



PRACTICAL NURSING PROGRAM
NURSING STUDENT HANDBOOK
2018-2019

Knowledge for Service
August 2018

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HLGU Practical Nursing Calendar for 2018-2019

Term One	August 21-December 7, 2018
Classes Begin (class in session Tuesday, August 21,2018)	August 21 (9am-3pm)
Labor Day off	September 3, 2018
*Big Truck night (evening clinical)	October 1 (Noon to 8pm)
Thanksgiving Vacation	November 19-23 (1)
Christmas Vacation	December 10 – January 7
Term Two	January 8 - May 4, 2019
School Resumes (class in session Tuesday, January 8, 2019)	January 8, 2019
Martin Luther King's Birthday off	January 21 (2)
*Teen Fair – Saturday Clinical	February 2
President's Day off	February 18 (3)
Spring Break	March 4-8
Easter Holidays	April 18 & 19 (4)
Inclement Weather Days	April 12 & 26
Term Three	May 8 - August 8, 2019
*Capping Ceremony (class in session Fri May 10)	May 16
*Golden Games Friday	May 17
Memorial Day off	May 27
*MSBN visit (transportation at student cost)	Morning Session, May or June
Summer Break	July 3-5 (5)
Practical Nursing Graduation	August 8, 2019
<p><i>Class hours are 8:00 AM – 4 PM Monday through Thursday (60 minutes for lunch). Clinicals start in February & are generally on Tuesday & Wednesdays from 6:30 AM – 3:30 PM (hours & days may vary at times; exceptions will be posted at a later date).</i></p> <p><i>Friday hours: 8:00 AM – 4 PM Open Lab is scheduled as needed for all remaining Fridays from 8 AM – noon or 9 AM – 1 PM (students must reserve this time for class in the event class is held during this time or remediation/make-up work is required – please see below).</i></p> <p>If needed, the Practical Nursing Program will <i>make up inclement weather days on April 12 & 26</i>. The student is reminded not to schedule appointments or other activities during the Friday morning lab times as the student may be required to be in class. It may be necessary to utilize additional Fridays for selected clinical activities such as CPR, IM, personal care clinical and orientation activities (computer charting) as well as additional inclement weather make-up days. *These will be scheduled at a later date.</p>	

History of Hannibal-LaGrange University Practical Nursing Program

The idea of a Practical Nursing School in Hannibal began when Mr. Harold Coston, Administrator of Levering Hospital, visited the School of Practical Nursing in Mexico, Missouri in 1960. Shortly following this visit, arrangements were made with the authorities of Mexico Public School of Practical Nursing, Mr. Davis Hart and Mr. Keyton Nixon, for a temporary affiliation. Miss Virginia Dyer, RN, State Supervisor of Practical Nurse Education and Miss Jane Rogers, RN, Executive Secretary of the State Board of Nursing in Jefferson City, visited Levering Hospital for approval of clinical facilities. Approval was obtained, and in July 1961, Hannibal's first class affiliated with the Mexico School.

The Hannibal students spent four months receiving their theory at the Mexico School under the direction of Mr. Davis Hart and Mrs. Peggy Sterner, RN, Coordinator/Instructor. Mrs. Sara Pille, RN, BS, Instructor from Hannibal, accompanied the students. When the students completed their classroom work, they returned to Hannibal with Mrs. Pille, who continued to instruct and supervise them in the clinical area. This first group of eight students, as Hannibal's first practical nursing class, graduated in Mexico, Missouri in July 1962.

In the meantime, the Hannibal Public School System began working on a permanent arrangement. This was accomplished following a meeting with the State Board of Nursing in Jefferson City on April 17, 1962 by Mr. Lloyd E. Estes, Assistant Superintendent of Hannibal Public Schools, Mr. Harold P. Coston, Administrator of Levering Hospital, Mr. M. M. Weaver, Vice-President and Treasurer of the Levering Board of Control, and Mrs. Marion Stehman, RN, Director of Nursing Service, Levering Hospital.

With the approval of the State Board of Nursing, the school was assured of financial support through the State Vocational Education funds and by Levering Hospital; and under the direction of the Hannibal Public School system the Hannibal Public School of Practical Nursing became the first and only school in Northeastern Missouri. On September 10, 1962, after publicity and recruitment, and with teaching facilities established at Levering Hospital, the first class of sixteen students was enrolled. Mr. Lloyd E. Estes was Director of the Program and Mrs. Sara Pille, RN was the Coordinator-Instructor.

Mrs. Sara Pille, RN, BS, was the first Coordinator/Instructor of the School. She was a native of Canada, and a graduate of St. Boniface General Hospital School of Nursing, located in St. Boniface, Manitoba, Canada. She received her Bachelor of Science in Nursing at St. Louis University, St. Louis, Missouri. She served as the Coordinator/Instructor for the program from July 1961 to July 1964 when she resigned and moved with her family to San Diego, California, where her husband was stationed with the U.S. Navy.

Mrs. Naomi Johnson, RN, a graduate of Burlington Hospital School of Nursing, Burlington, Iowa, was a clinical instructor under Mrs. Pille. Upon Mrs. Pille's departure, Mrs. Johnson was appointed Acting-Coordinator until the end of the school year, when she also left to return to hospital nursing.

At the same time, July 1964, Mrs. Betsy Wharton, RN, a staff nurse at Levering Hospital, became the Clinical Instructor. Mrs. Wharton was a graduate of Blessing Hospital School of Nursing, Quincy, Illinois and a native of the Edina-Knox City, Missouri area. She came to Hannibal from Columbia, Missouri, where she was employed as a 3-11 Charge Nurse at the University of Missouri Medical Center.

On September 1, 1964, Mrs. Beverly J. McClellan, RN, a graduate of St. Luke's Hospital School of Nursing, Kansas City, Missouri, became the Coordinator-Instructor. She was native of Warrensburg, Missouri, and brought a wide background of nursing experience into the position. She had done general duty, office nursing, 3-11 supervisory work, operating room, and school nursing.

At the end of the 1964-65 school year, Mrs. Wharton resigned, in preparation for moving to Quincy, Illinois, where she had accepted the position of Assistant Nursing Arts Instructor at Blessing Hospital.

Mrs. Wharton was succeeded by Mrs. Norma J. Hasselman, RN, a native of Oskaloosa, Iowa, and a graduate of Iowa Methodist School of Nursing, Des Moines, Iowa. Mrs. Hasselman had four years of experience in the Emergency Room and Drug Room at St. Elizabeth Hospital in Hannibal, Missouri with 1 ½ years as 7-3 Supervisor at Levering Hospital. She had also done office nursing and general duty.

With the employment of her husband in Jefferson City, Mrs. Hasselman resigned at the end of the 1965-66 school year, in order to move. Mrs. Carolyn Zeiger, RN, native of Monroe City, Missouri and a graduate of Blessing Hospital School of Nursing was secured as her replacement. Mrs. Zeiger's experience included staff nursing at Levering Hospital and office nursing at the Roller-Fischer Clinic.

Mr. Lloyd Estes served as Director of the School until September of 1965 when due to the weight of his other administrative duties in the school system, the responsibility was passed to Mr. Larry Lutz, Director of Adult Education, Hannibal Public Schools.

In June, 1966 the State Board of Nursing approved St. Elizabeth Hospital as a clinical facility and plans were begun for the expansion of the school. On September 2, 1966 the Cooperative Agreements were signed by Mr. Seaton A. Bonta, Superintendent of the Hannibal Public Schools, Mr. James Faries, Sr., Administrator of Levering Hospital, and Mr. Thomas J. Mohan, Administrator of St. Elizabeth Hospital, making the expansion a reality.

The resulting enlargement made possible an enrollment of twenty-two students, and created a necessity for an additional clinical instructor. Miss Doris A. Daume, RN, a graduate of St. Anne's Hospital, Chicago, Illinois, and surgery charge nurse at St. Elizabeth Hospital was selected.

In November of 1965, bonds were approved in Hannibal to construct an area vocational technical school adjacent to Hannibal High School, located at 4500 McMasters Avenue, Hannibal, Missouri. In September, 1968, the Practical Nursing School moved to its new quarters in the

newly constructed building. They consisted of three classrooms, a nursing arts laboratory, library, and an office.

With the larger quarters, the school was allowed to enroll a larger class. The State Board of Nursing approved an enrollment number of 32. A total of 30 students were enrolled on September 16, 1968, and as a result, an additional instructor was needed. Mrs. Virginia G. Yochum, RN, who had been the part-time teacher of the Post-Graduate medication course, became a full-time instructor. She was a graduate of Blessing Hospital, Quincy, Illinois, and had worked a total of 12 years full and part-time at Levering Hospital. Her experience included pediatrics, house supervision and recovery room.

In the spring of 1969, Mrs. McClellan resigned at the end of the school year. She moved to Norman, Oklahoma where her husband was attending school.

Mrs. Carolyn S. Zeiger, RN, Clinical Instructor for the past three years was appointed Coordinator upon Mrs. McClellan's resignation. Mrs. Katherine James, RN, BS, a graduate of Blessing Hospital School of Nursing, and San Francisco State College was employed to fill the Clinical Instructor vacancy. Mrs. James had been a teacher in a professional nursing program and Director of Nurses in California. She came to the school from the position of In-Service Director at Levering Hospital.

In the fall of 1970, Mr. Larry Lutz resigned as Director of the Vocational-Technical School to take a position with the Industrial Section of the State Department of Education. Mr. William Jameson, a graduate of the University of Missouri and the University of Michigan became Director of the Vocational-Technical School.

In November 1971, Mrs. Carolyn S. Zeiger, RN, resigned her position as Coordinator due to personal reasons. With her resignation Mrs. Katherine James, RN, Clinical Instructor for the past two years, was appointed as Coordinator.

Miss Henrietta Toalson, RN, a native of Hannibal, Missouri, and a graduate of St. Mary's Hospital School of Nursing, Quincy, Illinois, was appointed to fill the vacancy of Clinical Instructor. Miss Toalson had several years of experience in nursing supervision, first at St. Mary's Hospital and then at Levering Hospital in Hannibal, Missouri. Miss Toalson resigned the Clinical Instructor position at the end of August in 1975 to become an institutional advisory nurse with the Bureau of Nursing Homes, Missouri Division of Health.

The school was most fortunate to be able to rehire Mrs. Carolyn Zeiger, RN, to replace Miss Toalson and to assume a new responsibility with the school as the Assistant Coordinator-Instructor. During the three years Mrs. Zeiger was away from the school, she had worked as the Patient Care Coordinator at Levering Hospital, and then as a school nurse for the Hannibal Public School System.

Mr. Jameson resigned as Director of Vocational-Technical Education effective July, 1976. Mr. Harold D. Ward transferred from auto mechanics instructor to the position of Director.

In September of 1977, a new vocational program, Orientation to Health Occupations was started in the vocational-technical curriculum. Mrs. Zeiger transferred to the Hannibal High School faculty to teach the course.

Mrs. Kathleen Haycraft, RN, was hired to replace Mrs. Zeiger on the Practical Nursing faculty. Mrs. Haycraft was a graduate of the Blessing Hospital School of Nursing in Quincy, Illinois. She brought to the school a wealth of knowledge particularly in the area of cardiovascular nursing, having worked in CCU at Levering Hospital and in the SICU at St. Elizabeth Hospital.

After nearly ten years of progressively leading the Practical Nursing Program, Mrs. James resigned due to personal reasons in the Spring of 1978, effective at the end of the school year. Mrs. Haycraft, Assistant Coordinator-Instructor was appointed to the Coordinator position.

Mrs. Carol Lemons, RN, BSN, a graduate of the University of Missouri in Columbia was appointed to fill the Assistant Coordinator-Instructor position. Mrs. Lemons came to the Practical Nursing Program from the Intensive Care Unit of Levering Hospital bringing with her a fresh new outlook to nursing.

After sixteen years of dedicated employment, Miss Doris Daume retired in August of 1982. Her instructor's position was filled by Mrs. Karen DiQuattro, RN, who was a graduate of Cox Hospital School of Nursing in Springfield, Missouri. Mrs. DiQuattro, previously employed by Levering Hospital, brought a wide variety of experiences in obstetrics supervision and critical care nursing to the program.

After six years, Mrs. Haycraft resigned to accept a position at St. Elizabeth Hospital as Director of Staff Development in June of 1983. Mrs. Carol Lemons was appointed to the coordinator position. Mrs. Karyn Buxman, RN, a graduate of Blessing Hospital School of Nursing, was appointed to the position of instructor. Mrs. Buxman brought a great deal of enthusiasm for teaching to the program and experience in the areas of critical care, surgical nursing, and public health nursing.

In June of 1983, Mrs. DiQuattro resigned to move to Peoria, Illinois. Mrs. Mary Snarr, RN was appointed to the position of instructor. Mrs. Snarr, who was a graduate of Blessing School of Nursing in Quincy, Illinois, brought with her a strong background in emergency and critical care nursing and great enthusiasm for teaching. After two and a half years Mrs. Snarr resigned her position to move to Mexico, Missouri with her family.

At this time Mrs. Carolyn Zeiger, RN was appointed to the position of instructor. Mrs. Zeiger had been associated with the Vocational-Technical School for many years. She had previously been an instructor and coordinator of the Practical Nursing School and most recently the Health Occupations Instructor.

In August of 1986, Mrs. Karyn Buxman, RN resigned as an instructor to take the position of School Nurse. In August of 1988, Mrs. Virginia Yochum retired after 20 years of dedicated service. Mrs. Anne Blue was appointed to the position of instructor. Mrs. Blue, a graduate of

St. John's Mercy School of Nursing, brought to the school several years of experience in school nursing and obstetrics.

In July of 1990, after twelve years with the school, Mrs. Carol Lemons resigned to accept a position at St. Mary's Hospital in Quincy, Illinois, as Nursing Manager of the hospital's Psychiatric Care Units. Mrs. Carolyn Zeiger was appointed to the position of Coordinator at this time.

Mrs. Gwenda Pollard, RN, BC, BSN was appointed to the position of instructor. Mrs. Pollard received her education at Hannibal-LaGrange College and brought to the school a strong background in Mental Health Nursing and a great enthusiasm for teaching.

After twenty-eight years of dedicated employment, Mrs. Carolyn Zeiger retired in August of 1996. Mrs. Pollard, Instructor, was then appointed to the position of Coordinator.

Mrs. Mary Grossmeier, RN, BSN was appointed to the position of instructor in August, 1996. Mrs. Grossmeier received her education at the University of Wisconsin. She brought a variety of teaching experience from other nursing programs and a background in critical care nursing.

In September 1998, Mrs. Alice Dempsey, RN joined the faculty to share a position with Mrs. Mary Grossmeier. Mrs. Dempsey received her diploma in nursing from Blessing Hospital School of Nursing in Quincy, Illinois. Mrs. Dempsey brought a great enthusiasm for teaching along with her wide variety of clinical experiences in maternal-child, acute care, and home health nursing.

