WARNER PACIFIC UNIVERSITY
SCHOOL OF NURSING

Bachelor of Science in Nursing
Degree Program (BSNDP)
Nursing Student Handbook
2025-2026

(This handbook applies only to students admitted to the School of Nursing BSNDP.)

TABLE OF CONTENTS

SECTION I: WELCOME & INTRODUCTION

Welcome to Warner Pacific University's School of Nursing! The university, faculty, staff, and community are pleased you have selected our program to achieve your dream of becoming a registered nurse (RN) who holds a Bachelor of Science Degree in Nursing (BSN). At orientation, students will receive a link to this comprehensive BSN Degree Program (BSNDP) Student Handbook, which provides information about important policies, procedures, and guidelines. The BSNDP Student Handbook is a living document and may be updated or revised at any time to reflect changes in program policies, accreditation standards, institutional requirements, or regulatory expectations. All updates become effective immediately upon publication. As updates to the handbook occur, we will notify students through their Warner Pacific University (WP) email. Students are responsible for remaining informed of all current policies and procedures throughout their enrollment in the BSNDP. Continued enrollment signifies acknowledgment of and adherence to the current version of this handbook. The program will communicate updates as they occur; however, it is the student's responsibility to review and comply with all revisions. Failure to stay apprised of updates does not exempt students from accountability. This handbook is also posted to the WP BSNDP Webpage: https://www.warnerpacific.edu/academics/degrees-and-majors-minors/bsn-degree-programapplication-process/

WARNER PACIFIC UNIVERSITY

Overview
WP is operated under the auspices of the Church of God (Anderson, Indiana) as a place of education and service for people, regardless of their denomination, who desire a quality liberal arts and/or professional education in a vital Christian community. Founded in 1937 in Spokane, Washington, the college moved to Portland in 1940. In 1959, the name of the institution became Warner Pacific College in honor of one of the early founders of the church as well as to reflect its growing liberal arts emphasis. In 2018, the school became Warner Pacific University to reflect more accurately the growth and development it has experienced in the scope of programs offered and the scale of what its graduates are achieving. The Northwest Commission on Colleges and Universities (NWCCU) has continuously accredited WP since 1961, and the State of Oregon has approved WP to offer degree programs.

Mission
WP is a Christ-centered, urban, liberal arts university dedicated to providing students from diverse backgrounds an education that prepares them to engage actively in a constantly changing world.

Vision
Mission-driven leaders who change the world.

Values
- We learn in an inclusive community.
- We innovate toward experiential learning and academic relevance.
- We engage our spiritual journey with Christ at the Center.
- We serve and care for our city and world.
- We cultivate curiosity, creativity, and purpose.

Core Themes
• Cultivating a Christ-centered learning community.
• Collaborating with and for our urban environment.
• Fostering liberal arts education.
• Investing in the formation and success of students from diverse backgrounds.

SCHOOL OF NURSING (SON)

BSNDP Mission
WP's School of Nursing offers a BSNDP, which exists to educate and prepare students with diverse backgrounds to flourish as professional nurses advocating for recipients of care.

BSNDP Vision
As an offering of a Christ-centered, urban, liberal arts university, the BSNDP engages diverse students in an innovative, formational learning community. Faculty and students co-develop and nurture self-aware and culturally intelligent nurses. Students demonstrate professional skills, ethical practice, compassionate care, a collaborative spirit, and a commitment to lifelong learning and nursing excellence.

BSNDP Philosophy
The BSNDP fosters personal and professional convictions through synergistic integration of context, metaparadigm concepts, education, and practice. The program provides didactic nursing theory content in all courses and faculty-supervised clinical practice in clinical courses. The program meets regulatory standards of the Oregon State Board of Nursing (OSBN) for the depth and breadth of RN capabilities and competencies:
1. Create and maintain a safe environment of care.
2. Demonstrate professional, ethical, and legal behavior in nursing practice.
3. Use problem-solving skills, reflection, and clinical judgment in nursing practice.
4. Provide, direct, manage, appropriately delegate, and supervise nursing care for diverse recipients of care, whether individuals, families, groups, communities, or populations.
5. Provide safe, clinically competent, culturally intelligent, person-centered, and evidence-based care to promote, restore, and maintain wellness or for sensitive palliation and dignified end-of-life care.
6. Participate within and provide leadership for interprofessional teams.
7. Apply leadership skills to identify the need for and to promote judicious change.
8. Use communication and information technology effectively and appropriately to improve health outcomes and mitigate error.
9. Apply and integrate principles of community health and community-based care into practice.
10. Integrate concepts of resource utilization, quality improvement, and systems thinking to enhance care delivery for diverse recipients of care across all settings.

Individual courses in the BSNDP (also known as the Nursing major) address additional knowledge, skills, and attitudes needed to respond to a rapidly changing healthcare delivery environment. Clinical courses across the lifespan and common settings of care further develop and advance skills for the provision of

culturally intelligent and evidence-based teaching, counseling, and advocacy for individuals, families, groups, communities, and populations requiring specialized care.

To achieve mandated capabilities and competencies through ethical approaches, the BSNDP highlights well-accepted convictions associated with BSN preparation for professional nursing: caring, critical thinking, cultural intelligence, holistic practice, and the incorporation of technology as the basis for interprofessional collaboration. These convictions promote intentional delivery of high quality, person-centered care across the lifespan, whether for individuals, families, groups, communities, or populations. Elaboration follows below:

- Caring: The art of caring is a hallmark of professional nursing practice, characterized by enactment of agape love, genuineness, warmth, sensitivity, and curiosity. Nurses exhibit empathy to promote rapport with diverse recipients of care, engage in therapeutic communication, and effectively perform the six elements of the cyclical nursing process: assessment, nursing diagnosis, outcomes identification, planning, implementation, and evaluation.
- Critical Thinking: The science of metacognition supports this signature thread of BSN preparation. Elements of critical thinking include clarity, accuracy, precision, relevance, depth, breadth, logic, significance, and fairness, all of which are required in the dynamic arena of health care. Nurses make clinical decisions based on reasoning and reflection in such a way that the decisions remain within the scope of nursing practice as mandated by the American Nurses Association (ANA), American Association of Colleges of Nursing (AACN), and state regulatory bodies (e.g., the OSBN).
- Cultural Intelligence: Nurses demonstrate cultural competence and humility in the provision of care across the lifespan and as lifelong learners. Cultural diversity, including spirituality, must be accepted and respected as communities become increasingly diverse and vulnerable populations become more marginalized.
- Holistic Practice: Nursing practice is concerned with many dimensions of human beings. Care attends to biophysical, psychosocial, emotional, cultural, and spiritual dimensions of each recipient to promote an outcome of well-being as recipients respond to their unique manifestations of health and illness across the lifespan, including at the end of life.
- Incorporation of Technology: The professional nurse uses technology across the healthcare delivery continuum, including when systems may be specific to individual practice settings. Nurses locate, communicate, and interpret data housed in information databases to optimize outcomes and improve patient safety.
- Interprofessional Collaboration: The professional nurse contributes to the healing trinity of caring, safety, and systems leadership through effective collaboration on interprofessional teams.

The purposes of the BSNDP are to:
- Assist students in meeting BSNDP outcomes.
- Incorporate AACN's "Essentials" (Domains, Interrelated Concepts, and Level 1 Competencies and Sub-competencies*) and QSEN Institute's Competencies in the curriculum.
- Advance students' ability to be advocates for recipients of care through ANA's standards for ethical practice and social policy covenant.
- Promote professional nursing's service mandate for stewardship of holistic human health and healing. Graduates will also be prepared to sit for the NCLEX-RN licensure examination, increase diversity in the regional-to-global nursing workforce, and participate in process and outcome

initiatives in their places of employment (e.g., for interprofessional collaboration, evidence-based practice, high quality caring, patient safety and satisfaction, and leadership succession).

BSNDP Outcomes

Graduates of WP's BSNDP will:

1. Provide professional nursing care informed by a deep and broad exposure to the liberal arts, sound critical thought, and a synthesis of ethical, legal, and moral standards.
2. Exhibit a person-centered approach to managing care that is balanced with attention to the needs of all, with compassion for those who are underserved, a commitment to justice and mercy, and respect for difference that flows from grounded self-awareness.
3. Demonstrate sound self-management that enables perseverance, adaptability, successful functioning in the midst of ambiguity and paradox, and the ability to address priorities appropriately.
4. Communicate effectively with diverse patients, families, healthcare providers, and community members.
5. Work both independently and collaboratively in interdisciplinary teams to provide effective patient-centered care.
6. Understand and apply current evidence to inform population-based care in nursing practice and healthcare leadership roles.
7. Incorporate health promotion and disease and injury prevention, based on current evidence, into nursing practice with individuals, families, groups, communities, and populations.
8. Participate in planning, implementing, and evaluating healthcare technology to facilitate safe, effective, ethical, and cost-effective patient care.
9. Utilize leadership and communication skills to contribute to the ongoing improvement of nursing and healthcare practices and policies affecting patients and communities locally, nationally, and globally.
10. Continuously cultivate leadership skills and systemic thinking to ensure effective navigation of complex systems and rapidly changing regulatory environments.
11. Plan, implement, and evaluate person-centered, goal-directed nursing care based on a holistic assessment of diverse individuals, families, groups, communities, and populations across the lifespan, including compassionate end of life care.

CONCEPTUAL FRAMEWORK

Regulatory standards and process, practice, and performance outcomes guide development of an organizing conceptual framework for the BSNDP (depicted below in Figure 1). The organizing framework consists of concepts identifying a continuously evolving and interconnected system of institutions, regulatory oversight of principle-centered education and practice, and interprofessional collaboration. The framework features the following concepts, described individually, below:

- Context: (a) Oregon State Board of Nursing Chapter 851, Division 21 "Standards for the Approval of Educational Programs in Nursing Preparing Candidates for Licensure as Practical or Registered Nurses," and (b) Warner Pacific University and its Core Themes, which attract diverse students with aspirations for professional nursing practice following acquisition of a BSN Degree.
- Education for Professional Nursing Practice: American Association of Colleges of Nursing (AACN) Essentials (Level 1), QSEN Institute Competencies, and Accreditation Standards of the Commission on Collegiate Nursing Education (CCNE).
- Standards of Practice and Performance: American Nurses Association (ANA).

- Metaparadigm of Nursing: Concepts of Person, Health, Environment, and Nursing.

OSBN Standards for Approval

Through a three-step initial approval process of the OSBN, the program addressed seven Standards for Approval as specified in Chapter 851, Division 21 Rules.

1. 851-021-0040 Standards for Approval: Organization and Administration
2. 851-021-0045 Standards for Approval: Nursing Faculty
3. 851-021-0050 Standards for Approval: Curriculum
4. 851-021-0055 Standards for Approval: Students
5. 851-021-0060 Standards for Approval: Records
6. 851-021-0065 Standards for Approval: Facilities and Services
7. 851-021-0070 Standards for Approval: Evaluation

WP University Core Themes

1. Cultivating a Christ-centered learning community (Christ-centered).
2. Collaborating with and for our urban environment (urban).
3. Fostering a liberal arts education (grounded in the liberal arts).
4. Investing in the formation and success of students from diverse backgrounds (diverse).

Domains of AACN Essentials (2021)

Domain 1: Knowledge for Nursing Practice
Domain 2: Person-Centered Care
Domain 3: Population Health
Domain 4: Scholarship for Nursing Discipline
Domain 5: Quality and Safety
Domain 6: Interprofessional Partnerships
Domain 7: Systems-Based Practice
Domain 8: Informatics and Healthcare Technologies
Domain 9: Professionalism
Domain 10: Personal, Professional, and Leadership Development

AACN's Interrelated Concepts

- Clinical Judgment
- Communication
- Compassionate Care
- Diversity, Equity, and Inclusion
- Ethics
- Evidence-Based Practice
- Health Policy
- Social Determinants of Health

QSEN Institute Competencies (related to Quality and Safety Education for Nurses)

1. Patient/Person-Centered Care

2. Teamwork & Collaboration
3. Evidence-Based Practice
4. Quality Improvement
5. Safety
6. Informatics

CCNE Accreditation Standards (2018) (5-Year Initial Accreditation Granted 02-24-2021)
1. Program Quality: Mission and Governance
2. Program Quality: Institutional Commitment and Resources
3. Program Quality: Curriculum and Teaching-Learning Practices
4. Program Effectiveness: Assessment and Achievement of Program Outcomes

ANA Standards of Practice (3rd Edition, 2023)
1. Standard 1: Assessment-The registered nurse systematically collects comprehensive and relevant data related to the healthcare consumer's health status, condition, strengths, needs, and preferences. This includes physiological, psychological, sociocultural, spiritual, economic, and lifestyle data using evidence-based assessment techniques.
2. Standard 2: Diagnosis-The registered nurse analyzes assessment findings to determine actual or potential nursing diagnoses, problems, and issues. The nurse prioritizes these diagnoses, validates findings with the patient and interprofessional team, and articulates them in a manner that guides safe, effective care planning.
3. Standard 3: Outcomes Identification-The registered nurse identifies expected, individualized outcomes that are achievable, measurable, culturally relevant, and supported by evidence. Outcomes reflect the patient's values, preferences, literacy, resources, and the broader context of care delivery.
4. Standard 4: Planning-The registered nurse develops a comprehensive plan of care that prescribes evidence-based strategies, interventions, and alternatives designed to meet the identified outcomes. The plan integrates current clinical guidelines, patient goals, risk mitigation strategies, and resource allocation.
5. Standard 5: Implementation-The registered nurse implements the plan of care by executing evidence-based interventions, coordinating care, providing patient education, and promoting health. The RN organizes and integrates care activities across systems and disciplines to achieve safe, effective outcomes. The RN delivers education using culturally and literacy-appropriate strategies aimed at enhancing health, preventing illness, and supporting self-management.
6. Standard 6: Evaluation-The registered nurse evaluates progress toward the achievement of outcomes by analyzing patient responses, comparing expected vs. actual results, and determining the effectiveness of interventions. Evaluation findings lead to revision of diagnoses, outcomes, and the plan, ensuring ongoing, adaptive, and patient-centered care.
7. Standard 7: Ethics-The RN integrates the *Code of Ethics for Nurses* into all professional actions. Practice reflects integrity, respect for human dignity, protection of patient rights, ethical decision-making, and promotion of equity and justice across all care settings.
8. Standard 8: Advocacy-The RN advocates for the healthcare consumer's preferences, safety, values, and access to care. This includes supporting informed decision-making, addressing inequities, and collaborating with systems to eliminate barriers.

