NEW ENGLAND COLLEGE

THREE-YEAR COOPERATIVE BACHELOR OF SCIENCE IN NURSING

NURSING STUDENT HANDBOOK

Table of Contents

Dear New England College (NEC) Nursing Student:

Welcome to NEC Nursing! This academic year promises to be exciting as we welcome new members to our teaching-learning community. This handbook, designed for your use with the NEC Undergraduate Catalog and NEC Student Handbook, contains policies specific to NEC Nursing. We hope that it will assist you in better understanding student expectations and the program. This Nursing Student Handbook, revised annually, is also available on Blackboard in all nursing courses. After completing the first review of the handbook's contents, please complete the "Verification Form" in your Blackboard course and upload it.

Please note that NEC Nursing uses Blackboard for announcements to alert students to changes in policies and procedures. Announcements posted on Blackboard are delivered automatically to students' NEC email addresses. In addition, all nursing students have access to Blackboard for the course and program information.

NEC Nursing faculty and staff are committed to assisting your professional formation. On behalf of the faculty and staff, I wish you a warm welcome and a prosperous and stimulating academic year.

Dr. Angie Smith, DNP, RN, CNE

AngieSmith

Dean of Nursing & Health Professions

ACCREDITATION

NEC has initial approval by the New Hampshire Board of Nursing, 7 Eagle Square, Concord, New Hampshire, 03301
Phone: 603-271-2152
https://www.oplc.nh.gov/new-hampshire-board-nursing

The Three-Year Cooperative Bachelor of Science in Nursing Program at New England College is pursuing initial accreditation by the Commission on Collegiate Nursing Education http://www.ccneaccreditation.org. Applying for accreditation does not guarantee that accreditation will be granted.

Send comments to:

Commission on Collegiate Nursing Education Attention: Third-Party Comments 655 K
Street, NW, Suite 750
Washington, DC 20001

Section I:
Program Mission, Philosophy, Organizing Framework, Outcomes, and Bylaws

Mission, Vision, Philosophy, & Values

NEC Mission Statement

NEC is a creative and supportive learning community that challenges individuals to transform themselves and their world.

NEC Vision Statement

NEC will be the most highly respected and sought-after small private College in New Hampshire, known for its innovative academic programs and as a leader in experiential education.

NEC Nursing Mission Statement

The mission of the Three-Year Baccalaureate of Science in Nursing (BSN) Cooperative Program at NEC is to provide students with an innovative, accessible, affordable, experiential, and supportive learning community that challenges individuals to transform themselves and the care environments they serve.

NEC Nursing Vision Statement

NEC will be the most highly respected and sought-after small private College in New Hampshire, known for its innovative nursing program and as a leader in experiential nursing education.

NEC Nursing Philosophy

NEC Nursing faculty/staff believe our programs transcend the traditional nursing education model by offering the student a forward-thinking approach. Based on the Liberal Arts and an innovative experiential learning framework, our concept-based nursing curriculum seamlessly aligns with 21st-Century practice needs. As Nursing Faculty, we believe our programs prepare graduates to navigate the complexity of healthcare challenges today and into the future. In addition, nursing faculty are committed to mentoring and teaching the following NEC values:

Value 1: Imaginative, innovative, and creative approaches to all endeavors.
Value 2: Respect for self in the development of personal, social, physical, and intellectual abilities.
Value 3: Caring and collaborative relationships among members of our community.
Value 4: Respect for the varied qualities of individuals, communities, and the world.
Value 5: An appreciation of beauty and elegance in the search for truth.
Value 6: Inquiry into and the pursuit of social justice.
Value 7: Ethical and responsible citizenship, including service to the community.
Value 8: The pursuit of ecological sustainability.
Value 9: Continuous learning and a lifetime of personal achievement.

Program Organizing Framework

Professional Nursing Standards and Guidelines

The program organizing framework is designed from the alignment and adaptation of the following professional nursing standards and guideline resources:

- American Association of Colleges of Nursing (AACN) The Essentials of Baccalaureate Education for Professional Nursing Practice (2008)
- American Association of Colleges of Nursing (AACN) Essentials (2021) Domains and Core Concepts
- Massachusetts Nurse of the Future (NOF) Competencies (2016)

The following is a list of program concept groupings, topics, and concepts:

I.   Core Integrated Concepts
   A. Professionalism
   B. Clinical Judgment
   C. Communication
   D. Compassionate Care
   E. Diversity, Equity, and Inclusion
   F. Ethics
   G. Evidence-Based Practice
   H. Health Policy
   I. Social Determinants of Health
   J. Quality and Safety
   K. Informatics and Technology

II.   Concept Groupings
   A. Themes
      1. Professional Nursing Concepts
         1. Attributes and Roles
            a. Professional Identity
            b. Clinical Judgment
            c. Leadership
            d. Ethics
            e. Teaching and Learning
            f. Health Promotion and Illness Prevention
         2. Care Competencies
            a. Communication
            b. Collaboration
            c. Safety
            d. Informatics
            e. Evidence
            f. Quality

2. Health Care Concepts
    1. Delivery
        a. Population Health
        b. Diversity
        c. Equity
        d. Inclusion
        e. Health Disparities
        f. Care Coordination
        g. Caregiving
        h. Palliative Care
    2. Systems
        a. Organizations
        b. Economics
        c. Policy
        d. Law
3. Psychosocial Concepts
    1. Attributes and Roles
        a. Development
        b. Functional Ability
        c. Family Dynamics
        d. Culture
        e. Spirituality
        f. Adherence
        g. Self-Management
    2. Mood, Cognition, and Maladaptive Behavior
        a. Stress and Coping
        b. Mood and Affect
        c. Anxiety
        d. Cognition
        e. Psychosis
        f. Addiction
        g. Interpersonal Violence and Trauma
4. Biophysical Concepts
    1. Homeostasis and Regulation
        a. Fluid and Electrolytes
        b. Acid-Base Balance
        c. Thermoregulation
        d. Rest and Sleep
        e. Cellular Regulation
        f. Intracranial Regulation
        g. Metabolism
        h. Hormonal Regulation
        i. Glucose Regulation
        j. Nutrition
        k. Digestion
        l. Elimination
        m. Perfusion
        n. Gas Exchange and Oxygenation

          o. Clotting
          p. Pharmacology
2. Reproduction and Sexuality
          a. Reproduction
          b. Sexuality
3. Protection and Movement
          a. Immunity
          b. Inflammation
          c. Infection
          d. Mobility
          e. Tissue Integrity
          f. Sensory Perception
          g. Comfort
          h. Pain

Concept Definitions and Exemplars

Professional Nursing Concepts	
Topic: Nursing Attributes and Roles	**Definition and Exemplars**
Professional Identity	Definition: A sense of oneself, and in relation to others, that is influenced by characteristics, norms, and values of the nursing discipline, resulting in an individual thinking, acting, and feeling like a nurse. Exemplars: Integrity, Compassion, Courage, Humility, Advocacy, Accountability, Human Flourishing
Clinical Judgment	Definition: An interpretation or conclusion about a patient's needs, concerns, or health problems, and/or the decision to act (or not), use or modify standard approaches, or improvise new ones as deemed appropriate by the patient's response. Exemplars: Clinical Skills, Priority Setting Frameworks, Nursing Process, Communication, Medication Management, Management of Care, and Nursing Leadership
Leadership	Definition: An interactive process that provides needed guidance and direction. Exemplars: Leadership Roles and Leadership Styles
Ethics	Definition: The study or examination of morality through a variety of different approaches. Exemplars: Beginning of Life, Lifespan, End of Life, Organizational, and Health Policy Ethics Genetic Enhancement, Confidentiality, Advanced Directives, Uncompensated Care, and Conflict of Interest
Teaching and Learning	Definition: Anything that provides patients and families with information that enables them to make informed choices about their care, health, and wellbeing, and that helps them gain knowledge and skills to participate in care or healthy living processes. Exemplars: Formal, Informal, and Self-Directed Health Promotion and Illness Prevention Education
Health Promotion and Illness Prevention	Definition: Health promotion is the process of enabling people to increase control over, and to improve their health. Exemplars: Primary, Secondary, and Tertiary Prevention Across the Lifespan: Vaccination, Oral Hygiene, Nutrition, Physical Activity, Blood Pressure Screening, Breast Cancer Screening, Colorectal Cancer Screening
Topic: Care Competencies	**Definition and Exemplars**
Communication	Definition: A process of interaction between people in which symbols are used to create, exchange, and interpret messages about ideas, emotions, and mind states. Exemplars: Assertive, Therapeutic, Intrapersonal, Interpersonal, Interprofessional, Handoff/Reporting, Documentation – Electronic Health Record
Collaboration	Definition: Development of partnerships to achieve best possible outcomes that reflect the needs of the patient, family, or community, requiring an understanding of what others have to offer. Exemplars: Nurse-Patient, Nurse-Nurse, Interprofessional, Interorganizational
Safety	Definition: Minimizing risk of harm to patients and providers through both system effectiveness and individual performance. Exemplars: Point of Care and Systems
Informatics	Definition: The science that encompasses information science and computer science to study the process, management, and retrieval of information. Exemplars: Clinical, Consumer Health, Bio-surveillance and Bio-informatics Tools
Evidence	Definition: An ongoing process by which evidence, nursing theory, and the practitioners' clinical expertise are critically evaluated and considered, in conjunction with patient involvement, to provide the delivery of optimum nursing care for the individual. Exemplars: Quantitative and Qualitative Research, Practice Guidelines, and Expert Opinion and Health Care Policies
Quality	Definition: The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge. Exemplars: Regulatory Agencies, Advisory Bodies, Quality Plans and Philosophies, Error Prevention Management, and Health Information Technology

Healthcare Delivery Concepts	
Topic: Healthcare Delivery	**Definition and Exemplars**
Population Health	Definition: Health outcomes of a defined group of people along with the distribution of health outcomes within the group. Exemplars: Prevention of accidents, suicides, and communicable disease; Immunizations; Infection Control in Hospital Settings; Substance Abuse Education and Prevention; Non-Communicable Disease Prevention; School-Wide Screenings and Vaccine Administration; Public Health Laws (seatbelts, care seats, helmets); Health Data Collection and Statistics; Health Planning and Administration.
Diversity	Definition: A broad range of individual, population, and social characteristics that substantially limits a major life activity; religious beliefs; and socioeconomic status. Exemplars: Age; Sex; Race; Ethnicity; Sexual Orientation; Gender Identity; Family Structures; Geographic Locations; National Origin; Immigrants and Refugees; Language; Any Impairment.
Equity	Definition: The ability to recognize the differences in resources or knowledge needed to allow individuals to fully participate in society. Exemplars: Access to Higher Education, With the Goal of Overcoming Obstacles to Ensure Fairness. In Equitable Systems, All People Should Be Treated Fairly, Unhampered by Artificial Barriers, Stereotypes, Or Prejudice.
Inclusion	Definition: Inclusion represents environmental and organizational cultures in which faculty, students, staff, and administrators with diverse characteristics thrive. Exemplars: An inclusive environment requires intentionality and embraced differences, not merely being tolerant of them. Everyone works to ensure the perspectives and experiences of others are invited, welcomed, acknowledged, and respected.
Health Disparities	Definition: Differences that occur by gender, race or ethnicity, education or income, disability, living in rural localities, or sexual orientation. Exemplars: Healthcare access and insurance coverage; cardiovascular disease; Obesity; Diabetes; Immunizations; Preventive care; Smoking; Safe neighborhood; Social support system; Mental health services; Early and adequate prenatal care; Preterm birth rates; Pregnancy-related mortality rate; Infant, fetal, and perinatal mortality; Pap smear screening; Invasive cervical cancer; Prostate cancer mortality; Intimate partner violence; Quality of palliative care; and Pain management.
Care Coordination	Definition: The deliberate synchronization of activities and information to improve health outcomes by ensuring that care recipients' and families' needs and preferences for healthcare and community services are met over time. Exemplars: High-Risk Pregnancy; Preterm Infants; Special Needs Children; Frail and Elderly; Transitional Care; Mental Illness and End-of-Life Care.
Caregiving	Definition: Caregiving is made up of actions one does on behalf of another individual who is unable to do those actions for himself or herself. Exemplars: Short-term Caregiving Needs; Long-term Caregiving Needs; and Mental Health Conditions.
Palliative Care	Definition: Palliative care means patient and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs and to facilitate patient autonomy, access to information, and choice. (Grief and Loss) Exemplars: Perinatal and Neonatal; Children and Adolescents; and Adults.
Topic: Healthcare Systems	**Definition and Exemplars**
Organizations	Definition: A purposefully designed, structured social system developed for the delivery of healthcare services by specialized workforces to defined communities, populations, or markets. Exemplars: Hospitals; Nursing Homes; Clinics and Ambulatory Care Facilities; Hospice; and Specialty Care Organizations
Economics	Definition: The study of supply and demand of resources and its effect on the allocation of healthcare resources in an economic system. Exemplars: Medicare; Medicaid; State Children's Health Insurance Program; Private Insurance Plans; Accountable Care Organizations; and Managed Care Organizations.

