursing students to make recommendations to the nursing faculty for admission, progression, and graduation. Any student having concerns in any of the following areas should send a letter to the Chairperson of the Admissions and Progressions Committee (nursing department chair) for consideration and recommendation of the committee.

In order to progress in sequential nursing courses:

A. The student must pass each nursing course with a minimum of an 82% average on all course tests, quizzes, and exams excluding ATI assessments. IF the student has achieved the minimum 82% average on tests, quizzes, and exams, then the rest of the weighted course evaluation content will be factored in for a course grade. A minimum final course grade of 82% is required to progress.

B. The student must achieve satisfactory mastery of medication calculations, dosages and solutions as evidenced by a score of 90% on the Dosages and Solutions exam given each semester. (SEE DOSAGES AND SOLUTIONS).

C. Progression may be denied for non-academic reasons when the cause is incompatible with professional development of practice, for example, as with unsafe practices, unethical professional practices or attitudes incompatible with professional performance.

FORMAL COMPLAINTS

A Formal complaint is a written signed document of dissatisfaction submitted after all attempts at resolution have been followed per WJU policies.

DOSAGES AND SOLUTIONS

Students are presumed to enter the Nursing Program with adequate foundation in basic mathematics. To aid in mathematics review and specific application to the dosages and solutions, self-study texts are available.

Proficiency in the calculation of dosages and solutions is required at 90% mastery level before the student can administer medications in the sophomore year. Two opportunities are provided to achieve this required score.

In subsequent nursing courses with clinical components, students are required to demonstrate proficiency by achieving a 90% or above on a dosage and solutions test in order to progress in the nursing program.

Problems requiring calculation of dosages and solutions will be included in course tests and quizzes throughout nursing courses.


ATTENDANCE POLICY

A. Anticipated absences from theory classes, clinical labs and/or tests which are related to and because of extracurricular University activities are to be discussed with the faculty member and/or course coordinator prior to course registration. This is to facilitate the making of appropriate advance arrangements to ensure that a minimal amount of course work will be missed. Early discussion may also clarify whether or not the extracurricular activity date(s) and time(s) are incompatible with the course schedule.

B. Unavoidable absences should be discussed with the teacher presenting the materials, preferably in advance. The student will be held responsible for obtaining the information presented in all classes missed due to absence.

C. Clinical Attendance - Attendance in clinical settings is required. Accurate clinical evaluation is dependent upon adequate observation time, and each individual instructor must assess each student’s performance. A student missing any clinical experience in a course is at risk for failing the course. If there is a question regarding a student’s competency and skill resulting from absences, the final conclusion for determining progression will be a faculty discussion based on the instructors’ compiled data. Alternative or make-up experiences will be required of any missed clinical. The type of alternative or make-up experience will be at the discretion of the faculty member. However, alternative experiences may not provide the opportunity to satisfy clinical objectives, and the student may still be at risk for failing the course.

It is the responsibility of the student to inform the faculty and clinical unit of his/her absence. The clinical unit must be called in advance of absence. Email to faculty members for clinical absence will not be accepted.

Punctual arrival on the clinical unit is expected. Tardiness, without notification of the faculty, may result in an unsatisfactory grade for that clinical day.

Students are individually responsible for transportation to and from all clinical agencies.

School Closing - Normally school closing policies are not announced early enough to impact morning clinical times. Clinical faculty will, however, determine if clinical will be cancelled and will attempt to notify students. If the student is unsure that clinical will be held, the student should check “ANNOUNCEMENTS” in Blackboard for the clinical course by 4:45 am of the clinical day. If a student who does not live on campus, thinks that attendance during such times would be a serious risk, that student should contact the clinical faculty member and the clinical unit. (See Clinical Attendance in “C” above.)

E. Examinations - All students are expected to be present for examinations. If a student must be absent for an exam period due to extraordinary circumstances, he/she must notify the course faculty member before the exam to make arrangements to complete the exam. All make-up exams will be of essay type. Examination schedules will be determined by the department and will not be altered.

F. Quizzes - Quizzes will be periodically given in any nursing course. They may consist of either objective or essay type questions and may be given in class. If through prior arrangements, the faculty member permits a make-up quiz, the quiz will not be the exact same quiz as the original quiz, will contain some essay/short answer type questions, and will be given at a time decided by the faculty member.

Missed quizzes will be recorded as zero (0) unless prior arrangement has been made. There will be no provision for making up missed quizzes without prior arrangement.
QUIZZES AND TEST PROCEDURES

1. All students should plan to arrive in class early when quizzes, tests, and exams are scheduled. However, the faculty does not have to announce quiz dates in advance. This allows for time to place belongings in the front of the class, open laptops when computer tests are in use, etc. and avoid disruption to students who prepared and arrived on time. Those arriving later than the beginning of the class time will not be admitted and a score of zero will be entered for the experience.

2. All book bags and other belongings should be placed in the front of the room during quizzes and tests.

3. Cell phones and other electronic devices should be turned off and stored in book bags during all quizzes and tests. Use of such devices during a quiz or test will constitute failure on the quiz or test.