9. Standard 9: Respectful and Equitable Practice-The RN practices with cultural humility and fosters environments where all individuals are treated with dignity. Care is individualized and equitable, addressing cultural, social, linguistic, and spiritual factors while actively reducing disparities.
10. Standard 10: Communication-The RN communicates clearly, effectively, and professionally in all roles. Communication supports shared decision-making, patient understanding, safety, and interprofessional collaboration through verbal, nonverbal, written, and digital methods.
11. Standard 11: Collaboration-The RN collaborates with the patient, family, and interprofessional team to achieve optimal outcomes. Collaboration requires shared planning, open communication, mutual respect, and integration of diverse professional perspectives.
12. Standard 12: Leadership-The RN demonstrates leadership behaviors that promote quality care, a healthy work environment, and professional accountability. Leadership includes influencing systems, supporting colleagues, modeling professionalism, and participating in decision-making.
13. Standard 13: Education-The RN seeks knowledge and competency that reflect current nursing practice. The nurse engages in lifelong learning, professional development, continuing education, and reflective practice.
14. Standard 14: Scholarly Inquiry-The RN integrates evidence, research findings, quality improvement data, and scholarly literature into practice. The nurse participates in inquiry, utilizes data to guide decisions, and promotes innovation in care delivery.
15. Standard 15: Quality of Practice-The RN contributes to quality nursing practice by ensuring safe, effective, evidence-based, and person-centered care. Activities include participating in quality initiatives, identifying improvement opportunities, and evaluating outcomes.
16. Standard 16: Professional Practice and Evaluation-The RN evaluates their own practice relative to professional standards, ethics, regulations, and institutional policies. Self-evaluation leads to improvement plans, accountability, and continuous growth.
17. Standard 17: Resource Stewardship-The RN uses resources responsibly and efficiently to improve safety, quality, and cost-effectiveness. This includes advocating for appropriate staffing, reducing waste, and optimizing use of personnel, technology, and supplies.
18. Standard 18: Environmental Health-The RN practices in ways that promote a safe, healthy environment for patients, the community, and the workforce. This includes identifying and mitigating environmental hazards and advocating for policies that support ecological and occupational safety.
19. Standard 19: Accountability-The RN is accountable for professional actions, decisions, and outcomes. This includes adhering to standards, laws, and ethical principles; maintaining competence; and taking responsibility for practice across settings.

ANA Code of Ethics with Interpretive Statements (2015)
1. Provision 1: The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. Provision 2: The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. Provision 3: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
4. Provision 4: The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.

5. Provision 5: The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. Provision 6: The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
7. Provision 7: The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. Provision 8: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. Provision 9: The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

ANA Social Policy Statement and Covenant (2015)
Nursing is the protection, promotion, and optimization of health and abilities; prevention of illness and injury; alleviation of suffering through the diagnosis and treatment of human response; and advocacy in the care of individuals, families, groups, communities, and populations.

Metaparadigm of Nursing: What Is Nursing About?

Person:
Humans are dynamic beings who are sentient, multidimensional, and capable of higher cognitive functioning. When providing care, nurses regard recipients of care as holistic human beings and take into consideration factors that affect health behaviors: biological, spiritual, cognitive, and sociocultural dimensions, as well as stages of development. Persons who are the recipients of nursing care may be individuals, families, groups, communities, or populations.

Health:
Health is a subjective term for a resource of everyday living leading to well-being. Health results from responsive change within a homeostatic range. Feelings of health and well-being may accompany illness states, based on an individual's perception between the possibilities and actualities of the lived experience of illness. A valued other may also promote these feelings.

Environment:
The environment is an expansive concept, encompassing spiritual, internal, and external contexts, as in healthcare delivery systems and the location or geography in which human relationships exist. As such, the BSNDP threads exploration of environments throughout the curriculum to ascertain effects on recipients of care across the lifespan. These effects may be psychosocial, biological, economic, and/or cultural. Effects may also be conscious or unconscious.

Nursing:
A domain definition of nursing is "stewardship of holistic human health and healing" (Campbell, Gilbert, & Laustsen, 2014, p. 15). The nursing profession is a collective group of nurses, whose knowledge depends on a foundation from the liberal arts in higher education, nursing theories, and utilization of

evidence-based practice, as applied in the delivery of person-centered care across practice settings and in collaboration with other professionals.

The

BSNDP focuses on the healing trinity of caring, safety, and leadership through compassionate ethical legal practice, critical thinking, clinical reasoning, and therapeutic communication. Nurses engage in professional role development throughout their career, which accompanies personal growth, lifelong learning, and an increasingly sophisticated view of global health care.

* Campbell, L., Gilbert, M. A., & Laustsen, G. R. (2014). Capstone coach for nursing excellence (2nd Edition). Philadelphia: Davis.

Context:
1. Oregon State Board of Nursing Standards for Approval
2. Warner Pacific University
Core Themes:
- Christ-Centered
- Urban
- Grounded in the Liberal Arts
- Diverse Students with Aspirations for Professional Nursing Practice

Education:
- Essentials
(American Association of Colleges of Nursing)
- QSEN Institute Competencies
(Quality and Safety Education for Nurses)
- CCNE National Nursing Accreditation
(Standards of the Commission on Collegiate Nursing Education)

Person (Recipient of Care):
Diverse Individuals, Families, Groups, Communities, and Populations

Health:
Quality Health Care and Outcomes for Well-Being in Rapidly Evolving Delivery Systems

Ethical Practice:
- ANA Scope and Standards of Practice (Nursing Process and Professional Performance Standards)
- ANA Code of Ethics
- ANA Social Policy Statement and Covenant
(American Nurses Association)

Environment:
- Spiritual
- Internal
- External
(Including continuum of healthcare delivery)

Nursing:
- Stewardship of Holistic Human Health and Healing
- Advocacy for Recipients of Care through the Healing Trinity of Caring, Safety, and Leadership
- Collaboration with Other Professionals (Interprofessionalism)
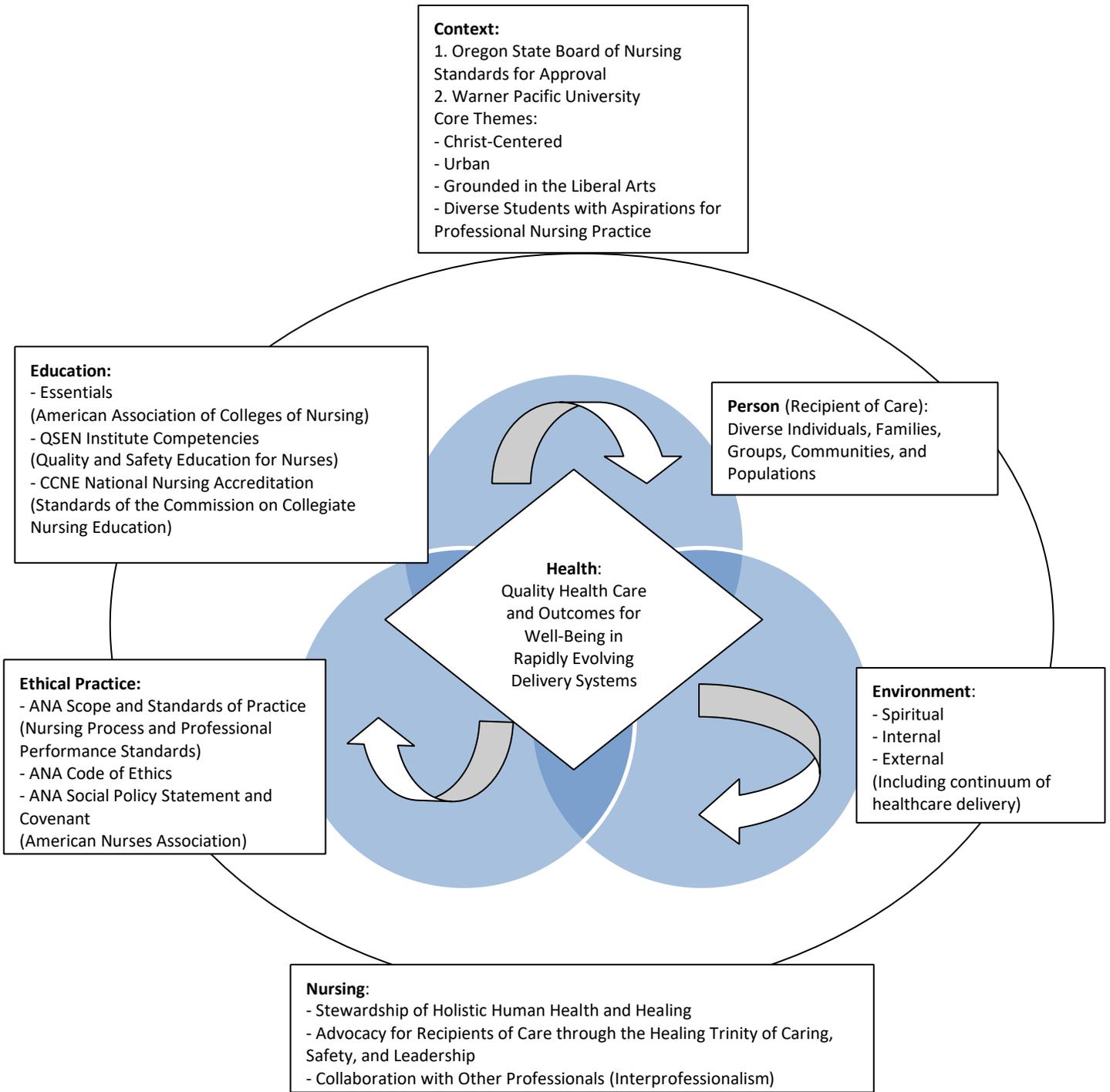
Figure 1: WP BSNDP Conceptual Framework

UNDERGRADUATE PROGRAM

Pre-Licensure Bachelor of Science in Nursing Degree Program (Traditional BSNDP): The BSNDP allows students to complete the requirements for becoming a Registered Nurse (RN) while also achieving a bachelor's degree. This academic program advances the mission of WP by providing students with a degree that equips them to participate in systemic change by increasing diversity of the greater Portland nursing workforce and beyond. Because WP attracts high-opportunity, diverse, first-generation students who are committed to long-term service within their home communities, our ability to produce capable, diverse nurses is unparalleled.

Prospective pre-licensure students apply to the BSNDP through two main routes:
- As a WP pre-nursing student in the second semester of the sophomore year: Students interested in the Nursing major complete general education core and nursing prerequisite courses in the first two years (APPENDIX A: Nursing 4-Year Planner). Upon acceptance, students complete nursing specific coursework, following a cohort model, in four upper division semesters (APPENDIX B: Upper Division Nursing Cohort Courses).
- As a transfer student: Some or all of the general education core and nursing pre-requisite courses have been completed and credit has been transferred to WP. Students then complete any remaining general education core courses and nursing-specific coursework in the upper division of their program of study.

If accepted into the BSN program, students are required to obtain a Health Screening completed and signed by a licensed MD, DO, NP, or PA. The following documentation must be submitted prior to beginning coursework:

- **Tuberculosis (TB) Screening:** IGRA blood test preferred.
- **Required Immunizations:** Influenza, Tdap, Hepatitis B, Varicella, MMR, and COVID-19 (recommended).
- **BLS Certification for Healthcare Providers:** Must be completed through the American Heart Association (AHA), either in-person or hybrid format.

Prior to clinical placement, students will be required to complete both a urine drug screen and a criminal background check. Details regarding these requirements will be reviewed during the Junior I semester.

The BSN program is a **substance-free program**. Students are expected to refrain from the use of any substances that are illegal at the federal level when entering a professional nursing program and career. The program maintains a **zero-tolerance policy** regarding the use of federally illegal substances.

Note: Upon graduating with a BSN Degree, the OSBN requires a background check, to be paid by the graduate, along with fees for licensing (OSBN) and testing (Pearson VUE). The OSBN decides who gets an RN license. For students with a criminal background, they are to be aware that while they may be able to graduate with a BSN degree, this academic milestone does not guarantee a Registered Nurse license from the OSBN, which is determined on a case-by-case basis.

Please also note: Up to 1500 new graduates from across Oregon apply for licensure in November/

December and May/June. OSBN publishes a [New Graduate Guide](#) with the following elements for consideration:

1. The Board exists for the safety of the public, not to get graduates licensed in time to meet a deadline placed by a potential employer. [Therefore, ask any potential employers – NOT OSBN – about implications and any extensions. Graduates who have been studying according to the schedule provided in the senior year ought to be well prepared to take the NCLEX-RN in a timely way once approved. Do NOT take the NCLEX-RN because of a job offer. Take it once very close to the "guaranteed pass rate" on practice tests.]
2. The Board does not expedite processing applications for any reason, such as a pending job offer.
3. Please do not contact Board staff to ask for a timeline or status of application processing.
4. Do not ask for a timeline regarding approval of an application.
5. Do not use a school email address on an application. Use only personal email.

Not included in the [New Graduate Guide](#) but vitally important: The most common reason our new graduates do not show up in OSBN's Affidavit of Graduation (AOG) portal is due to omitting Warner Pacific University as their school or selecting an incorrect program! When submitting the OSBN application, print out or download the completed application for reference, particularly because it includes another key component, the fingerprint requirement.

Students complete the required multicultural component during their BSNDP. Here are other steps, which are spelled out in detail in OSBN's [New Graduate Guide](#):

- Submit the application.
- Answer disclosure questions truthfully. They must align with a student's background check.
- Use the "Application Status Wizard" to check on the status of application processing.
- Meet all parameters for OSBN to send Pearson VUE the Release to Test, which is a manual, labor-intensive task.
- Receive via email an ATT code (Authorization to Test) from Pearson VUE.
- Schedule the licensing exam.
- Obtain exam results (read this section carefully regarding implications of passing or failing).