Policy	Definition: Goal-directed decision-making about health that is the result of an authorized, public decision-making process. Those actions, nonactions, directions, and/or guidance related to health that are decided by governments or other authorized entities. Exemplars: Federal; State; and Local
Law	Definition: The practice of law involving federal, state, or local law and rules or regulations regarding the delivery of healthcare services. In addition to healthcare provider issues and regulations of providers, health law includes legal issues regarding relationships between and among providers and payors. Exemplars: Federal Statutory Laws; Federal Regulations; State Statutory or Regulatory Laws; Torts; Contracts; and Criminal Liability.

Psychosocial Health Concepts	
Topic: Attributes and Roles	**Definition and Exemplars**
Development	Definition: The sequence of physical, psychosocial, and cognitive developmental changes that take place over the human life span. Exemplars: Physical/Physiological Developmental Delay/Disorder; Motoric Developmental Delay/Disorder; Social/Emotional Developmental Delay/Disorder; Cognitive Developmental Delay/Disorder; Speech and Communication Developmental Delay/Disorder.
Functional Ability	Definition: Cognitive, social, physical, and emotional ability to carry on the normal activities of daily living. Exemplars: Cerebral Palsy; Autism Spectrum Disorder; Alzheimer's Disease; Rheumatoid Arthritis; Parkinson's Disease; Fetal Alcohol Syndrome; Malnutrition; Chronic Pain; Chronic Fatigue; Blindness; Deafness; Multiple Sclerosis; Osteoarthritis; Schizophrenia; Spinal Cord Injury; Fractures; Cardiovascular Disease and Stroke.
Family Dynamics	Definition: Interrelationships between and among individual family members or the forces at work within a family that produce behaviors or symptoms. Exemplars: Changes in Family Dynamics; Positive Family Dynamics; Negative Family Dynamics.
Culture	Definition: Pattern of shared attitudes, beliefs, self-definitions, norms, roles, and values that can occur among those who speak a particular language or live in a defined geographical region. Exemplars: Health Care Practices/Beliefs; Family Roles; and Patient-Provider Communication.
Spirituality	Definition: Dynamic and intrinsic aspect of humanity through which people seek ultimate meaning, purpose, and transcendence and experience relationship to self, family, others, community, society, nature, and the significant or sacred. Spirituality is expressed through beliefs, values, traditions, and practices. Exemplars: Faith; Hope; Prayer; Sacraments; Mindfulness; Compassion; Meditation; Dietary Traditions
Adherence	Definition: Persistence in the practice and maintenance of desired health behaviors and is the result of active participation and agreement. Exemplars: Short- and Long-term Medication treatment; Diet; and Preventative Health Activities
Self-Management	Definition: Self-management is the ability of individuals and/or their caregivers to engage in the daily tasks required to maintain health and well-being or to respond to the changing physical, psychological, behavioral, and emotional sequelae of a chronic disease based on their knowledge of the condition, its consequences, and the plan of care developed in cooperation with their healthcare team within the context of the daily demands of life. Exemplars: Health Enhancement /Wellness; Predisease/Disease Prevention; Disease/New Diagnoses.
Topic: Mood, Cognition, and Maladaptive Behavior	**Definition and Exemplars**
Stress and Coping	Definition: A continual process that starts with an event that is experienced by the individual, perceived through intact information processing channels, appraised for scope and meaning, assessed as neutral, manageable, or threatening within current capacity of coping skills, resources, and abilities, ending ideally in a positive outcome of homeostasis and feeling of well-being. Exemplars: Acne; Anxiety Disorders; Autoimmune Disorders; Cardiac Arrhythmias; Coronary Artery Disease; Depression; Dysmenorrhea; Dyspepsia; Eating Disorders; Eczema; Erectile Dysfunction; Fibromyalgia; HTN; Immunodeficiency; Insomnia; IBS; Stroke; and Tension Headache.
Mood and Affect	Definition: The way a person feels, and the observable response a person has to his or her own feelings. Exemplars: Depressive Disorders and Manic Disorders

Anxiety	Definition: A subjectively distressful experience activated by the perception of threat, which has both a potential psychological and physiologic etiology and expression. Exemplars: Simple or Social Phobia; Panic Disorder; Generalized Anxiety Disorder; and OCD.
Cognition	Definition: The mental action or process of acquiring knowledge and understanding through thought, experience, and the senses. Exemplars: Neurocognitive Disorders; Cognitive Impairment – Non-Dementia; Focal Cognitive Disorders; Intellectual Disability; and Learning Disability.
Psychosis	Definition: A syndrome of neurocognitive symptoms that impairs cognitive capacity, leading to deficits of perception, functioning, and social relatedness. Exemplars: Schizophrenia; Major Depressive Disorder – Severe with Psychotic Features; Delirium; Major Neurocognitive Disorder; Substance/Medication-Induced Psychotic Disorder.
Addiction	Definition: A compulsive, abnormal dependence on a substance (such as alcohol, cocaine, opiates, or tobacco) or on a behavior (such as gambling, Internet, or pornography). The dependence typically has adverse psychological, physical, economic, social, or legal ramifications. Exemplars: Substance-Induced Disorders; Substance Use Disorders; and Behavioral Addictions.
Interpersonal Violence and Trauma	Definition: The intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in injury, death, psychologic harm, maldevelopment, or deprivation. Exemplars: Child Abuse and Neglect; Bullying; Professional Incivility; Intimate Partner Violence; and Elder Abuse and Neglect; Post Traumatic Stress Disorder

Biophysical Concepts	
Topic: Homeostasis and Regulation	Definition and Exemplars
Fluid and Electrolytes	Definition: Fluid and electrolyte balance refers to the body's maintaining of homeostasis of fluid volume and electrolytes by several mechanisms that facilitate fluid and electrolyte movement within the body, including organs and body systems, osmosis, diffusion, active transport, and capillary filtration. Exemplars: Acute and Chronic Renal Failure; Electrolyte Balance; Fluid Balance; Gastroenteritis. and Shock.
Acid-Base Balance	Definition: Acid-base refers to the balance of hydrogen and bicarbonate ions within the body (the acidity and alkalinity of body fluids). An arterial blood gas (ABG) analysis is used to determine blood pH, and homeostatic mechanisms regulate acid-base levels to keep the pH within a normal range. Acid-base imbalances occur when the pH of the blood falls outside the range 7.35 to 7.45. These imbalances can be respiratory or metabolic in origin. Managing acid-base balance is an important role of the nurse, especially in high-acuity settings. Exemplars: Acid-Base Balance; Respiratory and Metabolic Acidosis; and Respiratory and Metabolic Alkalosis
Thermoregulation	Definition: Thermoregulation is regulation of the body's temperature by cells in the hypothalamus in response to signals from thermal (heat and cold) receptors located close to the skin's surface. Stimulation of these receptors sends sensory messages to the anterior hypothalamus to initiate mechanisms to dissipate heat (through vasodilation and sweating) or to preserve warmth through vasoconstriction and piloerection ("goose bumps"). Exemplars: Fever; hyperthermia, hypothermia, multiple system failure, newborn thermoregulation; and parenteral nutrition.
Rest and Sleep	Definition: Natural, necessary, involves a shift in physiologic and neurologic activity, and is intended to be restorative. Exemplars: Insomnia; Narcolepsy; Jet Lag/Shift Work Sleep Disruptions; Sleep Disordered Breathing; and Sleep-Related Movement Disorders.
Cellular Regulation	Definition: Cellular regulation is the coordinated function of thousands of physiologic control systems within the body to maintain homeostasis under conditions of change in the internal and external environment. Exemplars: Anemia; Breast Cancer; Cancer; Cancer Survivorship; Colon Cancer; Leukemia. Lung Cancer; Prostate Cancer; Sickle Cell Anemia; and Skin Cancer
Intracranial Regulation	Definition: Intracranial regulation refers to compensatory mechanisms in the brain that operate to maintain pressure within the cranial cavity in a safe range (0 to 15 mm Hg). Reciprocal compensation occurs among the three intracranial compartments such that small increases in the volume of one component can be compensated for by a decrease in the volume of one or both other two components, as CSF and blood can shift, and brain tissue comply. Exemplars: Increased Intracranial Pressure; Seizures; and Traumatic Brain Injury

Metabolism	Definition: Energy metabolism refers to the chemical processes involved in converting carbohydrates, fats, and proteins from the foods we eat into the energy needed for cell functions Exemplars: Addison's Disease; Diabetes; Gestational Diabetes; Liver Disease; Obesity. Osteoporosis; Syndrome of Inappropriate Antidiuretic Hormone; and Thyroid Disease
Hormonal Regulation	Definition: Physiological mechanisms that regulate the secretion and action of hormones associated with the endocrine system. Exemplars: Disorders of the Thyroid, Parathyroid, Pancreas, Pituitary Gland, and Adrenal Gland.
Glucose Regulation	Definition: The process of maintaining optimal blood glucose levels Exemplars: Diabetes 1 and 2; Polycystic Ovary Syndrome; and Diabetic Ketoacidosis
Nutrition	Definition: Nutrition is the study of the nutrients and how they are handled by the body, as well as the impact of human behavior and environment on the process of nourishment. Exemplars: Blood glucose monitoring; eating disorders; enteral and parenteral nutrition. gastroesophageal reflux disease; infant nutrition; malnutrition; Nasogastric Tubes; and Nutritional Assessment
Digestion	Definition: Is the conversion of food into absorbable substances in the gastrointestinal tract. Exemplars: Hepatitis; Malabsorption Disorders; Pancreatitis; and Pyloric Stenosis
Elimination	Definition: Elimination is the removal of waste products from the body through the skin, lungs, kidneys, and intestines via the processes of perspiration, expiration, urination, and defecation. Exemplars: Benign Prostatic Hypertrophy, Bladder Incontinence and Retention; Bowel Incontinence; Constipation/Impaction; Irritable Bowel Disease; and Kidney Stones

Perfusion	Definition: Perfusion refers to the passage of oxygenated capillary blood through body tissues. Exemplars: Angina; Arteriosclerosis; Cardiomyopathy; Circulatory Assessment; Coronary Artery Disease; Deep Vein Thrombosis; Disseminated Intravascular Coagulation; Heart Failure; High Cholesterol; Hypertension; Life-Threatening Dysrhythmias; Multiple Organ Dysfunction Syndrome; Myocardial Infarction; Peripheral Vascular Disease; Pregnancy-Induced Hypertension. Pulmonary Embolism; Shock (Cardiogenic and Septic); Stoke; and Ventricular Septal Defect
Gas Exchange and Oxygenation	Definition: Oxygenation refers to the process of providing cells with oxygen through the respiratory system and is accomplished by pulmonary ventilation, respiration, and perfusion. Exemplars: Acute Respiratory Distress Syndrome; Asthma; Chronic Obstructive Pulmonary Disease; Cystic Fibrosis; Pneumothorax; Respiratory Assessment; Respiratory Syncytial Virus; and sudden infant death syndrome.
Clotting	Definition: Clotting is the process whereby platelets circulating in the bloodstream collect at the site of vascular injury, form a plug, activate coagulation factors in the blood plasma, and initiate the formation of a stable clot composed of fibrin to prevent excessive blood loss following trauma Exemplars: blood products; deep vein thrombosis; disseminated intravascular coagulation; HELLP Syndrome; and Hemophilia
Pharmacology	Definition: Pharmacology is the study of the biological effects of chemicals. Exemplars: Dosage Calculations; Management of Intravenous Therapy; and Medication Administration.
Topic: Reproduction and Sexuality	
Reproduction	Definition: Reproduction is the biological function of producing offspring and is essential for the survival of a species. It involves conception (the joining of the sperm from the male with the ovum from female), development of the fetus within the uterus, and birth. Exemplars: Antepartum Care/Prenatal Care; Assessment of the Pregnant Female; Intrapartum Care; Newborn Care; Placental Abruption; Placenta Previa; Postpartum Care; Postpartum Hemorrhage (PPH); Preeclampsia; Prematurity; and Rh Incompatibility
Sexuality	Definition: A critical component of human identity and well-being, sexuality involves how a person exhibits and experiences maleness or femaleness physically, emotionally, and mentally. Sexuality is defined not only by a person's genitalia and hormones but also by attitudes and feelings. It can also be defined as learned behaviors in how a person reacts to one's own sexuality and by how one behaves in relationships with others. Culture profoundly influences learned behaviors involving sexuality. Sexuality is an integral part of a person's identity and is present in one's demeanor through actions, communications, and physical appearance. Exemplars: Erectile Dysfunction; Family Planning and Preconception Care; Infertility Counseling; Menopause; Menstrual Dysfunction; and Sexually Transmitted Diseases