4. For quizzes, the maximum length of time allotted will be equal to the number of questions plus five minutes. An example of this would be that the maximum time for a quiz with fifteen questions would be twenty minutes.

TRANSFER STUDENT GUIDELINES

Students must meet prerequisites for specific courses as listed in Academic Catalog.

LEAVE OF ABSENCE

A. From a portion of a course:
   Personal and/or health reasons which require a student to be absent from a portion of a course will be considered on an individual basis.

B. For a semester or longer:
   1. A leave of absence for one or two semesters (at most) will be considered on an individual basis.
   2. A leave requiring more than two semesters may require reevaluation of the student’s course of study.

READMISSION TO THE NURSING MAJOR

Any student who has voluntarily or involuntarily left the nursing major or WJU with an absence of more than a full academic year may be considered for readmission upon request to the Admissions and Progressions Committee. Criteria for readmission will include:

A. Any special eligibility requirements as determined by the faculty
B. Student’s plans/actions to correct deficiencies.
C. Student’s prior academic performance.
D. Length of absence.
E. Current admission policies.
F. Changes in the program that may have occurred during the period of absence.

The request shall be filed prior to enrollment in any required nursing courses and shall include appropriate documentation of rationale for readmission. Readmission is not automatic and is determined by the nursing faculty.
A student, who has been dismissed from the program due to two or more failed courses, unsafe clinical practice, or professional or ethical concerns will not be considered for readmission.

**FAILURE OF NURSING COURSES**

In order to remain in the nursing program after a single nursing course failure the student must:

A. repeat both the didactic and clinical component of the failed course and achieve a passing grade in both.

B. audit all other nursing courses within the semester block of the failed course. All course assignments must be completed. The audited courses will be taken on a pass/fail basis. The student must achieve a passing grade as detailed in “Progression in Required Nursing Courses” section. Assuming the student passes the audited course, the original course grade will stand on the student’s WJU transcript.

**PROGRAM DISMISSAL DUE TO COURSE FAILURE**

Failure of any two nursing courses will result in dismissal from the program.

**APPLYING FOR ADMISSION TO THE REGISTERED NURSE LICENSING EXAMINATION**

Senior students are responsible for applying to the Board of Examiners for Registered Nurses in the state in which they wish to be licensed. Students should obtain information and an application from their state board months prior to graduation. Individual states may have differing requirements. Many require background checks that should be undertaken nine months in advance of taking the exam. Students will be alerted to the process of this paperwork.

Most state boards require the applicant to be a high school graduate or equivalent, to be of good moral character, and to be a graduate of a nursing program accredited by a state board. A student with a police record indicating a felony, a history of substance abuse, or similar concerns about eligibility to take the licensing examination should contact the State Board of Examiners prior to entering the nursing program. The following questions are just some that appear on the application for licensure in West Virginia:

- Have you ever committed an act of academic dishonesty?
- Have you ever or are you currently using illegal drugs?
- Have you ever or are you currently abusing prescription or over-the-counter medication?
- Have you ever been convicted of a felony or a misdemeanor or pled nolo contendere to any crime (include all traffic violations within the last five years except parking tickets).

Graduation from this program allows the student to apply to the State Board of Examiners to take the licensing examination. The student’s actual eligibility is determined by the State Board of Examiners for Registered Nurses.

**STANDARDS OF DRESS**

The student must maintain a professional appearance when representing WJU Nursing. Infractions of the dress code may result in dismissal from the clinical experience and/or unsatisfactory for the day.

1. When visiting the agency for clinical assignments, students may wear dress slacks or a skirt with a lab coat and name pin. No shorts, leggings, denim jeans, hats, caps or tennis shoes are permitted. The body from shoulders to knees should be covered. Lab coat on and buttoned.

2. The student uniform will be worn in designated clinical areas. It must fit properly, be clean and wrinkle free. The style of the uniform must be departmentally approved.
3. Hair must be arranged so that it is off the collar, neat, clean, and contained. No ornamental hair accessories are allowed. No headbands. Hair must be a naturally occurring color and conservatively groomed.

4. Male students are to be clean shaven, or have established short mustaches and beards.

5. No chains, bracelets, or necklaces are to be in sight. Only small button type earrings may be worn, one earring per ear. No other pierced or visible body jewelry is permitted.

6. Shoes must be clean, polished, leather and predominantly white with white socks. Ankles must be covered. No clogs, opened toed, or open heeled shoes.

7. No chewing gum is permitted.

8. Rings may not be worn except for plain wedding bands.

9. Fingernails must be cut or filed so that the nail does not extend beyond the fingertip. No colored polish, artificial nails or tips.

10. Female students shall wear neutral colored bra and panties (no thongs) under the uniform. Male students must wear plain white crew neck undershirts and underwear with uniform.

11. Identification is to be worn while in the clinical area.

12. Sweaters and long sleeved shirts may not be worn with the uniform. Only approved lab coats may be worn.

13. No visible tattoos are allowed. They may be covered with a band aide, or approved clothing.

NOTE: Dress requirements in some clinical settings may vary. Please check with the faculty of the area prior to client contact.