<div align="center">ADMINISTRATION, FACULTY & STAFF</div>

Nurse Administrators/Educators: Full-Time Faculty

- Andrea Thompson, PhD(c), MSN (Education), RN, Dean and Professor
  Nursing experience 2010-present; nurse educator/clinical educator associate 2010; nurse educator/clinical educator 2012
- Katie Ketterling-Thornburg, BSN, MSN, DNP, RN, APRN, FNP-C, Interim Associate Dean, Assistant Professor, and Advisor for Nursing Students in the Major
  Nursing experience 2011-present; nurse educator/clinical educator 2024-present
- Fernanda Fortuna, BSN, RN, Assistant Professor
  Nursing experience 2019-present; nurse educator /clinical educator 2019-present
- Jessica Sandstrom, MSN (Education), RN, CEN
  Nursing experience 2007-present; nurse educator/clinical educator associate 2019-2022; nurse educator/clinical educator 2022-present

Nursing Program Staff
- Lesley Ibarra, BA, Program Manager Clinical Placement Coordinator and Onboarding for ACEMAPP and StudentMAX

  Manager of Weekly Calendars; Manager of School Affiliation Agreements; Onboarding for Clinical Supervisors and Liaison for Contracts; and Liaison for Textbooks and Resources, Kaplan NCLEX-RN Prep, and Other Vendors (Hire Date: August 2025)
- Kate Williams, BSN, Program Coordinator/Simulation Coordinator

  Nursing experience 2022-present; nurse educator associate/clinical educator 2025-present

  Clinical Placement Coordinator and Onboarding for ACEMAPP and StudentMAX

  Manager of simulation program, class simulation schedule, and supply management for simulation lab; Assistant in School Affiliation Agreements; Assisting in Onboarding for Clinical Supervisors and Contracts (Hire Date: August 2025)

Adjunct Instructors of Nursing
- Linda Campbell, PhD, RN, CNS, CNE

  Nursing experience 1989-present; nurse educator/clinical educator 2003-present; accelerated nursing program director (Regis University) 2013-2016; WP founding dean of nursing 2017-2025
- Ajay Raghubansh, BSN, RN

  Nursing experience 2022-present; nurse educator associate/clinical educator 2025-present
- Danielle Lee, BSN, RN

  Nursing experience 2022-present; nurse educator/clinical educator 2025-present

SECTION II: ACADEMIC GUIDELINES

WP CORE STUDIES REQUIREMENTS

A liberal arts education fosters diverse students to engage actively in a constantly changing world. WP requires a minimum of 30 semester credits from the following 13 categories of general education:

1. Written Communication: Two-course sequence in English composition.
2. Information Technology: One course in information technology.
3. Scientific Reasoning: One course (100 level or above) in the natural sciences.
4. Quantitative Reasoning: One course (100 level or above) in mathematics.
5. Historical and Cultural Knowledge and Practice: One course from art and/or history.
6. Critical Thinking and Strategic Action: One course that focuses on techniques in dialogue, problem-solving, strategic planning, or critical thinking.
7. Holistic World View: One course in Biblical studies or one course in health theory accompanied by a course in physical activity.
8. Ethics: One course in ethics.
9. Diversity: One course that articulates the value of diverse voices and perspectives.
10. Urban Life: One course that explores human behavior, social organizations, and/or urban life.
11. Information Literacy and Research: One upper-division course (ILR 300 or equivalent) in advanced information literacy and research skills.
12. Spiritual Journey: One course at WP (REL 320) that helps students articulate their own spiritual journey.

13. Interdisciplinary Thinking: One upper-division course at WP (HUM 310) that helps students articulate connections among multiple academic disciplines.

Please Note: Students with a previous baccalaureate or higher degree have satisfied the above-listed general education core courses. Students who earned the AAOT (Associate of Arts Oregon Transfer) degree from an Oregon community college take three remaining general education courses within the Nursing Major: ILR 300, REL 320, and HUM 310. (See Upper Division Nursing Cohort Courses for sequencing.) Non-degreed students follow WP's transfer guides for general education core courses.

BSNDP CURRICULUM

Required Pre-Nursing and C0-Requisite Courses
BIO 221 Human A & P I, with lab (4)
BIO 222 Human A & P II, with lab (4)
BIO 370 Microbiology, with lab (4)
CHEM 111 Introduction to Chemistry, with lab (4)
MA 104 Math for Liberal Arts (3)
PSY 140 General Psychology (3) SOC
140 Sociology (3)
HD/SW 330 Life Span Human Development (3)
ILR 300 Advanced Information Literacy & Research (3)
REL 320 Spirituality, Character & Service (3)
HUM 310 Humanities Colloquy: Exploring the Human Condition (3)

Required Nursing Courses
NURS 210 Interprofessionalism (2)
NURS 301 Pathophysiology (3)
NURS 302 Pharmacology (3)
NURS 336 Health Assessment & Health Promotion (4)
NURS 340 Medical-Surgical Nursing I: Providing Care (5)
NURS 350 Diversity, Equity & Advocacy (3)
NURS 370 Research, Statistics & Evidence-Based Practice (3)
NURS 380 Maternal & Neonatal Health Nursing (3)
NURS 400 Child & Adolescent Health Nursing (3)
NURS 410 Family & Community Health Nursing (3)
NURS 440 Medical-Surgical Nursing II: Managing Care (6)
NURS 460 Leadership I: Epidemiology, Prevention & Informatics (3)
NURS 470 Mental Health Nursing (3)
NURS 480 Leadership II: Caring, Safety & Leadership (3)
NURS 490 Leadership III: Leadership & Management Capstone (6)

BSN DEGREE PROGRAM REQUIREMENTS

The Nursing Major: The nursing curriculum (a) prepares students to achieve nursing competencies and capabilities necessary for safe practice based on current standards of care, (b) reflects the identified

mission, goals, and learning outcomes of WP and the BSNDP, and (c) is consistent with Oregon statutes and standards identified in OSBN Chapter 851, Division 21 Rules as revised 08-012022.

Resources to inform and guide students in their pursuit of the Nursing major include the WP Catalog; this BSNDP Student Handbook; Nursing 4-Year Planner (APPENDIX A); Upper Division Nursing Cohort Courses (APPENDIX B); Current Course Syllabi (located in WP's Learning Management System: Canvas); the Registrar; Admissions and Academic Advisors; Faculty Advisors and Mentors; the Associate Dean of Nursing; and the Dean of Nursing. (See also: Commitments Section).

Requirements for Graduation: WP requires the following achievements for a Baccalaureate Degree:
• A minimum of 120 semester credits
• A cumulative grade point average of at least 2.0 in all courses taken in residence and accepted in transfer
• At least 40 upper division semester credits (courses numbering 300 and above)
• Completion of General Education Core (GEC) requirements as stipulated, achieving a grade of C or above in all required courses
• Completion of a major, achieving a grade of C- or better in all required and prerequisite courses
• At least 15 semester credits for the major in residence at WP
• At least 30 of the last 40 semester credits in residence at WP

The BSNDP meets or exceeds WP requirements for graduation, as follows:
• Bachelor of Science in Nursing (BSN) Degree: 122-125 total semester credits ○ GEC and Pre-Nursing Courses (PNC): 60-63 semester credits (depending on selected courses) ○ Nursing Cohort Courses: 62 semester credits
• 81 semester credits in the Nursing Major
• 53 semester credits in residence (all NURS prefix courses)
• 51 semester credits in upper division (NOTE: The lower division course is the 2-credit course NURS 210
• Completion of the Nursing Major, achieving a grade of C- or better in all required and prerequisite courses

ACADEMIC RESPONSIBILITIES, ACCOUNTABILITY & EXPECTATIONS FOR PROFESSIONAL BEHAVIORS

Academic Integrity Policy
(Note: Refer current students to WP Catalog: Dishonesty & Plagiarism)
Students are expected to adhere to the highest standards of honorable conduct in academic matters. If students and faculty are to build a learning community, it is essential that students present their own work in their classes. The following situations constitute a breach in academic integrity:
1. Giving unauthorized information to another student or receiving unauthorized information from another student or source during any type of examination or test.
2. Obtaining or providing without authorization, content (questions or answers) relating to any examination or test prior to the time of the examination or test.
3. Asking or arranging for another person to take an examination or test in one's place; asking or arranging for another person to sign an attendance sheet in one's absence.

4. Plagiarizing, which is taking work, words, or substantive ideas of another and offering them as one's own, without acknowledging the source. Examples include but are not limited to:
submission of a written work (either in part or in whole) completed by another; failure to give credit in a footnote or other citation for ideas, statements, facts, or conclusions that rightfully belong to another; failure to use quotation marks when quoting directly from another; and close and lengthy paraphrasing of another's writing.
5. Utilizing electronic resources to complete assignments instead of resources provided, specified, and/or approved by the instructor. (Note: Resources that generate non-student work, such as Course Hero and ChatGPT, are explicitly disallowed.)
6. Falsifying documentation from or in the clinical setting.

All incidents of willful dishonesty or plagiarism will be reported in writing to the Chief Academic Officer (CAO) using the WP Academic Integrity Violation Report Form (APPENDIX C). In order to protect both student and faculty involved, the Dean or CAO must be present during any action taken beyond the oral reprimand or counseling stage. Possible actions that may be taken by a faculty member who suspects a student of academic dishonesty (after conversation with the student in order to determine the student's awareness of the problem) are listed below:
1. An oral reprimand: Counseling with the student toward the aim of making the student aware of the gravity of the offense and preventing future occurrences, which may also include a requirement for the student to repeat the work or complete it through a substitute assignment.
2. Assignment of a failing grade or a reduction of the grade earned on the specific work in question.
3. A reduction in the course grade.

If a satisfactory resolution is not reached after these actions have been taken, either the faculty member or student may refer the matter to the Academic Policies Committee for resolution, which will address the issue using the regularly established procedures for academic appeals. If either the faculty member or student is not satisfied with the action of the Academic Policies Committee, an appeal may be made to the WP President (or designee). At the discretion of the CAO, repeat offenses may result in student suspension or administrative dismissal from the university.

All of the above procedures must be carried out in accordance with the Warner Pacific University Education Records Policy in compliance with the Family Educational Rights and Privacy Act (Public Law 93-380, known as FERPA). As an additional step toward accountability, students will be required to sign the Academic Integrity/Honor Code Form (APPENDIX D).

Accessibility Services
It is the policy and practice of Warner Pacific University to create inclusive and accessible learning environments consistent with federal and state law. If you are a student with a disability, or think you may have a disability, you are encouraged to initiate a conversation with Accessibility Services by contacting accessibility@warnerpacific.edu or 503-517-1692.

To be considered for reasonable accommodations, students must self-identify to Accessibility Services, participate in an intake meeting, and provide appropriate documentation. Returning students must request accommodations for each new term. Instructors are not required to provide accommodations unless they receive a Letter of Accommodation from Accessibility Services, and accommodations cannot be applied retroactively. For these reasons, students with disabilities are advised to contact

Accessibility Services early each semester to ensure that their needs are met. Please visit the Accessibility Services website for more information: Accessibility Services.

Academic Pathway to Success
Based on a desire to support and facilitate students' accountability and success, the Academic Pathway to Success (APS) process addresses issues surrounding actual and potential student difficulties with course or BSNDP expectations. The purpose is to have a consistent and clear process and recognize that each student's situation will require an individualized approach. Course and/or clinical faculty generate an APS Form (APPENDIX E) when a student is at risk for having a low grade or failing a course.

The need for an APS process may be identified due to substandard results on exams, written assignments, and/or clinical/skills performance, or for unprofessional behaviors. An APS process may also be identified due to lack of timely communication about missing class/meeting times and/or assignment deadlines. The APS Form provides guidance from the faculty and/or advisor for the student to improve his or her performance in the course or program overall and must be discussed with the student and signed by the faculty member and/or advisor and student. The student's signature indicates that the student has been presented with the APS Form and understands the nature of the situation. A copy of the completed APS Form is placed in the student's advising file.

Expectations for Professional Behavior
During the period of clinical/practicum assignment to any healthcare agency, each student is expected to understand and to follow all policies and procedures of that agency. All nursing students are to wear their WP DON nametag and badge reel when in the clinical area preparing for and/or attending clinical or practicum experiences. Patients cared for by nursing students have a right to expect confidentiality. (See HIPAA Section in this Handbook: Confidentiality and the Health Information Portability & Accountability Act Policy.) All students are expected to maintain patient confidentiality and practice according to sound ethical and professional principles, which means:
• Students must guard against the inadvertent or purposeful sharing of information regarding any aspect of a patient's treatment in any setting, except as required by the necessities of professional and interprofessional education, treatment, or management.
• Confidential information includes the patient's name or any other identifiers, such as diagnoses.
• All correspondence or documentation related to a patient must be carefully safeguarded.

As the purpose of clinical experience is to provide authentic learning for students, the following are a few examples of inappropriate clinical behaviors that can compromise clinical learning, quality nursing care, and positive relationships with our clinical partners and our recipients of care:
• Making personal phone calls, texting, or using computers for personal reasons during clinicals.
• Engaging in disruptive behavior at any time in the clinical setting.
• Photographing, photocopying, printing, and/or uploading any portion of a patient's chart.
• Socializing in the clinical setting, including around the nursing station, instead of being proactive about clinical learning.
• Acting beyond the scope of a nursing student, such as attending emergency situations, examinations, or case meetings without an explicit invitation and the preceptor being present.
• Undermining the authority of preceptors, instructors, and other clinical personnel in front of others, including patients.

A breach of confidentiality in the clinical site, nursing labs, or the classroom setting is considered unprofessional. Unsafe and/or unprofessional behavior are grounds for immediate dismissal. Egregious examples of such behavior include workplace bullying, violence, aggression, abuse, hostility, sabotage, and incivility. Frequency of behavior and related intentionality are also considered for immediate dismissal.

ASSIGNMENTS

Essential documents for each course, including the syllabus, course activities calendar, and student guides provide specific information about assignments and due dates. Students are advised to review this information at the beginning of each course and carefully track assignments and their due dates throughout each course.

Guide to Formal Papers: Unless stated differently by course faculty, the WP DON uses guidelines of the American Psychological Association (APA) as the format for all course/formal papers. Because professional writing requires the use of specific paper and reference formatting, it is expected that students learn to apply APA guidelines. Copies of the APA manual are available for purchase, and there are multiple websites that provide additional assistance in APA formatting (e.g., Purdue Writing Lab). WP also provides APA resources through the Otto F. Linn Library and the Office of Student Success & Engagement: https://www.warnerpacific.edu/academics/support-services/academicsuccess-center/academic-resources/.
Plagiarism Detection Software: Course faculty may require the use of plagiarism detection software (e.g., Turnitin) in conjunction with assignment submission. Students must allow for additional time required to benefit from use of this software.