Topic: Protection and Movement	
Immunity	Definition: Immunity is the body's specific protective response to a foreign agent or organism Exemplars: Anaphylaxis; HIV/AIDS; Hypersensitivity; Immune Response; Lupus; Rheumatoid Arthritis; and Transplant Rejection
Inflammation	Definition: Inflammation is a complex nonspecific response to tissue injury intended to minimize the effects of injury or infection, remove the damaged tissue, generate new tissue, and facilitate healing Exemplars: Appendicitis; Bronchitis; Celiac Disease; Gallbladder Disease; GERD; Hepatitis. Inflammation Process; Inflammation Response; Inflammatory Bowel Disorders and Diseases; Nephritis; Pancreatitis; Peptic Ulcer Disease
Infection	Definition: Infection is the presence and multiplication of a microorganism within another living organism, with subsequent injury to the host Exemplars: Antibiotic resistant infection; cellulitis; conjunctivitis; influenza; meningitis; MRSA. nosocomial infection; otitis media; pneumonia; septicemia; tuberculosis; and UTI
Mobility	Definition: Mobility is the range of motion available at a joint or the ability of a person to move, in general. Mobility may be restricted owing to pain, paralysis, loss of muscle strength, systemic disease, an immobilizing device (e.g., cast, brace), or prescribed limits to promote healing. Assessment of mobility includes positioning, ability to move, muscle strength and tone, joint function, and the prescribed mobility limits. Exemplars: Back problems; fractures; hip fractures; mobility techniques; multiple sclerosis. osteoarthritis; Parkinson's Disease; Rang of Motion; and Spinal Cord Injuries
Tissue Integrity	Definition: Tissue integrity refers to the state of skin or other tissue when it is healthy and intact. When tissue is wounded, its normal integrity and continuity are disrupted and its function of protection is compromised, making it vulnerable to invasion by organisms. Exemplars: Skin Assessment; burns; cellulitis; contact dermatitis; pressure ulcers; psoriasis; tinea pedis; and wound healing
Sensory Perception	Definition: Sensory perception is the conscious process of selecting, organizing, and interpreting data from the senses into meaningful information. Perception is influenced by the intensity, size, change, or representation of stimuli, as well as by past experiences, knowledge, and attitudes. Exemplars: Cataracts; eye injuries; glaucoma; hearing impairment; macular degeneration; peripheral neuropathy; and visual impairment.
Comfort	Definition: Comfort is a person's sense of psychosocial, emotional, and physical well-being. Comfort care provided by nurses focuses on restoring this sense of well-being to the patient, particularly by relieving pain. Exemplars: End-of-Life Care; Fatigue; Fibromyalgia; Pain: Acute and Chronic; and Sleep-Rest Disorders.
Pain	Definition: An unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage. Exemplars: Somatic Pain; Visceral Pain; Neuropathic Pain; and Mixed Pain

Required Courses for the Major

Nursing majors must earn a minimum grade of B- in all required NU prefix courses. Transfer credit is not permitted for NU prefix courses.

Nursing Courses:

NU 1110 - Professional Nursing I Credits: 4
NU 1120 - Health Assessment I Credits: 4 (meets LAS5 Natural Science requirement.)
NU 1130 - Professional Nursing II Credits: 4
NU 1140 - Health Assessment II Credits: 4
NU 1150 - Cooperative Experience I Credits: 12
NU 2130 - Professional Nursing III Credits: 4
NU 2150 - Cooperative Experience II Credits: 12
NU 3120 - Evidence and Informatics Credits: 2
NU 3150 - Cooperative Experience III Credits: 12
NU 4110 - Systems-Based Practice in Healthcare Credits: 2
NU 4130 - Transition to Professional Practice Credits: 2
NU 4510 - Capstone Seminar & Clinical Immersion Credits: 8

Liberal Arts and Sciences:

LAS 1110 (LAS 1) - The Natural Environment - Understanding Our Place in the Natural World Credits: 4
LAS 1120 (LAS 2) - The Civic Environment - Democratic Values Credits: 4
LAS 2110 (LAS 3) - Creative Arts Credits: 4
PS 1110 - Introduction to Psychology Credits: 4 (meets LAS 4 requirement)
NU 1120 - Health Assessment I Credits: 4 (meets LAS 5 requirement)
LAS 2140 (LAS 6) - Humanities Credits: 4
LAS 3110 (LAS 7) - Global Perspectives Credits: 4
LAS Elective Credits: 4
BI 1020 - Foundations of Nutrition Credits: 4
BI 3210 - Microbiology Credits: 4
PS 1110 - Introduction to Psychology Credits: 4 (meets LAS4 Social Science requirement.)
PS 2160 - Life-Span Development Credits: 4
SO 1110 - Introduction to Sociology Credits: 4

Program Goals and Learning Outcomes:

Program Goals. Through the delivery of an integrative curriculum, this program's purpose is to assist the student-learner to:

1. Critically think, clinically reason, and apply scientific problem-solving methods to demonstrate clinical judgment in simple and complex healthcare situations.
2. Intervene therapeutically by combining knowledge, skills, and professional dispositions in a holistic, socially just, person-centered, ethical, and compassionate manner.
3. Provide safe, high-quality, cost-effective care; and translate and apply evidence at the point of care and throughout care systems.
4. Communicate effectively using verbal, non-verbal, written, informatics, and technology skills to foster healthy interprofessional partnerships throughout care systems.
5. Value diversity as a member of society, the profession, and care systems; and advocate and lobby for inclusive and equitable access to healthcare.
6. Comport themself as professionals and leaders within an individual practice setting, system, society, and the nursing profession.

Program Learning Outcomes. The goals mentioned above relate to the identified program and student learning outcomes, based on the Essentials documents (AACN 2008 and AACN, 2021) and Nurse of the Future Competencies (Sroczynski, 2016) measured through classroom assessment methods and clinical performance. As a result of the completion of the nursing program, the New England College nursing graduate can:

PLO1. Synthesize knowledge from nursing, the arts, humanities, and the natural, physical, and social sciences into professional nursing practice across the lifespan and care continuum. (AACN Essentials 2008: (I) Liberal Education for Baccalaureate Generalist Nursing Practice, (IX) Baccalaureate Generalist Nursing Practice; AACN 2021 Essentials: (1) Knowledge of Nursing Practice; NOF: Patient-Centered Care)

PLO2: Provide holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate nursing care across the lifespan and care continuum. (AACN 2008 Essentials: (IX) Baccalaureate Generalist Nursing Practice, AACN 2021 Essentials: (2) Person-Centered Care; NOF: Patient-Centered Care and Communication)

PLO3: Serve in partnerships to advocate for improving the health status of a defined population through health promotion, illness prevention, and emergency preparedness measures. (AACN 2008 Essentials: (VII) Clinical Prevention and Population Health; AACN 2021 Essentials: (3) Population Health; NOF: Teamwork and Collaboration)

PLO4: Use clinical expertise and the individual's preferences, experience, and values to identify, evaluate, and apply the best current evidence into clinical decision-making. (AACN 2008 Essentials: (III) Scholarship for Evidence-Based Practice; AACN 2021 Essentials: (4) Scholarship for the Nursing Discipline; NOF: Evidence-Based Practice)

PLO5: Apply quality improvement principles and contribute to a culture of patient, provider, and work environment safety. (AACN 2008 Essentials: (II) Basic Organizational and Systems Leadership for Quality Care and Patient Safety, (VI) Interprofessional Communication and Collaboration for Improving Patient Health Outcomes; AACN 2021 Essentials: (5) Quality and Safety; NOF: Quality Improvement and Safety)

PLO6: Engage in team-based, person-centered care partnerships across the care continuum to optimize care, enhance the healthcare experience, and strengthen outcomes. (AACN 2008 Essentials: (VI) Interprofessional Communication and Collaboration for Improving Patient Health Outcomes; AACN 2021 Essentials: (6) Interprofessional Partnerships; NOF: Teamwork and Collaboration)

PLO7: Effectively and proactively coordinates unit-based human and fiscal resources to provide safe, quality, and equitable care across the lifespan and care continuum. (AACN 2008 Essentials: (II) Basic Organizational and Systems Leadership for Quality Care and Patient Safety, (V) Health Care Policy, Finance, and Regulatory Environments; AACN 2021 Essentials: (7) Systems-Based Practice; NOF: Systems-Based Practice, Leadership)

PLO8: Use information and technology to analyze and synthesize information to manage and improve the provision of safe, high-quality, and efficient care across the lifespan and care continuum. (AACN 2008 Essentials: (IV) Information Management and Application of Patient Care Technologies; AACN 2021 Essentials: (8) Informatics and Healthcare Technologies; NOF: Informatics and Technology, Communication)

PLO9: Demonstrate accountability for providing standard-based nursing care across the lifespan and care continuum, consistent with ethical, moral, altruistic, legal, regulatory, and humanistic ideologies. (AACN 2008 Essentials: (VIII) Professionalism and Professional Values; AACN 2021 Essentials: (9) Professionalism; NOF: Professionalism)

PLO10: Model personal health behaviors, demonstrate professional curiosity, and advocate for individuals across the lifespan and care continuum. (AACN 2008 Essentials: (II) Basic Organizational and Systems Leadership for Quality Care and Patient Safety, (VIII) Professionalism and Professional Values; AACN 2021 Essentials: (10) Personal, Professional, and Leadership Development; NOF: Professionalism, Leadership.

Course Descriptions, Learning Outcomes, and Hours FA24

NU 1110 Professional Nursing I: This course is the initial course in a two-part foundational nursing sequence designed to provide students with a comprehensive introduction to essential nursing knowledge. Students will learn the historical and theoretical underpinnings of the nursing profession. Key focus areas include professional nursing concepts that explore nursing attributes and roles. Students will begin to develop critical competencies in patient-centered care, including effective communication, collaboration, quality and safety practices, informatics, and evidence-based practice. Furthermore, this course introduces fundamental healthcare concepts, introducing students to diversity, equity, and inclusion in healthcare delivery and systems. It serves as a foundational step in comprehending the complex landscape of healthcare. In addition to these elements, the course introduces psychosocial concepts integral to nursing practice. Students will explore the significance of culture and spirituality in healthcare, recognizing their role in shaping patient experiences and care outcomes. Professional Nursing I serves as the cornerstone of the nursing program, preparing students with a deep understanding of nursing as a profession and providing them with the essential knowledge needed to embark on their nursing career. *4-credits. ATI Fee.

- 4-credits x 15 contact hours = 60 hours per semester, or 4 hours per week theory

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Demonstrate an understanding of the historical and theoretical foundations that shape nursing's unique approach to healthcare practice.
CSLO2: Define and explain person-centered nursing care.
CSLO3: Describe the nursing role in promoting health and preventing illness across the lifespan.
CSLO4: Explain the significance of considering individual preferences, experiences, and values in evidence-based clinical decision-making.
CSLO5: Define and articulate the concepts of quality improvement and safety in healthcare, including their impact on patients, providers, and work environments.
CSLO6: Identify and describe the roles of diverse healthcare team members throughout the continuum of care.
CSLO7: Define and explain the concept of system-based practice in healthcare.
CSLO8: Explain the importance of information and technology skills in facilitating effective communication within the healthcare setting.
CSLO9: Define professionalism and articulate the development of a professional identity within the nursing profession.
CSLO10: Identify essential leadership skills required of professional nurses and self-reflect on personal health behaviors.

NU 1120 Health Assessment I: This course is the first of two foundational health assessment courses that provide students with comprehensive instruction in the human body's organization, structures, and functions. Students will learn medical terminology, anatomy and physiology, and health assessment of each body system and how they interrelate to maintain homeostasis and regulation across the lifespan. This course is required for all nursing majors. *4 credits.

- 4-credits x 15 contact hours = 60 contact hours per semester, or 4 hours per week theory

Course Student Learning Outcomes: At the end of this course (I), students will be able to:

CSLO1: Summarize foundational knowledge of human anatomy and physiology and demonstrate beginner proficiency in health assessment techniques across the lifespan.
CSLO2: Explain the significance of conducting holistic, individualized, and evidence-based health assessments that respect cultural and developmental factors across the lifespan.
CSLO3: Demonstrate an understanding of infection control measures and the correct utilization of personal protective equipment in health assessment.
CSLO4: Describe how applying one's knowledge of normal anatomy and physiology to health assessment may impact patient outcomes.
CSLO5: Define and advocate for a culture of quality and safety in health assessment practices.
CSLO6: Summarize the critical importance of professional, accurate, and timely communication skills in nursing, particularly during health assessments.
CSLO7: Explain and apply a systematic approach to conducting comprehensive health assessments.
CSLO8: Evaluate the impact of information and communication technology tools on the accuracy and efficiency of health assessments and their implications for patient outcomes.
CSLO9: Reflect on personal actions during health assessments and analyze the potential consequences, emphasizing ethical and professional considerations.
CSLO10: Engage in self-reflection regarding personal health behaviors and identify opportunities for improvement and modification to promote a healthier lifestyle.

NU 1130 Professional Nursing II: This course is the second of two foundational nursing courses building on the knowledge and concepts introduced in Professional Nursing I and Health Assessment I and introduces the student to additional psychosocial concepts, including adherence, cognition, development, family, functional ability, grief and loss, and self-management. Additionally, this course introduces students to the biophysical concepts of protection/movement and homeostasis/regulation. Protection and movement concepts include comfort, immunity, infection, inflammation, mobility, pain, sensory perception, and tissue integrity. Homeostasis and regulation concepts include acid-base balance, digestion, elimination, fluid and electrolyte balance, gas exchange/oxygenation, metabolism, nutrition, and perfusion. Pre-requisite - Professional Nursing I. *4 credits. ATI Fee.