In July 1999, after eleven years of dedicated service, Mrs. Anne Blue-Wilson resigned her position to become a clinical educator at Hannibal Regional Hospital. Mrs. Debbie Housman, RN was appointed to the position of instructor. Mrs. Housman, a graduate of the Hannibal Public School of Practical Nursing and John Wood Community College, brought with her a great interest in nursing education and an extensive clinical background in geriatrics and long-term care.

After twenty-four years of dedicated service, Dr. Harold Ward retired as Director of the Hannibal Area Vocational and Technical School on June 30, 2000. The school became known as the Hannibal Career and Technical Center on July 1, 2000, as Mr. Steve Matyas assumed his position as Director. When Mr. Matyas resigned June 30, 2001, Mr. Roger McGregor assumed the directorship on July 1, 2001. Mr. McGregor had previously taught the Design Drafting course with the school and returned to the education field after several years of working in the industrial field.

To meet evolving student needs and in recognition of the continuing nursing shortage, a two-year half-time curriculum option was written and submitted to the Missouri State Board of Nursing (MSBN). This curriculum was supported by the clinical affiliates and received approval from the MSBN in March 2001. This brought the total enrollment of students to 30: 24 full-time students and 6 half-time students.

In July 2003, after five years of dedicated service, Mrs. Alice Dempsey resigned her half-time position to return to obstetrical nursing practice at Hannibal Regional Hospital. Mrs. Michelle Kemp BA, RN, BSN, was appointed to the full-time position of instructor. Mrs. Kemp, a graduate of Ottawa University and Blessing Reiman College of Nursing, brought with her a great interest in nursing education and a strong clinical background in emergency care.

With Mrs. Kemp's resignation in June, 2004, Mrs. Starla Dunn, RN, BSN was appointed to the full time position of instructor. Mrs. Dunn, a Hannibal native and graduate of William-Jewell College, brought with her 16 years of experience in medical-surgical nursing along with great energy and interest in nursing education.

In October 2005, Mrs. Dunn resigned to pursue an ICU staff nurse position with Hannibal Regional Hospital. Mrs. Denise Crisp, RN was appointed to the position of instructor in November 2005. Mrs. Crisp, a graduate of the Hannibal Public School of Practical Nursing and John Wood Community College, brought with her a great interest in nursing education and an extensive background in acute care nursing.

After 10 years of dedicated service, Mrs. Mary Grossmeier resigned her half-time position as nursing instructor in June 2006. Mrs. Linda Mundell, a graduate of Hannibal LaGrange College, enthusiastically assumed this half time vacancy in July 2006 and brought with her a wide variety of clinical experiences in acute care, geriatrics and home/public health nursing.

Several nurse experts in the community assisted in covering the teaching responsibilities of Mrs. Mundell when she resigned due to health reasons in November 2006. Mrs. Mary Grossmeier returned to teach geriatrics theory; Mrs. Terri Amos, clinical educator at Hannibal Regional Hospital, taught IV Therapy; Mrs. Hazel Burditt, nurse practitioner at the Hannibal Clinic, taught Maternal-Newborn Nursing; and Ms. Michelle Wallace of the Hannibal Regional Center assisted with Medical-Surgical Nursing instruction.

In 2007-08, the program continued to utilize community nurse experts to instruct the content areas previously listed. All of the adjunct instructors returned except Mrs. Grossmeier. Mrs. Betty Bross, retired Director of Nursing for Maple Lawn Nursing Home, assumed responsibility for teaching Geriatrics theory.

Adjunct instructors for 2008-09 and 2009-10 included Hannibal Regional Hospital's clinical educator Kim Payne (IV Therapy), retired nurse practitioner Hazel Burditt (Maternal-Newborn Nursing) and former HCTC instructors Michelle Wallace (A&P) and Anne Wilson (A&P and Medical-Surgical Nursing). Mrs. Wilson, Mrs. Burditt-Sylvie, and Miss Wallace continued their adjunct positions during 2010-2011.

After 21 years of dedicated service, Mrs. Gwenda Pollard retired in August of 2011. Mrs. Debra Housman, Instructor, was appointed to the position of Coordinator.

Mrs. Karry Young, RN, BSN enthusiastically assumed Mrs. Housman's full-time instructor vacancy. A graduate of the Sinclair School of Nursing at the University of Missouri – Columbia,

Mrs. Young brought clinical experience in obstetrical nursing and home health nursing. She also participated in the Baby Beep Research Study.

In the fall of 2012, Hannibal Public Schools and Hannibal-LaGrange University (HLGU) entered into an agreement for HLGU to assume sponsorship of the Practical Nursing Program. Since HLGU had an accounting system in place that met the new federal requirements, this ensured that eligible students could continue to access financial aid. Over the next several months, the PN program was transitioned to its temporary new classroom in the periodicals room in the Foster building on the HLGU campus. The last class under sponsorship of the Hannibal Public Schools graduated on August 9, 2012 at Clover Road Christian Church in Hannibal, MO. After thirteen years of dedicated service, Mrs. Debbie Housman left her position as Coordinator to teach nursing at John Wood Community College in Quincy, IL.

The first HLGU-PN class began August 28, 2012 with Mrs. Gwenda Pollard returning as Coordinator. Mrs. Denise Crisp and Mrs. Karry Young continued as full-time instructors. Adjunct instructors included Mrs. Cody Smashey (Hannibal Regional Hospital staff nurse), Mrs. Amanda Butler-St. Juliana (HLGU-ASN second year instructor and Hannibal Regional Hospital staff nurse), Mrs. Kimi Yuchs (nurse executive), Mrs. Ann Wilson (former educator at Hannibal Regional Hospital and Hannibal Public School of Practical Nursing) and Mrs. Jennifer Carlin (Hannibal Regional Hospital staff nurse).

Although both Mrs. St. Juliana and Mrs. Yuchs assumed full-time positions in the HLGU-ASN program in the spring of 2013, they continue to be available as adjuncts for the PN program. Ms. Michelle Wallace, a second year instructor for the HLGU-ASN program and summer A&P instructor for the PN program for several years, also remains available to assist the PN program in an adjunct capacity. Mrs. Jennifer Carlin resigned her position as a PN adjunct instructor in August 2013 to return to clinical nursing.

In May 2014 after 8.5 years of service, Mrs. Denise Crisp resigned her instructor position to accept a position in geriatric nursing. Mrs. Laura Mathews, BSN, RN accepted the full-time position vacated by Mrs. Crisp. Mrs. Mathews, an HLGU ASN graduate, brought with her 3 years of acute care medical-surgical nursing experience and a great interest in nursing education. In addition to the adjunct instructors who assisted during the 2012-2013 school year, Laura Davis-Mass, MSN, RN joined their ranks during the 2013-14 program year. Mrs. Maas is an experienced nurse educator who works full-time in the HLGU-ASN program.

On November 1, 2014, Mrs. Laura Mathews relinquished her full-time position to assume an adjunct position in the HLGU-PN program. On this same date, Mrs. Lynn Ogle, BSN, RN accepted the full-time position vacated by Mrs. Mathews. In addition to her passion for nursing education, Mrs. Ogle's clinical experience included pediatric and emergency nursing.

Mrs. Mathews resigned her position effective January 30, 2015 to prepare for the arrival of her first child in April 2015.

The HLGU-PN program moved from the HLGU Student Center to the new Carroll Science Center in August 2015. The class of 2015 visited the new classroom and toured the new building

on August 11, 2015. While there, each student found their numbered seat and left a welcome gift for the student with that number in the class of 2016.

With a new classroom accommodating 40 students and an 8 bed lab dedicated to the PN program, a proposal to increase program enrollment from 30-35 was submitted to the MSBN and officially approved August 25, 2015. The HLGU-PN program assembled for class for the first time in the new building on August 25, 2015 with a class of 34.

In March 2016, a proposal to permanently increase the HLGU-PN annual enrollment to 40 was submitted to the Missouri State Board of Nursing. This proposal was approved at the Board's quarterly meeting in June 2016.

Missouri State Board of Nursing (MSBN)

3605 Missouri Boulevard
P.O. Box 656
Jefferson City, MO 65102-0656
Phone: 573-751-0681
Fax: 573-751-0075
nursing@pr.mo.gov
<http://pr.mo.gov/nursing.asp>

This program has met the State of Missouri Minimum Standards for Full Approval for 2011-2017 per the MSBN.

Please refer to the Hannibal-LaGrange University Catalog for the Statements of Compliance.

FACULTY

Lois Damron, BSN, RN

ASN – Hannibal LaGrange University, Hannibal, MO.
BSN – Hannibal LaGrange University, Hannibal, MO.

Lynn Ogle, BSN, RN - Instructor

ASN – John Wood Community College, Quincy, IL
BSN – Chamberlain College, St. Louis, MO

ADJUNCT FACULTY

Laura Davis-Maas, MSN, RN

Amanda St. Juliana, MSN-Ed, RN

Amelia Seiler, MSN, RN

Janet Stuckman, MSN, RN

Michelle Wallace, MSN, RN

NURSING MISSION AND PHILOSOPHY

Mission

The Hannibal-LaGrange University Division of Nursing strives to achieve excellence in nursing education by maintaining high academic standards in a distinctively Christian environment. Such an environment encourages the highest development of the student intellectually, physically, socially and spiritually.

Philosophy

The philosophy of the Hannibal-LaGrange University Division of Nursing is based on the shared values and beliefs of faculty, staff and students. The faculty believe that nursing education should be responsive to a diverse society, meeting both the needs of the individual student and the health care consumer. The nursing faculty are committed to excellence in the profession of nursing and quality education. The Hannibal-LaGrange University Practical Nursing Program prepares its graduates to achieve success on the NCLEX-PN and to function as accountable and flexible health-care providers who practice under the direction of the registered professional nurse or physician in diverse settings. The organizing framework of the program is based on the major concepts of PERSON, HEALTH, NURSING, ENVIRONMENT, TEACHING-LEARNING, and NURSING EDUCATION.

PERSON: We believe the PERSON is a unique, holistic being, created by and accountable to God. As a holistic being, the PERSON has basic needs arising from physiological, developmental, cognitive, psychosocial, cultural, and spiritual dimensions. The PERSON, throughout the lifespan, has the right to live with dignity, to be accepted for inherent worth as an individual, and to make decisions about life. PERSON is also defined as individuals, families, and communities.

HEALTH: We believe HEALTH to be a holistic and dynamic process in which the person adapts to internal and external environmental changes. HEALTH is an ever-changing state, fluctuating on a wellness-illness continuum, in which continual alterations are made in order to maintain homeostasis. Meeting basic needs is essential to obtain optimal health. HEALTH has objective and subjective components, varies with each person's perception, and may be viewed differently by the health care provider. Health care encompasses health promotion, maintenance, restoration and end of life care designed to support an optimal state of HEALTH throughout the lifespan.

NURSING: We believe the profession of NURSING is an art and a science that derives knowledge from the humanities, sciences, nursing theory, research and evidence-based practice. NURSING encompasses caring, compassion, and cultural awareness. Under the direction of a physician or registered professional nurse, the practical nurse as a provider of care assesses, communicates, educates, acts as an advocate, collaborates, and manages care, utilizing clinical decision making and holistic caring interventions, in an attempt to help the person maximize self-care abilities throughout the lifespan. The nurse uses current technology and delivers safe,

competent, and cost efficient care. The nurse utilizes the nursing process in assisting the person to promote, maintain, and restore health, or provide end of life care. The nurse is legally and ethically accountable to self, individuals and society. NURSING is a commitment and a service to the person in a diverse, multi-cultural society regardless of age, sex, race, color, religious belief, disability, or type of health problem.

ENVIRONMENT: We believe the ENVIRONMENT is a complex, dynamic, and open system encompassing all internal and external factors affecting the person. Within this ENVIRONMENTAL system, the person is constantly exposed to fluctuating internal and external factors and attempts to adapt while maintaining homeostasis. Responses by the person to the ENVIRONMENT result in health changes along the wellness-illness continuum. All interactions among the person, health, and nursing overlap and occur within the infinite boundaries of the environment.

TEACHING-LEARNING: We believe TEACHING-LEARNING to be a dynamic, continuous, and interactive process of education. TEACHING involves effectively communicating knowledge in an innovative and creative manner. The teacher serves as the facilitator by actively engaging student involvement with regard to individual learning styles, prior experiences, needs and abilities. The teacher encourages the development of critical thinking, communication, creativity, and independence by guiding, directing, and evaluating planned learning experiences. LEARNING is a process of cognitive, affective, and psychomotor development in which the student acquires knowledge and skills from the simple to the complex. LEARNING is best achieved when it is based upon internal motivation and readiness to learn. The TEACHING-LEARNING process is a shared responsibility and is enhanced by a caring teacher-student relationship. Such an atmosphere promotes student achievement and self-development.

NURSING EDUCATION: We believe NURSING EDUCATION is a collaborative endeavor of faculty and students to achieve the knowledge, skills, and attitudes required to practice professional nursing. NURSING EDUCATION is accessible to individuals with diverse cultural, experiential, and academic backgrounds. NURSING EDUCATION takes place in an institution of higher learning where students have the opportunity to interact with students in other curricula. The student is exposed to a variety of learning opportunities in academic and clinical settings to gain basic knowledge and skills necessary to function as a practical nurse across the lifespan in diverse settings. The nursing student acquires knowledge of trends, issues, technology, and forces that shape and influence the practice of nursing. Student self-assessment and evaluation is encouraged to prepare for continuing personal and professional development after graduation. Lifelong learning is an integral component of the nursing profession and commitment by the individual.

CORE VALUES

* Caring * Integrity * Respect * Service

PROGRAM OUTCOMES

The outcome criteria of the Hannibal-LaGrange Practical Nursing Program are to prepare graduate practical nurses who will:

1. Participate as a member of the health care team in collecting data, assessing, planning, implementing, and evaluating patient-centered care in all settings where nursing takes place, under the direction of a licensed physician and/or professional nurse.
2. Demonstrate entry-level competency in using sound judgment, knowledge, skills, and past experience when assessing and meeting the holistic, safety, and rehabilitation needs of the individual patient/client in sickness and in health.
3. Recognize the essential worth and needs of individual/community and gain insight into behaviors which will aid in the understanding of the needs of others.
4. Recognize opportunities for and actively participate in health teaching and use available resources in the clinical facility and in the community.
5. Accept responsibility for individual and professional behavior and for continuing personal, professional, and educational development.
6. Practice within the legal and ethical framework of the practical nurses' role as governed by the Missouri Nurse Practice Act.
7. Recognize the practical nurse's responsibilities as an effective and contributing member of professional organizations and as a member of a democratic society.

OUTCOME MEASURES

1. Graduates of the Hannibal-LaGrange University Practical Nursing Program will achieve a first-time NCLEX-PN pass rate that is equal to or greater than the state passing average.
2. The admission process is such that students admitted are capable of achieving the program objectives. The retention goal is a minimum of 75%.
3. The pattern of employment will be that 100% of graduates will be employed in a nursing position within 6 months of graduation.
4. Exit interviews of graduates and follow-up surveys by both graduates and employers will be evaluated for reflection of program satisfaction.