Exams and Honorlock: Honorlock will proctor your exams this semester. Honorlock is an online proctoring service that allows you to take your exam from the comfort of your home. You DO NOT need to create an account or schedule an appointment in advance. Honorlock is available 24/7, and all that is required is a computer, a working webcam/microphone, your ID, and a stable internet connection.

To get started, you will need Google Chrome and download the Honorlock Chrome Extension. When you are ready to complete your assessment, log into your Canvas, go to your course, and click on your exam. Clicking "Launch Proctoring" will begin the Honorlock authentication process, where you will take a picture of yourself and show your ID. During the authentication steps, you may be prompted to complete a room scan. This is a test taker authentication step in which you will be asked to perform a 360-degree scan of your environment with the computer or webcam to confirm the integrity of the testing environment. Honorlock will be recording your exam session through your webcam and microphone and recording your screen. Honorlock also has an integrity algorithm that can detect search-engine use, so please do not attempt to search for answers, even if it's on a secondary device.

Honorlock support is available 24/7/365. If you encounter any issues, you may contact them through live chat on the support page or within the exam itself. Some guides you should review are Honorlock MSRs, Honorlock FAQs for Test Takers, Honorlock Knowledge Base, and How to Use Honorlock.

Late Submissions: All assignments are to be submitted on or shortly before the due date, unless prior arrangements have been made with the course faculty. Faculty will provide information in the syllabus or student guide regarding penalties for late assignments.

Extensions: In the event of special circumstances, faculty may grant a student an extension of time for completing course assignments. Students requesting an extension are expected to contact faculty before the assignment due date.

GRADES

Refer to the current WP Catalog. Each course faculty determines the evaluation methods and grade value for each course assignment/activity.
- Grading and Grade Points: WP uses a traditional grade point scale (where A=4 grade points, B=3 grade points, C=2 grade points, D=1 grade point, and F=0 grade points). Plus or minus grades are also specified on the transcript and calculated into the grade point average.
- Letter Grades and Numerical Point Range: Because of the rigorous nature of nursing judgment, care of persons, and outcomes for recipients of care, the DON uses the following grading scale:

Percentage	Grade		Percentage	Grade		Percentage	Grade
94 – 100%	A		80 – 83%	B-		67 – 69%	D+
90 – 93%	A-		77 – 79%	C+		64 – 66%	D
87 – 89%	B+		74 – 76%	C		60 – 63%	D-
84 – 86%	B		70 – 73%	C-		59% or below	F

Threshold and Hurdle Requirements: Because of actual and potential life-or-death scenarios for recipients of care, students in the Nursing Major must meet or exceed rigorous requirements. They are supported to do so through written OSBN-approved outcomes, learning activities, evaluations of their performance across the curriculum, and posted faculty office hours. In addition, the Division of Nursing has tutors, mentors, and other resources available to students at posted times.

All courses and assignments are graded either on a letter grade (A through F) or a Pass/No Pass basis. See Course Syllabi and Student Guides for details about grading. Final course grades use the system for letter grades and numerical point range noted above. The highest letter grade a student can earn on a transcript if these requirements are not met is a D+ and depends on the final numerical point range.
- Individual exams and/or assignments will be rounded to the appropriate hundredths place. •
    There are up to four elements to passing a course:
    o Receiving a final cumulative course grade of a "C-" (70%) or better to pass the course. Course grades below a "C-" (70%) are considered a failing grade.
    o Maintaining a 70 percent cumulative passing grade in all proctored examinations given in a specific course.
    o Passing any and all clinical components to pass the course.
    o Submitting all required assignments for both theory and clinical courses to pass the course.
- Students not adhering to expectations stated above receive a failing grade (from D+ to F, depending on final numerical point range) regardless of grades received on individual assignments or evaluations.

- Final course grades are subject to mathematical rounding (i.e., decimal fractions of 0.49 or lower are rounded down and 0.50 or greater are rounded up). "Close" to a requirement is not considered grounds for appeal unless a mathematical error has occurred.
- Pending the outcome of an appeal, a student is expected to reflect, remediate, and re-commit before returning in a second attempt to be successful in a course.
- After two course failures (grades below C-), students will receive a dismissal letter from the Dean of the Division of Nursing. This approach is common across most nursing programs and is intended to protect affected students from further emotional and financial consequences.
- Affected students may appeal to the Nursing Division Review Panel (NDRP) regarding any extenuating circumstances or other compelling reasons to be retained instead of dismissed. Panel members will review a student's appeal and render a decision. The student has an additional avenue of appeal, listed below under the "Two-Course Failure" section. The only exception to this is Nurs 490, for which there is no appeal after failing twice. See included BSNDP policies.

Grades of Incomplete: An Incomplete ("I") may be granted only when: (a) completion of remaining requirements is not possible because of factors beyond the control of the student; (b) the student has been in regular contact with the instructor regarding course completion; and (c) the student was earning a course grade of at least "C-" at the date of occurrence or request. The "I" may be granted only after a student has obtained and completed an approved "Request for Incomplete Form," to be filed in WP's Records Office and accompanied by a contract for completing the work, signed by the student and the instructor. Requests for incompletes must be filed before finals week begins. An Incomplete taken in the fall semester must be completed by the end of the following spring semester; an Incomplete taken in the spring or summer semester must be completed by the end of the following fall semester. Refer to the WP Catalog for additional steps and consequences.

Note: Because of the sequential nature of many nursing courses, a student receiving an "Incomplete" grade may be unable to progress to all courses in the next term.

Course Failure: All students must comply with the current WP Catalog progression policies and processes. In addition, the BSN Program expects students to attend to the following requirements for passing all nursing courses:
1. Maintain a 70 percent cumulative passing grade in all proctored examinations given in a specific course and in the nursing program overall.
2. Successfully pass all clinical and laboratory objectives for the course.
3. Complete all program-testing requirements (e.g., Kaplan exams) as specified in program documents or in course syllabi.
4. Refer to the "Grading" and "Progression, Withdrawal & Dismissal" sections in this handbook for consequences related to course failure.

Process: When a student fails a course, the student will meet with the course faculty. If needed, the student will be referred to the advisor for a counseling session as soon as possible to discuss reasons for the failing grade and anticipated subsequent actions. The grade appeal process shall be discussed during this session. The advisor or course faculty will provide a completed APS Form (APPENDIX E), including the actions to be taken. The APS Form must include the following:
- Circumstances related to the student's course failure and the plans or changes the student has made that will facilitate the student's success in future nursing courses.

- The selected plan for progression if continuation in the BSNDP is possible.

A student needing to retake a failed course will be notified when enrollment in a section of the failed course is available. Such placement is on a space-available basis and typically requires dropping back a cohort. **If a gap of greater than one semester occurs, the student may be required to complete relevant skills, remediate other course content, and/or retake relevant prerequisite nursing courses.**

As a common practice across most nursing schools, students are limited to one nursing course repeat in the BSNDP, including withdrawals for failing performance. A second nursing course failure or withdrawal for failing performance automatically results in the student receiving written notification of their possible dismissal by the dean of nursing, along with the process to appeal, according to the section immediately below. Please note that WP's Registrar carries out the logistics of dismissal whenever that point is the conclusion.

Dismissal Appeal
Two Failure Policy – As outlined in this BSNDP Handbook, the following policy is common across nursing programs: After two course failures (grades below C-), a student will be dismissed from the program. A student who is dismissed from the BSNDP is no longer eligible to enroll in BSN courses. In the event of extenuating circumstances, the student may appeal the dismissal status in writing using the Petition to the NDRP Form (APPENDIX F).
- In the petition, the student must address the results of any prior APS plans that are on file with the DON. As mentioned above, the dismissal appeal depends on extenuating circumstances and not on opinions or anecdotes from those who know the student personally but not academically within the BSNDP at Warner Pacific University.
- Dismissal Communication Procedures: After grades have been submitted for the term, the dean of nursing will make the dismissal determination, and the affected student will be notified of his or her program dismissal via a standardized letter attached to an email from the dean of nursing. When the dismissal letter is sent to the student, a copy will be emailed to WP's registrar.
- Dismissal Appeal Procedures: This handbook has been updated to clarify the student's appeal procedures upon dismissal. Up to two steps a student may take are outlined below:
  1) Appeal, Step 1: Petition to the Nursing Division Review Panel (NDRP)
     Because of broad and distressing implications associated with being dismissed from a nursing program, this panel will have a rotating composition of three faculty who meet in person or via synchronous online meeting like Zoom to review the student's petition.
     A. A student must submit the NDRP Form (APPENDIX F) as documentation each time the panel is convened. The completed Petition to the NDRP should be submitted to the program manager, who will forward it confidentially to the NDRP for review and decision.
     B. The dean of nursing advises the student in writing of the NDRP's decision (a) to support the student's petition, (b) to support the student's petition with reservations, or (c) not to support the student's petition. If the panel supports the student's petition, the panel will provide the dean of nursing with the completed NDRP Form. The dean will review any reservations and return the form to the student's advisor to reinstate the student on a space available basis.
     C. If the panel does not support the student's petition and the student accepts this determination, the student will then meet with WP's Registrar to complete all steps of the dismissal process.

2) Appeal, Step 2: Petition to the Academic Policies Committee (APC) Using WP's Standard Institutional Procedures
   If the student is dissatisfied with the results of his or her appeal to the NDRP, then he or she may submit a petition to the institutional APC. The APC will review documentation from the student and from the Division of Nursing to inform the committee's decision. The committee's decision will be communicated to the student in writing. The decision of the APC is final.

Summary of Appeals
- Scope of the NDRP: The NDRP does not consider Academic Integrity Appeals or Grade Appeals, only Program Dismissal Appeals.
- Integrity Situations: Integrity reports and integrity appeals follow the process outlined in the WP Catalog (p. 35-36 of the WP Catalog).
- Grade Appeals: Grade appeals follow the grade appeal process outlined in the WP Catalog (p. 36 of the WP Catalog).
- If a student wishes to submit a non-failing Grade Appeal, then he or she will follow the process outlined in the current WP Catalog. Once a student has obtained a final ruling on the Grade Appeal, then that student's status with the BSNDP may be reviewed with the student's advisor, relevant course instructor, and program dean, utilizing appeal results.

ADMISSIONS POLICIES & PROCEDURES

Refer to the current WP Catalog. These policies prevent redundancies in this handbook. They cover the following elements and procedures:
- Campus Visit
- When and How to Apply
- Admission Requirements
- International Student Admission
- Student Re-Admission
- Admission Criteria
- Admission Decision – Undergraduate
- Notification

Admissions Policies Related to Deferred Action for Childhood Arrivals (DACA): According to the Oregon State Board of Nursing, if an applicant can produce the forms verifying he or she has either a Social Security Number (SSN) or has authorization to be in the United States, then he or she is authorized to apply for an Oregon RN license and take the NCLEX-RN. Please see OAR 851-001-0030 (5) for needed documents. Nursing students should be aware that other states may have different regulations regarding DACA and applying for RN licensure. Additionally, regulatory changes at the Federal level may also impact DACA students. Applicants should investigate and consider current Federal and State regulations regarding DACA when applying to a nursing program and their future licensure as a RN.

PROGRESSION, WITHDRAWAL & DISMISSAL POLICIES

Satisfactory Progress (WP Catalog): Nursing students are expected to make satisfactory progress toward their degree by maintaining a minimum GPA of 2.5, by enrolling in courses that meet the requirements for a specific degree program, and by completing the following:
• 24 credits per academic year if classified as a fulltime student
• 18 credits per academic year if classified as a 3/4-time student
• 12 credits per academic year if classified as a 1/2-time student

Students will be placed on Academic Probation at the close of any semester in which their GPA for that semester falls below a 2.5. If the GPA earned the subsequent semester is not a minimum of 2.5, or if a student has two or more course failures (below a "C-" grade), that student will receive a dismissal letter and must follow the appeals process, if desired. Students are required to earn a cumulative career GPA of 2.5 to be eligible for graduation. Nursing students may not enter on probation. Students in the BSNDP placed on Academic Probation at the conclusion of any semester must follow WP guidelines as found in the current WP Catalog.

Withdrawals from a Nursing Course: Nursing students must initiate any withdrawal from a course. A student may withdraw with no record on the transcript up to the end of the third week (or equivalent one-fifth amount of coursework) of the semester (called a "drop"). For a withdrawal after 20 percent of the course is completed, a "W" will be entered on the student's transcript. A student withdrawing within the first week is required to have the signature of his/her advisor. If withdrawal occurs after the first week, signatures from the advisor and the course instructor are required. A student who fails to withdraw officially from a course but has not attended class sessions or submitted assignments will be assigned an "X" grade on the transcript record. Students who withdraw from two courses with a failing grade will receive a dismissal letter from the program and must follow the appeals process, if desired. The student is responsible for completing the paperwork or withdrawals. Add/Drop forms are available in the Records Office.

A student who withdraws from WP is required to file a Withdrawal Form with the Division of Student Success and Engagement and have an Exit Interview with the Retention, Progression, and Completion Coordinator. Students who are exiting permanently must be cleared by each office listed on the form. The completed exit form is then filed in the Records Office.

Leave of Absence & Returning after a Leave of Absence: Some students need or want to leave the university for a time. This is referred to as a "Leave of Absence." A leave of absence is defined as an interruption in attendance at WP for a period of one semester for acceptable reasons. Re-entry to the university is automatic at the expiration of the leave period provided all other specified deadlines have been met. A student may request a leave of absence by filling out a Request for Leave of Absence Form, which is available in the Office of Enrollment.

Because of the need for students to maintain competence in the content and skills from nursing courses, students returning from a Leave of Absence may be required to demonstrate competence at the level at which they left the program. Competence may be assessed through evaluation of nursing knowledge, skills, and attitudes as determined by relevant faculty of the BSNDP. In addition, because

of the sequential nature of nursing courses, a student's return to the BSNDP after a Leave of Absence is based on space availability and may be delayed for a semester or more.