- 4-credits x 15 contact hours = 60 contact hours per semester, or 4 hours per week theory

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Demonstrate an understanding of how nursing integrates with the arts, humanities, natural sciences, physical sciences, and social sciences to enhance professional nursing practice.
CSLO2: Apply nursing skills to deliver person-centered care across the lifespan and care continuum, considering individual preferences, experiences, and values.
CSLO3: Articulate the nursing role in health promotion and illness prevention across the lifespan and care continuum, emphasizing proactive measures.
CSLO4: Incorporate individual preferences, experiences, and values into evidence-based clinical decision-making across the lifespan and care continuum.
CSLO5: Explain the quality improvement principles and their impact on patient, provider, and work environment safety throughout the lifespan and care continuum.
CSLO6: Differentiate the unique role of nurses from other healthcare professions within healthcare teams across the care continuum.
CSLO7: Describe how providing safe and equitable nursing care influences the healthcare delivery system.
CSLO8: Illustrate the utilization of information and technology in healthcare across the lifespan and care continuum to enhance patient outcomes.
CSLO9: Summarize the ethical, moral, altruistic, legal, regulatory, and humanistic qualities and attributes expected of professional nurses.
CSLO10: Identify personal health behaviors that may be detrimental and propose strategies for modification to promote overall well-being.

NU 1140 Health Assessment for Nursing II: This course is the second of two foundational health assessment courses that provide students with comprehensive instruction on the pathology related to the human body's organization, structures, and functions. Students will review medical terminology, normal anatomy and physiology, and health assessment of each body system and learn how pathology impacts homeostasis across the lifespan. Students will demonstrate health assessment skills in the nursing lab. This course is required for all nursing majors. Prerequisite: NU 1120 - Health Assessment I *4 credits.

- 4-credit x 15 contact hours = 60 hours per semester, 4 hours per week of skills lab practice

Course Student Learning Outcomes: At the end of this course (II), students will be able to:

CSLO1: Apply anatomy, physiology, and health assessment knowledge to make informed clinical judgments.
CSLO2: Utilize anatomy, physiology, and health assessment knowledge to differentiate between normal and abnormal health assessment findings.
CSLO3: Demonstrate competence in implementing infection control measures and utilizing personal protective equipment correctly during health assessments.
CSLO4: Explain the importance of considering an individual's preferences, experiences, and values in evidence-based clinical decision-making.
CSLO5: Summarize the principles of a culture of quality and safety as they pertain to health assessment skills.
CSLO6: Demonstrate professional, accurate, and timely communication skills when communicating health assessment information.
CSLO7: Exhibit proficiency in employing a systematic approach to conducting comprehensive health assessments.
CSLO8: Explain the role of information and communication technology tools in enhancing patient and team communication during health assessments.
CSLO9: Engage in reflective practice to analyze personal actions during health assessments and consider their consequences, emphasizing ethical and professional considerations.
CSLO10: Exhibit a spirit of inquiry that promotes adaptability and professional growth in the context of health assessments.

NU 1150 Cooperative Experience I: In the first of three Cooperative Learning Experiences, students learn to integrate and apply core knowledge from the liberal arts and sciences with foundational nursing knowledge, skills, and professional behaviors as the basis for providing safe, quality, and patient-centered care for diverse populations across the lifespan and care continuum. By introducing concept exemplars, this course scaffolds pathophysiology, pharmacology, and clinical practice over the knowledge, skills, and behaviors learned in the first two Professional Nursing and Health Assessment course sequences. Comprehensive concept presentation units focus on the biophysical concepts of acid-base balance, fluid and electrolytes, gas exchange/oxygenation, perfusion, and elimination. Learning experiences include classroom theory, RN student patient care management experiences, and employment as an LNA at one of our cooperative partner organizations. Prerequisites: NU 1130 - Professional Nursing II & NU 1140 - Health Assessment II *12 credits. ATI Fee.

- 12-credit Cooperative Education
  - 168 hours (unpaid RN clinical education hours)
  - 336 hours (paid LNA work hours)
  - 60 hours (theoretical hours)

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Apply foundational knowledge from nursing, the liberal arts, sciences, and humanities to initiate professional nursing practice for diverse populations across the lifespan and care continuum.
CSLO2: Demonstrate the principles of person-centered nursing care for diverse populations, ensuring a holistic and patient-centered approach.
CSLO3: Advocate for enhancing health and well-being across the lifespan and care continuum by implementing health promotion and illness prevention measures.
CSLO4: Utilize theoretical nursing knowledge, individual preferences, experiences, and values to inform evidence-based clinical decisions for populations across the lifespan and care continuum.
CSLO5: Apply theoretical knowledge of quality improvement, patient safety, and a safe work environment in nursing practice for populations across the lifespan and care continuum.
CSLO6: Engage collaboratively in team-based, person-centered care partnerships to optimize patient care, enhance healthcare experiences, and improve outcomes across the care continuum.
CSLO7: Describe how human and fiscal resources within healthcare units are related to safe, high-quality, and equitable care for diverse populations across the lifespan and care continuum.
CSLO8: Utilize information and technology effectively for communication and outcome improvement in healthcare settings, addressing the needs of populations across the lifespan and care continuum.
CSLO9: Demonstrate personal accountability for delivering standard-based nursing care while upholding ethical, moral, altruistic, legal, regulatory, and humanistic principles.
CSLO10: Begin to advocate for diverse populations across the lifespan and care continuum.

NU 2130 Professional Nursing III: In this course, students learn to integrate and apply core knowledge from the liberal arts and sciences with foundational nursing knowledge, skills, and professional behaviors as the basis for providing safe, quality, and patient-centered care for populations across the lifespan and care continuum. By introducing concept exemplars, this course scaffolds pathophysiology, pharmacology, and clinical practice over the knowledge, skills, and behaviors learned in the first two Professional Nursing and Health Assessment course sequences and Cooperative Experience I. Comprehensive concept presentation units focus on the biophysical concepts of cellular regulation, clotting, metabolism, hormone regulation, and glucose regulation. Prerequisite: NU 1150 - Cooperative Experience I *4 credits. ATI Fee.

- 4 credits x 15 contact hours = 60 hours per semester, 4 hours per week of theory

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Demonstrate an understanding of how nursing integrates with the arts, humanities, natural sciences, physical sciences, and social sciences to enhance professional nursing practice.
CSLO2: Apply nursing skills to deliver person-centered care across the lifespan and care continuum, considering individual preferences, experiences, and values.
CSLO3: Articulate the nursing role in health promotion and illness prevention across the lifespan and care continuum, emphasizing proactive measures.
CSLO4: Incorporate individual preferences, experiences, and values into evidence-based clinical decision-making across the lifespan and care continuum.
CSLO5: Explain the quality improvement principles and their impact on patient, provider, and work environment safety throughout the lifespan and care continuum.
CSLO6: Differentiate the unique role of nurses from other healthcare professions within healthcare teams across the care continuum.
CSLO7: Describe how providing safe and equitable nursing care influences the healthcare delivery system.
CSLO8: Illustrate the utilization of information and technology in healthcare across the lifespan and care continuum to enhance patient outcomes.
CSLO9: Summarize the ethical, moral, altruistic, legal, regulatory, and humanistic qualities and attributes expected of professional nurses.
CSLO10: Identify personal health behaviors that may be detrimental and propose strategies for modification to promote overall well-being.

NU2150 Cooperative Experience II: In the second of three Cooperative Learning Experiences, students integrate and apply core knowledge from the liberal arts and sciences with intermediate nursing knowledge, skills, and professional behaviors as the basis for providing safe, quality, and patient-centered care for diverse populations across the lifespan and care continuum. By introducing concept exemplars, this course scaffolds pathophysiology, pharmacology, and clinical practice over the knowledge, skills, and behaviors learned in the Professional Nursing and Health Assessment course sequences and Cooperative Experience I. Comprehensive concept presentation units focus on the healthcare concepts of population health, care coordination, social determinants of health, and diversity, equity, and inclusion. Students learn additional psychosocial concepts related to mood, cognition, and maladaptive behaviors through a population health lens. Learning experiences include classroom theory, RN student patient care management experiences, and employment as an LNA at one of our cooperative partner organizations. Prerequisite: NU 2130 - Professional Nursing III 12 credits. ATI Fee.

- 12-credit Cooperative Education = 540 hours
  - 168 hours (unpaid RN clinical education hours)
  - 336 hours (paid LNA work hours)
  - 60 hours (theoretical hours)

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Apply intermediate knowledge from nursing, the liberal arts, sciences, and humanities to initiate professional nursing practice for diverse populations across the lifespan and care continuum.
CSLO2: Demonstrate the principles of person-centered nursing care for diverse populations, ensuring a holistic and patient-centered approach.
CSLO3: Advocate for enhancing health and well-being across the lifespan and care continuum by implementing health promotion and illness prevention measures.
CSLO4: Utilize theoretical nursing knowledge, individual preferences, experiences, and values to inform evidence-based clinical decisions for diverse populations across the lifespan and care continuum.
CSLO5: Apply theoretical knowledge of quality improvement, patient safety, and a safe work environment in nursing practice for diverse populations across the lifespan and care continuum.
CSLO6: Engage collaboratively in team-based, person-centered care partnerships to optimize patient care, enhance healthcare experiences, and improve outcomes across the care continuum.
CSLO7: Begin to effectively coordinate human and fiscal resources within healthcare units to provide safe, high-quality, and equitable care for diverse populations across the lifespan and care continuum.
CSLO8: Utilize information and technology effectively for communication and outcome improvement in healthcare settings, addressing the needs of diverse populations across the lifespan and care continuum.
CSLO9: Demonstrate personal accountability for delivering standard-based nursing care while upholding ethical, moral, altruistic, legal, regulatory, and humanistic principles.
CSLO10: Advocate for diverse populations across the lifespan and care continuum.

NU 3150 Cooperative Experience III: In the final of three Cooperative Learning Experiences, students integrate and apply core knowledge from the liberal arts and sciences with advanced intermediate nursing knowledge, skills, and professional behaviors as the basis for providing safe, quality, and patient-centered care for populations across the lifespan and care continuum. By introducing concept exemplars, this course scaffolds pathophysiology, pharmacology, and clinical practice over the knowledge, skills, and behaviors learned in the Professional Nursing and Health Assessment course sequences and Cooperative Experiences I and II. Comprehensive concept presentation units focus on biophysical concept exemplars for the pediatric (including newborn care) and women's health (including ante-, intra-, and post-partum care) populations across the care continuum. Learning experiences include classroom theory, RN student patient care management experiences, and employment as an LNA at one of our cooperative partner organizations. Prerequisite: NU 2150 - Cooperative Experience II. *12 credits. ATI Fee.

- 12-credit Cooperative Education = 540 hours
  - 168 hours (unpaid RN clinical education hours)
  - 336 hours (paid LNA work hours)
  - 60 hours (theoretical hours)

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Apply advanced intermediate knowledge from nursing, the liberal arts, sciences, and humanities to initiate professional nursing practice for diverse populations across the lifespan and care continuum, demonstrating a comprehensive understanding of healthcare complexities and interdisciplinary collaboration.
CSLO2: Demonstrate the principles of person-centered nursing care, ensuring a holistic and culturally sensitive approach while adapting to changing patient needs in pediatric and women's health populations.
CSLO3: Advocate for enhancing pediatric and women's health and well-being across the care continuum by implementing health promotion and illness prevention measures.
CSLO4: Utilize advanced intermediate theoretical nursing knowledge, individual preferences, experiences, and values to inform evidence-based clinical decisions for pediatric and women's health across the care continuum.
CSLO5: Apply theoretical knowledge of quality improvement, patient safety, and a safe work environment in nursing practice for diverse populations across the lifespan and care continuum.
CSLO6: Engage collaboratively in team-based, person-centered care partnerships to optimize patient care, enhance healthcare experiences, and improve outcomes across the care continuum.
CSLO7: Reflect on a healthcare unit's available resources and their influence on safe, high-quality, and equitable care for the pediatric and women's health populations across the care continuum.
CSLO8: Utilize information and technology effectively for communication and outcome improvement in healthcare settings, addressing the needs of pediatric and women's health populations across the lifespan and care continuum.
CSLO9: Demonstrate personal accountability for delivering standard-based nursing care while upholding ethical, moral, altruistic, legal, regulatory, and humanistic principles.
CSLO10: Advocate for pediatric and women's health populations across the lifespan and care continuum.