Reviewed yearly
Revised as needed

PROCEDURE FOR MEASURING STUDENT COMPETENCE

MEASUREMENT OF ENROLLED STUDENT'S PROGRESS & COMPETENCY

A review of the student's level of achievement in theory, general adjustment and clinical experience is made periodically throughout the program. The student must not fall below the minimum achievement level in any subject area. Minimum achievement level is considered to be 80% (C).

The math content must be successfully completed prior to starting clinical rotations. Math testing will continue in second and third semester courses. Achievement levels in the various courses cannot be averaged; each course must stand alone.

The schedule for evaluating progress and competence is as follows:

1. Four weeks after enrollment. (See appendix I)
2. Twelve weeks after enrollment. (See appendix I)
3. At the end of each course. (See appendix I)
4. Student clinical performance evaluations are made following Geriatric, Medical/Surgical and Team Leading theory and clinical experiences.
5. Student's behavior will be evaluated as the need arises. Inappropriate behavior will be documented on critical incident and/or warning forms. If the behavior continues, the student will be recommended for probation. The student will be subject to dismissal if the terms of probation are not met. **At any time, if an extremely unsafe incident occurs either in the classroom or clinical, the student may be dismissed.**

FINAL COMPETENCY MEASUREMENT

Exit testing is administered to each student upon completion of content areas near the end of the program. This is used as a tool to assist the student in evaluating strengths and weaknesses. This will enable the student to identify areas for self-study. **Successful completion of the Exit Exams is a requirement for graduation (see exit exam policy in appendix).**

As a final summary of clinical and theory performance, a reference form is completed for each student evaluating his or her ability as a beginning practitioner. (See appendix I)

A final transcript summarizing theory and clinical performance will be prepared and kept on file in the registrar's office at HLGU.

The ultimate final measurement of competency is the National Council Licensure Examination (NCLEX-PN or State Boards) which the graduate takes after completion of the program. Attached is statistical information on the results of this measurement.

HANNIBAL PUBLIC SCHOOL OF PRACTICAL NURSING (1962-2012)
Hannibal-LaGrange University Practical Nursing Program (2013-2016)
STATISTICAL INFORMATION

Enrolled		Graduated		State Boards
16	September 10, 1962	15	August 23, 1963	15
21	September 11, 1963	16	August 21, 1964	16
20	September 14, 1964	13	August 27, 1965	13
14	September 13, 1965	12	August 26, 1966	12
21	September 12, 1966	17	August 25, 1967	17
23	September 11, 1967	16	August 23, 1968	14
30	September 16, 1968	19	August 29, 1969	19
29	September 15, 1969	22	August 28, 1970	22
30	September 14, 1970	23	August 27, 1971	23
32	September 13, 1971	27	August 25, 1972	27
30	September 11, 1972	27	August 24, 1973	27
29	September 10, 1973	25	August 23, 1974	25
27	September 16, 1974	24	August 29, 1975	24
31	September 15, 1975	24	August 27, 1976	24
32	September 13, 1976	32	August 26, 1977	32
30	September 12, 1977	24	August 25, 1978	24
32	September 11, 1978	24	August 24, 1979	23*
32	September 10, 1979	26	August 22, 1980	26
32	September 8, 1980	24	August 21, 1981	24
32	September 7, 1981	31	August 22, 1982	30
32	September 13, 1982	30	August 25, 1983	30
32	September 9, 1983	26	August 24, 1984	26
24	September 10, 1984	19	August 22, 1985	19
23	September 9, 1985	15	August 21, 1986	15
20	September 8, 1986	15	August 20, 1987	15
23	September 14, 1987	16	August 25, 1988	16
23	September 12, 1988	18	August 24, 1989	18
19	September 11, 1989	17	August 23, 1990	17
22	September 10, 1990	23	August 22, 1991	23
20	September 9, 1991	16	August 20, 1992	16
24	September 14, 1992	19	August 26, 1993	19
24	September 13, 1993	19	September 1, 1994	19
23	September 12, 1994	16	August 24, 1995	16
24	August 28, 1995	19	August 8, 1996	19
24	August 26, 1996	15	August 7, 1997	15
24	August 25, 1997	17	August 6, 1998	14**
25	August 27, 1998	18	August 5, 1999	18
23	August 25, 1999	13	August 3, 2000	13
22	August 23, 2000	18	August 2, 2001	18
21	August 27, 2001	13	August 8, 2002	13
31	August 26, 2002	25	August 14, 2003	25
30	August 25, 2003	16	August 12, 2004	16
30	August 26, 2004	24	August 11, 2005	22
30	August 25, 2005	20	August 17, 2006	18
31	August 24, 2006	23	August 16, 2007	23
26	August 23, 2007	20	August 14, 2008	19
31	August 21, 2008	23	August 13, 2009	22
31	August 27, 2009	25	August 12, 2010	25
30	August 23, 2010	25	August 11, 2011	25
29	August 22, 2011	22	August 9, 2012	20
31	August 28, 2012	22	August 20, 2013	20
31	August 27, 2013	25	August 14, 2014	24
30	August 26, 2014	25	August 13, 2015	
34	August 25, 2015	26	August 11, 2016	
31	August 30, 2016		August 10, 2017	

* One not eligible to write State Board Exams

** Two graduates have not tested

NURSING CURRICULUM

FIRST SEMESTER

		Credits/Hours
PNE110	Contributory/Selective Experiences I & Personal & Vocational Concepts	5/131
PNE105	Nursing Fundamentals	6/100
PNE104	Anatomy & Physiology	6/95
PNE109	Human Growth & Development & Nutrition	3/55
PNE111	Pharmacology/Introduction to Medical-Surgical Nursing	6/105
		26/486

SECOND SEMESTER

PNE128	Medical-Surgical Nursing I & Intravenous Therapy	6/100
PNE122	Geriatric Nursing	3/62
PNE129	Maternal-Child/Pediatric/ Mental Health Nursing	8/120
PNE120	Contributory/Selective Experiences II	3/223
		20/505

THIRD SEMESTER

PNE133	Medical-Surgical Nursing II	4/70
PNE134	Medical-Surgical Nursing III	5/75
PNE135	Team Leading	2/58
PNE130	Contributory/Selective Experiences III	5/306
		16/509

Total Program Credits/Hours
62/1500

Theory and clinical experiences are designed to meet the philosophy and objectives of the program as determined by the faculty and in accordance with the Missouri State Board of Nursing Standards for Approved Programs of Practical Nursing in Missouri.

COURSE DESCRIPTIONS

TERM 1 Courses: 26 hours; Prerequisites: all PN admission requirements

PNE 110 Personal & Vocational Concepts & Contributory/Selective Experiences I 5 hours

PVC assists students to understand the vocation of practical nursing as well as the roles and responsibilities of the Licensed Practical Nurse. This course provides information regarding the legal and ethical aspects of nursing, nursing history and trends, the role of the practical and professional nurse, the interprofessional approach to patient care and quality improvement processes.

C/SE1 provides students with various vocation-related experiences including clinical preparation, chapel, class business meetings, seminars, assessment testing, and special clinical opportunities. This course also introduces students to basic math skills needed to calculate dosage requirements in clinical practice.

PNE 109 Human Growth & Development & Nutrition 3 hours

Provides an understanding of the various stages of normal growth and development in the human life cycle as applied to nursing care. Individual, family and community health care will be addressed. Focuses on the fundamentals of good nutrition and its relationship to human health. The course covers the science of man's food requirements, the nutritional value of foods and the specific nutrient requirements for all age groups under varying conditions. Food fads, safe guarding the food supply, and water balance are covered.

PNE 104 Anatomy & Physiology 6 hours

Acquaints students with the normal basic structure and function of the human body. The student will acquire knowledge of the various body systems and their individual organs, and gain an understanding of the relationship of the parts which enables the body to function as an integrated whole.

PNE 105 Nursing Fundamentals 6 hours

Introduces the basic concepts and practices underlying all nursing care. Learning is applied in both classroom and laboratory settings. The student will demonstrate proficiency in the laboratory and continued proficiency in clinical practice.

PNE 111 Pharmacology & Introduction to Medical Surgical Nursing 6 hours

Covers dosage calculation, basic principles of pharmacology, administration of medication, the effect of drugs on body systems and the Practical Nurse's responsibilities and limitations in the care of patients receiving drug therapy. The study of specific drugs is integrated into specific pathophysiology courses. Introduces the fundamental processes of health and illness, fluid and electrolyte balance, pre and postoperative care, care of the patient with cancer, care of the patient

in pain, and care of the patient with an infection. It is confined to basic information that prepares the students for the more advanced medical-surgical courses.

TERM 2: 20 credits; Prerequisites: successful completion of all term I courses

PNE 128 Medical Surgical Nursing I & IV Therapy

6 hours

Focuses on the care of the medical-surgical patient experiencing diseases and disorders of various body systems. Emphasis is placed on utilizing nursing care skills, nursing knowledge, the nursing process, and adapting each to the individual patient in the clinical area. Recognized medical and surgical treatments including diet and pharmacological therapies are integrated throughout the medical-surgical content. Prepares the practical nursing student to perform venipuncture, monitor and regulate intravenous fluids, add parenteral solutions to existing IV lines, change IV tubing, monitor transfusions of blood initiated by the RN and increase knowledge of IV solutions used in IV therapy. This skill is integrated in the clinical rotations under the direction of an approved preceptor.

PNE 122 Geriatric Nursing

3 hours

Presents the holistic approach to the care of the mature to aging person. Explores the aging process with its many challenges and compensations. Problems related to role change and completions of developmental tasks are investigated. Students will care for the aging individual in extended care facilities, hospitals and other health care settings.

PNE 129 Maternal-Child Nursing, Pediatric Nursing & Mental Health Nursing

8 hours

Provides students with the basic knowledge necessary to care for maternal and newborn clients at the entry level of practical nursing. Also provides basic instruction and skill development in the assessment and care of the maternal client in the areas of prenatal care, labor and delivery, and postpartum. Also provides basic knowledge and skill development in the area of newborn nursing.

Provides an understanding of the pediatric disease processes. Covers nursing care for the child and its family with an emphasis on disease process, health teaching, prevention of illness, and promotion of optimal physical, developmental, and emotional health. The course will illustrate health care in the hospital, home, school, clinic, and physician's office.

Acquaints students with a group of health problems that derive primarily from problems in emotional adjustment and maturity. Raises awareness of public health issues related to mental disorders and points out the needs of the mentally ill and the care required to cope with related health issues in society.

PNE 120 Contributory/Selective Experiences II

3 hours

Provides students with various vocation-related theory, lab & clinical experiences. Includes all clinicals except geriatrics.

TERM 3: 16 credits: Prerequisites: successful completion of all term 2 courses.

PNE 133 Medical Surgical Nursing II

4 hours

Provides further instruction in the care of the medical-surgical patient.

PNE 134 Medical Surgical Nursing III

5 hours

Provides further instruction in the care of the medical-surgical patient.

PNE 135 Team Leading

2 hours

Introduces practical nursing students to leadership techniques and skills. Provides a basic management foundation on which to build through instruction and clinical experiences.

PNE 130 Contributory/Selective Experiences III

5 hours

Provides students with various vocation-related theory, lab & clinical experiences. Includes all clinicals except team leading.

Stand-alone course for LPNS

PNE 126 Intravenous Therapy

2 hours

Prepares the Missouri Licensed Practical Nurse to perform venipuncture, monitor and regulate intravenous fluids, add parenteral solutions to existing IV lines, change IV tubing, monitor transfusions of blood initiated by the RN and increase knowledge of IV solutions used in IV therapy. These skills are demonstrated in a clinical rotation under the direction of an approved preceptor.

ACADEMIC STANDARDS

In addition to the policies and regulations of the Hannibal-LaGrange University Practical Nursing Program, the student is subject to all policies and regulations as outlined in the HLGU Catalog and Student Handbook (www.hlg.edu) as well as all clinical facilities. Academic standards applicable to all Hannibal-LaGrange University students are found in the official University catalog. Standards applying specifically to practical nursing are as follows:

A. GRADES and TESTING REQUIREMENTS

Students receive a grade for each course. A grade consists of all theory and clinical assignments and evaluations as described in the course syllabus. Grades are expressed in letters and their equivalency in numbers as follows:

- A = 94-100
- B = 87-93
- C = 80*-86
- D = 70-79
- F = 69 or below

Any nursing student receiving a final grade BELOW 80% will not be able to continue in the practical nursing program. Grades will not be rounded.

Any student making below 82 will be considered on warning or probation with remediation mandates. Students on warning or probation may be required to attend remedial sessions after school or during Friday open lab.

Assignments are to be made up within seven days unless special permission is granted by the faculty. **ALL MAKE-UP WORK WILL BE COMPLETED AFTER SCHOOL HOURS OR AS DESIGNATED BY THE INSTRUCTOR.** A 5% penalty will be applied to the scores of all tests not taken at the designated time. **NO MORE THAN THREE TESTS MAY BE TAKEN LATE IN ANY COURSE WITH THE ASSESSED 5% PENALTY; EVERY LATE TEST THEREAFTER WILL BE RECORDED AT HALF EARNED SCORE.**

IT IS THE STUDENT'S RESPONSIBILITY TO CONTACT THE CLASS INSTRUCTOR REGARDING MAKE-UP WORK. FAILURE TO PROMPTLY INITIATE SUCH CONTACT MAY RESULT IN LOSS OF GRADE.

Testing Requirements: The first test performance grade will be recorded. However, to ensure student competency and comprehension, any failed test must be re-taken and passed before progressing to the next test of content area in the course. (If that subsequent test is taken late, the student will receive a 5% test penalty). Make-up or retake tests will cover the same material but may have different test questions.

The student may **NOT** re-take a test the same day of the initial test review **nor** will more than one re-take opportunity be allowed in **one** day.

All testing re-takes must be completed prior to completion of course. All testing re-takes must be done **during the next open lab period** unless special permission is granted by the faculty. The student will be required to make-up all missed open labs by being in attendance at the subsequent Friday lab from 0800-1200 (or 0900-1300). All missed open labs may be documented on the student's reference form.

Student Responsibility: It is the student's responsibility to contact the class instructor regarding any late assignments, testing and make-up work. Failure to do so may result in loss of grade. Making copies of classroom materials is the responsibility of the student – this service is not provided by the nursing department or clinical facilities. **It is against program policy to make copies of take-home quizzes and tests.**

Homework Grading: Specific evaluation criteria will be established/provided for written and/or oral assignments.

Class Participation Grading System

1. Attendance/punctuality
2. Physically prepared (in seat, learning materials ready)
3. Honesty
4. Accepts constructive feedback in a professional manner
5. Demonstrates courtesy and respect toward the instructor and classmates
6. Is attentive and cooperative in class
7. Takes a serious approach to learning
8. Reflects a positive attitude and effort
9. Makes a positive contribution to the class
10. Follows directions and submits assignments on time (class participation grade will be reduced by 5 points for each assignment not submitted)
11. Attends open lab as indicated

FAILURE TO ACHIEVE IN ANY AREA MAY RESULT IN A 5% REDUCTION IN CLASS PARTICIPATION GRADE. THE REDUCTION WILL OCCUR WITH EACH INCIDENT.