INJURY DURING CLINICAL EXPERIENCES

If a student is injured in any way during a clinical experience, the student must report the injury to the clinical instructor and then follow the procedure required by the clinical agency. If such procedures involve emergency room services or other treatment, the student is responsible for any expenses incurred.

CPR CERTIFICATION

All students involved in clinical courses must have current Healthcare Provider CPR certification.

HEALTH INSURANCE

Health insurance is a requirement for all clinical courses.
STUDENT LIABILITY INSURANCE

All nursing students involved in clinical care settings will be covered under a WJU blanket liability policy and be billed through the University.

COMMUNICABLE DISEASE STATEMENT

When in the clinical setting, the student is responsible for being free of communicable diseases. If the student has been exposed to a communicable disease (e.g. chicken pox, etc.) the student must inform the nursing faculty immediately and before going into any clinical area.

IMMUNIZATION POLICIES

In addition to the requirements specified by the University, nursing students, prior to beginning the first clinical experience and/or annually, are required to have the following immunizations. See immunization form for details. Immunization requirements may also differ by clinical agency.

1. Hepatitis B Vaccine:
2. MMR (Measles, Mumps, Rubella)
3. Tuberculosis Mantoux Test
4. Tetanus, diphtheria, pertussis. (TD/Tdap)
5. Menigococcal
6. Varicella (chickenpox)
7. Annual Influenza Vaccination (Certain clinical sites require ALL nursing students and faculty to have proof of vaccination)

POLICIES RELATED TO BLOODBORNE PATHOGENS

1. Universal Precautions: Because the control of infection is an integral part of every action the nurse performs, all students will be required to consistently apply learned principles of Infection Control. Students are to observe universal blood and body fluid precautions for all patients/clients as identified in institutional policies.

2. Safety precautions: Students are responsible for utilizing safety precautions to minimize exposure to bloodborne pathogens. These precautions include the proper use and disposal of personal protective equipment, decontamination of areas and disposal of sharps according to agency policies, and compliance with policies in the agency’s exposure control plan.

3. Annual Training: All students in the clinical courses must attend annual training on occupational exposure to bloodborne pathogens.

4. Exposure Incidents: Students must report any exposure incident that occurs during a clinical experience to their instructor and then follow the exposure procedure of the clinical agency.

HIPAA POLICIES

Students must comply with regulations resulting from the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regarding protected health information. Students must attend annual updates on this issue. Students should be aware that inappropriate release of patient information could result in fines, jail time or program dismissal. Confidentiality and privacy must be maintained.
STUDENT NURSES ASSOCIATION

The Wheeling Jesuit University Student Nurses Association (WJU SNA) is a recognized student organization within the university and a chapter of the National Student Nurses Association (NSNA). Membership to the WJU SNA and the NSNA is open to any student who has declared nursing as his/her major. The purposes of the WJU SNA are to sponsor health related activities, increase awareness of nursing and health related issues, enhance communication between students and faculty, and promote active participation of students in professional organization activities on the state and national level. WJU SNA members may have the opportunity to attend state and national meetings of the West Virginia Student Nurses Association and the National Student Nurses Association. Students must obtain the permission of the faculty if missing class and/or clinical time is anticipated.

CRIMINAL BACKGROUND CHECK/DRUG TEST

Students must complete a criminal background check and a drug test before the first clinical course. The drug test must be negative for all drugs except for those legally prescribed. A positive drug test will result in not being able to attend clinical or be admitted to the nursing program. Drug tests may be performed thereafter for cause or randomly. Clinical agencies may prohibit students with certain criminal violations from practicing and State Boards of Nursing may prohibit or restrict licensure due to a criminal and/or drug history. Students are responsible for the cost of criminal background checks and drug tests.

RELATIONSHIP WITH COOPERATING AGENCIES

If information is needed from a particular agency representative, an advance appointment should be made with that person. Agency personnel should not be used in lieu of normal reference sources.

Students who need additional information from a patient record are expected to return to the agency to get it. It is not acceptable to call a clinical unit and request information. Students are prohibited from getting patient information for another student. Agency policies regarding records must be followed.

Students are expected to abide by agency regulations and extend professional respectful behavior to patients and agency personnel. These include modulation of noise levels, leaving units and conference rooms in orderly condition.

NURSE EXTERNSHIP PROGRAM

Nurse Externship program may be available for variable credit in the summer between junior and senior year. Please consult student advisor. Students are encouraged to seek information from seniors who participated in an externship.

STANDARDS FOR FORMAL PAPERS

1. Typewritten with use of Microsoft Word
2. Text of paper is to be double spaced
3. Right and left hand margins must be at least 1 inch wide
4. Proofread before submission
5. The most current edition of the Publication Manual of the American Psychological Association must be used as writing and format guide
6. Deadlines will be strictly enforced. Points may be deducted for each day beyond date due according to course syllabi
7. The use of Turnitin is required for all scholarly papers
CHEATING / PLAGIARISM

Cheating of any nature will not be tolerated in the nursing department. Please refer to the Academic Integrity website http://www.wju.edu/about/hr/policies/cl_academicdishonesty.asp for an overview of academic integrity and the policies in place at WJU.