NU 3120 Evidence and Informatics: This course introduces nursing informatics as an integration of nursing, computer, and information sciences. Students will use technology to integrate evidence-based practice and informatics, examining the essential elements of the research process and models for applying evidence in clinical practice to support nursing care quality standards and fostering analytical thinking that reduces risk. Designed to spark the student's spirit of inquiry, students will begin to transform research into practice by identifying a gap in nursing practice, developing a clinical question, conducting a literature review, appraising the literature, and disseminating new evidence. Prerequisite: NU 1150 - Cooperative Experience I * 2 theory credits

- 2 credits x 15 contact hours = 30 contact hours per semester, or 2 hours per week (online)

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Apply knowledge from nursing, the arts, humanities, and the natural, physical, and social sciences into an evidence-based practice project.
CSLO2: Critically appraise and utilize evidence to enhance person-centered nursing care.
CSLO3: Compare and contrast health promotion and illness prevention measures used to improve the health status of populations.
CSLO4: Evaluate and apply the most relevant quantitative and qualitative evidence, considering individual preferences, experiences, and values, to drive meaningful practice changes.
CSLO5: Assess evidence-based technologies for quality improvement and patient safety.
CSLO6: Analyze the impact of collaborative, team-based partnerships on patient care, healthcare experiences, and outcomes.
CSLO7: Evaluate the influence of human and fiscal resources on the delivery of safe, high-quality, and equitable healthcare.
CSLO8: Describe how information, communication technologies, and informatics processes are used to deliver care, collect data, and inform decision-making.
CSLO9: Appraise nursing literature that aligns with nursing characteristics and values, emphasizing evidence-based practice.
CSLO10: Demonstrate a spirit of inquiry that fosters adaptability and professional maturity.

NU 4110 Systems-Based Practice: This 7-week course builds upon and extends the principles of system-based practice, interprofessional competencies, and evidence-based practice, providing a comprehensive understanding of the intricate legal, ethical, regulatory, economic, and political dynamics shaping organizational behavior, leadership-followership, and management within the healthcare landscape. Students will explore critical topics such as leadership, management, organizational communication, ethical and legal considerations, delegation, and prioritization, preparing them for advanced roles in nursing practice. Prerequisites: NU 3120 - Evidence and Informatics & NU 3150 - Cooperative Experience III *2 theory credits.

- 2 credits x 15 contact hours = 30 contact hours per semester, or 2 hours per week (hybrid)

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Leverage a broad knowledge base from nursing and the liberal arts to cultivate an advanced understanding of a system-based approach to nursing leadership.
CSLO2: Analyze effective care coordination strategies that enhance person-centered care delivery.
CSLO3: Champion initiatives aimed at improving the health status of diverse populations through health policy advocacy.
CSLO4: Engage in scholarly inquiry as an effective team member, contributing to advancing nursing practice.
CSLO5: Develop a comprehensive plan for initiating and executing a quality improvement change project.
CSLO6: Collaborate with an interprofessional team to improve quality and safety.
CSLO7: Simulate the management of human and fiscal resources to ensure the delivery of safe, high-quality, and equitable care to diverse populations.
CSLO8: Analyze and synthesize data to manage and improve the provision of safe, high-quality, and efficient care for diverse populations.
CSLO9: Demonstrate accountability for delivering standard-based nursing care across the lifespan and care continuum, guided by ethical, moral, altruistic, legal, regulatory, and humanistic principles.
CSLO10: Model leadership behaviors that foster professional curiosity and advocate for ongoing improvements in healthcare quality and safety.

NU 4130 Transitions to Professional Nursing Practice: This 7-week seminar provides opportunities to explore current healthcare and professional nursing practice issues to support student transition into the professional workplace. Students will create a professional curriculum vitae, prepare for job interviews, and be guided through preparation for professional licensure and registration for the NCLEX-RN. Prerequisite: NU 3150 - Cooperative Experience III Co-requisites: NU 4110 - Systems-Based Practice in Healthcare & NU 4510 - Capstone Seminar & Clinical Immersion *2 theory credits.

- 2 credits x 15 contact hours = 30 contact hours per semester, or 2 hours per week (hybrid)

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Synthesize knowledge from nursing, the arts, humanities, and the natural, physical, and social sciences into professional nursing practice across the lifespan and care continuum.
CSLO2: Provide holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate nursing care across the lifespan and care continuum.
CSLO3: Serve in partnerships to advocate for improving the health status of a defined population through health promotion, illness prevention, and emergency preparedness measures.
CSLO4: Competently apply theoretical and clinical knowledge, considering the individual's preferences, experiences, and values, to identify, evaluate, and apply the best current evidence to clinical decision-making.
CSLO5: Apply quality improvement principles and contribute to a safety culture of patient, provider, and work environment.
CSLO6: Engage in team-based, person-centered care partnerships across the care continuum to optimize care, enhance the healthcare experience, and strengthen outcomes.
CSLO7: Effectively and proactively coordinates unit-based human and fiscal resources to provide safe, quality, and equitable care across the lifespan and care continuum.
CSLO8: Use information and technology to analyze and synthesize information to manage and improve the provision of safe, high-quality, and efficient care across the lifespan and care continuum.
CSLO9: Demonstrate accountability for providing standard-based nursing care across the lifespan and care continuum, consistent with ethical, moral, altruistic, legal, regulatory, and humanistic ideologies.
CSLO10: Model personal health behaviors, demonstrate professional curiosity, and advocate for individuals across the lifespan and care continuum.

NU 4510 Capstone Seminar and Clinical Immersion: This 14-week hybrid course is the summative evaluation of the theory and clinical program learning outcomes through ongoing adaptive assessments and synthesis of program concepts and a 180-hour clinical immersion. Prerequisite: NU 3150 - Cooperative Experience III Co-requisites: NU 4110 - Systems-Based Practice in Healthcare & NU 4130 - Transition to Professional Practice *8 credits. ATI Fee.

- 4-credits theory = 180 hours over the first 7-weeks
    - 40 hours for the ATI Live Review (in-person in week 1)
    - 70 hours ATI Capstone (online; first 7-weeks)
    - 70 hours Virtual ATI (online; second 7-weeks)
- 4-credit externship = 180 hours over the second 7-weeks, or 26 hours per week
    - 40 hours of indirect care (at the hospital)
    - 140 hours of direct care in a capstone placement (at the hospital)

Course Student Learning Outcomes: At the end of this course, students will be able to:

CSLO1: Synthesize knowledge from nursing, the arts, humanities, and the natural, physical, and social sciences into professional nursing practice across the lifespan and care continuum.
CSLO2: Provide holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate nursing care across the lifespan and care continuum.
CSLO3: Serve in partnerships to advocate for improving the health status of a defined population through health promotion, illness prevention, and emergency preparedness measures.
CSLO4: Competently apply theoretical and clinical knowledge, considering the individual's preferences, experiences, and values, to identify, evaluate, and apply the best current evidence to clinical decision-making.
CSLO5: Apply quality improvement principles and contribute to a safety culture of patient, provider, and work environment.
CSLO6: Engage in team-based, person-centered care partnerships across the care continuum to optimize care, enhance the healthcare experience, and strengthen outcomes.
CSLO7: Effectively and proactively coordinates unit-based human and fiscal resources to provide safe, quality, and equitable care across the lifespan and care continuum.
CSLO8: Use information and technology to analyze and synthesize information to manage and improve the provision of safe, high-quality, and efficient care across the lifespan and care continuum.
CSLO9: Demonstrate accountability for providing standard-based nursing care across the lifespan and care continuum, consistent with ethical, moral, altruistic, legal, regulatory, and humanistic ideologies.
CSLO10: Model personal health behaviors, demonstrate professional curiosity, and advocate for individuals across the lifespan and care continuum.

Program totals:

Theory Instruction	Direct Care	Simulation/Lab	LNA Hours
690	684	60	1008

Total instruction hours = approximately 1,434 hours

Total LNA hours = 1008 hours

<div align="center">**NEC Nursing Bylaws**</div>

Shared Governance Committee

The Shared Governance Committee (SGC) comprises all full-time nursing faculty and the Dean of Nursing and Health Professions, who hold voting rights. Adjunct nursing faculty can attend meetings as non-voting guests. Student representatives, appointed by a process determined by the Student Nurses Association, from each nursing cohort will be invited to present as appropriate at the beginning of each meeting to report and communicate aggregate student requests and concerns for consideration. Meetings occur at least monthly, with the Dean's authority for time-sensitive matters. Detailed minutes are kept by the administrative assistant and approved by voting members of the SGC.

Purpose

The SGC's key roles are to:

- Approve and implement nursing degree program curricula.
- Approve and implement academic policies, processes, and procedures.
- Approve and implement the admission, progression, retention, and graduation standards.
- Advise the Dean on matters affecting faculty, students, and program.
- Provide faculty and student input on faculty and student policies of concern.
- Consider Nursing Advisory Council Recommendations.
- Review and approve nursing student affairs committee and curriculum committee actions.

The SGC ensures collaborative, transparent decision-making for the NEC Nursing program.

Membership

Membership in the committee is open to all full-time and visiting nursing faculty members and the Dean. Part-time faculty members are invited to attend as advisory guests.

Voting Privileges

All full-time and visiting nursing faculty members and the Dean have voting privileges. Adjunct faculty and students are non-voting guests.

Outcome

To ensure effective and collaborative decision-making within the NEC Nursing program.

Meeting Schedule

Meetings are convened at least once a month or more frequently as necessitated by committee responsibilities.

Student Affairs Committee

The Student Affairs Committee (SAC) is responsible for developing, overseeing, and evaluating the program admission criteria, academic policies, and student progression standards for the nursing program. This dedicated committee collaborates closely with the college admissions team to guide program admission requirements, and it plays a pivotal role in assessing the suitability of prospective students whose admission eligibility is under scrutiny. Furthermore, the SAC reviews student petitions and renders decisions on dismissals, appeals, and re-entry, all in alignment with the academic policies of the program and the college. The SAC conducts a comprehensive annual review of admission, academic, and progression policies to ensure they remain pertinent and effective. Admissions provide invaluable support to facilitate the SAC's work. Detailed minutes are kept by the administrative assistant and approved by voting members.

Purpose

The primary objectives of the Student Affairs Committee are as follows:

- To uphold the integrity of admission standards.
- To determine the admission status of students.
- To continuously assess and refine admission and progression standards and related published information.
- To review and enhance relevant student policies and related published materials.
- To ensure a comprehensive and precise evaluation of student progression.
- To decide on probation, dismissal, appeals, and readmission of individual students per the academic policies of the program and college.

Decisions made by the SAC may be appealed to the Dean solely on procedural grounds.

Membership

The Committee comprises at least three full-time faculty members. A Chair is appointed every two years.

Voting Privileges

All members of the Committee hold voting privileges.

Outcome

The SAC's work closely monitors student admission and progression within the nursing program.

Meeting Schedule

The SAC convenes at the commencement and conclusion of each semester and schedules additional meetings as necessary to address pertinent matters.

Undergraduate Curriculum and Evaluation Committee

The Undergraduate Curriculum and Evaluation Committee (UGC&EC) is responsible for developing and reviewing the undergraduate pre-licensure curriculum and overseeing and evaluating individual and aggregate pre-licensure program outcomes. This committee brings recommendations to the Shared Governance Committee for approval and/or action. Once approved, curricular changes are submitted to the General Education Committee (if required), the college curriculum committee, and the full faculty for final approval. Detailed minutes are kept by the administrative assistant and approved by voting members.

Purpose

The primary objectives of the UGC&EC are as follows:

- To ensure alignment of the program's mission, vision, faculty beliefs, goals, and outcomes with those of the college.
- To ensure that the program's mission, vision, faculty beliefs, goals, and outcomes reflect pertinent professional standards and guidelines.
- To develop, implement, and refine the curriculum.
- To scrutinize courses and proposed course changes to safeguard curriculum integrity and uphold expected student learning outcomes.
- To guarantee that teaching-learning environments facilitate the attainment of student outcomes.
- To review all faculty submissions for course alterations/modifications and act on those requests.
- To maintain an up-to-date and relevant systematic plan for program evaluation.
- To revisit the systematic plan for program evaluation at least every three years.
- To gather information on student alumni and employer satisfaction and the demonstrated achievements of graduates.
- To analyze aggregate student outcomes and compare them to anticipated student outcomes.
- To utilize aggregate student outcome data to encourage continuous program improvement.

Membership

Membership in the committee is open to all full-time and visiting faculty members, and part-time faculty members are invited to attend as their availability permits. The Dean is an ex-officio member, and the Chair is appointed every two years.

Voting Privileges

All members of the committee have voting privileges.

Outcome

The Nursing Curriculum and Evaluation Committee is pivotal in periodically evaluating curriculum and teaching-learning practices, fostering ongoing improvements.

Meeting Schedule

The SAC convenes at the commencement and conclusion of each semester and schedules additional meetings as necessary to address pertinent matters.

Section II:

NEC Nursing Faculty Structures, Resources, & Information

Academic Accommodations

New England College values diversity and inclusion; we are committed to fostering mutual respect and full participation. Our goal is to create learning environments that are usable, equitable, inclusive, and welcoming. If there are aspects of the instruction or design of this course that result in barriers to your inclusion or accurate assessment, please notify the instructor as soon as possible. Students are encouraged to contact the Office of Disability Services as soon as possible to discuss a range of options for removing barriers in the course, including reasonable accommodations.

Students requiring disability-related accommodations are expected to request accommodations through the accommodations management system each term and briefly meet with the Office of Disability Services to review and finalize course-specific accommodations. ODS electronically distributes notices of accommodations, and students discuss their accommodation needs with their instructor early in the course. The student and instructor will discuss implementing the accommodations and address the course's accessibility. The Office of Disability Services is available to faculty and students with any accommodation questions or accessibility and disability-related concerns.