B. WRITTEN WORK

Written communication is extremely important in the nursing profession. It is critical that written work be clear, concise, and readable in a format that reflects professional standards. All written assignments or papers of any type must be completed to receive a final course grade and are to be submitted according to the following guidelines:

1. **All materials are to be submitted using black or blue ink or pencil on 8 1/2 x 11 paper.**
2. **Late Assignments: All assignments are due by 0800 of designated day. Late assignments received after 0800 of the day due will be assessed a 10% penalty if received before 0800 of the following class day. Assignments turned in after the late period may be recorded at 1/2 graded value per instructor's discretion. In the event of a tardy or absence, a 10% penalty will be assessed if the assignment is submitted promptly upon returning to school. THREE ASSIGNMENTS OF UNSATISFACTORY QUALITY MAY RESULT IN A FAILING GRADE FOR THE COURSE.**

C. CLASSROOM and SKILLS LAB:

CLASSROOM INFORMATION

1. Classes are generally scheduled for 50 minutes with a 10 minute terminal break. Classes scheduled to meet for 90 minutes will break for 10 minutes at the end of 80 minutes. Students are expected to be in their seats ready for class with paper, pen, appropriate texts and materials. Students will not leave on break until dismissed by the Instructor.
2. When a student has been absent or tardy, this is to be noted and initialed by an Instructor before readmission to the classroom will be allowed. The attendance record is to be submitted to the Coordinator at the end of each week.
3. Class participation is an important part of the learning process. Students must raise their hands to be recognized by the Instructor.
4. Conduct disruptive to learning cannot be tolerated. The offender will be given one verbal warning. If this does not suffice the student will be sent from the classroom and will make an appointment with the Coordinator.
5. All homework is to be marked with student name and #, course and due date. Place it face down in the Instructor's basket in the designated area. **DO NOT REMOVE ANY ITEMS FROM INSTRUCTORS' BASKETS OR RETURN MATERIALS TO INSTRUCTORS' DESKS. STUDENTS ARE NOT TO BE IN THE INSTRUCTORS' OR COORDINATOR'S OFFICES UNLESS AN INSTRUCTOR IS PRESENT. All numbered papers are to be erased and returned to the appropriate instructor.**

6. Tape recorders may be used per instructor discretion. All books and journals in the nursing department are references that must remain in the department.
7. Please help us to maintain a tidy classroom by clearing your desk and aligning your chair at the end of each day. Students are expected to use their baskets to contain desktop articles; this basket will be quickly moved under the desk during times when the desktop must be cleared (testing, etc). Each week, two students are assigned to the PN classroom, the PN lab and the nursing lounge to oversee and maintain overall tidiness and report any problems. The lounge duties will include checking the refrigerators (discard any containers of food at the end of the week, wiping it clean, and defrosting as needed), the microwaves (wiping them clean), and coffee pot (ensure that it is turned off each evening and washing at the end of each week). **NO OPEN CONTAINERS OF FOOD OR DRINK ARE ALLOWED TO BE KEPT IN THE REFRIGERATORS.**
8. **Snacks and covered beverages** may be kept at the student's desk and discretely consumed during class sessions. There may be times when this must be restricted. No food and drink are allowed in the computer lab.

LAB INFORMATION

The PN nursing skills lab is open during class hours. Additional hours may be provided based upon faculty availability.

The nursing skills lab is where students are introduced to new skills. Students are expected to practice and be evaluated on nursing skills. Critical thinking is encouraged by incorporating the rationale for what is being learned as well as understanding the nursing responsibilities that accompany these skills.

Students have the opportunity to practice independently, with peers, and with faculty to develop these skills. **Practice is generally completed on the student's own time.** It would be beneficial to include lab practice time into your weekly schedule. Prior to skills check-off, the student is required to complete two practices that should not be less than 30 minutes each, unless specified by faculty.

The goal of the nursing skills lab is to provide an opportunity for the student to become competent with nursing skills. This activity promotes safe practice and excellence in nursing.

Skills Lab Guidelines

- NO children allowed in lab.
- NO cell phones during practices or check off as this can be distracting to other students.
- Bring all necessary forms to skills check-off.
- Dress for check-offs: NO long sleeves, no excessive jewelry, long hair tied back, etc.
- Student will be required to remediate per instructor's directives for any unsatisfactory skills check-off before retesting.

D. NURSING LIBRARY AND LEARNING CENTER

The Nursing Library /Study Area (Room 125) is open during class hours. Additional hours may be established with instructor support. Books and journals located there are for use in the Nursing Library only. The Roland Library has a variety of additional resources available for use. A computer password is required for computer-assisted programs on campus. Please contact Computer Services for a password.

E. CELL PHONES/LAPTOPS

All cell phones **MUST** be on silence during class time and must be stowed in the students' mailbox. Cell phones may be used on campus during breaks, lunch, and before and after school. Cell phone use is not permitted on patient-care units, while providing direct patient care or during observational experiences. Please remember to use cell phone etiquette. Please give family members or those needing to reach you the nursing division secretary/receptionist's phone number: 573-629-3140.

F. ATTENDANCE

A record of attendance will be kept in each student's permanent file. This is a reflection of professional responsibility and reliability. Regular classroom attendance and clinical laboratory attendance is essential for the nursing student to succeed. Absence from class will make the student less effective in the clinical area. Repeated absences from either class or clinical will jeopardize student status in the program. **When absences do occur, it is the student's responsibility to discuss those absences with the instructor and make arrangements to complete missed work.**

1. Classroom

- a. Students are expected to be present and punctual for all class lectures. If an absence or tardy is necessary, please **promptly send a group email notice** to the PN Coordinator & Instructors.
- b. The student is responsible for all material covered and assignments given in class during absences and tardies.
- c. Failure to comply with this policy will result in an unexcused absence.

2. Clinical

- a. It is the student's responsibility to personally inform the clinical instructor of an absence as early as possible **BEFORE** the scheduled clinical/observation. Please call the clinical instructor's home or cell phone before 2100 the night before clinical or after 0530 on the day of clinical. If unable to make contact, then wait until the clinical starting time and call the clinical facility. You must talk to your clinical instructor personally. **DO NOT LEAVE A MESSAGE.** In addition, the student is to notify the charge nurse on duty on the assigned unit of the clinical agency to report the absence.
- b. It is the student's responsibility to reschedule any missed observational experiences with the instructor or coordinator. **Any clinical absence will require make-up work** at the instructor's discretion (this may be clinical assignment or written work). Clinical make-up

will be done at the INSTRUCTOR'S CONVENIENCE and in some cases may require additional make-up fees at the rate of \$40.00/hour.

- c. Absence from **orientation** to clinical areas, **habitual tardiness, or absence of greater than 10% of clinical hours** will subject the student for review by the Nursing Admission, Promotion, and Retention Committee.
 - d. One clinical absence due to instructor cancellation or University closing will be allowed without makeup, per semester. **(If there is NO cause for cancellation, students are not owed one day per semester.)**
 - e. Students with greater than 10% absence and/or a failing grade in the theory component of the nursing course may be restricted from the clinical area until, in the professional judgment of the nursing faculty, sufficient theoretical knowledge is acquired to assure safe patient care.
 - f. Students tardy for clinical may be sent to the Hannibal-LaGrange Nursing Division and may receive an unsatisfactory grade for that clinical day. The clinical day will be required to be rescheduled at the convenience of the instructor.
 - g. Failure to comply with this policy will result in an unexcused absence.
3. Absenteeism will be reviewed on an individual basis. Excessive absenteeism will result in disciplinary action.

Prompt notification regarding an absence is MANDATORY. Failure to do so will be recorded as an unexcused absence.

THREE UNEXCUSED ABSENCES SHALL MAKE THE STUDENT SUBJECT TO DISMISSAL UPON THE RECOMMENDATION OF THE FACULTY. A warning note will be written after each unexcused absence and placed in the student's file.

4. Absenteeism Procedure

Students who have been absent or tardy need to document time gone and verify that time with an instructor who will consult the master attendance record. The student record will be submitted to the Coordinator at the end of each week, compared to the master attendance record, entered into the portal and returned to the student. **Request for absences are to be made to the Coordinator/Instructor or emailed to the PN Faculty Group for evaluation before the date and time requested.** Upon returning to class, the student must consult with the classroom instructor to reconcile the time gone with the master attendance list. In the event of a time discrepancy between the student record and the master attendance record, the master attendance list will be considered accurate. Attendance will be taken in each class. An absence of less than 30 minutes will count as a tardy and 30 or more minutes will be documented as an absence.

5. Leave of Absence

FAMILY CRISIS: A limited leave of absence may be granted for personal illness or emergencies in the student's immediate family. Absences will be evaluated on an individual basis by the faculty from the standpoint of the content and experiences missed by the student and his/her ability to meet the requirements of the program. A family crisis leave of longer

than seven school days will necessitate the student in good scholastic standing to return and resume studies in the next class. Good scholastic standing means the student has passing grades in all areas. (See readmission policy - # 7 below)

MEDICAL LEAVE OF ABSENCE: Loss of time due to extended illness would require the student to request a medical leave of absence. Only those students in good scholastic standing will be allowed to resume their studies in a future class. Good scholastic standing means the student has passing grades in all areas. (See readmission policy - # 7 below)

A student unable to render safe nursing care because of prescribed medication or physical condition will be asked to leave the clinical area until such a condition is alleviated and medical clearance for return is documented per medical information form. (See appendix I)

6. **Punctuality Requirements:** Punctuality is an expectation and a necessary component of professional conduct. A student with excessive absenteeism/tardies may receive a warning. If the behavior continues, a recommendation for probation will be given.
7. **Readmission Policy:** A student who withdraws from the program in good standing (i.e. passing grades in all areas) may be readmitted to the next class on an individual basis. This student shall complete the same requirements for graduation as do other members of the class to which they are admitted. A student who withdraws or is dismissed from the program due to unsatisfactory grades or attendance will be evaluated for readmission to the program. This may include the need to reapply to the program.

G. **TESTS/MAKE-UP TESTS:** see A: GRADES and TESTING REQUIREMENTS

H. STUDENT EVALUATION PROCESS

The faculty is available to assist with student concerns by appointment. Special requests, checking on assignments, etc. should be done before or after school. Business will not be conducted during lunch break.

1. **THEORY** - The syllabus for each nursing course contains the academic requirements for promotion. All requirements must be met for promotion. If a student is not meeting the requirements, a conference with the student will be requested.
2. **SKILLS LABORATORY** - It is the students' responsibility to prepare for return demonstrations in a timely manner and successfully demonstrate mastery of the skill. The grading system for Skills Lab will consist of a check-off/grading sheet for each procedure.
3. **CLINICAL** - Students are provided with clinical objectives at the beginning of each rotation. Students will be made aware of their progress continuously throughout the semester. Clinical evaluations will be conducted on a weekly basis as well as for specific rotations (med-surg and team leading). The grading system for clinical is provided in the clinical handbook. A student receiving a clinical unsatisfactory on three occasions in one semester

may be dismissed from the course with a grade of "F". See Appendix B for Unsafe Student Practice Policy.

4. PROFESSIONAL BEHAVIOR – Students are expected to conduct themselves in a professional and prudent manner even when the course work and demands are great. Students will function in stressful conditions and are expected to demonstrate mature, appropriate coping mechanisms. When unacceptable behavior or attitudes are identified, students may be counseled. At this time, the instructor will request a conference with the student during which the unacceptable attitude or behavior will be discussed. The student may be placed on warning/probation and given a chance to correct the behavior or attitude. A written plan for correction, which could include professional counseling, will be developed and agreed upon by the student and instructor and must be completed within a specified time frame. At the end of the specified time frame, if there has not been sufficient improvement to meet all objectives required by the agreement, the student may be dismissed from the nursing program. If the required improvement is accomplished, the warning/probationary status will be removed. Depending upon the nature of the unprofessional behavior, the student may be subject to immediate dismissal.

5. Counseling and Guidance:

Instructors are available on an individual or group basis for conferencing by appointment. Appointments may be scheduled before classes in the morning, after school, and on breaks.

Student Development focuses primarily upon assisting students to develop their cognitive, spiritual, social and physical potentials as they pursue their educational goals. Students may make an appointment with this office on their own (extension 3008) or with the help of the Coordinator. Please refer to the online HLGU Student Handbook.

The Financial Aid office, Registrar and Student Accounts office are located in the Burt Administration building and are available to assist students (please see phone directory in the online HLGU Student Handbook).

Each student is scheduled for a conference and/or will receive an evaluation during the following times for theory/clinical performance*.

1. After 4 weeks
2. After 12 weeks
3. At the end of each course
4. After the Geriatric rotation
5. At the end of each Medical Surgical/specialty rotations period
6. At the end of the Team Leading rotation

The student will expect constructive evaluations directed toward his/her academic and clinical performance. These have no bearing on his/her value as a person. Performance is to be viewed as either positive or needing improvement. Remember, evaluation is an ever-present reality in any career.

*Please note that counseling and guidance are offered continually throughout the year and that conferences may be held more frequently than noted above in an effort to assist students to successfully complete the nursing program.

I. CLINICAL EXPERIENCE

1. Students are responsible for following the policies of Hannibal-LaGrange University and the policies of the assigned clinical agencies.
2. Students are responsible for their own transportation to and from the clinical agencies. Carpooling is encouraged.
3. Students are required to purchase malpractice liability insurance before they may practice in the clinical area. The insurance policy is to be purchased through the University during registration.
4. **Students reporting for clinical unprepared for their assignment or demonstrating unsatisfactory performance may be sent home or to the Hannibal-LaGrange University Practical Nursing Program and receive an unsatisfactory grade for that clinical day.** The clinical day will be required to be rescheduled at the convenience of the instructor.
5. All student/client relationships are to be maintained on a therapeutic level only. Contact with clients will be limited to the clinical assignment unless otherwise approved by the appropriate instructor.
6. Nurses, and therefore nursing students, are expected to accept all assignments when given. If the student holds religious beliefs that could prevent carrying out certain assignments, a discussion with the instructor should take place at the beginning of the semester.
7. Students **MUST** maintain patient confidentiality both inside and outside of the clinical setting. HIPAA Federal Regulations are followed per clinical institution policy.

J. STUDENT EMPLOYMENT RULES

1. In accordance with the Missouri Statutes and the Rules and Regulations of the Department of Registration and Education, the student may be employed only in a capacity which does not require a practical nursing license.
2. Students may not wear the school uniform in any type of employment for pay.
3. The nursing faculty strongly advises students not to work full-time and carry a full class load during the school term. Alertness in class and clinical is expected for academic and clinical success and for the safety of patients. Students are expected not to work the eight hours prior to a class or clinical day.