Please consult any writing guide for a complete definition of plagiarism. Using the words and/or ideas of another person without crediting the source is without excuse in terms of academic work; further, it is evidence of dishonesty which cannot be tolerated in persons who carry the responsibility for the lives and welfare of others.

Plagiarism is the use not only of the published works of others but also the work of previous or fellow students. “Selling” of a paper is considered by the nursing department as serious an offense as is “buying” one. The same academic sanctions may be applied to either student.

Turnitin is required in nursing courses for written formal papers and at the discretion of the faculty.

PREGNANCY POLICY

Any student who is or becomes pregnant, while a student in the nursing program, must notify the faculty as soon as possible. A student must also supply a written notification from a physician that states the positive pregnancy and that the student is physically able to participate fully in all course/clinical requirements. The pregnant student will be expected to meet the stated conditions and objectives that are required of any student in either a didactic or clinical course. There may be some minor adaptation made to an assignment in the clinical area if deemed necessary by the clinical instructor, not the student. The student must be aware of infection control measures to protect oneself as well as others from disease transmission. If at any time the medical doctor, nurse practitioner, nurse midwife, or clinical instructor states the student is unable to perform expected tasks, functions, and or studies for the current nursing course(s), the student may be required to withdraw or may be dismissed from the course/clinical. Students will not be able to progress in the nursing program until that course/clinical that was missed is repeated per the nursing program requirements. Students are encouraged to wait six weeks after delivery before returning to school. Each nursing student will be expected to sign a statement that she has read this policy, and that she understands that failure to abide by this policy will be grounds for withdrawal from the nursing course. If any clinical agency has restrictions, the student will follow the guidelines of the agency.

WJU CHILDREN / VISITOR POLICY

Newborns, children, or visitors of the students are not allowed to attend either the didactic classrooms or clinical sites at any time. The classroom or clinical area is no place for newborns or children. It is a learning environment for all students and this would be a distraction for everyone including the student involved. Visitors may only attend classroom at the request of the instructor for learning purposes, such as in the case of a guest speaker.
§19-1-1. General.

1.1. Scope. -- This rule establishes the policies and standards criteria for the evaluation and accreditation of colleges, departments or schools of nursing.


1.3. Filing Date. -- June 4, 2009.

1.4. Effective Date. -- July 9, 2009.


These words and terms mean the following:

2.1. "Accredited college, department or school of nursing" means a college, department or school which meets the requirements of W. Va. Code §30-7-1 et seq, this rule, and any other applicable laws and rules. For purposes of considering applications for licensure, the Board may recognize nursing education programs accredited or approved by a comparable Board or other recognized authority in another jurisdiction.

2.2. “Administrator employment time” means the devotion of 80% time to school administrative duties. The administrator of the nursing program's teaching responsibilities is not to exceed 6 academic semester credits per year, no more than 3 academic credits per semester.

2.3. "Associate degree program in nursing" means a program conducted by a college or university that leads to an associate degree with a major in nursing.

2.4. "Baccalaureate degree program in nursing" means a program conducted by a college or university and leads to a baccalaureate degree with a major in nursing.

2.5. "Board" means the West Virginia board of examiners for registered professional nurses.

2.6. "Clinical Preceptor" means a registered professional nurse who:

2.6.a. is currently licensed as a registered professional nurse in good standing in the state in which he or she is providing the preceptorship with education preparation at or above the level for which the student is preparing;

2.6.b. has a minimum of 2 years of experience as a registered professional nurse providing direct patient care during the 5 years immediately preceding the date of the written agreement;
2.6.c. has a philosophy of health care congruent with that of the nursing program; and,

2.6.d. has current knowledge of nursing practice at the registered professional nurse level.

2.7. "College", "Department" or "School" mean a nursing education unit charged with responsibility to prepare its graduates for practice as registered professional nurses, qualified to meet licensing requirements in West Virginia. This nursing education unit may have multiple programs and may be structured in a university, college or hospital.

2.8. "Credit hour" means that credit assigned for 1 hour of lecture per week, or 2 to 4 hours of lab per week, per semester.

2.9. “Curriculum” means a planned nursing educational experience based on the philosophy, mission, goals and outcomes of the nursing education program. The curriculum will include clinical assignments to meet the objectives of each nursing course.

2.10. “Diploma program” means a program which is usually, but not necessarily, conducted by a hospital and leads to a diploma in nursing.

2.11. “Distance education” means a formal educational process in which the majority of the instruction in a course/program occurs when instructors and students are not physically in the same location. The educational process may use various methodologies for communication, instruction, and evaluation.

2.12. “Generic Masters degree program” means a program conducted by a university and leads to a masters degree in nursing for individuals preparing for initial licensure as a registered professional nurse.

2.13. "Governing organization“ means the university, college, or other organization of which the nursing education unit is an integral part.

2.14. "Graduation" means the candidate has satisfied all requirements of the college, department or school of nursing granting the diploma or degree.

2.15. “New program” means any education program planning to prepare individuals for initial licensure that has not been accredited by the Board. This includes but is not limited to diploma, associate, baccalaureate, generic masters, second degree programs, accelerated programs, cohorts, sites, distance education through technology, Internet or web-based programs.