ATTENDANCE & COURSE PARTICIPATION

Attendance at academic and clinical activities is expected to maximize learning opportunities, to develop professional skills and behaviors, and to connect nursing content with nursing practice. All related expectations are specified in the WP Catalog and upheld by the Division of Nursing. **In particular, on-time attendance is expected at all academic, laboratory, and clinical experiences.** Students are expected to come prepared and actively participate in all required BSN Program experiences. Students must contact the course or clinical faculty directly and copy the program manager (clinical placement coordinator) and advisor by email prior to any expected significant lateness or absence.

In an emergency causing a student's absence, the student should notify the faculty (course and clinical instructor), program manager, and advisor as soon as possible. The determination of whether an absence is excused rests with the faculty. See sections on make-up for lab sessions or clinical activities. The faculty may request a written excuse from a healthcare professional for absences related to health conditions.

Students are expected to attend every class. When students will miss a nursing school activity, they are to inform the program manager, advisor, and their course instructor at least 12 hours in advance unless there is an extenuating circumstance (e.g., sick at the last minute). Students are to arrange with peers to get the notes for any missed lecture. Students are not to rely on their peers to let the faculty, program manager, and advisor know of their absence.

Attendance in all class sessions is a **required** component of the BSN program, as nursing education relies on active participation, professional accountability, and consistent engagement with course content.

Although missed classes are not permissible and cannot be "made up" in the traditional sense, the program recognizes that unavoidable circumstances may occasionally occur. When this happens, students are expected to take immediate responsibility for their learning. Students who miss a class must contact the course faculty before the start of class to receive guidance regarding alternative learning activities designed to support content mastery. These activities do *not* replace the missed instructional time but provide an opportunity for the student to remain on track with essential concepts, meet course outcomes, and maintain progression.

Make-up work may include, but is not limited to, targeted readings, written reflections, evidence-based application assignments, skills or simulation remediation, or other faculty-directed learning experiences.

Completion of assigned make-up work is required; however, it does not negate the absence and does not guarantee full credit for participation-based components of the course.

Ultimately, the student is responsible for ensuring they remain current with all course material and for upholding the professional standards expected in the BSN program.

Students sometimes misperceive "asynchronous learning" as license to take time off from school, including for vacation or outside work. Nursing school is a two-year (4-semester) commitment, in part because some elements of a course may be added after the first day, including exams and other evaluation methods, Zoom lectures, and office hours. Students typically do not have classes during summers or winter break but are responsible for program communication noted below.

WP Email: When courses are in session, students are expected to check their email at least once a day. When courses are not in session, students must check email at least twice per week for updates on clinical placements, regulatory requirements, and the like.

Exam Days: Students who are more than 5 minutes late to exam days will not be allowed to take the exam unless they have notified the course instructor of extenuating circumstances. Students are expected to show up at least 5 minutes early to get situated for an exam. If students do show up late, they will receive a zero on their exam.

Holidays: All seniors must follow their clinical schedules even if an assigned shift falls on a holiday. Capstone seniors are expected to work the clinical shifts of their preceptor(s), which may include and not be limited to: Labor Day, Midterm Study Break, Thanksgiving Day, Dr. Martin Luther King Jr. Day, President's Day, Spring Break, Good Friday, and Easter.

Returning after Illness, Surgery, Injury, or Pregnancy: Students who have been ill, injured, pregnant, or had surgery may be required to provide the advisor with a written release from their healthcare provider indicating that they may safely return to clinical, lab, and classroom activities. Additional safeguards include:
• Students must adhere to rapidly evolving policies and procedures related to communicable diseases.
• Students are not to return after any other influenza-like illness until they have been afebrile while not taking antipyretics for at least 24 hours and signs and symptoms have improved.
• Pregnant students are required to obtain a written release to continue in the BSNDP from their healthcare provider. The medical release for pregnancy should reflect no medical restrictions from classroom, lab, or clinical education. If students take a leave of absence due to pregnancy, they will be required to obtain a written release post-partum from their healthcare provider before returning to clinical, lab, and classroom activities.

EMERGENCIES/WEATHER RELATED CLOSURES

WP uses the Omnilert messaging system to notify the campus community via text message about emergencies on campus and weather-related closures: https://www.warnerpacific.edu/resources/campus-safety-emergency-management/emergencypreparedness/.

Faculty, staff, and students must sign up for this service at: https://warnerpacific.omnilert.net/subscriber.php.

BSN students assigned to clinical days outside of capstone will be told whether they are to attend their clinical shifts. WP's administration will state who is affected and what the action will be. Students are to

attend clinical rotations as there are patients waiting for them. Rarely are there excused absences during capstone. Capstone students are expected to show up, no matter the weather, unless their preceptor or clinical instructor/supervisor contacts them and calls off the shift.

STUDENT INJURY AT AN ON-CAMPUS SITE

If a student receives an injury in the classroom, skills laboratory, simulation laboratory, or anywhere on campus, the faculty (or other students) should do the following:
1. See to the student's safety and provide emergency care if necessary. If the injury is severe, call 911.
2. Call or ask someone to call Campus Safety for all injuries. Campus Safety officers are on duty 24 hours a day, 7 days a week, and can be reached at 503.250.1730 (cell); 503.517.2127; or Ext. 2127 from any campus phone. (Campus Safety officers may also assist with directing emergency assistance to the proper location.)
3. Note that a student's personal health insurance covers the cost associated with any incident.
4. Complete an incident report (faculty only).
5. Beyond first-responder emergency care, refrain from having faculty or other students treat a student's injury or offer an opinion or diagnosis.

GRADUATION PROCEDURES

When students are 15-45 credits from graduation, they begin the application process for graduation with the assistance of their academic advisor. (Refer to the current WP Catalog.)

Paperwork: Students are expected to have all their clinical paperwork and timesheets turned in by stated deadlines. Course and clinical instructors submit their paperwork separately.

The Pinning Ceremony: The Pinning Ceremony is a nursing tradition that symbolizes the culmination of academic preparation required to become a professional nurse. The ceremony is a "rite of passage" into the nursing profession for graduating BSN students and serves as a celebration for graduates and faculty. Families and friends participate as possible, which may only be by Zoom during times of extreme or disruptive conditions. Students receive their WP nursing pin by attending the ceremony. Students (and, when conditions permit, their families and friends) are strongly encouraged to participate in this meaningful ceremony. The ceremony is typically held during the afternoon, a day or two before commencement. The program manager publicizes the Pinning Ceremony, which includes a keepsake pamphlet and other celebratory items and traditions.

WP Graduation and Commencement: Graduation is the receipt of a credential verifying the student's completion of all requirements for the BSN Degree. Details to apply for graduation are found in the current WP Catalog. The date of graduation is the end date of students' final semester, which occurs two days before their Commencement Ceremony. Students and their families are encouraged to celebrate their graduation by attending their WP Commencement Ceremony.

NCLEX-RN Application: During their final semester, prelicensure BSN students are provided with detailed information about the post-graduation process and procedures to apply for the NCLEX-RN, which is the national standardized examination for licensure as an RN. Students will be directed to

create an account and complete forms at the Website of the Oregon State Board of Nursing (OSBN): https://www.oregon.gov/OSBN/Pages/forms.aspx. The OSBN publishes an authoritative New Graduate Guide on its website, which includes information about Pearson VUE, the company that administers the NCLEX-RN. Please note: The OSBN is the sole judge of all documents and credentials determining eligibility for licensing. Other eligibility requirements are also found on the OSBN Website. Negative elements of a background check are treated on a case-by-case basis.

SECTION III: CLINICAL GUIDELINES

Clinical shifts align with course and clinical outcomes, which must be met to pass a clinical course. WP DON's Clinical Placement Coordinator (CPC) is the liaison between the DON and all clinical partners. Students MAY NOT PURSUE clinical placements on their own, no matter how enthusiastic personnel in a clinical setting may be. The CPC communicates regularly about expectations, placements, and clinical rotation processes, such as how to gain computer access. Students are strongly encouraged to check their email 2-3 times per week when courses and clinicals are not in session. Many aspects of courses and clinical rotations PRECEDE the semester in which they occur, including during summer and winter breaks. If students are away from phone and electronic communication during their breaks, they are to notify their advisor and CPC in advance. If students miss clinical shifts for an unexcused absence, there may not be an opportunity for them to make up these hours. (See also CLINICAL ATTENDANCE REQUIREMENTS, below, which include only ONE GRACE DAY during the program.)

Make-Up Clinical Dates: Due to the nature of clinical rotations in various facilities serving multiple nursing programs and hundreds of students per term/semester, there is no opportunity for students to switch days. Nursing students are also NOT ALLOWED to arrange their own make-up times. The course instructor will assign make-up times if there is an opportunity to do so. In other cases, students will sign-up for a lab or simulation time to make up portions of any missed clinical day. Students should not necessarily expect to be able to make up a 12-hour shift in one sitting.

Clinical Courses

NURS 340	72 Direct Care Hours	16 Other Hours	88 Total Clinical Hours
NURS 380	0 Direct Care Hours	68 Other Hours	68 Total Clinical Hours
NURS 400	0 Direct Care Hours	32 Other Hours	32 Total Clinical Hours
NURS 410	0 Direct Care Hours	16 Other Hours	16 Total Clinical Hours
NURS 440	108 Direct Care Hours	16 Other Hours	124 Total Clinical Hours
NURS 470	36 Direct Care Hours	0 Other Hours	36 Total Clinical Hours
NURS 490	270 Direct Care Hours	0 Other Hours	270 Total Clinical Hours
Total Hours Overall for the BSN Degree Program: 634 Hours			

It is students' responsibility to track their own clinical hours on provided timesheets and submit their completed timesheets to the CPC every semester for each course with a clinical component. Hours earned in skills labs and work roles (such as CNA) are not a substitution for clinical hours. Direct care and other clinical hours may be obtained in the following ways:
- Clinical hours at a facility assigned by the CPC
- Simulations assigned by the course instructor in licensed virtual programs and/or low-fidelity (scripted) classroom scenarios

- High-fidelity (realistic) lab experiences facilitated by WP DON's clinical simulation coordinator or course faculty

Fees Associated with Clinical Experiences
Students are responsible for all travel and anticipated associated expenses/fees (e.g., fuel, auto insurance, parking, vehicle maintenance, food, and lodging) that are incurred to obtain clinical hours. Students may need to arrange or use overnight housing based on where they have been placed for their clinical experiences. The CPC participates only in arrangements offered/required by clinical sites.

Transportation Expectations
WP is fortunate to have its location within the metropolitan area of Portland, OR, which typically facilitates ease of clinical placements. The COVID-19 Pandemic, however, taught us to be proactive and explicit about the possibility of "out-of-the-box" placements to maximize opportunities for on-site clinical experiences. Therefore, students are expected to have a vehicle in their second through fourth semesters of the program, as students may need to travel up to 250 miles one way for a clinical placement. Students who commute more than 50 miles one way from WP's main Mount Tabor Campus will receive a corresponding hour of indirect time applied toward total clinical hours.

CLINICAL PLACEMENT COMPLIANCE REQUIREMENTS
(Updated as required by ACEMAPP/StudentMAX and Clinical Partners)

1. Evidence of current BLS certification for healthcare providers from an approved American Heart Association program: This requirement must be kept current while in nursing courses. The expiration date on record in the student's ACEMAPP account is tracked and monitored for currency. If students do not complete this update in a timely manner, they may be denied planned clinical rotations.
2. Criminal background check: To be completed through the recommended vendor whenever required by clinical partners. This timeline will be communicated when appropriate during the program.
3. Documentation from a licensed primary-care provider of a recent health screening attesting to a student's ability to be engaged in clinical activities: To be completed every 12 months, including at the start of the program before beginning upper division courses.
4. Documentation of mandated immunizations:
   - Tetanus/diphtheria/pertussis (Tdap)
   - measles/mumps/rubella (MMR) (titer required if dates cannot be found)
   - Varicella (titer required if dates cannot be found)
   - Hepatitis B series (titer required if dates cannot be found)
   - annual Influenza
   - COVID-19 (recommended, but may be required by a particular agency)
   **Although students may qualify for medical or religious exemptions from certain vaccines, clinical partners may still mandate full vaccination to protect vulnerable populations. In addition, the OSBN, OHA, and other regulatory institutions with purview over patient safety universally hold all personnel and visitors (including nursing students) to higher vaccination standards as they deem warranted.
5. Tuberculosis (TB) screening: Students are required to obtain an initial TB screening including IGRA when they first complete clinical onboarding and a follow-up questionnaire thereafter. This may be

completed during the first term of upper division, prior to clinical onboarding for the initial in-person clinical site. Students with a baseline positive or newly positive TB screening must follow-up according to specific clinical partners' guidelines published on ACEMAPP before being allowed into clinical sites.

6. Drug Test: To be completed through a recommended vendor whenever required by clinical partners. As stated earlier, the WP BSNDP is a **substance-free program**. Students are expected to refrain from the use of any substances that are illegal at the federal level when entering a professional nursing program and career. The program maintains a **zero-tolerance policy** regarding the use of federally illegal substances. If students fail a drug screening for clinical onboarding requirements, they will be dismissed from the program. Their return to nursing school depends on the appeal process if a student chooses to do so. Please see included BSNDP nursing policies. Beyond that, they may have to update knowledge, skills, and attitudes if allowed to re-enter the program after appeal. Be aware that clinical sites typically do not accept diluted samples nor allow students to leave the premises during the testing process.

7. Verification of completed learning modules and trainings in all areas required by clinical partners and/or posted to ACEMAPP, e.g.:
    - HIPAA
    - OSHA (e.g., Fire Safety and Biohazards)
    - EPIC
    - Glucose Monitoring

Students must maintain current documentation of clinical compliance requirements. Once on file, ACEMAPP notifies students (repeatedly) of upcoming expirations. Please allow sufficient time to address requirements considering all other obligations of concurrent courses and clinical rotations. Students who have not completed clinical requirements may prevent the upload of their roster, which can affect their entire clinical group. Therefore, students who do not meet deadlines will be removed from clinical rotations, so others in their group are not prevented from moving forward. As a courtesy to all who depend on compliance, students must not wait until the last possible day to submit required documentation. If documentation becomes out of compliance during a clinical rotation, students may be removed from shifts until they have completed and uploaded the necessary documentation to comply with ACEMAPP requirements.