K. PROMOTION/RETENTION POLICIES

1. In order to remain in the Practical Nursing Program, the student must:
 - a. Meet the health requirements for nursing.
 - b. Maintain a minimum of a 2.0 cumulative grade point average and a "C" grade (80%) in all courses. See syllabi for individual course requirements.
 - c. Students will be required to take standardized tests prior to the conclusion of some nursing courses. The student must successfully challenge these tests or remediation and retesting will be required. This remediation will be assigned at the discretion of the course instructors. The cost of remediation is the sole responsibility of the student.
2. Students who are required to audit previously passed nursing courses before re-entry into the nursing program must satisfactorily meet all faculty requirements of the audited course.
3. Math Requirements. See Appendix D.
4. Exit Exam Requirements. See Appendix E.
5. Readmission Policy: A student who withdraws from the program in good standing (i.e. passing grades in all areas) may be readmitted to a future class on an individual basis. This student shall complete the same requirements for graduation as do other members of the class to which they are admitted. A student who withdraws or is dismissed from the program due to unsatisfactory grades or attendance will be evaluated for readmission to the program. This may include the need to reapply to the program.

L. DISMISSAL

1. A student may be dismissed from the Practical Nursing Program for the following reasons:
 - a. Unprofessional/unethical behavior.
 - b. Unsafe clinical performance.
 - c. Appearing in class or clinical under the influence of alcohol, recreational drugs, or medications that impair judgment.
 - d. Final course grade below 80%. Test average must also exceed 79.5%. Homework and class participation cannot be used to bring the average above 79.5% when the test average is inadequate. Clinical average of less than 80% in any rotation.
 - e. Three unexcused absences. An unexcused absence is when the student has an inadequate reason for the absence or fails to properly report the absence. Unexcused absences are determined by the Coordinator of the nursing program.

- f. Conviction of a felony or misdemeanor involving moral turpitude will be reviewed and can be, in some cases, grounds for admission denial or dismissal as determined by appropriate university and clinical authorities. (See Appendix C)
2. Dismissal will be determined by the Nursing Admission, Promotion, and Retention Committee on the basis of either a single incident or patterns of unprofessional or unsafe behavior.
3. Action to dismiss a student is to be brought to the Nursing Admission, Promotion, and Retention Committee as soon as possible following the relevant incident(s), but no later than 3 University business days.
4. The student will be informed of his or her dismissal as soon as possible following such a determination on the part of the Nursing Admission, Promotion, and Retention Committee, but no later than 2 University business days for a total of 5 business days from the incident.

M. NURSING PROGRAM DISMISSAL-GRIEVANCE PROCEDURE

1. The student may ask for a hearing before the Academic Affairs Committee within 2 University business days of receiving notice of dismissal. Failure of the student to request a hearing or an extension of the time constraints of 2 University business days will indicate that the student has waived the right to appeal. The Academic Affairs Committee will hold a hearing within 3 University business days of receiving the written request. The student will be advised in writing of the date, time, and nature of the hearing.
2. If the decision of the Academic Affairs Committee is in agreement with the decision of the Nursing Admission, Promotion, and Retention Committee, notification of dismissal will be sent to the registrar. **The student will be responsible for withdrawing from the course and from the nursing program.**
3. In the event that the Academic Affairs Committee is not in agreement with that of the Nursing Admission, Promotion, and Retention Committee, both decisions will be sent to the Vice President for Academic Affairs who will make a decision within 2 University business days.
4. If further appeal is sought, the student may request a hearing before the President within 1 University business day of notification of the Vice President for Academic Affairs decision. If still further appeal is sought, the student may request a hearing before a delegated committee from the University Board of Trustees. Decisions will be made and communicated to the student within 1 University business day.
5. The time element is crucial as its intent is to minimize the loss of time from theory and the clinical area as much as possible should the student be allowed to return to the course. In this case, every effort will be made to give the student opportunity to make up missed theory and clinical experiences.

APPEAL HEARING PROCEDURE
BY THE ACADEMIC AFFAIRS COMMITTEE

1. The Vice President for Academic Affairs will preside.
2. A nursing faculty representative will present documentation showing the student's progress to date. The recommendation made by the nursing faculty regarding the student's dismissal is presented.
3. The student is then given an opportunity to present his/her side of the case. The student may want to bring witnesses or written statements on his/her behalf, ask for clarification, and/or additional information. The student is also invited to have a support person present. The support person, however, is to be a silent observer.
4. The committee may want to have individuals present with expertise in the practice of nursing or nursing education for their consultation.
5. The committee may ask questions of both parties regarding this issue to provide further information and clarification.
6. The parties involved are excused, a decision is reached, and this decision is made known to both the student and the nursing division orally and in writing.

N. WITHDRAWAL

If a student withdraws from a nursing course for any reason, the steps outlined in the HLGU Catalog must be followed.

O. READMISSION

1. A student who has failed or withdrawn from a nursing course or program must submit in writing a request for readmission to the PN Coordinator. The student must request readmission for the next semester that the course will be taught.
2. Permission to re-enroll will be determined by the reason for the failure, withdrawal, or dismissal, recommendations made at the time, behavior of the prospective student in regard to these recommendations, and the performance of the prospective student during any audit experience in nursing courses.
3. The student applying for readmission must inform the PN Coordinator of the date of his/her desired return. Readmission will be contingent upon approval of the Nursing Admission, Promotion, and Retention Committee and space availability.
4. Because nursing requires the successful mastery and maintenance of knowledge and skills, students seeking readmission may be required to successfully audit previously passed nursing

courses. All cost for auditing or repeating a course are the sole responsibility of the student. Refer to Promotion/Retention Policies.

5. The requirements for an audited course will be based upon the Nursing Department faculty's judgment of the student's needs and will be established in writing prior to the beginning of the course.
6. A student who has failed, withdrawn, or been dismissed from the nursing program and does not request to return the next semester the course is taught will need to reapply to the program.
7. A student seeking readmission must present evidence that all previous faculty recommendations have been satisfactorily met (ex. counseling, work experience, etc.).
8. A student may repeat a nursing course only once. No more than one nursing course may be repeated.

P. OTHER GRIEVANCES

See the HLGU University Student Handbook for grade related and non-grade related appeals procedures.

Q. PROFESSIONAL ACTIVITIES AND ORGANIZATIONS

1. A two year membership in the Missouri State Association for Licensed Practical Nurses (MOSALPN) is included in the HLGU-PN Program tuition. See Appendix H.
 - a. HLGU-PN meetings are held monthly.
 - b. Members are encouraged to participate in community service projects each year. See Appendix F
 - c. Fundraising:
 - All nursing students are expected to participate in all fundraising projects.
 - Should a student not participate in the fundraising project, the student will be expected to contribute a fair monetary amount.
 - The money collected by fundraising will be used for nursing seminars, community projects, pinning & graduation ceremonies, etc as funds allow.
2. Student attendance at the pinning/graduation practice and ceremony is mandatory.

R. SCHOLARSHIPS, STUDENT ASSISTANTSHIPS and AWARDS

1. SCHOLARSHIPS and STUDENT ASSISTANTSHIPS

- a. MISSOURI LEAGUE OF NURSING annual scholarships as funds allow.
- b. BETH HAVEN LPN EMPLOYEE REIMBURSEMENT PROGRAM – tuition reimbursement program for Beth Haven employees. Please see Beth Haven administration for more information.
- c. BETH HAVEN COMMUNITY LPN SCHOLARSHIP - \$1000 scholarship to acknowledge the school's contribution in meeting the community's nursing needs, the importance of LPNs in the long term care field, as well as supporting an individual who desires to be a nurse.

2. AWARDS

- a. COMMUNITY SERVICE: Recognition for participating in community service as a practical nursing student.
- c. GENERAL NURSING PROFICIENCY: Funded by the Northeast Missouri Medical Society, this award is given to a graduating practical nurse who has displayed proficiency in all areas of clinical practice and exhibited academic excellence. This individual has demonstrated leadership qualities, self-confidence, and the ability to function as a team member. This student is selected by the nursing faculty.
- d. CLINICAL NURSING: The recipient of this award is selected by the nursing faculty and the hospital nursing staff. This student has exhibited superior clinical nursing skills and is mature, dependable, and able to make sound nursing judgments. This award is given by Hannibal Regional Hospital.
- e. EXEMPLARY NURSING PERSONALITY: In May 1998, the family and friends of Brandie Kearns established a nursing personality award to honor her memory. Brandie, a 1996-97 Practical Nursing student who died five weeks before graduation, demonstrated class spirit and enthusiasm for nursing as evidenced by her ability to show empathy and compassion in interpersonal relationships. These personality characteristics serve as the criteria for her memorial award. The recipient of this award is chosen by the students and faculty of the Hannibal-LaGrange University Practical Nursing Program.
- f. HANNIBAL CLINIC AWARD: \$1000 award honoring a practical nursing graduate who demonstrates strong performance in nursing theory and clinical, leadership and attendance.
- g. ACADEMIC ACHIEVEMENT: Cash awards honoring academic achievers in the top 20% of the class.

- h. PERFECT ATTENDANCE: Recognition to graduating students who have no absences or tardies throughout the school year.

S. PROVISIONS FOR HEALTH AND WELFARE OF STUDENTS

Provisions applicable to all Hannibal-LaGrange University students are found in the official University catalog and the Hannibal-LaGrange University Student Handbook. Provisions applying specifically to nursing students are as follows:

1. HEALTH POLICY

- a. The nursing student is required to meet the specific health requirements of HLGU and each assigned clinical agency. Proof of health insurance, current immunization status, and selected diagnostic testing such as tuberculin skin testing, rubella vaccine or titer levels, must be on file.
- b. If evidence of a potential or actual physical and/or mental health problem is noted, the nursing faculty may require additional health evaluation. Failure to obtain additional evaluation may result in suspension or dismissal from the program. Evidence of adequate physical and mental health is necessary for continuation in the program, therefore a written release of information may be required (see appendix I).

Dr. Memken, of the Hannibal Clinic, is the University physician and is available to all students (at their own cost), as well as the Emergency Room physicians at Hannibal Regional Hospital which is covered 24 hours/day, or Hannibal Regional Medical Group, Hannibal Ambulatory Care Center, or the Community Health Center.

Hannibal Clinic, Inc.

100 Medical Drive
Hannibal MO 63401
573-221-5250

Hannibal Regional Hospital

6000 Hospital Drive
Hannibal MO 63401
573-248-1300

Hannibal Regional Medical Group

6500 Hospital Drive
Hannibal, MO 63401
573-248-1300

Hannibal Ambulatory Care Center

100 Medical Drive
Hannibal MO 63401
573-248-3333

- b. Students who are pregnant or who have an altered health status must have written approval from their physicians to continue in the clinical setting and must meet all of the stated clinical outcomes with a satisfactory performance.

- d. HLGU and the clinical agencies are not responsible for any occupational hazards encountered during the course of study (i.e. infections, communicable diseases or injury). Students are responsible for their own health care and health insurance throughout the nursing program as evidenced by a photocopy of the student's current health insurance card.

2. STUDENT SERVICES

Refer to online HLGU University Catalog and Student Handbook for general information on services such as academic advisement, career services counseling, financial assistance, student housing, and food services. Social, athletic, cultural, professional, and religious activities are planned by the University staff and by members of student organizations. These activities are designed to appeal to a broad scope of interests and to encourage participation by all students. The Director of Financial Aid is responsible for counseling students who need financial assistance and such students are encouraged to seek help from that office. See the HLGU University Catalog for further information.

T. NURSING STUDENT DRESS CODE

Nursing students are to dress in the following manner when in the clinical facility:

1. Complete uniform – clean and neatly pressed.

All students will order a uniform package from the nursing department that will include:

- Two blue scrub tops and pants.
- One blue polo shirt with HLGU logo for certain clinical experiences including clinical pre-planning and field trips.
- One blue or white scrub jacket.

(Although not included in the uniform package, student may opt to purchase and wear an all-white (no writing or graphics) long sleeve shirt under the blue scrub top.

- a. Nurse's white leather shoes or leather athletic shoes are required. Canvas shoes or sandals are NOT acceptable. Closed toe, backless shoes may be worn. Clinical shoes are to be used for **clinical** only. Shoes worn to clinical must be clean and in good repair. Solid white socks must cover the ankle completely.

- b. HLGU picture ID badge available through the admissions office is required as well as a "STUDENT" nametag identifier available through the University Book Store. **The student uniform is not complete without the ID badge.**

- c. **A white or blue scrub jacket must be worn when going to any clinical agency for**

patient assignments. A picture ID badge is mandatory on the lab coat.

d. HLGU-PN uniform or HLGU-PN polo/T-shirt and khakis must be worn for pre-clinical hospital visits, clinical orientations and all observations/field trips.

2. Wrist watch with sweep second hand, bandage scissors, pen light, and stethoscope are required.
3. Jewelry - no rings other than a plain wedding band are advised; one pair of small post-type earrings (one in each ear) may be worn by students. No bracelets or necklaces may be worn.
4. Students will not have exposed tattoos, wear nose rings, tongue rings, or any other form of visible flesh piercing or body "art."
5. Hair should be clean, neat, and away from the face. Shoulder-length or longer hair (i.e. hair of any length falls in front of chin or face with head bent forward) must be secured up and off the collar. All facial hair including sideburns, moustaches, and beards must be kept neatly trimmed and clean.
6. Nails should be kept short, clean, and neatly manicured. Clear or subdued shades of nail polish may be used. No artificial nails or artificial tips are allowed.
7. Light make-up is permitted. No strong perfume, cologne, after-shave or perfumed lotion or perfumed body spray may be worn on clinical days. Personal hygiene must be maintained. No offensive body odor or unpleasant odors such as smoke will be permitted.
- 8. Students are prohibited from smoking while in the HLGU student nursing uniform or on student assignment. No smoking is permitted on the HLGU campus. This policy includes the use of E-cigarettes.**
9. No chewing gum allowed.
10. The student is responsible for following the dress code policy of the assigned clinical agency.
11. Classroom Dress: Each student is expected to adhere to the dress code as indicated in the Hannibal-Lagrange University Student Handbook (www.hlg.edu).

U. SELECTED REQUIREMENTS FOR LICENSURE

GRADUATION: Upon satisfactory completion of all the requirements in the prescribed one-year course of studies, the student will be eligible to receive the final transcript.

STATE LICENSURE: The qualified graduate of the Hannibal-LaGrange University Practical Nursing Program, who is in accordance with the **Nurse Practice Act 335.066 1.2 (1) through (22)**, is eligible to make application to the State Board of Nursing to write (take) the National Council Licensure Examination for Practical Nurses (NCLEX-PN). Upon passing the NCLEX-PN, the graduate becomes a Licensed Practical Nurse (LPN) and is eligible to apply for membership in local, state, and national practical nursing organizations. **Completion of an approved nursing program does not guarantee eligibility to take the NCLEX.**

A person who has a criminal history may not be eligible to apply for licensure to practice nursing. Consequently, successful completion of a nursing program does not guarantee eligibility to take the licensure examination. To apply for licensure students must meet the standards in section 335.066 of the Missouri Nursing Practice Act. Please see: <http://www.moga.mo.gov/statutes/C300-399/3350000066.HTM>. For other states and countries, please see their respective Nurse Practice Act.