2.16. “Part-time faculty” means faculty employed by the nursing education program in a position with fewer hours than the organization's definition of full-time faculty status.

2.17. "Provisionally accredited college, department or school of nursing" means a college, department or school of nursing which either has been temporarily approved but has not been in operation long enough to qualify for full accreditation, or one which fails to meet the requirements of the law and of the Board, and has received notification of its deficiencies.

2.18. "Recommendations" means suggestions for the guidance of colleges, departments or schools of nursing in the development of their programs.

2.19. "Recommendation for admission to the licensure examination for registered professional nurses" means a written statement required in order to take the license examination. The applicant must be recommended to the Board by a faculty member of the program. This recommendation is based on satisfactory completion of the program.
2.20. “Renewal of accreditation” means continuation of accreditation based on survey visits, conferences, correspondence, and contents of the annual report during the reporting period and is granted for a time period determined by the Board.

2.21. "Requirements" means mandatory conditions which a college, department or school of nursing must meet in order to be accredited.

2.22. “Scheduled on-site visit” means the on-site accreditation visit occurring as part of the ongoing accreditation process of the nursing education unit.

2.23. “Standards” means a standard prescribed by the Board for educational programs preparing persons for licensure to practice registered professional nursing as per §30-7-7.(b).


3.1. The purposes of accreditation include:

3.1.a. Protection of the public through evaluation of pre-service professional nursing education programs in terms of the criteria set forth in this rule;

3.1.b. Improvement in the quality of nursing service through the improvement of professional nursing education;

3.1.c. Guidance of prospective students in the selection of approved professional nursing education programs; and

3.1.d. Assurance of eligibility to take the state licensing examination and to apply for state licensure to graduates of state accredited nursing programs.

§19-1-4. Application for Legal Accreditation.

4.1. The application fee for establishing a new program and to receive legal accreditation of a professional nursing education program and initial on-site visit is fifty dollars ($50). A governing institution that plans to establish a new nursing education program for the preparation of practitioners of registered professional nursing shall complete and submit such application for accreditation to the Board a minimum of 6 months in advance of the expected opening date:

4.1.a. a letter of intent identifying the governing institution, the type of nursing education program, and the status of approval from accrediting bodies and state agencies.

4.1.b. a feasibility study that includes:

4.1.b.1. the purpose of establishing the new nursing education program;

4.1.b.2. an assessment establishing the need for a new undergraduate professional nursing program;

4.1.b.3. statement of the availability of health care agencies, educational facilities and practice sites with sufficient clinical learning experiences throughout the lifespan to support the program. Letters of commitment and contract proposals from the clinical facility are accepted documents for inclusion to demonstrate meeting the standard;

4.1.b.4. enrollment projections and identification of potential students;

4.1.b.5. determination of demand for graduates of specific proposed program in geographical area;
4.1.b.6. submission of the proposed initial budget with assurance of adequate financial resources to support the implementation and continuing program including submission of the proposed initial budget and continuing budget;

4.1.b.7. availability of qualified faculty for theoretical and clinical instruction;

4.1.b.8. timeline for planning and implementation of the proposed program;

4.1.b.9. impact on existing nursing programs within a 50 mile radius of the proposed program;

4.1.b.10. organizational structure of the governing institution and placement of proposed nursing education program within the overall organization.

4.1.c. documentation that demonstrates the potential to meet all standards identified in this rule;

4.1.d. verification that a qualified nursing program administrator meeting the requirements of this rule is employed to develop the nursing program;

4.1.e. verification of availability of qualified nursing faculty to support the proposed numbers of student admissions to the new nursing education program; and

4.1.f. a curriculum plan that complies with the standards identified in §19-1-14.

4.2. A survey may be conducted to amplify, clarify, and verify information in the application.

4.3 If all standards for accreditation are met, the program shall receive provisional accreditation.

4.4. Following receipt of the first calendar year report of performance of graduates on the national licensure examination, the Board shall conduct a survey to determine if all standards for approval of a nursing education program have been met. The Board may:

4.4.a. grant full accreditation if standards of a nursing education program are met;

4.4.b. continue provisional approval and provide to the governing institution and nursing program administrator a written notice of deficiencies that establishes a reasonable time, based upon the number and severity of deficiencies, to correct deficiencies.

§19-1-5. Accreditation of Education Unit.

5.1. Visits and surveys. The Board, through its executive secretary and staff or other qualified persons, shall periodically survey all nursing education programs accredited by the Board, including all satellite sites of any program.

5.2. Maintenance of accreditation standards. The nursing education unit shall maintain accreditation standards as set forth in this rule. The nursing education unit shall submit to the Board a copy of the national accreditation report, recommendations and final decision for each national accreditation visit once received by the program within 10 days of the program's receipt of the report.

5.3. Program visits, in addition to regularly scheduled visits, shall be conducted more frequently if:

5.3.a. there is a concern regarding the school's compliance with standards for nursing education programs;
5.3.b. the director of the nursing program changes;

5.3.c. a major curriculum change is proposed; and/or

5.3.d. a complaint has been submitted to the Board.