For students who have not previously worked with the Office of Disability Services but who believe they need accommodations, please contact the office via email at disabilityservices@nec.edu or make an appointment.

Academic Honor Principle

As a community at New England College, we embrace the academic honors principle: honesty, trust, and integrity.

Honesty is being true to oneself and others, engendering a culture of trust.
Trust builds mutual respect, fostering a disposition of responsibility and civility.
Integrity denotes inner strength of character: doing what is right and avoiding what is wrong.
As members of the NEC Community, we accept these values as fundamental guides to our actions, decisions, and behavior. Please see the Academic Catalog for further details on procedures and sanctions in minor and major cases of academic dishonesty.

Need Help?

There are numerous support services available to NEC students. Tutors, mentors, coaches, advisors, faculty, associate deans, and wellness are just a few resources we must help you succeed. Please do not hesitate to contact your faculty member, the associate dean of your division, or your advisor if you need help!

NEC Nursing Organization Chart
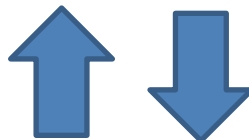
NEC President Dr. Wayne Lesperance
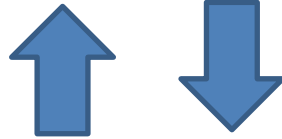
NEC VPAA Dr. Patricia Corbett
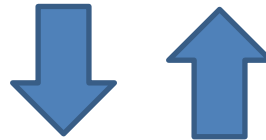
Dean of Nursing & Health Professions Dr. A. McPhee Smith, DNP, RN, CNE

Faculty

Students

Cooperative Experience Partner Selection Process
(For New Students Beginning in the Fall 2023 and Beyond)

1. Students should attend a scheduled Cooperative Experience Fair to meet representatives of our cooperative experience partners.

2. The Nursing & Health Professions Administrative Assistant will notify students to submit the following form and set a due date for its return. The form includes:
   a.   Student name
   b.   Employment status at any current cooperative experience partner organizations
   c.   Primary residence when NOT taking classes at NEC.
   d.   Primary residence when taking classes at NEC.
   e.   Student's 1st, 2nd, & 3rd cooperative experience partner preferences

3. Once forms have been submitted by the required due date, the dean and faculty will use the following criteria to pair students with a cooperative experience partner (in the order written):
   a.   First preference
   b.   Proof of employment, if applicable
   c.   Distance in miles from a primary residence
   d.   Cooperative Experience partner representative feedback from the Cooperative Experience Fair

4. If your first preference is unavailable, then the second choice will be applied with the following criteria (in the order written):
   a.   Proof of employment, if applicable
   b.   Distance in miles from a primary residence
   c.   Cooperative Experience partner representative feedback from the Cooperative Experience Fair

5. If your second preference is unavailable, then the third choice will be applied with the following criteria (in the order written)
   a.   Proof of employment, if applicable
   b.   Distance in miles from a primary residence
   c.   Cooperative Experience partner representative feedback from the Cooperative Experience Fair

Cooperative Experience Partner Selection Process

1.   Name: _____

2.   Are you employed (currently) at any of the following healthcare organizations?
      (Please check all that apply).

      • Elliot Hospital
      • Catholic Medical Center
      • Concord Hospital
      • Lakes Region General Hospital
      • Portsmouth Regional Hospital
      • Frisbee Hospital
      • Parkland Hospital
      • Cheshire Medical Center
      • Other…_____

3.   Primary residence when NOT taking classes at NEC.

      _____(street address)

      _____(city) _____(state)

4.   Please provide the physical address of where you live when taking classes at NEC, i.e., home
address or residence halls, as applicable.

      _____(street address)

      _____(city) _____(state)

5.   Please list your Cooperative Experience Partner preferences ranking from 1st choice to 3rd
choice …. This may or may not be where you work now, but perhaps you hope to work when you
graduate.

      • Elliot Hospital in Manchester, N.H.
      • Catholic Medical Center in Manchester, N.H. (current employees ONLY)
      • Concord Hospital in Concord, N.H.
      • Lakes Region General Hospital in Laconia, N.H.
      • Portsmouth Regional Hospital in Portsmouth, N.H.
      • Frisbee Hospital in Rochester, N.H.
      • Parkland Hospital in Derry, N.H.
      • Cheshire Medical Center in Keene, N.H.

      1st Choice: _____Distance from primary residence_____
      2nd Choice: _____Distance from primary residence_____
      3rd Choice: _____Distance from primary residence_____

Section III.
Academic Policies and Procedures

Academic Success Plan Policy

Purpose: To provide guidelines for faculty and students to formatively address student performance that fails to meet standards, policies, or procedures outlined in the Nursing Student Handbook. The goal of the Success Plan is to assist the student in understanding better and more proactively addressing identified academic or behavioral concerns. Student success in a professional nursing program depends on meeting expectations in three realms: professional comportment, clinical, and academic performance. Faculty and instructors are responsible for providing students with a clear understanding of professional, clinical, and academic expectations and, through evaluative measures, letting students know when they are not meeting minimal expectations. Students are responsible for familiarizing themselves with the expectations, seeking information when they do not understand what is expected, and actively participating in their learning to enhance their opportunities for success.

Policy:
- An Academic Success Plan may be initiated when faculty or clinical preceptor identifies student performance and/or behavior inconsistent with the NEC Nursing expectations.
- A success plan may be initiated if the expectations are not met within one or more of three categories: Professional, Clinical, and/or Academic.
- This policy does not apply to repetitive, grossly unsafe, or egregious behaviors; such concerns should be immediately reported to the Dean of Nursing & Health Professions, and an investigation will be conducted. In the meantime, the Dean will inform the student that the student is under investigation.
- A student's failure to meet the goals of the Academic Success Plan may result in a lack of professional, clinical, and/or academic success, resulting in stopped progression or dismissal from the program.

Procedure:

1. Student performance and/or behavioral concerns should be addressed by the Faculty and Academic Advisors as soon as possible.
2. Advisors will contact the student privately to discuss any issues or concerns that might impact student performance and/or behavior.
3. The faculty will privately discuss performance and/or behavioral concerns with the student at the first opportunity. Regarding clinical performance concerns, the faculty will include the clinical preceptor and clinical facilitator in the discussion.
   a. At this meeting, using relevant evaluation tools, rubrics, and policies, expected performance and/or behaviors will be reviewed with the student.
   b. The student will be asked to reflect on their performance and/or behavior, consider expectations, and identify the root cause of performance and/or behavioral deficits.
   c. The faculty and other relevant parties will share their perspectives on the student's performance and/or expectations-related behavior.
   d. The student and faculty will identify specific resources and strategies to address measurable outcomes for the identified performance and/or behavioral deficits.
   e. A follow-up appointment (s) to evaluate progress will be established.
   f. The student, faculty, and other relevant parties will sign the success plan.
   g. If progress is not apparent and/or the student fails to follow the success plan, the student will incur progressive sanctions up to and including dismissal from the nursing program.
4. If a third incident in any category occurs over the student's academic tenure, the student may be dismissed from the nursing program. (See Grievance Policy)
5. A copy of the Academic Success Plan will be scanned, provided electronically, and placed in the student's file in the NEC Nursing office.

ADMS 8.23

Attendance Policy

Purpose: To provide students with clear guidance regarding all nursing lectures and scheduled clinical learning experience attendance. All New Hampshire Board of Nursing-approved registered nursing education programs must provide minimum theory and clinical hours. In addition, all CCNE-accredited nursing programs require that learning experiences be carefully designed to provide significant learning required to achieve program outcomes consistent with baccalaureate expectations. Thus, policies related to attendance exist.

Policy:
- General Policy for Class and Cooperative Experiences for Nursing Students at NEC
  - Attendance at all scheduled classes and clinical learning experiences is mandatory.
  - Students are expected to arrive on time and be seated by the time class or clinical begins after any breaks the professor may give.
  - Make-up opportunities may not be available; thus, student absences affect the ability to meet course and state licensure requirements. In addition, absences may affect a student's ability to succeed or progress in the course and program.
- Classroom Attendance
  - In addition to the above, the following is a requirement for nursing courses that meet in the classroom environment (in-person or remote):
    - Students are expected to attend all classroom experiences to meet the objectives successfully.
    - Students are permitted one (1) absence during the course inclusion dates. After that, ten (10) points will be deducted from the student's professionalism grade for each occurrence.
    - If the absence occurs on a scheduled exam day, the student must contact the professor at least two (2) hours before the start of the exam. If this expectation is unmet, an exam grade of zero will be awarded. Only if the Dean excuses the absence will the student be permitted to arrange an alternative date/time to take the exam at the discretion of the faculty's schedule.
    - Exception(s): If the student's absence is deemed "excused" by NEC procedure (example: COVID quarantine) OR the Dean of Nursing has deemed the absence "excused."
    - Students are expected to be on time to class per the course's posted start time in "MyNEC." If a student is not present at the start time and is tardy, five (5) points will be deducted from the student's professionalism grade for each occurrence.
- Cooperative Experiences
  - In addition to the above, the following is a requirement for all Cooperative Experiences:
    - Students are expected to attend all RN-precepted shifts for 168 hours per term, with no exceptions.
      - Students may only adjust RN preceptor shifts with prior approval by Christie Jadlocki, cjadlocki@nec.edu. **DO NOT change RN preceptor hours with the CCF until you have approval from Christie to do so!**
    - Students are expected to attend two LNA weekly shifts to total 336 hours per term, with no exceptions.
      - Students can only adjust LNA hours with prior approval by Christie Jadlocki, cjadlocki@nec.edu. **DO NOT change LNA hours with the employer until you have approval from Christie to do so!**
    - Exception(s): If the student's absence is deemed "excused" by NEC procedure (example: COVID quarantine) OR the Dean of Nursing has deemed an absence "excused."
    - There are no scheduled make-up days for LNA or RN preceptor shifts. Any absences may impact your ability to meet the course/program objectives and required academic credit which may result in repeating the course/delayed graduation.

ADMS 8.24

Class and Cooperative Cancellation Policy

Purpose: To outline the mechanisms to determine if a class or cooperative learning experience has been canceled. Severe weather may sometimes preclude safe travel. Faculty may also experience sudden, unexpected personal, family, or health concerns that may require the cancellation of a planned learning experience. Students are asked to adhere to this policy to prevent unsafe and/or unnecessary travel.

Policy:

- Students must routinely check phone, email, and text messages for information in severe weather.

- The student should follow the NEC Nursing attendance policy if there is a safety concern in inclement weather.

- If a faculty member must cancel, the faculty will notify students via NEC email.

- The mode of communication for cancellation is Blackboard announcements. Therefore, students are advised to check Blackboard announcements before each class.

- Students must provide a phone number to the cooperative clinical facilitator to be reached in case of an unexpected cancellation.

Procedure:

1. Routinely check Blackboard for messages regarding cancellations.
2. Routinely check phone and text messages for information regarding cancellations.
3. Should questions arise, be in touch with the faculty.

ADMS 10.23

Electronic Device Policy

Purpose: To outline the appropriate use of electronic devices in the learning environment.
NEC Nursing supports professional electronic devices, such as cell phones, tablets, personal computers, and personal tracking devices for appropriate personal use and learning purposes. This policy was developed to define the appropriate use of electronic devices in an academic setting. In general, the non-disruptive use of electronic devices to promote learning is supported. But, illegal, distracting, disruptive, or rude use of electronic devices is not tolerated. The following guidelines are meant to guide students and faculty about the appropriate professional use of electronic devices and provide consequences for illegal, distracting, disruptive, or rude use.

Policy:

- In the current climate of instant communication and computer/internet technology, students must be mindful of appropriate conduct when using laptop computers, communication devices, and audio or video recording devices.

- Students may bring cell phones and other electronic devices to class, but they must be silent.

- All electronic devices, including smart watches and cell phones, must be appropriately secured, and turned off during examinations. Cell phones may not be used as a calculator.

- Video and or audio recording during a lecture or professional encounters is only permitted with faculty approval or as part of an approved accommodation.

- When participating in clinical experiences, it is very important to be aware of and comply with all organizational policies, particularly those regarding the use of electronic devices and maintaining patient confidentiality. Students are expected to complete HIPPA training and take extraordinary measures to avoid HIPPA violations.

- In compliance with professional standards of behavior and the interest of patient safety and confidentiality, students' use of cell phones in patient care settings is strictly forbidden. Use of other electronic devices, including blue tooth tracking devices, may also be prohibited in clinical settings. Consult agency policies before using or enabling the use of such devices.

- Students must be familiar with and adhere to professional guidelines on the use of social media. Refer to the Social Media Policy for further guidance.

- Computer access to protected patient health information is limited; students may only access information related to assigned patients and only access information necessary to provide safe patient care and complete their assigned care and academic assignments.

Procedure:

All students must adhere to the policy above.

1. A violation of this policy in the classroom or clinical setting will result in sanctions up to and including dismissal from the setting, the course, and/or the program depending on the nature of the violation and contextual variables.

2. Possession of a prohibited electronic device during a quiz or exam will result in an automatic zero and referral to the Dean of Health Professions for academic dishonesty.