APPENDIX A

HANNIBAL-LAGRANGE UNIVERSITY PRACTICAL NURSING PROGRAM ACADEMIC DISHONESTY POLICY

Policy: Academic dishonesty is subject to disciplinary action. Offenses of academic dishonesty shall be cumulative for the entire program.

Purpose: The purpose of this policy is to define academic dishonesty and the procedure for the consequences of the behavior.

Academic dishonesty includes but is not limited to the following:

1. Cheating or knowingly assisting another student in committing an act of cheating or other academic dishonesty.
2. Unauthorized possession of examinations.
3. Unauthorized changing of grades or markings on an examination or in an instructor's grade book, or any change of any grade record.
4. Plagiarism, which may include, but is not necessarily limited to, submitting test papers, research reports and writing, illustration, laboratory results, or any other assigned responsibilities as one's own work, when in reality it has been done by another person or copied from another author or from written, published or unpublished material including internet sources. For additional information regarding how to avoid plagiarism, see Appendix D.

Procedure:

1. Each incident of academic dishonesty shall be reported by the instructor to the Nursing Admission, Promotion and Retention Committee and to the Vice President for Academic Affairs for action. Decisions could range from written warning to dismissal.
2. The student may use the Appeals Procedure if dissatisfied with the penalty for dishonesty.

APPENDIX B

HANNIBAL-LAGRANGE UNIVERSITY PRACTICAL NURSING PROGRAM UNSAFE STUDENT PRACTICE POLICY

Policy: The student will:

1. Demonstrate patterns of professional behaviors which follow the legal and ethical codes of nursing.
2. Promote the actual or potential well-being of clients, health care workers and self in the biological, psychological, sociological and cultural realms.
3. Demonstrate accountability in preparation, documentation and continuity of care.
4. Show respect for the human rights of the individuals.

Purpose: The purpose of this policy is to:

1. Protect the safety of the clients, peers, staff members and clinical instructors.
2. Assure compliance with the Missouri Nurse Practice Act.
3. Maintain nursing practice within the Standards of Nursing Care.
4. Promote an awareness of the responsibility and accountability for student's clinical performance.

Indicators to be used as guidelines for evaluating safe practice are:

1. Regulatory. The student practices within the boundaries of the Missouri Nurse Practice Act, and the guidelines and objectives of the Practical Nursing Program. The student follows the rules and regulations of the cooperating health care agencies. Guidelines and objectives are found in this Student Handbook and the HLGU-PN clinical manual.

Examples of unsafe practice include but are not limited to the following:

- a. Failure to notify the agency and/or instructor of clinical absence.
 - b. Presenting for clinical practice under the influence of alcohol and/or other drugs.
 - c. Habitual tardiness to clinical.
2. Ethical. The student practices according to the American Nurses Association Code of Ethics, Standards of Practice, and the Missouri State Nurse Practice Act.

Examples of unsafe practice include but are not limited to the following:

- a. Refusing assignments based on client's race, culture, or religious preference.
- b. Placing personal values and standards above institutional values and

standards.

- c. Failing to report unethical behavior(s) of other health care persons in the clinical setting(s) which affects client welfare.

- 3. Biological, psychological, social, and cultural realms.
The student's practice meets the holistic needs of the client, utilizing basic knowledge acquired from the biological, psychological, sociological and cultural sciences.

Examples of unsafe practice include but are not limited to the following:

- a. Failure to display stable mental, physical, or emotional behavior(s) which may affect others' well-being.
 - b. Failure to follow through on suggested referrals or interventions to correct deficit areas which may result in harm to others (Deficit areas defined in 3. a. above).
 - c. Acts of omission or commission in the care of clients, such as but not limited to: physical abuse, placing clients in hazardous positions, conditions, or circumstances, mental or emotional abuse, and repeated medication errors.
 - d. Miscommunications, disruption of client care and/or unit functioning.
 - e. Lack of physical coordination necessary for carrying out nursing procedures.
- 4. Accountability. The student's practice demonstrates consistency in the responsible preparation, documentation, and promotion of the continuity of the care of clients.

Examples of unsafe practice include but are not limited to the following.

- a. Failure to provide concise, inclusive, written and verbal communication.
- b. Failure to accurately record comprehensive client behaviors.
- c. Failure to report questionable nursing practices. Refer to standards of nursing care of the respective agency.
- d. Attempting activities without adequate orientation or theoretical preparation or appropriate assistance.
- e. Dishonesty.

5. Human rights. The student's conduct shows respect for the individual, client, health team member, faculty, and self including but not limited to the innate, legal, ethical, and cultural realms.

Examples of unsafe practice include but are not limited to the following.

- a. Failure to maintain confidentiality of communications.
 - b. Failure to maintain confidentiality of records.
 - c. Utilization of stereotypical assessments which are detrimental to patient care.
 - d. Failure to recognize and promote every patient's rights.
6. Preceptor or clinical agency refusal to continue working with the student due to clinical safety issues.

Procedure:

1. Each incident of unsafe student practice shall be reported by the instructor to the PN Coordinator, the Nursing Admissions, Promotion and Retention Committee and to the Vice President for Academic Affairs for action. Decisions could range from written warnings to course failure and/or dismissal from the nursing program. All records will be contained in the student's file.
2. A student who is observed by a faculty member to have put a patient in danger will be dismissed from the clinical setting immediately.
3. IMMEDIATE TERMINATION WILL RESULT FROM THE FOLLOWING:
 - (1) Knowingly causing harm to a client, or
 - (2) Appearance in class or clinical under the influence of drugs or alcohol.
4. The student may appeal the decision by following the grievance procedure.

APPENDIX C

HANNIBAL-LAGRANGE UNIVERSITY PRACTICAL NURSING PROGRAM CRIMINAL BACKGROUND CHECKS, SUBSTANCE ABUSE AND DRUG TESTING POLICY

Policy:

Students in the Nursing and/or Allied Health majors who have contact with patients or residents must provide disclosure regarding his/her criminal background and evidence of negative substance abuse and drug screens. In addition, the Division of Nursing and Allied Health adhere to the Hannibal-LaGrange University student policies and regulations, which include disciplinary action for criminal behavior, use and/or possession of drugs and alcoholic beverages, use of tobacco on campus and while representing the University off campus, as stated in the University's Student Handbook.

Purpose:

In order to comply with terms of affiliation agreements between Hannibal-LaGrange University Nursing and Allied Health programs and clinical agencies, any student who is to have contact with patients or residents must provide disclosure regarding his or her criminal background and have a criminal background check by the Missouri State Highway Patrol Criminal Records and Identification Division, the Missouri Department of Health and Senior Services, and any agency thereof required by the clinical agencies (i.e. Employee Disqualification List (EDL), Office of Inspector General (OIG), General Services Administration, FBI and/or any other law enforcement agency of the state and of the United States). State law prohibits a hospital, or other provider, from knowingly allowing those who have been convicted of, pled guilty to or nolo contendere in this state or any other state, or has been found guilty of a crime, which is committed in Missouri as a Class A or B felony violation, to give care to clients in their agency.

In addition, clinical agency sites with which the University has affiliation agreements require evidence of negative substance abuse and drugs screens. Hannibal-LaGrange Nursing Division and Allied Health require all students to report for their clinical experience free from the effects of illegal drugs, alcohol, or any other drugs that may impair their performance and jeopardize patient safety.

Procedure:

1. Prior to clinical experiences, all students are required to submit completed consent forms and documents required for criminal background checks. Consent forms for specific clinical agency sites that require substance abuse and drug screens will be completed as needed. Costs incurred for initial background checks and clinical substance abuse and drug screens are included in tuition fees. Costs for subsequent checks and screens are the responsibility of the student.
2. Each student must provide evidence of a negative criminal history search through certifiedbackground.com. Any student convicted of a felony or misdemeanor while in the nursing program must report the conviction immediately to the PN Coordinator.

3. Students who do not complete a criminal background disclosure or who do not request a criminal background history check will be ineligible to complete clinical rotations in affiliating clinical agencies.
4. Any student who refuses to submit to initial or subsequent substance abuse and drug testing will be dismissed from the Nursing or Allied Health Program immediately for any such refusal.
5. Any student who tests positive for a drug or controlled substance must be able to verify that it was obtained legally and legitimately. If an initial drug or controlled substance test is positive, a second test will be performed to confirm the initial result. A positive test result on the confirming test will result in dismissal from the nursing or allied health program immediately as a result of such positive testing.
6. If an alcohol test is positive, a second test will be performed IMMEDIATELY to confirm the initial result. Any confirmed alcohol result above 0% will be considered positive. A positive test result on the confirming test will result in dismissal from the nursing or allied health program immediately as a result of such positive testing.
7. Any student dismissed following a positive drug, controlled substance, or alcohol test will be removed from all nursing and allied health courses and will also be referred for disciplinary action from the University. A grade of "W" (withdrawal) will be noted on the transcript if prior to the University withdrawal date. A grade of "F" (failure) will be noted on the transcript if the student is removed from courses following the University withdrawal date.
8. Clinical agencies and Hannibal-LaGrange University reserve the right to conduct random drug and alcohol screens on all students.
9. Students must abide by the terms of the above policy and must report any conviction under a criminal drug statute for violations occurring on or off University premises. A conviction must be reported within 72 hours after the conviction. Convictions include pleas of guilty and nolo contendere. Students convicted of involvement in a criminal drug offense will be dismissed from the nursing or allied health program.

APPENDIX D

HANNIBAL-LAGRANGE UNIVERSITY PRACTICAL NURSING PROGRAM MATH AND MEDICATION CALCULATIONS REQUIREMENTS POLICY

Policy:

Nursing students must demonstrate expertise in medication calculations. A series of medication and clinical calculation tests will be administered throughout the program to assess the students' proficiency in accurately performing calculations.

Purpose:

It is a vital responsibility of nurses to accurately calculate medication dosages. If mathematical errors occur, a patient can be seriously or fatally injured.

Procedure:

1. During the first term, the student will receive instruction, homework and testing on fractions, decimals, percentages, Roman numerals, metric system, ratio and proportions and medication calculations. At the end of the semester, students will be required to take a comprehensive math and medications calculation final exam. A minimum of 80% on all math/medication calculation exams must be achieved to remain in the program. All exams and retakes must be completed by term's end. Math scores will be recorded in Contributory/Selective Experiences I.
2. During terms 2 and 3, the student will expect a math/medication calculation test approximately every other week. The first score achieved on these tests will be recorded in Contributory/Selective Experiences II (term 2) and Contributory/Selective Experiences III (term 3) and will count toward the overall grade in those courses. Any failed test must be taken and passed (80% or above) during Friday open lab. Math and medication calculation problems are also frequently included on other course exams.
3. At the end of term 3, students will be required to successfully challenge a comprehensive Math and Medication Calculations exam as part of the Mock Boards (Exit Exam). Retakes will be allowed until the semester ends. An 80% or higher score on this examination is a graduation requirement.
4. Grading rules will include the following:
 - a. Follow all directions on the tests.
 - c. For **parenteral drugs**, if the amount to be given is less than 1 ml round to the nearest one hundredth, (2 decimal places). For example, 0.239 is rounded to 0.24. In addition, if the amount to be given is more than 1 ml round to the nearest tenth, (1 decimal place). For example, 1.28 is rounded to 1.3.
 - e. For manually regulated IV calculations you can only visually count whole drops. It is impossible to calculate 14.7 drops per minute. Round to the nearest

whole number. For example 14.7 is rounded to 15 drops per minute. Carry calculations to one decimal place, then round drops per minute (gtt/min) to the nearest whole number.

- f. When writing decimals, eliminate unnecessary zeros to avoid confusion. Never use a trailing 0. For example, write 0.2, **do not write** 0.20. Although the last zero does not change the value of the decimal, it is not necessary and may lead to confusion.
- g. To avoid missing a decimal point and interpreting the numeric value as a whole number, **always** place a zero to the left of the decimal point to emphasize that the number has a value less than one. For example, write **0.35, 0.15, 0.003**.

APPENDIX E

HANNIBAL-LAGRANGE UNIVERSITY PRACTICAL NURSING PROGRAM EXIT EXAM REQUIREMENTS POLICY

An Exit Exam (MOCK BOARDS) will be administered to each student in the final semester of the curriculum. This exam is designed to identify the strengths and weaknesses of the student and a possible need for remediation prior to taking the licensure exam. Successful completion of the Exit Exam is a requirement for (A) the completion of PNE 134, (B) the student's graduation and (C) for the student's name to be submitted to take the licensing (NCLEX-PN) exam.

The first Exit Exam will be given approximately one to two weeks prior to graduation. A score of 900 or above is the level of performance recommended and meets all Exit Exam Requirements.

A score between 850 and 899 only partially satisfies course exit exam requirements, and will require the student to (A) remediate as determined by the nursing faculty and (B) take Exit Exam 2 approximately one week to one day prior to graduation.

A score of less than 850 does not satisfy course exit exam requirements and will (A) require remediation as determined by the nursing faculty and (B) take Exit Exam 2 approximately one week to one day prior to graduation.

The second Exit Exam will be given approximately one week to one day prior to graduation. A score of 900 or above is the level of performance recommended and meets all Exit Exam Requirements.

A score of 850-899 is considered acceptable (900 or above is recommended), but only partially satisfies course exit exam requirements. In order to satisfy course exit exam requirements, the student must remediate by (A) completing an HLGU approved review course within 8 weeks after graduation and (B) provide written proof of course completion to the Practical Nursing Coordinator.

A score of less than 850 on the second exam does not satisfy course exit exam requirements and will require serious remediation. If a student does not achieve a score of 850, the student will receive an "Incomplete" but may participate in the pinning and graduation ceremony provided that all other HLGU-PN graduation requirements are met. The student must remediate by (A) completing an HLGU approved review course within 8 weeks after graduation and (B) must provide written proof of course completion to the Practical Nursing Coordinator and (C) take a third exit exam as determined by the PN coordinator.

The third Exit Exam will be given approximately 8 weeks after graduation and after the required remediation has been completed. A score of 850 or above is considered acceptable (900 or above is recommended). The student must (A) remediate as determined by the nursing faculty and (B) provide proof of completion of remediation.

After proof of completion of remediation, the student will then be considered to have passed PNE 134, to have met graduation requirements, and the student's name will then be submitted to take the licensing (NCLEX-PN) exam.

If a student does not achieve an acceptable score of 850 or above on the third Exit Exam, the student must complete remediation as determined by the nursing faculty.

Please note: The cost of the review courses, remediation, the 3rd HESI exit examination (if applicable) and other expenses are the sole responsibility of the student.