5.4. Accreditation of an existing program when ownership and control are changed. When a governing organization contemplates a change of ownership and control of a program, it shall send notice of the intended change to the Board 90 days prior to the effective date of the intended change. The owner or governing organization expecting to assume responsibility for the program shall immediately make application for accreditation. If the Board is satisfied the owner or governing organization which will be responsible for the new program meets the criteria for accreditation and will comply with the recommendations of the Board, it may be provisionally accredited.

5.5. Delivery of instruction by distance education methods shall enable students to meet the goals, competencies, and objectives of the educational program and standards of the Board, including supervised clinical learning experiences.

5.6. A distance-learning program shall establish a means for assessing individual student and program outcomes.

5.7. A nursing education program based outside the state of West Virginia desiring to have students in a clinical facility in West Virginia shall:

5.7.a. notify the Board, in writing, 30 days in advance of the clinical learning experience for Board approval:

5.7.a.1. name of student, including license number if student is licensed in West Virginia;

5.7.a.2. name and license number of clinical supervisor;

5.7.a.3. name and location of the clinical facility;

5.7.a.4. name and license number of the nursing faculty responsible for the evaluation and oversight of the student's clinical learning experiences;

5.7.a.5. submit documentation verifying the program has accreditation by the residing state board of nursing or national nursing accreditation body;

5.7.a.6. comply with all standards of the rule including those related to clinical supervision of student learning experiences. The Board may request periodic report for the purpose of data collection or to determine compliance with the provisions of this rule.

5.8. Expansion of a program requires approval from the Board. Only those programs with full accreditation status may submit requests to the Board to initiate expansion of a program.


6.1. Loss of accreditation through failure to meet standards. The Board may withdraw accreditation from any nursing education program which fails to meet legal and educational requirements or Board standards to the satisfaction of the Board within a reasonable time period as determined by the Board. The program shall be removed from the list of Board-approved professional nursing education programs. The Board shall notify the administrator of the nursing education unit in writing of deficiencies in the nursing education program.

6.1.a. Factors jeopardizing program accreditation status include but may not be limited to:
6.1.a.1. deficiencies in compliance with this rule;
6.1.a.2. utilization of students to meet staffing needs in health care facilities;
6.1.a.3. noncompliance with school's stated philosophy/mission, program design, objectives/outcomes, and/or policies;
6.1.a.4. continual failure to submit records and reports to the Board office within designated time frames;
6.1.a.5. failure to provide sufficient variety and number of clinical learning opportunities for students to achieve stated objectives/outcomes;
6.1.a.6. failure to comply with Board requirements or to respond to Board recommendations within a specified time;
6.1.a.7. student enrollments without sufficient faculty, facilities and/or patient census;
6.1.a.8. failure to maintain at least 80% passing rate on the licensure examination by first-time candidates;
6.1.a.9. failure of the program dean or director to document annually the currency of faculty licenses;
6.1.a.10. failure to maintain adequate budget to meet the needs of the program; or
6.1.a.11. other activities or situations that demonstrate to the Board that a program is not meeting legal requirements and standards.

6.2. Loss of accreditation through change of organization. When a program changes ownership or control, the Board shall automatically withdraw accreditation. The new owner or organization shall comply with the provisions of subsection 5.3. of this rule to continue the nursing education program.

6.3. Provisional accreditation for failure to meet standards. At the Board's discretion, it may grant provisional accreditation to a nursing education program during the time in which it takes corrective action in order to meet the accreditation standards set forth in this rule.

6.4 Any professional nursing school having a 20% or higher failure rate on the national licensure examination, shall receive a warning from the Board. If changes, correction and/or adjustment relative to faculty, facilities, student admission, curriculum content, and/or methods of teaching are not initiated within a specified time and such action approved by the Board, the Board may impose additional requirements or restrictions on the program.

§19-1-7. Closing of a Program.

7.1. The governing organization shall advise the Board in writing of the intent to close a nursing education program at least 6 months prior to the planned closing date. The governing organization shall submit a plan for safeguarding the quality of instruction and practice during the closing period.

7.2. The governing organization shall ensure that all standards for nursing education programs are maintained and all necessary courses are taught until the last student is transferred or graduated.

7.3. The governing institution shall secure and provide for the permanent custody and storage of records of students and graduates. The Board shall be notified of the location and method of retrieving information from these records.
7.4. At the Board's discretion, it may request additional information and plans for the closing of a nursing education program and the transfer of students and records.

7.5. The Board shall automatically withdraw accreditation of the program on the day the last student completes curriculum requirements of the program that is closing.

§19-1-8. Reports.

8.1. The nursing education unit shall submit an annual report to the Board by September 1 of each year for each nursing program accredited by the Board. Data included in this annual report shall be determined by the Board, and shall include, but not be limited to, statistical data, faculty data, faculty qualifications information, plans for the next academic year, student enrollment data, faculty workload data and a brief evaluation statement.

8.2. The nursing education unit shall submit a self-study or program evaluation report to the Board one month prior to a scheduled on-site visit to the nursing education program. The Board shall determine the format and guidelines for the submission of this report.