Note: This kind of compliance is in force for RNs across their career, so students must begin now to remain vigilant and adherent to regulatory requirements. Postponing requirements may bring costly risks to your career! For example, your RN license in Oregon typically expires at 11:59 pm on your birthday every two years. If you wait until the 11th hour to renew, you will find out too late that the OSBN currently requires continuing education units (CEUs) for pain management (1 hour, free course), cultural competence (2 hours), placement within the NURSYS database, and payment of OSBN renewal processes and fees (approximately 1 hour for required answers to standard renewal questions, currently $245 every two years). If you are late to renew, you will be charged an additional $100, and you cannot work as an RN until you have completed the renewal process.

NURS 490 Leadership III Capstone Placements: The CPC assigns students to their capstone placement according to an ACEMAPP process, often just ahead of their final semester. Placements differ every semester for a variety of reasons, including preceptors' availability and competing demands at various entities. **As with any clinical placement, students MAY NOT obtain a capstone placement**

on their own. Because students will follow their preceptors' schedules, they must adjust any work role outside of the BSNDP.

Whenever possible, capstone placements are also assigned according to students' top three preferences. Priority will be given to students with the highest GPA in science in nursing-based courses. A preferred capstone placement may depend on having been an employee for a given amount of time at a facility with which the WP DON already has a clinical affiliation before the capstone semester. Capstone placements may be determined by the dean, associate dean, medical-surgical course faculty, and/or CPC. Other placements are typically chosen at random or to fulfill a mission-driven opportunity. Students MAY NOT adjust placements for their convenience.

CLINICAL/PRACTICUM APPEARANCE REQUIREMENTS

Nursing students are ambassadors of WP, advocates for recipients of care, and champions of the healing trinity of caring, safety, and leadership. It is imperative that actual and potential triggering aspects of appearance are minimized because students and BSN-RNs serve as generalists across the lifespan. As such, all nursing students are expected to wear the prescribed WP DON scrubs or agency-required uniform when present in a clinical agency. They must also conform to personal grooming requirements of clinical agencies and have supplies necessary for expected activities of each clinical experience. WP DON scrubs are typically required while in skills lab or simulation activities.

Nursing Student Uniform: At all times, students representing the WP DON are to appear professional in attire:
*   WP DON nursing student uniforms consist of scrub pants and a matching scrub top in the WP identifying teal blue color, available from our webpage on the SuiteStyles website. (See BSNDP orientation materials for specifics related to prices and ordering.) Student uniforms must be clean, wrinkle-free, in good repair, and of appropriate fit to permit freedom of movement and maintain modesty.
*   All students need a complete WPU scrub uniform, no later than two weeks after school starts, for skills labs that occur in their first semester. **Students will not be allowed to participate in the lab without WPU scrubs.** This will lead to inability to meet course outcomes, which leads to course failure. (Occasionally, particular sizes are on back-order, in which case students will wear substitute scrubs in a similar color or follow their instructor's guidance.) In addition, no later than two weeks preceding the first clinical course in their second semester, students should purchase an extra pair of scrubs to have available if one set is either damaged or soiled. WP DON scrubs do not have patches in order to extend their usefulness as wearable garments. After all, the nursing program is for a relatively short time.
*   All students must wear appropriate undergarments, which ought not to be visible when sitting, standing, or reaching. A neutral colored or matching long- or short-sleeved crew neck t-shirt may be worn under the scrub top by both women and men.
*   Maternity uniforms must be made out of the same fabric and of similar style and color as the WP DON student uniform. Maternity uniforms can also be purchased from SuiteStyles.
*   For community-based experiences not involving in-patient care, faculty will recommend appropriate clothing options, which may include conservative, business-casual street clothes.
*   WP DON picture-ID nametags with WP badge reel must be worn at all times while in clinical activities.

- All shoes worn in the clinical area must be closed-toe, clean, and professional. White tennis or 'sport' shoes may be worn if clean and in good repair (no bright/neon colors). Students should reserve shoes specifically for hospital use and not worn for daily wear. Sandals or flip-flops are not permitted.
- If required, surgical scrub clothes are provided by the clinical facility. On many units where scrubs are required, an outer covering may need to be worn when leaving the unit for any reason. The clinical instructor or supervisor should approve appropriateness of dress before the student leaves the clinical unit.
- If on the facility's campus and not in the patient care setting, unless otherwise directed by their clinical instructor or supervisor, students must wear business-casual street clothes or their student uniform.

Nursing Student Personal Grooming
- Make-up and other cosmetics are to be natural colors and simple.
- Heavy scents, lotions, perfumes, colognes, and after-shaves are not acceptable. A heavy scent of tobacco, food, or other products is also not acceptable.
- Hair should appear clean and well groomed. For both men and women, shoulder length and longer hair must be worn secured to the back of the head. Any length should not obstruct a student's vision. Mustaches, sideburns, and beards must be clean and neatly trimmed. False eyelashes or extensions may be stylish but are discouraged in clinical areas. Wear eye shields to minimize any risks to patients from lashes falling off or shedding, particularly into a sterile field.
- Primarily for safety's sake, hoop or dangling earrings, bracelets, or necklaces are not to be worn in clinical facilities. Plain band rings may be worn. All jewelry must be in accordance with agency policy, or at the discretion of the faculty member, and appropriate for the particular clinical area.
- With the exception of no more than one stud (no gauges) per ear lobe, no visible facial or body piercing, including tongue piercings, are allowed. (Check with local agencies for stricter policies.)
- In consideration for diverse recipients of care, tattoos must be covered to the extent possible and in accordance with clinical agency policy.
- In keeping with mandates from the Centers for Disease Control and agency policies, direct patient caregivers may not wear any form of artificial nails. Natural nails must be kept clean and short and may not be pierced. It is recommended that nails be left unpolished.

Nursing Student Supplies
- A watch with a second hand, a pair of bandage scissors, a pen light, and a stethoscope are required for most clinical activities. Faculty may alter need for specific supplies based on expected activities.
- Agency policy regarding cell phones or smartphones must be adhered to at all times. Students are not allowed cell phones for personal use in a clinical area.
- Fanny packs may be used only in accordance with agency policy and with faculty approval. Cleanliness and safety must guide their use.
- Additional items/supplies may be required depending on course focus and learning objectives. A pair of hemostats and a roll of non-allergenic tape are typically considered indispensable.

CLINICAL ATTENDANCE REQUIREMENTS

Clinical Make-up Days: Full attendance of the assigned clinical rotation is an expectation for nursing students. In the event of illness or other circumstance leading to a clinical absence, students are

responsible for notifying their clinical instructor or supervisor and WP's CPC before the start of the clinical day. Students who miss any number of assigned skills lab or simulation hours must submit the completed Clinical-Lab Makeup Form (APPENDIX G) to the associated course instructor. Make-up hours are not guaranteed. Unless an alternative activity is determined by the faculty, students are required to make up missed clinical hours as arranged by the course instructor and may need to pay a corresponding fee. Students MAY NOT arrange their own make-up clinical hours with the agency, clinical instructor, or preceptor. Students also MAY NOT switch with fellow cohort students, as days are preassigned.

Clinical Rotations - ONE grace day: There will be only ONE grace day for a missed clinical shift throughout the entire BSNDP, and there will be NO unfulfilled hours during capstone unless determined by an agency or course instructor. When students must miss a clinical shift, they will notify the CPC, their course instructor, and their clinical instructor/supervisor at least 12 hours in advance unless there is an extenuating circumstance (e.g., sick at the last minute). Students are typically required to make up these hours in an available simulation, as make-up times in the clinical setting are not guaranteed.

If students miss more than one clinical shift during their time in the BSNDP, the current course instructor will issue an Academic Pathway to Success Form (APPENDIX E). Students will participate with their advisor to create a plan to prevent foreseeable absences, including those related to outside work and any kind of elective appointment.

Skills Lab and Simulation Lab Make-up Process: Full attendance (100%) of the assigned hours in skills or simulation labs is also an expectation for pre-licensure nursing students. In the event of an illness or other circumstance leading to an unforeseeable lab absence, students are responsible for notifying their course faculty and submitting a Clinical-Lab Makeup Form (APPENDIX G). Simulations count in a 2:1 ratio because of predictable times for pre-brief simulation-debrief and no down time.

Arrangements for skills and/or simulation lab make-ups are made through a formal process involving the student and associated course faculty. The make-up process is as follows:
1. The student who misses any number of assigned skills lab or simulation hours must submit the Clinical-Lab Makeup Form (APPENDIX G) to arrange a make-up with the course faculty.
2. The student and course faculty will identify possible dates for the make-up.
3. Prior to submitting the course grade, the course faculty will validate that the appropriate lab day make-up has been successfully completed. Students not successfully completing a skills or simulation lab make-up will receive a grade of I-F for the course pending successful completion.
4. Additional fees may be added to the student's account to cover costs associated with lab make-up sessions.

Clinical paperwork must be submitted to the CPC at the end of every semester. Students must review expectations of Clinical Documentation (APPENDIX H).

INFECTIOUS OR COMMUNICABLE DISEASES & PATIENT CARE

Nursing professionals have a fundamental responsibility to provide care to any and all patients regardless of a patient's health status. Students may not refuse to care for any patient based on the patient's disease status or personal characteristics (e.g., race, ethnicity, creed, gender, sexual

orientation, or specific religious affiliation). An exception to this policy is if students' pregnancy or immuno-compromised status could expose them to a particular disease capable of posing serious risk of harm or threatening students' life/health and/or that of an unborn child.

If nursing students have a potentially infectious illness, they need to contact their clinical faculty to determine whether to attend clinical that day. Below is a useful guide on illnesses precluding clinical or classroom activities:

- If students have a fever, they are restricted from activities until 24 hours after resolution of fever without the use of antipyretic medications.
- If students have diarrhea, they are restricted from patient contact and contact with the patient's environment until symptoms resolve.
- If students have viral respiratory signs or symptoms (e.g., cough, sneezing, rhinorrhea, or sore throat) WITHOUT FEVER, they should limit direct patient contact and use precautions for immuno-compromised patients (e.g., masking and an emphasis on hand hygiene and respiratory etiquette). They must prevent contact with high-risk patients and their environments (e.g., stem cell or bone marrow transplant, solid organ transplant, and oncology units).

TRANSPORTATION & OFF-CAMPUS LEARNING ACTIVITIES

Students are responsible for transportation and parking fees at all agencies assigned for student experiences. A car is essential for many clinical experiences with a community focus and to promote on-time arrival to a shift. Students are responsible for all travel and anticipated associated expenses/fees (e.g., fuel, auto insurance, parking, vehicle maintenance, food, and lodging) that are incurred to obtain clinical hours. Students may need to arrange overnight housing based on where they have been placed for their clinical experiences.

Transportation Expectations (See also Section III: CLINICAL GUIDELINES)
- Students are expected to have a vehicle in their second through fourth semesters of the program, as students may need to travel up to 250 miles one way for a clinical placement. Note: Up to 50 miles one way is common, and students who commute more than 50 miles one way from WP's main Mt. Tabor Campus will receive a corresponding hour of indirect time toward total clinical hours. The CPC does not consider the time it takes to reach a clinical site because of the numerous factors involved.
- Students are prohibited from transporting patients and/or patients' family members.
- Students are prohibited from riding in land, sea, or air ambulances during any clinical learning experience.

INJURY AT AN OFF-CAMPUS LEARNING SITE

Clinical instructors, course instructors, and/or preceptors are responsible for overseeing the process for clinical injuries that may occur with students they supervise. If a clinical instructor, course instructor, and/or preceptor believes a student injury is a medical emergency, the first priority is the student's well-being and the student should be seen by the nearest emergency provider. Students with a non-urgent injury received at a clinical or other off-campus learning site should seek follow-up care with their provider or through appropriate services (e.g., urgent care) based on their individual health

insurance. To ensure proper treatment, notification, and documentation of student injury or exposure incurred at a clinical facility, students must report any injury (no matter how minor) to their preceptor and clinical instructor and follow all related clinical agency protocols. Students must submit an additional element of documentation, the Accident Report Form (APPENDIX I) to WP's Human Resources (WPUHR@warnerpacific.edu).

PROFESSIONALISM, ETHICAL BEHAVIOR,
THERAPEUTIC COMMUNICATION & APPROPRIATE BOUNDARIES

Students are expected to demonstrate professionalism, ethical behavior, therapeutic communication, and appropriate boundaries at all times. To facilitate meeting these expectations, students ought to consider their interactions through the dual lens of "desired behavior" and "conduct unbecoming," whether a nursing student, WP ambassador, or BSN-prepared nurse. Students would do well to pause and breathe when inclined to pursue any negative communication. Irreparable damage may occur through unacceptable displays of verbal and nonverbal actions with faculty, staff, classmates, clinical partners, and/or recipients of care. All such instances in clinical settings will be documented and tracked through the Evaluation of Clinical Course Outcomes (ECCO) form, which will show "fail" in clinical expectations, and an Academic Pathway to Success (APS) form, which will identify remedial actions. Students who fail to manifest broadly desired behaviors and/or honesty may be asked to leave the BSNDP.

In particular, students are not allowed to be involved socially with any patients at any time. This kind of interaction is untenable exploitation because recipients of care need the protection of safe and secure boundaries to achieve optimal outcomes and well-being. Students must conduct themselves in accordance with the ethos and policies of the university, the clinical agency, and professional standards. Students are expected to adhere to the Provisions of the ANA Code of Ethics for Nurses.

CHEMICALLY IMPAIRED STUDENT DRUG & ALCOHOL GUIDELINES

WP prohibits students from being intoxicated or under the influence of alcohol and/or drugs. When nursing students are impaired, they likely have altered judgment and skills. Based on reasonable suspicion of alcohol or drug use:
- Students will be tested for the use of alcohol and drugs. Reasonable suspicion is defined to mean that a student's instructor, preceptor, or their designee believes that the behavior, speech, body odor, or appearance of a student is indicative of the use of alcohol or drugs. Reasonably suspicious behavior could include conduct preventing students from performing essential functions of their role or posing a direct threat to the safety of others.
- Associated behaviors may include but are not limited to unsteady or staggering gait, rapid or slurred speech, unresponsiveness, verbal or physical outbursts, threats to harm self or others, difficulty participating in activities, self-report of drug use or alcohol abuse, and/or unsatisfactory care for others.
- Signs and symptoms may include odor of alcohol or drugs, nausea, vomiting, sweating, pinpoint or dilated pupils, bloodshot eyes, and/or fine motor tremors.