Exit Exam Requirements

Test	≥ 900	850-899	≤ 849
Test #1	Satisfied all course exit exam requirements.	Partially satisfied course exit exam requirements. The student must (A) remediate as determined by the nursing faculty and (B) will need to take Test #2 to achieve score of 900.	Has not satisfied course exit exam requirements. The student must (A) remediate as determined by the nursing faculty and (B) will need to take Test #2 to achieve score of 900.
Test #2 (all students will take HESI test #2 as it will be recorded as a test grade in PNE 130)	Satisfied all course exit exam requirements.	Partially satisfied course exit exam requirements. The student will receive an “Incomplete” but may participate in pinning and graduation ceremonies given all other HLGU graduation requirements are met. The student must (A) remediate by taking an ATI Virtual Tutoring review course and (B) authorize the release of progress reports to the PN Coordinator provide written proof of completion of review course and (C) take HESI Test #3 to achieve an acceptable score of 850 or above (900 or above recommended) as determined by the PN Coordinator.	Has not satisfied course exit exam requirements. The student will receive an “Incomplete” but may participate in pinning and graduation ceremonies given all other HLGU graduation requirements are met. The student must (A) complete an ATI Virtual Tutoring review course by the end of the fall term (B) authorize the release of progress reports to the PN Coordinator provide written proof of completion of review course and (C) take HESI Test #3 to achieve an acceptable score of 850 or above (900 or above recommended) as determined by the PN Coordinator.
Test #3	Satisfied all course exit exam requirements. The student’s name will then be submitted to take the licensing (NCLEX-PN) exam.	Satisfied all course exit exam requirements. The student’s name will then be submitted to take the licensing (NCLEX-PN) exam.	Partially satisfied course exit exam requirements. The student must remediate as determined by the nursing faculty. After proof of registration for remediation, the student is considered to have passed PNE 134 and to have met graduation requirements. The student’s name will then be submitted to take the licensing (NCLEX-PN) exam.

APPENDIX F

HANNIBAL-LAGRANGE UNIVERSITY PRACTICAL NURSING PROGRAM COMMUNITY SERVICE OPPORTUNITIES

As part of the learning experience in the nursing program at Hannibal-LaGrange University, students are encouraged to complete community service hours. This experience provides the student with an opportunity to be actively engaged in the community while fulfilling the *Mission* and *Purpose* of the University, specifically *to promote the life of service in keeping with the example of Jesus Christ* and with the University motto “*Knowledge for Service*”. The nursing department values service and believes it is a rewarding part of the nursing profession.

Any community service completed by students mutually benefits the campus and community. Community service opportunities are identified by the PN faculty. Students will be notified and are encouraged to participate in any or all community service opportunities as they arise. Community service hours may be banked as make-up time and will be recognized at graduation.

All service hours must be approved prior to performing and must be validated by PN Coordinator. No paid hours may be counted towards community service hours. Objectives for each service opportunity must be completed and submitted to the PN Coordinator.

APPENDIX G

HANNIBAL-LAGRANGE UNIVERSITY ASN NURSING PROGRAM GUIDELINES FOR WRITING A FORMAL PAPER

When writing, it is important that the paper be concise, clear, and readable. All papers for the Nursing Division are to be typewritten and follow the American Psychological Association (APA) format, 5th edition.

1. Before beginning the paper, review the **grading rubric. Remember to make sure all areas from the rubric are covered. Areas not included in the paper will receive zero points.**
2. A review of literature is done by reviewing nursing and medical journals (within the last 5 years) for current information on the chosen topic. More journal articles should be used rather than textbooks, so that the paper includes the most current information. A computer search for articles can be done in the library. We suggest using CINAHL. Many journal articles are available in html or PDF format and can be printed free of charge in the L.A. Foster Library. The articles can be obtained through interlibrary loan if the library does not carry the journal in which the article is written. It is important to begin the research for your topic early.
3. When reviewing articles or textbooks for information, notes can be made on index cards. *Credit needs to be given to the author, unless the information is your own original ideas or it is common knowledge.* Failure to do so is plagiarism. If exact words are used from articles or textbooks then quotation marks need to be used and also page number needs to be indicated as well as author and year (see APA Guide). A limited number of quotations should be used. Quotations should be used for special emphasis or if translation would detract from its original meaning.
4. Writing an outline of what you intend to write can help to identify areas that you have covered as well as areas you need to expand on.
5. The introduction usually tells what the subject of the paper is, why the subject was chosen, or the relevance to the class or to nursing. (Why is it an important topic?). Do not use "I chose this topic". Avoid the use of "I" in a formal paper. More appropriate would be "This topic was chosen because....." or "The author chose this topic because" or "This paper will discuss" .
6. Conclusion – Summarize your findings.
7. Finalize the draft. Using headings to subdivide the paper will make it easier to read, and will help identify that all areas are included.

8. **Refer to Writing a Paper in APA Style for further instructions.**
9. Proofread your final paper for spelling, correct grammar, correct punctuation, and for content. Are all topics addressed?
10. A “References” page must be included. Make sure that all references included on this page are included in the paper. Make sure that all references used in the paper are included on the reference page.
11. Refer to the American Psychological Association (APA) textbook for additional information. There are copies in the Nursing Division and in the HLGU Library. The textbook can also be purchased through the University Bookstore.

PLAGIARISM: WHAT IT IS AND HOW TO AVOID IT!!!!

Plagiarism can be defined as "...taking and using as one's own the ideas or written work of someone else" (Kreis, 1994, p. 66).

"A writer who fails to give appropriate acknowledgment when repeating another's wording or particularly apt term, paraphrasing another's argument, or presenting another's line of thinking is guilty of plagiarism" (Gibaldi, 1995, p. 26).

"...acts included under the general heading of plagiarism:

Buying a paper from a research service or term paper mill...

Turning in another student's work without that student's knowledge...

Turning in a paper a peer has written for the student...

Copying a paper from a source text without proper acknowledgment...

Copying material from a source text, supplying proper documentation, but leaving out quotation marks...Paraphrasing material from a source text without appropriate documentation..." (Wilhoit, 1994, p. 161-162)

PLAGIARISM=STEALING

Avoid plagiarism by:

*doing your own work!

*begin researching early

*make an outline of the main points that will be supported by your research material

*make note cards of facts and ideas that support your research thesis (the main idea) **and**

include on the note cards quotes and all reference info (journal, article title, publication

date, author, page numbers)

*use quotes and the ideas of others to SUPPORT your thesis and credit ALL ideas and quotes. "In writing your research paper, then, you must document everything that you borrow-not only direct quotations and paraphrases but also information and ideas" (Gibaldi, 1995, p. 29)

*check the American Psychological Association (APA) summary provided in your "Nursing Student Handbook" for the proper methods for citing references (giving credit to your sources)

*expect to write several drafts, checking all drafts for quotation errors

*Proofread, proofread, proofread!!!

You will be held accountable for the plagiarism information on the Hannibal-LaGrange Library web site <http://www.HLGU.edu/library/research.html>. Look at the links

Plagiarism: What it is and how to recognize and avoid it. Also examine how Quoting and Paraphrasing relate to plagiarism

References

Gibaldi, J. (1995). *MLA Handbook for Writers of Research Papers* (4th. ed.). New York: Modern Language Association of America, 27-29.

Kreis, K. (1994). A write step in the wrong direction. *Teaching K-8*, 66-67.

Wilhoit, S. (1994). Helping students avoid plagiarism. *University Teaching*, 42(4), 161-164.

APPENDIX H

HANNIBAL-LAGRANGE UNIVERSITY PRACTICAL NURSING PROGRAM MEMBERSHIP IN THE HANNIBAL-LAGRANGE UNIVERSITY STUDENT PRACTICAL NURSES' ASSOCIATION (MOSALPN)

POLICY: All students in the Practical Nursing Program at Hannibal-LaGrange University will have membership in MOSALPN.

PURPOSE: In order to encourage professional behavior in nursing students during school and in the future, membership and participation in a state organization is a good beginning. Additional benefits come from participation in the local organization.

PROCEDURE:

1. All students will receive a 2 year MOSALPN membership as part of University tuition and fees for the PN program.
2. All students are expected to participate in the school chapter both in attendance at scheduled monthly meetings, as well as fundraising activities.

**HANNIBAL-LAGRANGE UNIVERSITY
PRACTICAL NURSING PROGRAM
GUIDELINES FOR CONDUCT OF THE HLGU-SPN (MOSALPN) MEETINGS**

POLICY: The HLGU-SPN meetings shall be conducted on a monthly schedule, modified to fit need and the school calendar as necessary.

PURPOSE: Participation in the HLGU-SPN organization is designed to develop a spirit of cooperation, fellowship, and responsibility in nursing students.

PROCEDURE:

1. The by-laws of the HLGU-SPN organization shall be used for guidance of elected officers and faculty advisors.
2. Robert's Rules of Order shall be the guideline for Parliamentary Procedure.
3. The secretary will take minutes at each regular meeting and a copy will be delivered to the PN Coordinator within one week.
4. The treasurer will give a financial report at each regular meeting. This will be recorded in the minutes.
5. Failure to attend two consecutive regular meetings without advance notice/reason by the elected officers shall be cause for the membership to remove said officer from responsibility, and another member to be appointed/elected to the vacated office.
6. Any consequences voted on by the majority of the members for non-participation by absent or uninterested members are binding upon the offending member.

Practical Nursing Student Organization Constitution

Article I

This program shall be known as the Hannibal-LaGrange University Practical Nursing Program.

Article II

This Program is established to educate Practical Nurses. Each student in this program shall maintain the standard of integrity, honor, and character; shall furnish information regarding Practical Nursing to interested parties and the general public, and shall promote fellowship among its members and members of other organizations of nurses.

Article III

Membership shall be open to any person of good moral character who can meet the qualifications and requirements of the program in accordance with the minimum standards of the Missouri State Board of Nursing.

Article IV

The control, direction and management of affairs and finance of the program shall be by the executive board. The executive board shall consist of all elected officers. The elected officers will be President, Vice-President, Secretary and Treasurer.

The manner of elections shall be governed by the By-Laws and in case of a vacancy of any officer it shall be filled by appointment of the executive board until the next annual election.

Article V

There shall be regular meetings held once monthly. Special meetings may be called at any time by the executive board or when one-third of the members request such a meeting. At the special meeting only the special business specified shall be taken up. A two-thirds majority of the members must be present to constitute a quorum.

Article VI

We as a student body shall be under the supervision of our University administration.

Article VII

Amendments may be made at any time if there is a two-thirds majority vote. An amendment may be made at either a regular or special meeting. The By-Laws may be amended in the same way.

By- Laws

Article I Membership

Any student who is enrolled in the program in accordance with the minimum standards of the Missouri State Board of Nursing.

Article II Officers

Officers shall be elected by the student body and those officers shall be President, Vice-President, Secretary and Treasurer, and said officers shall serve for a term of one year and will be known as the Executive Board. In case of vacancy of office the Executive Board can appoint someone to fill the vacancy. The President shall preside at all meetings and shall be ex-officio member of all committees. The Vice-President shall preside in the absence of the President and shall perform any duties designated by the President or the Executive Board. The Secretary shall keep the records of the proceedings of all meetings and all other matters of which a record shall be deemed advisable. She/He shall conduct all correspondence of the program with the concurrence of the President and Vice-President. The Treasurer shall collect any funds of the program. She/He shall keep accurate records and shall report at the regular scheduled meetings.

Article III Order of Business

Call to Order
Reading of the minutes of preceding meetings
Report of Treasurer
Report of other Committees
Report of Special Committees
Elections if any
Miscellaneous Business

Article IV Advisory Council

The Advisory Council shall consist of the Coordinator of the program and one other member of the faculty.

Article V Committees (Amended by the class of 1988-89)

The committees shall be: Constitution & By-Laws; Class History (scrapbook); Class Motto, Class Flower, and Class Color(s); Class Will and Prophecy; Ways & Means: (a) Program and Activities (b) Fund Raising.

Established by the Class of 1964-65 (Reviewed Annually)

**Practical Nursing
Student Organization Objectives**

1. To develop leadership characteristics.
2. To develop self-confidence and self-acceptance.
3. To develop a greater understanding of the nursing profession.
4. To further develop occupational competencies needed for a career in nursing.
5. To develop high ethical standards in personal and professional relationships.
6. To develop an effective state organization.
7. To develop a greater awareness of career opportunities in nursing.
8. To develop a greater proficiency in communication.
9. To develop greater appreciation of the responsibilities of citizenship.
10. To realize the importance of continuing education.
11. To participate in planned social activities.

APPENDIX I

**Prompt group email notification to faculty is required for each absence. Dismissal from program will be recommended for 3 unexcused absences (absent without notice).
Hannibal-LaGrange University Practical Nursing Program**

Four-Week Evaluation Conference

	C&SI/PVC	NF	A&P	G&D/NUT
Attitude & Class Participation				
Grade to Date				
Comments				
Instructor Signature				

General Comments

Student _____ **Date** _____

Coordinator _____ Date _____

Hannibal-LaGrange University Practical Nursing Program

Twelve Week Evaluation Conference

	C&SI/PVC	NF	A&P	Pharm/Intro
Attitude & Class Participation				
Grade to Date				
Comments				
Instructor Signature				

General Comments

Student _____ Date _____

Coordinator _____ Date _____

Critical Incident

Critical Incident # _____ Has this particular incident occurred previously? _____

Description of incident/behavior that led to unsatisfactory evaluation:

Remediation Plan:

Student Input into Remediation Plan:

Student will complete remediation by: _____

Instructor _____ Date _____

Student _____ Date _____

Evaluation Date: _____ Evaluation Outcome: Satisfactory Unsatisfactory

Instructor Comments:

Student Comments:

Instructor _____ Date _____

Student _____ Date _____

Dismissal Form

Student Name: _____ Date: _____

HLGU-PN Program

Student recommended for DISMISSAL for the following reasons. Attach documentation as needed.

_____ Attendance
_____ Unsatisfactory Grades
_____ Other _____

Terms of Reentry if applicable:

Coordinator: _____ Date: _____

Action Taken:

Coordinator's Signature: _____ Date: _____

Student's Signature: _____ Date: _____

Hannibal-LaGrange University Practical Nursing Program

Reference Form

Name: _____ Social Security #: _____
 Dates Attended: _____ Graduation Date: _____
 # Absences: _____ # Tardies: _____ # Unexcused: _____
 Academic Performance – Grade average: _____ Class Rank: _____
 # Academic warnings/probation: ____/____ Officer/Awards _____

 Clinical warnings/probation/disciplinary actions: ____/____/____

	9 (Excellent)	8 7 (Good)	3 2 1 (Fair)	0 (Poor)
Clinical Performance:				
Quality of work				
Productive output				
Preparation/Use of resources				
Self-Direction				
Ability to work with others				
Response to authority				
Time Management				
Personal & Professional Responsibility				
Communication Skills:				
Written				
Verbal				
Strengths:				
Weaknesses:				

Coordinator: _____ Date: _____
 Instructor: _____ Date: _____
 Instructor: _____ Date: _____
 Instructor: _____ Date: _____

I authorize the release of this completed form to prospective employers and/or educational institutions.

Student: _____ Date: _____

**Hannibal-LaGrange University Practical Nursing Program
2800 Palmyra Road
Hannibal, Missouri 63401**

Phone: (573) 629-3140

Fax: (573) 629-3150

Lois Damron, Coordinator

MEDICAL INFORMATION FORM

I, _____, authorize the release of the following information to the Hannibal-LaGrange University Practical Nursing Program (HLGU-PN Program)

Diagnosis: _____

Treatment Plan:

This individual has a:

_____ full medical release to participate in class and clinical activities or a

_____ limited medical release to participate in class and clinical activities

Limitations include:

Physician Signature

Date

This authorization shall terminate upon my graduation from HLGU-PN Program.