ADMS 8.23

Examinations

Purpose: To outline the student and faculty expectations regarding all nursing examinations.

Examination Accommodations

According to the American Disabilities Act, students with certain disabilities may qualify for testing accommodations.

Policy:
- The student's responsibility is to contact the Office of Student Access and Accommodations for approval of the need for academic accommodations.
- Students with examination accommodations must provide documentation to each faculty to receive those accommodations.

Procedure:
1. The examination must be given during the regular examination unless the faculty has specified and/or approved another time.
2. All examinations are administered remotely and under proctored conditions.
3. If an examination is to be administered to a student other than the regular examination time, the student may be administered an alternate examination.

Examination Administration

Examinations are one form of assessment used to evaluate student learning outcomes. All examinations will be administered via ATI Proctorio.

Purpose: To outline the steps to be taken by nursing faculty administering examinations to ensure the academic integrity of examinations. Students must have a functioning laptop or desktop computer with a microphone and camera. Students must complete the ATI Dry Run before the first exam to ensure the computer can support the ATI Proctorio application.

Policy:
- Students will only be permitted to enter the exam if they are tardy for up to 15 minutes of the scheduled exam time. See attendance policy.
- There will be no discussion of exam items between students and faculty on the exam day.

Procedures: Non-adherence to the policy may result in the inability to take a scheduled exam or an automatic examination failure.

ADMS 8.24

Examination Review

Purpose: To provide faculty and students with guidance regarding the review of examinations. To protect the integrity of the test bank.

Policy: Exam review sessions are not mandatory; however, they may be offered with the intent to clarify and dialogue about concepts evaluated in an examination.

Procedure:
1. All examinations review is time-limited and may be held in class or during scheduled faculty office hours.

2. To ensure the integrity of examinations and items on examinations, all review sessions must occur on NEC's campus; procedures must be taken to ensure the integrity of the exam and exam items.

3. To make good use of student and faculty time, students must adhere to an established set of behavioral norms during a review session, or the session will end.

4. Students should be aware that it is inappropriate to challenge their faculty or argue about their grades on an examination in a public forum. When done by groups of individuals, such behaviors constitute mobbing, a recognized form of incivility, and a form of professional misconduct. Instead, individuals with concerns about items on the examination or calculating their grades should ask to meet with the faculty privately.

5. Students are not allowed any writing materials, digital equipment, or electronic storage devices, e.g., phones, iPads, or smart watches, while an exam is in their possession or being reviewed. Any student who violates this rule may be charged with academic dishonesty.

6. Students may not leave the review session with exam items in their possession. Any student who violates this rule will be charged with academic dishonesty.

ADMS 8.24

Grading Policy

Purpose: To outline the grading policies for NEC Nursing.

Policy:
- The faculty will outline the methods for evaluation for each course in the course syllabus.
- The description of assignments and related rubrics for each course will be posted on Blackboard.
- The clinical portfolio guidelines for each course will be posted on Blackboard.
- Grades are assigned according to the NEC Grading Scale below:

Grade	Value
A	94-100
A-	90-93
B+	87-89
B	83-86
B-	80-82
C+	77-79
C	73-76
C-	70-72
D	60-69
F	Below 60

- Students Must:
    - Earn a minimum grade of "B-" or 80% overall in all required NU prefix courses.
    - Earn an overall minimum "B-" or 80% grade in all required nursing clinical portfolio assignments.
    - Earn a minimum " Satisfactory " evaluation in all simulated/clinical learning outcomes of a course.
    - Earn an average of 80% in the Assessment by Examination category in each NU prefix course.
    - Maintain a minimum overall "B-" grade or cumulative GPA of 2.7 at NEC.

- Remediation Plans may be initiated by the course instructor for all students who earn less than 80% on any examination. Remediation plans are a collaborative tool designed to assist students toward successful course completion and are a mandatory requirement.

Program Assessment Methods

- Professional Nursing I, II, & III and Health Assessment I & II will have the following evaluation methods:

    - Assessments by Examination: Four 50-point unit assessments will be conducted during these courses. In addition, there will be one 100-question comprehensive final exam. The course instructor reserves the right to administer unannounced quizzes that may or may not be counted in the final grade. (50%)

    - Assessment by Assignments: These course instructors reserve the right to administer scheduled or unscheduled assignments (e.g., ATI, discussions, case studies, group activities, concept maps, skills labs, etc.) that may or may not be counted in the final grade. (45%)

    - Assessment by Professionalism in the Classroom/Clinical: Professional Identity is a nursing attribute that shapes the nurse. Therefore, nursing students must demonstrate nursing values in every educational experience. As a professional, course evaluations are a mandatory part of this course's evidence-based quality improvement process, instructor(s), and program. (5%)

- Cooperative Experience I, II, & II will have the following evaluation methods:

    - Assessments by Examination: Four 50-point unit assessments will be conducted during these courses. In addition, there will be one 100-question comprehensive final exam. The course instructor reserves the right to administer unannounced quizzes that may or may not be counted in the final grade. (50%)

    - Assessment by Assignment: These course instructors reserve the right to administer scheduled or unscheduled assignments (e.g., ATI discussions, case studies, group activities, concept maps, etc.) that may or may not be counted in the final grade. (20%)

    - Assessment by Clinical Portfolio: Each student will compile a clinical portfolio throughout the semester. The portfolio will comprise 25% of the final grade. A grade of 80% or higher is required on each clinical portfolio assignment to pass the Cooperative Experience and progress in the nursing program. Employment in good standing at a partner organization must be maintained to pass this course. (25%)

    - Assessment by Professionalism in the Classroom/Clinical: Professional Identity is a nursing attribute that shapes the nurse. Therefore, nursing students must demonstrate nursing values in every educational experience. As a professional, course evaluations are a mandatory part of this course's evidence-based quality improvement process, instructor(s), and program. (5%)

- Evidence and Informatics, Systems-Based Practice, and Transition to Professional Nursing Practice will have the following evaluation methods:

    - Assessment by Course-Specific Scholarly Project or Presentation: (50%)

    - Assessment by Assignment: These course instructors reserve the right to administer scheduled or unscheduled assignments (e.g., ATI, discussions, case studies, group activities, concept maps, etc.) that may or may not be counted in the final grade. (45%)

    - Assessment by Professionalism in the Classroom/Clinical: Professional Identity is a nursing attribute that shapes the nurse. Therefore, nursing students are expected to demonstrate nursing values in every educational experience. As a professional, course evaluations are a mandatory part of this course's evidence-based quality improvement process, instructor(s), & and program. (5%)

- Capstone Seminar & Clinical Immersion

Assessments/Assignments	Value of Course Grade
ATI Live Review	5%
ATI Capstone	30%
Virtual ATI	30%
Summative Clinical Portfolio	30%
Assessment by Professionalism in the Classroom/Clinical	5%
Total	100%

Procedure:

Students who do not meet the passing standards as outlined in this policy will be subject to the nursing program's progression standards, which may include stopped progression or dismissal from the program.

ADMS 8.23

Issues and Resolution Policy

Purpose: To assure fair and equitable treatment of all students through open communication and resolution of issues among students, faculty, administration, and staff. The Issues and Resolution policy is a process that allows NEC Nursing students to bring forward issues of student dissatisfaction and unfair or non-equitable treatment regarding established policies, procedures, rules, and regulations of NEC Nursing. This policy is specific to NEC Nursing in conjunction with the policies of NEC.

Policy:
- The student can express issues without prejudice, penalty, or recrimination.
- Following the proper procedure, sequence, and timeframe is important when an issue is filed.
- The resolution will be considered final when a solution is obtained in any given step.
- Documents related to the issue will be maintained in a confidential and secure file in the NEC Nursing office.

Procedure:
1. The student shall schedule a meeting with the involved party. The student may request that their advisor be present. If the advisor is the involved party, the student may ask another faculty or the Dean to be present. This meeting must be scheduled within ten business days of the occurrence.
2. If the issue is not resolved in the step above, the student and the involved party will document and sign a written copy of their discussion. Copies will be given to the involved parties.
3. Next, and within ten business days of the meeting referenced in the second step above, the Dean of Nursing & Health Professions will review the issue and arrange to meet individually with the student and the involved party.
4. Within ten working days of this meeting, the student will receive a decision from the Dean of Nursing & Health Professions.
5. If the issue remains unresolved after meeting with the Dean, either party may request in writing that the Dean arrange a meeting with all parties and the Vice President of Academic Affairs (VPAA). This group will review the issue and the Dean's decided resolution of the issue.

The following guidelines will be followed:
   a. Meetings are closed, formal, and confidential. The Dean directs the flow of the meeting but does not vote. An appointed secretary shall take minutes.
   b. If new information is pertinent to the issue under consideration, academic community members (students, faculty, administration, and staff) may be asked to present information.
   c. Both the student and the involved party may be questioned. Questions must be relevant to the issue.
   d. Upon request from the group, the involved party is expected to make such records pertinent to the issue available. The confidential nature of these records shall be safeguarded.
   e. The student and/or involved party may bring another NEC student, faculty, or staff member as a support person. The support person may not address the committee but may answer questions directed by the committee.
   f. Proceedings of the meeting may not be audio or video recorded without permission from all in attendance.
   g. A simple majority shall be required to decide.
   h. The group shall prepare a written decision within ten business days.
   i. Documentation of the decision will be signed by both involved parties and kept in the Grievance File in the NEC Nursing office for seven years, and copies will be given to the involved parties.

ADMS 1.24

Leave of Absence Policy and Readmission

Purpose: To define the procedures to follow when seeking a leave of absence or readmission to the program following a leave of absence.

NEC Nursing supports students who wish to take a leave of absence or return to the nursing program after taking a leave of absence.

Policy:

- Any nursing student may request a Leave of Absence for one or two consecutive semesters.
- A leave that extends beyond one year must have prior approval from the Dean of Nursing & Health Professions.
- A student approved for a leave of absence is no longer enrolled for federal financial aid purposes; thus, they should be in contact with the Financial Aid about their financial obligations.
- The student who has been on a leave of absence or medical leave of absence for less than one year and left the program in good standing is guaranteed a seat in the nursing program upon their return. All other students will need to reapply to the nursing program.
- Returning students will be considered for readmission to the nursing program if they meet the progression standards. Those who fail to meet the progression standards will be denied readmission.
- Any student deemed clinically "unsafe" according to evaluative clinical performance criteria or "unprofessional" according to the Code of Conduct will not be considered for readmission.
- Any student readmitted to the program following a Leave of Absence for health or personal concerns are placed on "close academic scrutiny" to ensure a smooth transition to the academic environment.
- Students will only be considered for readmission to the program once.
- Applicants for readmission must meet all admission standards and progression requirements for the nursing program.

Procedure: Processing a Leave of Absence or Medical Leave of Absence

Students wishing to process a Leave of Absence should
- Discuss their plans with their advisor.
- Complete an interview with the Dean of Nursing & Health Professions.
- Consult with the Financial Aid Office.

ADMS 8.23

Recruitment, Admission, Progression, and Graduation Policies

Purpose: To provide a uniform statement for students and faculty regarding nursing student recruitment, admission, progression, and successful completion of graduation requirements.

The requirements for graduation are consistent with NH BON requirements and NEC requirements. Upon completing this program, graduates earn a Bachelor of Science in Nursing (BSN) and can take the National Council Licensure Examination for Registered Nurses (NCLEX-RN®).

Recruitment

The NEC Nursing recruitment philosophy aligns with the National Association of College Admission Counseling's (NACAC) Statement of Principles of Good Practice. The NEC Nursing faculty works with our internal and external colleagues on the marketing, admission, and enrollment teams to maintain high ethical standards and a highly transparent admissions process for nursing applicants.

Admission
NEC Nursing strives to maintain our nursing admission standards and aims to review candidates holistically; thus, students who do not strictly meet our admission requirements are encouraged to apply, meet with a member of the admissions staff and/or the Dean of Nursing & Health Professions for advisement as their mix of experience, attributes, and academic performance may make them a suitable candidate for nursing now or in the future. Students who are ineligible for admission based on these requirements also may be admitted by permission of the Dean of Nursing & Health Professions.

- The student applies to the nursing program.
- The NEC Admission Team collaborates with the NEC Nursing Student Affairs Committee to review all candidates.
- Candidates who meet or exceed the listed admission criteria are admitted directly into nursing.
  - Students can expect an email and US Postal Service notification from the NEC Admission Team outlining the following acceptance contingencies:
    - Submission of all application materials as outlined in the next section.
    - Submission of final transcripts
    - A $300.00 Deposit – Reserves your acceptance and seat in the cohort.
      - Once all of these have been completed, students can expect a final acceptance letter via email and US Postal Service from NEC Nursing with the final acceptance decision and information.
- Candidates who fall below the set nursing admission criteria:
  - May be interviewed by NEC Nursing
  - May have a follow up interview by the program's nursing admission council and then be:
    - Admitted to the nursing program contingent upon:
      - Submission of all materials as outlined below.
      - Submission of all final transcripts
      - The $300.00 Deposit – Reserves your acceptance and seat in the cohort.
        - Once all of these have been completed, students can expect a final acceptance letter via email and US Postal Service from the NEC Nursing with final acceptance and information.
    - Admitted to the NEC Health Science program to demonstrate ability to meet the academic rigors of the nursing program.
      - Students can expect a letter via email and US Postal Service from the NEC Nursing with the final acceptance decision and information.
    - Denied admission to NEC.