If drug use or alcohol abuse is suspected, the clinical instructor will take the following steps:
1. Remove the student from the clinical activity.

2. Confront the student in a private setting and in the presence of a witness, if possible.
3. Discuss the suspicious behavior with the student and allow the student to explain.
4. Notify the Dean of the Division of Nursing.

The Dean of Nursing will notify the Vice President for Enrollment and Student Success & Engagement. In cases where drug or alcohol use is suspected, WP reserves the right to require students to undergo a urine screen to test for the presence of illegal substances. A positive urine screen or alcohol breath test will result in dismissal from the BSNDP and WP.

SECTION IV: MISCELLANEOUS NURSING STUDENT GUIDELINES & RESOURCES

ACADEMIC & PROGRAM ADVISING

All students registered for six or more credits are assigned an academic advisor. The advisor's responsibility is to assist the student to set, plan, and reach his/her own personal educational goals. In order for an advising relationship to function well, each person involved needs to know what is expected. The final responsibility for meeting all academic and graduation requirements rests with the individual student.

To achieve educational goals, students must take the initial responsibility for setting advising appointments, creating an Educational Plan in MyWP before meeting with the advisor, and undertaking some long-range planning for the completion of studies. Students should track their progress toward completing degree requirements by reviewing their program evaluations regularly. A minimum of six months prior to graduation, students should file an Application for Graduation with WP's Records Office.

Students who have earned fewer than 45 credits toward their degree(s) will work with an academic advisor to register for classes. When preparing to register for their junior year classes, students shift to a faculty advisor in the major area of study, who assists students to focus on long-range planning, including reviewing individual graduation applications and students' academic major and vocational plans.

Students who change majors after being assigned to a faculty advisor must request a change of advisor to align with the new major. Students have the right to request such a change for other reasons as well. Major/Minor Update forms are available in the Records Office. Note: Nursing majors follow the same academic and program advising procedures as other WP students.

ELECTRONIC COMMUNICATIONS & SOCIAL MEDIA/NETWORKING

Nursing students are advised against posting any personal or professional information that may have negative implications to themselves or to WP on social media, including Facebook/Meta® and other public access internet sites. DON students are specifically not allowed to post anything on any social media site that is in violation of the Health Insurance Portability and Accountability Act (HIPAA).

COMMITMENTS FOR THE WP BSNDP:
GUIDANCE AND ENCOURAGEMENT TO BE SUCCESSFUL

Time Commitments

Prospective students who have been invited for admission to the WP DON BSNDP have a new priority in their life that typically lasts 4 semesters, with summer and winter breaks off from school but not from communication about their program. The reward for this commitment is tried-and-true preparation to become a BSN-prepared RN, the most trusted profession for decades, except for the year following the tragedy of 9-11, for which firefighters topped the list and nurses were second. BSN RNs are generalists who provide and manage care for recipients across the lifespan. The role is satisfying, makes a difference in the lives of recipients of care, and typically leads to self-actualization.

This BSN Student Handbook includes requirements not only of WP but also of its communities of interest, which include ACEMAPP/StudentMAX (regional clinical platform) and clinical partners (a variety of institutions inviting students to their setting for real-world experience to add to the knowledge, skills, and attitudes embedded in the BSNDP). Students must hold open Monday-Friday for courses, labs, clinical rotations, and other experiences. Students who work outside of their BSNDP must adjust work schedules accordingly to fulfill expectations for class and lab sessions, clinical rotations, evaluation methods and deadlines, and other aspects. (Refer to the semester schedule and weekly calendar.) When the BSNDP has a short-notice change for weather, mandatory meetings, and the like, students are expected to keep the BSNDP as their priority.

For every credit of any course, anticipate 3-4 times in hours for class/assignment/exam preparation. For example, in a 3-credit course, expect to spend 9-12 hours/week in reading, studying, reviewing, fulfilling assignments, and remediating. Adjust for your needs.

Unexcused class absences generally require triple the time to make up missed content and do not automatically extend an assignment deadline. No professor has time to reteach a class period, and students must turn to classmates for their notes. Listen up when a professor guides efforts for exams and other assignments. Often, the majority of content will be drawn from PowerPoint lectures, which will focus students' efforts but will not replace the experience of attendance. Notify course faculty, the CPC, and advisor for all absences.

Clinical courses, which occur in semesters 2-4, have prep work, which is commonly critical thinking combined with written work representing a student's understanding of a patient's care plan. There is ONE clinical grace day in the BSNDP. Other absences require make-up work to meet course and clinical outcomes. This work might be a simulation, a homework packet, or additional shift(s).

Special note to parents of young children: Secure a child-care pyramid of relatives, neighbors, friends, and high-school students in a home economics internship. Unexcused absences to attend to competing demands can result in time and financial consequences known to derail a program.

Hi-Tech and Hi-Touch Commitments

Review the technology needs of your WP BSNDP. They may change depending on satisfaction ratings and available resources. Attempting to use a smart phone exclusively for email correspondence and assignments is known to cause gaps in a program. Chromebooks also have limitations. Apple and Windows products are recommended.

Review requirements identified in the BSN Student Handbook. Be proactive about automobile transportation to clinical sites because they may not be accessible via public transportation.

Be proactive, too, about understanding professional nursing. Nursing is both art and science grounded in the healing trinity of caring, safety, and leadership. Some students are shocked to discover the amount of sacred hands-on or emotionally laden cares and immediately decide that nursing is not for them. Discard stereotypical and false notions of nursing seen in television, film, and social media. Schedule a meeting with a career counselor, practicing RN, or faculty member for advice when unfamiliar with or questioning nursing as a major. WP's BSNDP is capped, and those who drop out in the first semester disrupt many processes. WP has other majors that may be more suitable for a particular student's dreams and aspirations, including social work, business administration, healthcare administration, education, and natural sciences like biology.

Use God-given mental faculties (super powers) to figure out the "what" of your life, not the how. (These mental faculties are described in a separate handout: Imagination, Intuition, Will, Memory, Reason, and Perception.) Ask some questions: What is the life I would love to live? What step(s) could I take? Do not think from the conditions of past or current life events. Look from a desire to become a professional nurse. Work with specific mental faculties to put oneself in harmony with a deep desire. Honor those who are supporting the path to becoming a BSN-RN. Regularly thank them and do something special for them during breaks. Enjoy the journey!

NURSING STUDENT EMPLOYMENT

The WP BSNDP is academically demanding and requires a significant investment in time for classroom, lab, and clinical learning.

Although the University does not prohibit employment, students are expected to **prioritize their academic and clinical responsibilities above outside work commitments**. Employment obligations **will not be accepted as justification** for:
- absence from class, clinical, simulation, or required program activities
- tardiness or missed work
- inability to meet course requirements or deadlines
- requests for alternative clinical placements or scheduling modifications

Students are responsible for managing personal schedules in a manner that supports academic success, professional development, and patient safety.

The BSN Program strongly encourages students to plan financially and academically with the understanding that the nursing curriculum is comparable to a full-time professional commitment.

If employment negatively affects learning, an Academic Pathway to Success Form (APPENDIX E) will be issued with requirements for remediation. Learning difficulties typically include not turning assignments in on time, not meeting the C- or above standard, and not meeting the expectations of essential course and clinical documents: syllabi, student guides, course activities calendars, clinical guidelines, Planning and Evaluation Forms (PEFs), and Evaluation of Clinical Course Outcome forms (ECCOs).

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT (HIPAA)

Students and faculty of the WP DON have access to protected health information (PHI) for patients they encounter in clinical settings. All faculty and students are expected to comply with HIPAA requirements and must complete HIPAA training before attending any clinical activities. Maintaining rigorous adherence to HIPAA compliance requirements within all WP-sponsored programs, projects, and activities is designed to:

1. Ensure the security and confidentiality of PHI and ePHI as covered by HIPAA.
2. Protect against any anticipated threats or hazards to the security or integrity of such information.
3. Protect against unauthorized access, use, or disclosure of such information.

It is the responsibility of each student to adhere to these practices. All violations of the HIPAA privacy and security policies and practices are taken very seriously. All violations will be reported to the Dean and/or Associate Dean for review to determine the extent of the violation and the appropriate sanctions to be applied, where necessary. Sanctions may include notification of the student's advisor, reductions in the grade for the course up to and including failure, and remedial action. Reporting of HIPAA violations also follows a clinical agency's guidelines.

STUDENT PARTICIPATION IN GOVERNANCE

Student participation in governance is designed to provide nursing students the opportunity to participate in the operations and evaluation of the DON. Participation provides a means for students to give feedback and contribute to decision-making regarding the BSNDP and WP. Student involvement in DON or WP governance facilitates direct communication between faculty and students; provides student input on curriculum, procedures, and general education programs; and promotes communication, leadership, and professionalism among nursing students. The DON convenes the Student Governance Committee for an hour approximately once each month during an academic year and maintains related agendas and meeting minutes.

STUDENT PARTICIPATION IN WP INTERCOLLEGIATE ACTIVITIES

The BSNDP recognizes value for students who wish to participate in collegiate athletics. Because the scheduling of students' clinical activities may coincide with athletic practice or competitions, nursing students involved in intercollegiate athletic activities must coordinate with their nursing faculty, nursing administration, academic advisor, relevant athletic coaches, and WP's athletic director to determine how to manage conflicts between athletic and nursing program activities. The usual approach follows this hierarchy: (a) athletic competitions take precedence, followed by (b) nursing courses, exams, and clinical shifts, followed by (c) athletic practices, unless when traveling with the team.

PROFESSIONAL ORGANIZATIONS

National Student Nurses Association (NSNA): Nursing students are encouraged to consider becoming members of the National Student Nurses Association (NSNA). This organization's mission is to mentor students preparing for initial licensure as registered nurses, and to convey the standards, ethics, and skills that students will need as responsible and accountable leaders and members of the profession. Review the benefits of being a member of NSNA.

Nurses' Christian Fellowship (NCF): An international professional nursing organization, NCF is both a Christian professional organization and a ministry for nurses and nursing students. More information about the organization is located on the following website: http://ncf-jcn.org/aboutncf/ncf-international.

SECTION V: WARNER PACIFIC UNIVERSITY SERVICES & POLICIES

For information not specifically addressed in the BSN Student Handbook, please refer to the current WP Catalog or The Squire Student Handbook. For example, WP outlines its grievance and complaint policies for any student on page 24 of the WP Catalog. Related procedures provide an opportunity for students to work out their differences in a safe and structured manner. The Division of Nursing strongly encourages students to follow the "chain of command," which is not only a judicious process but also a professional expectation across all nursing careers.

Policies are reviewed annually. Updates may be implemented throughout the year, and students will be notified of any revisions to the BSN Student Handbook via WP email accounts. Students are responsible for remaining informed of all current policies and procedures throughout their enrollment in the BSN program. Continued enrollment signifies acknowledgment of and adherence to the most current version of this handbook. The program will communicate updates as they occur; however, it is the student's responsibility to review and comply with all revisions. Failure to stay apprised of updates does not exempt students from accountability.

BSNDP SPECIFIC POLICIES (see included)
Direct Admission Policy for Internal Students
Substance Use, Drug Screening, and Dismissal Policy
Dosage Calculation Testing Policy
Clinical Skills Competency & Check-Off Policy
N490 Leadership III Course Failure and Program Dismissal Policy

The policies outlined in the following section are grounded in Warner Pacific University's mission as a Christ-centered, urban, liberal arts institution committed to forming mission-driven leaders. These policies support academic excellence, ethical accountability, experiential learning, and service to diverse communities. Each policy reflects our shared responsibility to cultivate safe, inclusive, and transformative learning environments that prepare graduates to change the world through compassionate nursing practice.

WP BSN Degree Program: Direct Admission Policy for Internal Students

Purpose

This policy outlines criteria for direct admission into the Bachelor of Science in Nursing (BSN) Program for currently enrolled Warner Pacific University (WPU) students who demonstrate strong academic performance in prerequisite science coursework.

Policy Statement

The School of Nursing affirms Warner Pacific University's commitment to cultivating a Christ-centered, inclusive learning community that supports students from diverse backgrounds as they pursue professional nursing practice.

Internal students who meet established academic criteria may be directly admitted into the BSNDP in alignment with the University's mission to prepare students to engage actively in a constantly changing world. Direct admission reflects:

- Commitment to academic excellence grounded in the liberal arts
- Demonstrated readiness for experiential and clinical learning
- Alignment with the professional values of service, compassion, and ethical leadership

Admission decisions are guided by fairness, transparency, and the University's dedication to forming mission-driven leaders who change the world through healthcare practice.

Eligibility Requirements

To be considered for direct admission into the BSN program, internal WPU students must meet the following criteria:

Enrollment Status
- Must be currently enrolled as a degree-seeking undergraduate student at Warner Pacific University.

Minimum WPU Credit Requirement
- Must have completed **a minimum of 30 college-level credits at WPU** prior to BSN program admission consideration.

Completion of Required Science Prerequisites
- Must have completed the following science prerequisite courses (or be in the final semester of completion at time of review):
  - Anatomy & Physiology I **with lab**
  - Anatomy & Physiology II **with lab**
  - **Microbiology with lab**
  - **Chemistry with lab**

Minimum GPA Requirements
- **Minimum cumulative GPA:** 2.50
- **Minimum science GPA:** 2.50

Completion of BSNDP application with all components
- This includes required essays

Direct Admission Guarantee

Internal WPU students who meet the following academic benchmark are **guaranteed admission** to the BSN program (pending successful completion of all compliance and background screening requirements):

- **Cumulative science GPA of 3.25 or higher**

Definition of Science GPA

The science GPA includes the following required courses taken at WPU or accepted transfer equivalents:

- Anatomy & Physiology I and II (with labs)
- Microbiology (with lab)
- **Chemistry (with lab)**

Additional approved science courses may be included at the discretion of the Nursing Program for GPA calculation and auditing purposes.

Additional Admission Requirements

- Successful completion of all BSN prerequisite coursework prior to program start.
- Maintenance of minimum GPA requirements until matriculation.
- Completion of all clinical compliance and screening requirements (immunizations, background check, drug screening, etc.).