Student Signature: _____ Date: _____

SAMPLE STEP APPEALS FORM

In this order, conflict resolution has failed with instructor, PN Coordinator and Division Chair. I am presenting my concerns below to the Academic Dean:

Date: _____

Student Name: _____

Address: _____
(Street) (City) (State) (Zip Code)

Telephone: _____
(Area Code)

Nature of your appeal - Please describe the policy or action you believe may be in violation and identify person(s) you believe be responsible.

If others are affected by the possible violation, please give their names and positions.

If you wish, please describe any corrective action you would like to see take place with regard to the possible violation or provide other information relevant to this appeal.

Student Signature: _____ Date: _____

APPENDIX J

NURSE PRACTICE ACT

Missouri Revised Statutes

Chapter 335

Nurses

Section 335.066

August 28, 2013

Denial, revocation, or suspension of license, grounds for, civil immunity for providing information--complaint procedures.

335.066. 1. The board may refuse to issue or reinstate any certificate of registration or authority, permit or license required pursuant to chapter 335 for one or any combination of causes stated in subsection 2 of this section or the board may, as a condition to issuing or reinstating any such permit or license, require a person to submit himself or herself for identification, intervention, treatment, or rehabilitation by the impaired nurse program as provided in section 335.067. The board shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant of his or her right to file a complaint with the administrative hearing commission as provided by chapter 621.

2. The board may cause a complaint to be filed with the administrative hearing commission as provided by chapter 621 against any holder of any certificate of registration or authority, permit or license required by sections 335.011 to 335.096 or any person who has failed to renew or has surrendered his or her certificate of registration or authority, permit or license for any one or any combination of the following causes:

(1) Use or unlawful possession of any controlled substance, as defined in chapter 195, or alcoholic beverage to an extent that such use impairs a person's ability to perform the work of any profession licensed or regulated by sections 335.011 to 335.096;

(2) The person has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution pursuant to the laws of any state or of the United States, for any offense reasonably related to the qualifications, functions or duties of any profession licensed or regulated pursuant to sections 335.011 to 335.096, for any offense an essential element of which is fraud, dishonesty or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

(3) Use of fraud, deception, misrepresentation or bribery in securing any certificate of registration or authority, permit or license issued pursuant to sections 335.011 to 335.096 or in

obtaining permission to take any examination given or required pursuant to sections 335.011 to 335.096;

(4) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation;

(5) Incompetency, gross negligence, or repeated negligence in the performance of the functions or duties of any profession licensed or regulated by chapter 335. For the purposes of this subdivision, "repeated negligence" means the failure, on more than one occasion, to use that degree of skill and learning ordinarily used under the same or similar circumstances by the member of the applicant's or licensee's profession;

(6) Misconduct, fraud, misrepresentation, dishonesty, unethical conduct, or unprofessional conduct in the performance of the functions or duties of any profession licensed or regulated by this chapter, including, but not limited to, the following:

(a) Willfully and continually overcharging or overtreating patients; or charging for visits which did not occur unless the services were contracted for in advance, or for services which were not rendered or documented in the patient's records;

(b) Attempting, directly or indirectly, by way of intimidation, coercion or deception, to obtain or retain a patient or discourage the use of a second opinion or consultation;

(c) Willfully and continually performing inappropriate or unnecessary treatment, diagnostic tests, or nursing services;

(d) Delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience, or licensure to perform such responsibilities;

(e) Performing nursing services beyond the authorized scope of practice for which the individual is licensed in this state;

(f) Exercising influence within a nurse-patient relationship for purposes of engaging a patient in sexual activity;

(g) Being listed on any state or federal sexual offender registry;

(h) Failure of any applicant or licensee to cooperate with the board during any investigation;

(i) Failure to comply with any subpoena or subpoena duces tecum from the board or an order of the board;

(j) Failure to timely pay license renewal fees specified in this chapter;

(k) Violating a probation agreement, order, or other settlement agreement with this board or any other licensing agency;

- (l) Failing to inform the board of the nurse's current residence;
- (m) Any other conduct that is unethical or unprofessional involving a minor;
- (7) Violation of, or assisting or enabling any person to violate, any provision of sections 335.011 to 335.096, or of any lawful rule or regulation adopted pursuant to sections 335.011 to 335.096;
- (8) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license or diploma from any school;
- (9) Disciplinary action against the holder of a license or other right to practice any profession regulated by sections 335.011 to 335.096 granted by another state, territory, federal agency or country upon grounds for which revocation or suspension is authorized in this state;
- (10) A person is finally adjudged insane or incompetent by a court of competent jurisdiction;
- (11) Assisting or enabling any person to practice or offer to practice any profession licensed or regulated by sections 335.011 to 335.096 who is not registered and currently eligible to practice pursuant to sections 335.011 to 335.096;
- (12) Issuance of a certificate of registration or authority, permit or license based upon a material mistake of fact;
- (13) Violation of any professional trust or confidence;
- (14) Use of any advertisement or solicitation which is false, misleading or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed;
- (15) Violation of the drug laws or rules and regulations of this state, any other state or the federal government;
- (16) Placement on an employee disqualification list or other related restriction or finding pertaining to employment within a health-related profession issued by any state or federal government or agency following final disposition by such state or federal government or agency;
- (17) Failure to successfully complete the impaired nurse program;
- (18) Knowingly making or causing to be made a false statement or misrepresentation of a material fact, with intent to defraud, for payment pursuant to the provisions of chapter 208 or chapter 630, or for payment from Title XVIII or Title XIX of the federal Medicare program;
- (19) Failure or refusal to properly guard against contagious, infectious, or communicable diseases or the spread thereof; maintaining an unsanitary office or performing professional services under unsanitary conditions; or failure to report the existence of an unsanitary condition

in the office of a physician or in any health care facility to the board, in writing, within thirty days after the discovery thereof;

(20) A pattern of personal use or consumption of any controlled substance unless it is prescribed, dispensed, or administered by a provider who is authorized by law to do so;

(21) Habitual intoxication or dependence on alcohol, evidence of which may include more than one alcohol-related enforcement contact as defined by section 302.525;

(22) Failure to comply with a treatment program or an aftercare program entered into as part of a board order, settlement agreement, or licensee's professional health program.

3. After the filing of such complaint, the proceedings shall be conducted in accordance with the provisions of chapter 621. Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for disciplinary action are met, the board may, singly or in combination, censure or place the person named in the complaint on probation on such terms and conditions as the board deems appropriate for a period not to exceed five years, or may suspend, for a period not to exceed three years, or revoke the license, certificate, or permit.

4. For any hearing before the full board, the board shall cause the notice of the hearing to be served upon such licensee in person or by certified mail to the licensee at the licensee's last known address. If service cannot be accomplished in person or by certified mail, notice by publication as described in subsection 3 of section 506.160 shall be allowed; any representative of the board is authorized to act as a court or judge would in that section; any employee of the board is authorized to act as a clerk would in that section.

5. An individual whose license has been revoked shall wait one year from the date of revocation to apply for relicensure. Relicensure shall be at the discretion of the board after compliance with all the requirements of sections 335.011 to 335.096 relative to the licensing of an applicant for the first time.

6. The board may notify the proper licensing authority of any other state concerning the final disciplinary action determined by the board on a license in which the person whose license was suspended or revoked was also licensed of the suspension or revocation.

7. Any person, organization, association or corporation who reports or provides information to the board of nursing pursuant to the provisions of sections 335.011 to 335.259* and who does so in good faith shall not be subject to an action for civil damages as a result thereof.

8. The board may apply to the administrative hearing commission for an emergency suspension or restriction of a license for the following causes:

(1) Engaging in sexual conduct ** as defined in section 566.010, with a patient who is not the licensee's spouse, regardless of whether the patient consented;

(2) Engaging in sexual misconduct with a minor or person the licensee believes to be a minor. "Sexual misconduct" means any conduct of a sexual nature which would be illegal under state or federal law;

(3) Possession of a controlled substance in violation of chapter 195 or any state or federal law, rule, or regulation, excluding record-keeping violations;

(4) Use of a controlled substance without a valid prescription;

(5) The licensee is adjudicated incapacitated or disabled by a court of competent jurisdiction;

(6) Habitual intoxication or dependence upon alcohol or controlled substances or failure to comply with a treatment or aftercare program entered into pursuant to a board order, settlement agreement, or as part of the licensee's professional health program;

(7) A report from a board-approved facility or a professional health program stating the licensee is not fit to practice. For purposes of this section, a licensee is deemed to have waived all objections to the admissibility of testimony from the provider of the examination and admissibility of the examination reports. The licensee shall sign all necessary releases for the board to obtain and use the examination during a hearing; or

(8) Any conduct for which the board may discipline that constitutes a serious danger to the health, safety, or welfare of a patient or the public.

9. The board shall submit existing affidavits and existing certified court records together with a complaint alleging the facts in support of the board's request for an emergency suspension or restriction to the administrative hearing commission and shall supply the administrative hearing commission with the last home or business addresses on file with the board for the licensee. Within one business day of the filing of the complaint, the administrative hearing commission shall return a service packet to the board. The service packet shall include the board's complaint and any affidavits or records the board intends to rely on that have been filed with the administrative hearing commission. The service packet may contain other information in the discretion of the administrative hearing commission. Within twenty-four hours of receiving the packet, the board shall either personally serve the licensee or leave a copy of the service packet at all of the licensee's current addresses on file with the board. Prior to the hearing, the licensee may file affidavits and certified court records for consideration by the administrative hearing commission.

10. Within five days of the board's filing of the complaint, the administrative hearing commission shall review the information submitted by the board and the licensee and shall determine based on that information if probable cause exists pursuant to subsection 8 of this section and shall issue its findings of fact and conclusions of law. If the administrative hearing commission finds that there is probable cause, the administrative hearing commission shall enter the order requested by the board. The order shall be effective upon personal service or by leaving a copy at all of the licensee's current addresses on file with the board.

11. (1) The administrative hearing commission shall hold a hearing within forty-five days of the board's filing of the complaint to determine if cause for discipline exists. The administrative hearing commission may grant a request for a continuance, but shall in any event hold the hearing within one hundred twenty days of the board's initial filing. The board shall be granted leave to amend its complaint if it is more than thirty days prior to the hearing. If less than thirty days, the board may be granted leave to amend if public safety requires.

(2) If no cause for discipline exists, the administrative hearing commission shall issue findings of fact, conclusions of law, and an order terminating the emergency suspension or restriction.

(3) If cause for discipline exists, the administrative hearing commission shall issue findings of fact and conclusions of law and order the emergency suspension or restriction to remain in full force and effect pending a disciplinary hearing before the board. The board shall hold a hearing following the certification of the record by the administrative hearing commission and may impose any discipline otherwise authorized by state law.

12. Any action under this section shall be in addition to and not in lieu of any discipline otherwise in the board's power to impose and may be brought concurrently with other actions.

13. If the administrative hearing commission does not find probable cause and does not grant the emergency suspension or restriction, the board shall remove all reference to such emergency suspension or restriction from its public records. Records relating to the suspension or restriction shall be maintained in the board's files. The board or licensee may use such records in the course of any litigation to which they are both parties. Additionally, such records may be released upon a specific, written request of the licensee.

14. If the administrative hearing commission grants temporary authority to the board to restrict or suspend the nurse's license, such temporary authority of the board shall become final authority if there is no request by the nurse for a full hearing within thirty days of the preliminary hearing. The administrative hearing commission shall, if requested by the nurse named in the complaint, set a date to hold a full hearing under the provisions of chapter 621 regarding the activities alleged in the initial complaint filed by the board.

15. If the administrative hearing commission refuses to grant temporary authority to the board or restrict or suspend the nurse's license under subsection 8 of this section, such dismissal shall not bar the board from initiating a subsequent disciplinary action on the same grounds.

16. (1) The board may initiate a hearing before the board for discipline of any licensee's license or certificate upon receipt of one of the following:

(a) Certified court records of a finding of guilt or plea of guilty or nolo contendere in a criminal prosecution under the laws of any state or of the United States for any offense involving the qualifications, functions, or duties of any profession licensed or regulated under this chapter, for any offense involving fraud, dishonesty, or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed;

(b) Evidence of final disciplinary action against the licensee's license, certification, or registration issued by any other state, by any other agency or entity of this state or any other state, or the United States or its territories, or any other country;

(c) Evidence of certified court records finding the licensee has been judged incapacitated or disabled under Missouri law or under the laws of any other state or of the United States or its territories.

(2) The board shall provide the licensee not less than ten days' notice of any hearing held pursuant to chapter 536.

(3) Upon a finding that cause exists to discipline a licensee's license, the board may impose any discipline otherwise available.

(L. 1975 S.B. 108 § 12, A.L. 1981 S.B. 16, A.L. 1995 S.B. 452, A.L. 1999 H.B. 343, A.L. 2007 H.B. 780 merged with S.B. 308, A.L. 2013 H.B. 315)

*Section 335.259 was repealed by S.B. 52, 1993.

**Word "in" appears here in original rolls.

APPENDIX K

Required Criminal Background Checks

Since health-care facilities are required by Missouri law (chapter 660, Department of Social Services, Section 660.317) to conduct criminal background checks on all personnel having contact with patients, all Practical Nursing students must authorize this background check and comply with the standards set forth by each health care agency. Because these standards may call for the exclusion of some students, it needs to be recognized that it is possible that graduation requirements will not be met. In addition, it needs to be recognized that the Missouri State Board of Nursing will require a second criminal background check prior to authorizing the Practical Nursing graduate to sit for the licensure examination. Students are required to report any charges/convictions that occur from acceptance into program through graduation. This report must be made in writing the day the student returns to class immediately after the incident. Please confer with the Practical Nursing Coordinator immediately if you have questions or concerns.

I have read and understand the above statement.

Student Signature: _____ Date: _____

Revised 8/10 GMP
Reviewed 9/13; 9/14 GMP

**HANNIBAL-LAGRANGE UNIVERSITY
PRACTICAL NURSING PROGRAM
STUDENT AGREEMENT**

I have read and understand the 2015-2016 Practical Nursing Student Handbook and agree to abide by the rules and regulations which are established within the handbook.

Student Signature

**STATEMENT OF RELEASE FROM RESPONSIBILITY
FOR EXPOSURE TO COMMUNICABLE DISEASES OR INJURY
IN THE NURSING PROGRAM**

I understand that I may be exposed to communicable diseases or injury during my clinical experiences as a student of the Hannibal-LaGrange University Practical Nursing Program. I understand that any cost incurred as a result of exposure will be at my expense. I will not hold the school responsible.

Student Signature

Date

NOTE: This page is to be returned to the Practical Nursing Coordinator upon completion of classroom review. Failure to comply with this deadline will result in prohibition from further class attendance.