8.3. The nursing education unit shall notify the Board on forms provided by the Board of potential faculty of the university, college, or hospital to teach in any accredited nursing program whose qualifications fall within the exceptions defined in 19CSR1-11.1.a.1.

8.4. A university, college, or hospital desiring to initiate a new nursing education program shall complete a needs assessment report for submission to the Board at least one month prior to a scheduled Board meeting. The Board shall determine the format and guidelines for submitting this report.

8.5. A nursing education unit desiring to implement a substantial change to the nursing education program shall submit its request to the Board one month prior to a scheduled Board meeting. The nursing education unit shall not implement a substantial change to a nursing education program prior to receiving permission to do so by the Board.

8.6. At the Board's discretion, it may request additional reports from a nursing education unit to include, but not be limited to, written plans for improving licensure examination pass rates of graduates and progress reports.

§19-1-9. Mission and Goals/Outcomes of the Nursing Education Unit.

9.1. The mission or philosophy and goals or outcomes of the nursing education unit shall be clearly stated, periodically reviewed by nursing faculty, and consistent with those of the governing organization.

9.2. Implementation through an adequate program. The nursing education unit shall accomplish its stated goals or outcomes.

§19-1-10. Organization and Administrative Control of the Nursing Education Unit.

10.1. The nursing education unit in the governing organization.

10.1.a. Organization of the nursing education unit. The organization pattern of the nursing education unit shall be comparable to that of other like education units in the governing organization. The nursing education unit shall make a chart showing the structure of the nursing education unit, its relationship to administration, and with other education units available to the Board upon request.

10.1.b. Budget of the nursing education unit. The budget of the nursing education unit shall be part of the budget of
the governing organization. The administrator of the nursing education unit has input into the preparation, presentation and
is responsible for the administration of the budget for the nursing education unit. The administrator of the nursing program
has input into the budget and it shall be adequate to achieve the mission of the nursing education unit.

10.1.b.1. Financial support for faculty, equipment, supplies and services shall be adequate to achieve the outcomes of all nursing programs within the nursing education unit.

10.1.b.2. Secretarial and other support services shall be sufficient to accomplish the goals and expected outcomes of all nursing programs within the nursing education unit.

10.1.c. Administration of the nursing education unit. The nursing education unit shall be administered by a nurse who (a) holds a graduate degree with a major in nursing, (b) has 5 years professional nursing experience, 2 years of which were teaching in a professional nursing program, and c) holds a license as a registered professional nurse in the state of West Virginia. In addition, qualifications are comparable to those qualifications required of other faculty in the governing organization. The administrator of the nursing education unit is responsible for the following:

10.1.c.1. Providing leadership for faculty and staff;

10.1.c.2. Developing and maintaining relationships with local, state, regional, and national agencies involved in professional nursing or nursing education;

10.1.c.3. Establishing and maintaining liaison with the central administration and other departments of the governing organization;

10.1.c.4. Preparing and administering the budget;

10.1.c.5. Facilitating faculty development and conducting performance reviews;

10.1.c.6. Recommending faculty for appointment, promotion, tenure and retention; and

10.1.c.7. Notifying the Board of any major changes in the nursing education program or its administration.

10.1.d. Agreements with an agency or agencies for clinical practice experiences. There shall be a written agreement between the governing organization and the agency or agencies which provide clinical education experiences for students.

§19-1-11. Faculty of the Nursing Education Unit.

11.1. Nursing faculty members, both full and part-time shall be academically and professionally qualified and shall:

11.1.a. Have a graduate degree with a major in nursing;

11.1.a.1. The Board may grant an exception to the requirements in subdivision 11.1.a. of this rule for faculty members who:

11.1.a.1.A. Have a bachelor degree with a major in nursing and are admitted and enrolled in a graduate degree program with a major in nursing within 1 year of employment in the faculty position;

11.1.a.1.B. Have qualifications other than those set forth in this subsection which are acceptable to the Board.
11.1.b. Have evidence of current experience in nursing practice and education sufficient to demonstrate professional competence. For faculty with less than two years experience in education, the nursing program administrator will submit to the Board mentoring and orientation plans as defined by Board guidelines and function under the guidance of a faculty member fully qualified in the specific teaching area and professional competence; and

11.1.c. Have credentials which verify status as a registered professional nurse in West Virginia.

11.2. Reports on faculty qualifications. The nursing education unit shall submit to the Board a record of the qualifications of each faculty member with the program annual report.

11.3. Conditions of nursing faculty employment. Faculty policies of the nursing education unit shall be nondiscriminatory and consistent with that of the governing organization. Faculty policies which differ from the governing organization shall be justified by the nursing education unit goals. The policies shall be written, implemented and available to faculty and to the Board upon request.