Post-secondary Students - Qualified post-secondary students are admitted directly into the nursing program as space allows. In addition to NEC's general admission requirements, applicants to the pre-licensure nursing program should meet the following admission standards.

- Minimum high school GPA of 2.7 or by permission of the Dean
- Essay
- (2) Letter of Recommendation from an Academic Advisor or Professional Recommendation
- Licensed Nursing Assistant (LNA) licensure is required before the first cooperative clinical experience.
- Current BLS
- Eligible for employment as an LNA at a partner institution
- Criminal Background Check & Initial/Routine Drug Screening Before First Cooperative Clinical Experience

External & Internal Transfer Requirements - External or Internal Students enrolled in other colleges or NEC academic programs are eligible for transfer into the nursing program. The selection process takes place at the end of each semester. The most qualified applicants will be accepted as space in the program allows. To be considered for transfer, the applicant must meet these requirements:

- Completed at least 12 college credits and at least a 2.7 GPA or by permission of the Dean.
- Essay
- (2) Letter of Recommendation from an Academic Advisor or Professional Recommendation
- A licensed Nursing Assistant (LNA) is required before the first cooperative clinical experience.
- Current BLS
- Eligible for employment as an LNA at a partner institution
- Criminal Background Check & Initial/Routine Drug Screening Before First Cooperative Clinical Experience

May be required to assess and support individual academic needs:
- TEAS (Test of Essential Academic Skills)
- TOEFL (Test of English as a Foreign Language) for International Students

Progression in the Program:
To progress semester-to-semester in the pre-licensure nursing program, the student must:
- Earn a minimum grade of "B-" or 80% overall in all required NU prefix courses.
- Earn an overall minimum "B-" or 80% grade in all required nursing clinical portfolio assignments.
- Earn an average of 80% in the Assessment by Examination category in each NU prefix course.
- Meet the expected level of accuracy on the Safe Medication Dosage Calculation Competency.
- Earn a minimum "Satisfactory" evaluation in all simulated/clinical learning outcomes of a course.
- Maintain a minimum overall "B-" grade or cumulative GPA of 2.7 at NEC.
- Maintain eligibility for employment at the assigned partner institution.

Please take note of the following:
- A student may repeat an individual NU course only once.
- A student may repeat only two separate NU courses.
- Students must take all courses required for the nursing program in the proper sequence or with the Dean's approval.
- Inability to meet these standards may result in a student's stopped progression or dismissal from the nursing program.

Stopped Progression

Stopped Progression means that a nursing student who fails to meet the progression standards listed above may be stopped from moving to the next nursing course. For instance, students failing to meet the minimum grade of B- or 80% final grade in any nursing course, an 80% on their exam cumulative in any nursing course with exams, or an 80% on their Cooperative Portfolio in any nursing cooperative experience course may be stopped from progressing term to term, which will extend the students' program and graduation.

Students who have received a stopped progression notification from NEC Nursing can appeal the decision. Students must email the NEC Nursing Student Affairs Committee (SAC), NECNursing@nec.edu, directly within seven days of receiving the stopped progression notification.

Procedure:
- The SAC will meet to review all appeals.
- The SAC will provide written notification of the decision within ten days of the appeals meeting.
- On procedural grounds **only**, students may appeal the SAC's decision to the Dean of Nursing & Health Professions, Dr. Angie McPhee-Smith, amcphee-smith@nec.edu.

Forward Progression

A student whose progression has been stopped and wishes to return to the nursing program must submit a letter requesting "forward progression" to the Dean 30 days before the start of the upcoming semester. The letter should include:
- A statement indicating an intent to progress in the major.
- A description of the circumstances that led to your progression being stopped.
- A detailed Academic Success Plan to prevent those circumstances from reoccurring.

Upon reinstatement, the student must meet with a nursing advisor before class registration.

Program Dismissal and Program Dismissal Appeal Process

Students may be dismissed from the nursing program if the student:
- Fails to meet the passing standard in a nursing course more than once.
- Fails to meet the passing standard in more than two nursing courses.
- Fails to maintain an overall 2.7 GPA at NEC.
- Is deemed clinically "unsafe" according to evaluative clinical criteria.
- Is unable to achieve the expected level of accuracy on the Safe Medication Dosage Calculation Competency.
- Is unable to obtain and sustain LNA licensure.
- Cannot obtain or maintain employment as an LNA at the assigned partner institution.
- Is deemed "unprofessional" based on their conduct in the classroom or cooperative clinical experiences.

Students who have received a program dismissal notification from NEC Nursing can appeal the decision. Students must email the NEC Nursing Student Affairs Committee (SAC), NECNursing@nec.edu, directly within seven days of receiving the stopped progression notification.

Procedure:
- The SAC will meet to review all appeals.
- The SAC will provide written notification of the decision within ten days of the appeals meeting.
- On procedural grounds **only**, students may appeal the SAC's decision to the Dean of Nursing & Health Professions, Dr. Angie McPhee-Smith, amcphee-smith@nec.edu.

Graduation

For a student to meet the requirements for graduation, the student must meet the following criteria:

- Meet all NEC graduation requirements for the Bachelor of Science with a major in Nursing.
- Complete all NU courses with a minimum grade of B-; or 80%.
- Students must complete all degree requirements within six years of enrolling in the first nursing course.

ADMS 8.24

Safe Medication Dosage Calculation Competency

I. PURPOSE: To promote safe medication administration, New England College provides learning experiences throughout the program that focus on safe medication calculation.

II. POLICY: In each nursing cooperative experience, students must demonstrate competency in safe medication dosage calculation before administering medications. Each student will demonstrate this competency by completing the Safe Medication Dosage Calculation exam during the first week in the Cooperative Experience I, II, III, and Capstone Seminar and achieving the expected level of accuracy for each experience.

- Students who fail to achieve the expected level of accuracy on their first attempt must complete remediation and retest within one week. Students who fail to achieve the expected level of accuracy on their second attempt must complete remediation and retest within one week.
- Students may only demonstrate medication administration in the clinical setting once competency has been met.
- Any student who fails to achieve the expected level of accuracy on the third retest will be withdrawn from the course and dismissed from the program.
- Faculty strongly recommends that students needing math skills contact the Writing and Academic Support Center.
- Grading: The student will receive a pass or fail grade, which depends upon achieving the minimum level of expectation for each course.
  - o The following minimum levels of expectations for each nursing cooperative experience are as follows:
    - NU 1140 Cooperative Experience I: 92%
    - NU 2140 Cooperative Experience II: 92%
    - NU 3140 Cooperative Experience III: 96%
    - NU 4510 Capstone Seminar: 96%

Approved 4.26.24
ADMS 5.24

Section IV.
Social and Behavioral Policies

Behavioral Norms

Purpose: To outline expected behaviors in the learning/academic environment. Learning and professional growth, development, and self-regulation occur in the academic nursing community. NEC Nursing is a high-stakes learning environment, and, as such, it can be stressful and a place where boundaries may be pushed. Therefore, it is imperative to create a respectful and nurturing environment. Although not yet a nurse, nursing students enrolled in a professional program are expected by the faculty, the administration, other healthcare professionals, and the public to always abide by the profession's standards.

Policy:
- Common courtesy and respect are minimal requirements for all members of the academic nursing community (faculty, students, and staff). Courteous behavior includes but is not limited to:

  o The appropriate manner of dress for all guest speakers and academic events. This means business casual at a minimum for students and professional attire for faculty.
  o Timely arrival for scheduled appointments, meetings, and learning experiences.
  o Professional demeanor: community members are expected to communicate and behave, verbally and non-verbally, civilly and respectfully in all encounters.
  o Address faculty and staff by their preferred name and when appropriate, i.e., Ms., Mr., Coach, Dean, Professor, or if it applies, Doctor. Include a greeting and salutation in correspondence, including email correspondence.
  o Demonstrate respect for others/differences; practice inclusive and collaborative behaviors and avoid the trap of personalizing differences when they exist.
  o Assume goodwill; stand for something good, be open and honest about one's intentions, and be non-judgmental regarding the intentions of others.
  o Be humble about one's accomplishments and mistakes.
  o Be fair in your judgments.
  o Demonstrate accountability for one's actions.
  o Show forgiveness.

  - Adherence to minimal standards of courteous behavior in the classroom/learning environment is expected. Examples of courteous behaviors include but are not limited to:

    o Preparedness for the learning experience.
    o Avoidance of distracting behaviors in the learning environment.

Procedure:

1. Students will review this policy when they review the course syllabi and sign a document indicating that they understand the behavioral expectations of the learning environment.

2. To maintain a positive teaching-learning environment, students who do not adhere to this policy will generally receive cues to observe the classroom norms but may be asked to leave the classroom and be subject to a reduction in the Assessment by Professionalism in the Classroom/Clinical grade.

3. Repeated non-adherence to this policy will result in progressive sanctions up to and including removal from the class and/or dismissal from the program.

ADMS 8.23

Dress Code and Personal Appearance

Purpose: To outline expectations regarding professional dress and appearance for nursing students. Professionals are expected to present themselves as safe, competent, and trustworthy members of the profession. Professional dress and appearance are important because they:

- Provide a powerful symbolic message about a professional's status and competence.
- Students are representing themselves, NEC Nursing, and the partner organization.
- It can have an impact on patient safety and infection control.

Policy:

- NEC Nursing students must wear the approved NEC Nursing uniform in the clinical setting.
- The nursing student uniform should only be worn when participating in clinical activities scheduled by NEC.
- The uniform should be clean, free of stains, hemmed, and wrinkle-free; uniforms may not be rolled at the ankle or the waist. Uniform pants with a tattered hemline are not acceptable.
- Nursing shoes should be clean and allow for swift movement (skid-free, low-heeled)
- To ensure patient safety, uniforms must be loose fitting to allow swift and proper ease of movement.
- To maintain the profession's dignity and professional boundaries, uniforms should be fitted to avoid exposure to undergarments. Tunic tops should be untucked to cover both the midriff and buttocks. A t-shirt or camisole may be necessary to avoid exposure to chest or brassieres.
- Tattoos and body piercings are subject to the partner organization's policy.
- Long hair should be worn off the collar /shoulders to avoid infection control concerns. Ponytails are not considered acceptable.
- Beards and facial hair should be trimmed and neat in appearance.
- Fingernails must be short and clean. Nail polish and/or acrylic nails, artificial nails, overlays, and/or extenders are not permitted in the delivery of direct patient care.
- Heavy perfume cologne or other highly scented lotions are not permitted.
- Make-up, if worn, should be conservatively limited to mascara, lip gloss, and foundation.
- To uphold the profession's standards, smoking is prohibited on the clinical campus or when wearing the NEC uniform.
- Gum chewing is not permitted.

Procedure:

1. Students who do not adhere to the conditions of this policy will be asked to make suitable adjustments and, if immediately suitable adjustments cannot be made, will be required to leave the clinical setting.
2. Students repeatedly demonstrating non-adherence to the conditions of this policy will be asked to develop an Academic Success Plan (see related policy).

ADMS 8.23

Social Media Policy

Purpose: To enhance and protect the personal and professional reputation of nursing students, their colleagues, the faculty, the school, and NEC when participating in social media.

Social media is a powerful and far-reaching means of communication that can blur the lines between personal, professional, and institutional voices and significantly impact one's personal and professional reputation. According to the ANA (2011), "nurses and nursing students should understand the nature, benefits, and consequences of participating in social networking of all types."

Social media is designed to be disseminated through social interaction created using highly accessible and scalable publishing techniques. Examples include but are not limited to Twitter, Facebook, YouTube, Instagram, Snapchat, and LinkedIn.

Policy:

- Do not post confidential or proprietary information about patients, professionals, or other students.
     - Follow the applicable federal requirements such as FERPA and HIPPA in the online environment.
     - Adhere to the NEC Code of Conduct
     - Always consider copyright and intellectual property rights when using social media sites.
          When in doubt, consult with a librarian.
- Use of the NEC name, logo, or other symbols representing NEC with proper authorization is permitted.
     - Do not use the NEC logo, images, or iconography on personal social media sites.
     - Do not post pictures of other students in any clothing where the NEC logo can be seen without permission from the student, NEC Nursing, and NEC.
- Obey the Terms of Service of any social media platform employed.
- Be familiar with and adhere to the American Nurses Association principles for social networking.
- Be familiar with and adhere to the National Council of State Boards of Nursing (NCSBN) Social Media Guidelines.
- Nursing students and nursing faculty should take advantage of privacy settings available on many social networking sites in their online activities and seek to separate their online personal and professional sites and information. However, using privacy settings and separating personal and professional information online does not guarantee that information will not be repeated in less protected forums.

Procedure:
Students who do not adhere to this policy and the identified professional standards and guidelines will be punished, including dismissal from the nursing program and/or potential legal liability.

ADMS 8.23