11.4. Assignment and workload of nursing faculty. The governing organization shall hire and maintain sufficient faculty with the experience and competence in the respective specialties of nursing education to accomplish the goals or outcomes of the nursing education unit. Assignment and workload shall be consistent with the governing institution and includes clinical lab. Workload should provide for regeneration, reflection and wellness opportunities for nursing faculty. Factors to be included but not limited to when establishing the ratio of faculty to students should include:

11.4.a. the students' level of knowledge/skill;
11.4.b. course objectives;
11.4.c. acuity level of clients;
11.4.d. affiliating agency's goal and priorities;
11.4.e. percentage of temporary personnel staffing;
11.4.f. physical layout of facility;
11.4.g. current usage by other affiliating students; and
11.4.h. the Board’s standards.

11.5. Organization of nursing faculty. The nursing faculty shall organize under its own governing rules, and meet regularly. Students shall have opportunities to participate in meetings of the faculty organization. The nursing education unit shall maintain minutes of meetings recorded and shall maintain minutes on file. The nursing education unit shall provide evidence of part time faculty participation in governance and communication within the nursing education unit.

11.6. Malpractice insurance for nursing faculty. The faculty shall have liability insurance for clinical practice required in nursing education courses.

§19-1-12. Students in the Nursing Education Unit.

12.1. The nursing education unit shall base the selection and admission of students on established criteria, and be consistent in the recruitment and admission of students, and shall determine student enrollment by the clinical and teaching facilities available and by the numbers of nursing faculty. Enrollment into the nursing education program may not increase if the program does not have full accreditation by the Board. An increase in enrollment of greater than 10% must have prior
approval by the Board.

12.1.a. Requirements for admission. A high school diploma or general education development (G.E.D.) certificate is required for admission to any nursing education program. Requirements for admission shall be consistently applied throughout the program. Changes in requirements shall be communicated to the students in a reasonable timeframe.

12.1.b. Transfer or readmission of students. The nursing faculty members shall establish policies for students requesting readmission or admission by transfer from another university, college, or hospital's nursing education program. Requirements for transfer and readmission shall be consistently applied throughout the program. Changes in requirements shall be communicated to the students in a reasonable time frame.

12.2. Student policies. Policies concerning students shall be clearly stated in the student handbook and/or catalog of the governing organization. There shall be evidence of communication of policies of the governing institution and nursing education program to the students. Changes in requirements shall be communicated to the students in a reasonable time frame.

12.3. Liability insurance for students. Students shall be covered by liability insurance for clinical practice.

12.4. Students shall adhere to the standards for professional conduct as stated in the Board's rule, Standards for Professional Nursing Practice, 19CSR10, and are subject to disciplinary action by the Board for acts of professional misconduct as defined in the Board's rule, Professional Misconduct, 19CSR3.


13.1. The curriculum of each nursing education program within the nursing education unit shall be based on the philosophy or mission and goals or outcomes of the nursing education unit.

13.1.a. The curriculum shall incorporate the concepts of nursing process and the standards for nursing practice as defined in the Board's rule, Standards for Professional Nursing, 19CSR10. Clinical assignments shall be designed to meet the objectives of each nursing course. Faculty shall provide evidence of ongoing review and updating of instructional materials, lecture notes, handouts and resources provided to students to ensure students receive current information and standards of practice.

13.1.b. Curricula for programs offering the diploma, the associate degree, baccalaureate degree, generic masters, accelerated programs, cohorts, sites, or distance education in nursing shall include theory and practice in nursing, encompassing the attainment and maintenance of physical and mental health and the prevention of illness for individuals and groups throughout the life process.

13.2. The nursing courses shall be supported by courses which meet the requirements of the governing organization, including biological, physical and behavioral science courses.

13.3. Major changes in the nursing curriculum or the nursing education pattern. The nursing education unit shall send an electronic copy of proposed major changes in the curriculum or nursing education pattern of courses currently approved by the Board to the Board office one month prior to a scheduled Board meeting. The nursing education unit shall not effect these changes unless and until it receives Board approval. Examples of major changes include but are not limited to:

13.3.a. The total number of credit hours;

13.3.b. The re-distribution of credit hours;

13.3.c. An additional instructional site for the program;
13.3.d. A comprehensive change in philosophy or mission and goals or outcomes;

13.3.e. The addition of new faculty; and

13.3.f. Changes in required cognate (general education) courses.


14.1. The nursing education unit shall provide adequate teaching facilities to accomplish the goals or outcomes of the nursing education programs. These shall include well-equipped classrooms, conference rooms, libraries, laboratories and offices for faculty members.

14.2. Comprehensive and current library resources, computer facilities, laboratory and other learning resources shall be available and accessible. The nursing faculty shall have input into the development and provision of learning resources.

14.3. The resources, facilities and services of the governing organization shall be available to and used by the nursing education unit.

14.4. The hospitals or other health care facilities and services utilized for clinical learning experiences shall be adequate in number and kind to meet program goals or outcomes. A preceptor serves as a role model and resource to students in the clinical setting in conjunction with a faculty member.

§19-1-15. Evaluation of the Nursing Education Unit.

15.1. The nursing education unit shall have an ongoing systematic evaluation of all program components which is used for development, maintenance and revision of the program. The evaluation shall include but not be limited to curriculum content review and test review.

15.2. The evaluation plan shall include measurable outcomes, e.g., licensure examination passage rate, employment patterns, graduation rates and attrition.