Non-Guaranteed Admission

Students who meet the minimum GPA requirements (2.50 cumulative and science GPAs) but do not meet the 3.25 science GPA threshold may still apply and will be evaluated through the standard competitive admission process based on space availability.

Policy Review

This policy will be reviewed annually by the Nursing Program Chair and Office of Academic Affairs to ensure continued alignment with accreditation standards, state regulations, and clinical placement capacity.

WP – BSN Degree Program: Substance Use, Drug Screening, and Dismissal Policy

Purpose

The Warner Pacific University (WPU) Bachelor of Science in Nursing (BSN) Program requires all students to maintain a substance-free status to ensure safe clinical practice, uphold professional standards of nursing education, and protect the welfare of patients, students, and clinical partners. As a Christ-centered institution committed to holistic well-being, Warner Pacific University promotes environments that uphold dignity, integrity, and public safety. The program adheres to standards outlined by the Commission on Collegiate Nursing Education (CCNE) and the Oregon State Board of Nursing (OSBN) relating to professionalism, safe practice, and clinical conduct.

Policy Statement

All BSN students must comply with required urine drug screening prior to and throughout clinical placement. A positive drug test for any prohibited substance constitutes grounds for immediate dismissal from the nursing program, consistent with CCNE Standard III (Program Quality: Curriculum and Teaching-Learning Practices) and OSBN Division 21 standards related to professional conduct and clinical safety. The BSNDP maintains a substance-free policy to:

- Protect recipients of care
- Preserve safe clinical environments
- Promote accountability and ethical professional formation

Students are expected to model behaviors consistent with professional nursing standards and with the University's commitment to caring for our city and world. The use of federally illegal substances, impairment during clinical or academic activities, or failure to comply with required drug screening standards undermines both patient safety and the formation of trustworthy healthcare professionals.

Definition of Prohibited Substances

A prohibited substance is defined as any substance that:
1. Is illegal under federal law;
2. Is a controlled substance without a valid prescription;
3. Is prohibited by a clinical partner or agency policy; or
4. Impairs clinical judgment, alertness, safety, or the ability to participate in clinical learning.

Marijuana (THC) remains illegal at the federal level and is therefore considered a prohibited substance under this policy regardless of state legalization.

Drug Screening Requirements

Students must:
- Complete an initial urine drug screen before clinical placement;
- Submit additional drug testing if required by the clinical agency;
- Participate in random or for-cause drug testing at any point during enrollment;
- Comply with deadlines as established by the program.

Failure to submit a valid drug screening sample by the required deadline will be handled as a positive test result.

Positive Drug Test

Any of the following constitute a positive drug test:
- Laboratory-confirmed detection of a prohibited substance,
- Refusal to submit a urine sample,
- Attempt to tamper with, dilute, or substitute a sample,
- Failure to complete required screening by the deadline.

Dismissal from the Program

Upon confirmation of a positive drug screen:
- The student will be immediately removed from clinical placement;
- Administrative withdrawal from all clinical courses will occur;
- The student will be dismissed from the nursing program;
- The student will be considered **ineligible for re-application or re-admission**.

This action is required to maintain compliance with CCNE accreditation expectations and OSBN clinical safety requirements.

Professional Standards

Nursing students are expected to demonstrate professional conduct consistent with:
- CCNE Standards (latest published edition),
- OSBN Division 21 Professional Standards,
- ANA Code of Ethics,
- Clinical agency regulations,
- State and federal controlled substance laws.

The BSN program maintains a zero-tolerance stance on the possession or use of prohibited substances.

Confidentiality

All drug screening results will be maintained as confidential educational records in accordance with FERPA and institutional policy. Results may be disclosed to clinical partners for placement requirements only as needed.

Student Responsibility

Students are responsible for:

- Remaining free of prohibited substances,
- Understanding this policy while enrolled,
- Complying with all clinical agency requirements,
- Maintaining ongoing eligibility for clinical placement.

Failure to comply with this policy constitutes grounds for dismissal.

Policy Review

This policy will be reviewed annually. Updates may occur to maintain compliance with CCNE accreditation expectations, OSBN regulation, clinical agency requirements, and state or federal laws. Students are responsible for remaining apprised of current versions of all clinical eligibility and professional conduct policies while enrolled in the BSN program.

WP BSN Degree Program: Dosage Calculation Testing Policy

Applies to:
- NURS 336 | Health Assessment & Health Promotion
- NURS 340 | Medical-Surgical Nursing I: Providing Care
- NURS 380 | Maternal & Neonatal Health Nursing
- NURS 400 | Child & Adolescent Health Nursing
- NURS 410 | Community & Population Health Nursing
- NURS 440 | Medical-Surgical Nursing II: Managing Care
- NURS 470 | Mental Health Nursing
- NURS 490 | Leadership III: Leadership & Management Capstone

Purpose
The purpose of this policy is to ensure that all nursing students demonstrate safe, accurate, and consistent medication dosage calculation skills prior to engaging in any clinical or practicum experience. Accurate medication administration is a foundational component of safe nursing care. In alignment with Warner Pacific's commitment to excellence, accountability, and service, students must demonstrate mastery of dosage calculation competencies prior to clinical practice.

Policy Statement
All nursing students must demonstrate 100% proficiency on a Dosage Calculation Exam prior to entering any clinical or practicum setting. Competency in dosage calculation is a mandatory prerequisite for clinical participation and course progression. Dosage Calculation Exams are administered at the beginning of each clinical nursing course, starting after successful completion of NURS 336 | Health Assessment & Health Promotion, and continuing through NURS 490 | Leadership III: Leadership & Management Capstone.

Policy Details
1. Testing Requirement
A Dosage Calculation Exam will be administered at the start of each clinical nursing course. Students must pass the exam before engaging in clinical, simulation, or precepted experiences. Successful completion of this exam is required for all subsequent clinical courses.

2. Passing Criteria
Students must achieve a score of 100% to demonstrate medication dosage calculation competency. No rounding errors, calculation mistakes, or partial credit will be permitted. This standard reflects the accuracy and precision required for safe nursing practice.

3. Procedure for Students Who Do Not Pass
- First Attempt (Score < 100%)

The student must attend a mandatory Dosage Calculation Remediation Workshop led by nursing faculty. After completion, the student may retake the exam (Second Attempt).
- Second Attempt (Score < 100%)

The student must attend a second remediation workshop and complete further individualized instruction. The student must also submit one Dosage Calculation Practice Exam per day for seven (7) consecutive days. Each practice exam must be reviewed and signed by a faculty member or designated tutor before the third and final attempt.

- Third Attempt (Score < 100%)

Failure to achieve 100% on the third attempt will result in: failure of the clinical course and ineligibility to participate in clinical experiences for that term.

4. Course Repetition and Program Dismissal

A student who fails a clinical course due to unsuccessful completion of the dosage calculation requirement may repeat the course once. Failure to achieve 100% proficiency upon repeating the course will result in dismissal from the Nursing Program. Readmission, if allowed, will follow institutional and program-specific policies.

5. Test Format

Dosage Calculation Exams may include, but are not limited to: basic arithmetic and unit conversions (metric, household, apothecary systems); oral and parenteral dosage calculations; intravenous (IV) flow rates, infusion times, and titrations; pediatric and weight-based dosages; and specialty-specific calculations (e.g., obstetric, psychiatric, community, leadership/practicum scenarios). Calculators may be used unless otherwise restricted. Students must show all work; partial credit will not be awarded for incorrect answers.

6. Academic Integrity

All dosage calculation exams are proctored and individual assessments. Academic dishonesty, collaboration, or use of unauthorized resources will result in disciplinary action per the Nursing Program and Institutional Academic Integrity Policies.

7. Ongoing Competency

Dosage calculation competency must be demonstrated at the beginning of each clinical nursing course. Students must maintain 100% proficiency throughout the program to ensure continued eligibility for clinical placement and graduation.

Rationale

Accurate medication dosage calculation is a foundational nursing skill essential for safe and effective patient care. This policy upholds the highest standards of clinical preparation, patient safety, and professional accountability by ensuring that all nursing students consistently demonstrate perfect accuracy in medication dosage calculation prior to any clinical experience. This requirement reflects:

- The University's dedication to experiential learning that is academically rigorous
- The School of Nursing's commitment to protecting vulnerable populations
- The ethical obligation to prevent harm and promote safety

Students are provided structured opportunities for remediation and support, reflecting our value of cultivating curiosity, perseverance, and academic growth. However, mastery standards remain non-negotiable due to the life-and-death implications of medication administration.

References

American Association of Colleges of Nursing (AACN) Essentials (latest edition)
National Council of State Boards of Nursing (NCSBN) Standards of Practice
Institute for Safe Medication Practices (ISMP) Guidelines

WP BSN Degree Program: Clinical Skills Competency & Check-Off Policy

Purpose
To ensure that all nursing students demonstrate competency in essential psychomotor, technical, and safety-related nursing skills prior to performing these skills in the clinical setting. This policy aligns with the American Association of Colleges of Nursing (AACN) Essentials, the National Council of State Boards of Nursing (NCSBN) Standards of Practice, and the Institute for Safe Medication Practices (ISMP) Guidelines.

Policy Statement
All nursing students must successfully demonstrate mastery of required clinical skills through a structured check-off process before performing these skills in clinical practice or simulation. Competency validation ensures patient safety, promotes professional accountability, and maintains program standards consistent with national nursing practice expectations. Clinical skill competency demonstrates a student's readiness to serve individuals, families, and communities with compassion and excellence.
In keeping with Warner Pacific's mission to prepare students to engage actively in a changing world, clinical competencies emphasize:

- Person-centered care
- Cultural humility
- Ethical accountability
- Professional collaboration
- Safe systems-based practice

Students must demonstrate competence in required skills prior to performing them in clinical settings. Faculty provide formative feedback, reflective learning opportunities, and remediation pathways consistent with our values of inclusive community and student formation.

Scope
This policy applies to all pre-licensure nursing students enrolled in clinical and skills-based courses within the Nursing Program.

Skills Validation Procedure
1. Preparation
Students must review assigned skill materials (videos, readings, and procedure checklists) before the scheduled check-off. Practice sessions in the simulation or skills lab are strongly encouraged. Faculty and lab staff are available for guidance during open practice hours.

2. Initial Check-Off
Each skill check-off will be conducted by a qualified nursing faculty member or skills lab instructor. Students must come prepared to skills lab with Elsevier skills check off list and perform each step of the skill according to the approved skills checklist, demonstrating patient identification, infection control, clinical judgment, communication, and documentation accuracy. If for any reason a student has not been in the academic or clinical setting due to extenuating circumstances, the student must participate in a skills check off with course faculty or the simulation coordinator prior to returning from academic

hiatus. There is no exception to this rule, and the student will not be allowed to return to the program until this has been completed.

3. Passing Criteria
A score of 100% competency is required to pass each skill. All critical steps must be completed accurately. Failure to perform a critical step or multiple non-critical errors results in a 'Needs Improvement' rating.

4. Remediation and Retesting
- First Attempt (Needs Improvement): Student must attend a remediation session with simulation lab coordinator before retesting.
- Second Attempt (Needs Improvement): Student must complete additional remediation with lead faculty of course before a final check-off.
- Third Attempt (Fail): Failure to achieve 100% competency results in course failure and ineligibility for clinical participation.

5. Safety & Professional Conduct
Students must adhere to standard precautions, institutional policies, and professional appearance guidelines during all skills sessions. Unsafe or unprofessional behavior may result in immediate failure of the skill attempt.

6. Documentation
Faculty will document outcomes of each skill attempt, including date, evaluator, and remediation requirements. Records are maintained in the student's academic file.

7. Academic Integrity
Skills check-offs are individual assessments. Academic dishonesty, falsification of documentation, or unauthorized assistance will result in disciplinary action per program policy.

Ongoing Competency
Competency validation is continuous throughout the nursing program. Students must retain proficiency in previously validated skills and may be required to demonstrate ongoing competency at any time, especially before advanced clinical placements or capstone experiences.

Rationale
This policy reinforces the nursing program's commitment to patient safety and professional excellence. By mandating complete accuracy in skill performance and adherence to national standards (AACN, NCSBN, ISMP), the program ensures that graduates enter clinical practice as competent and accountable healthcare professionals.

References
- American Association of Colleges of Nursing (AACN). The Essentials: Core Competencies for Professional Nursing Education (latest edition).
- National Council of State Boards of Nursing (NCSBN). Standards of Practice for Nursing Education and Clinical Competence.
- Institute for Safe Medication Practices (ISMP). Guidelines for Safe Nursing Practice.

WP BSN Degree Program: N490 Leadership III Course Failure and Program Dismissal Policy

Purpose
To uphold academic and professional standards within the Bachelor of Science in Nursing (BSN) program and ensure students meet competency expectations required for safe and effective entry-level nursing practice.

Scope
This policy applies to all students enrolled in the BSN program and specifically governs progression and dismissal related to N490 Leadership III (Capstone).

Policy Statement
NURS 490 Leadership III represents the culminating experience of the BSNDP and reflects the University's vision of forming mission-driven leaders who change the world.

This capstone course evaluates students' readiness to:
- Integrate ethical leadership with clinical expertise
- Demonstrate systems thinking in complex healthcare environments
- Advocate for individuals and populations
- Model professional integrity rooted in Christ-centered values

Because this course signifies readiness for entry into professional practice, failure of NURS 490 indicates that required program outcomes have not been met. A student who does not earn a passing grade in N490 Leadership III on the first attempt may repeat the course once, pending successful completion of a remediation plan and available course placement. A student who fails N490 Leadership III twice, in any sequence of enrollment, will be dismissed from the BSN program and is not eligible for further progression or re-entry into the Nursing major.

Procedures - First Failure
Upon the first unsuccessful attempt in N490 Leadership III:
1. The student will meet with course faculty and the Dean/Associate Dean.
2. Areas of academic, clinical, or professional deficit will be identified.
3. A written remediation plan will be issued.
4. Re-enrollment in N490 Leadership III is contingent upon:
   - Successful completion of all remediation requirements, and
   - Course seat availability.

Procedures - Second Failure
Upon a second unsuccessful attempt in N490 Leadership III:
1. The student will receive written notification of program dismissal.
2. The student will be referred to Academic Advising to explore options outside the Nursing major.
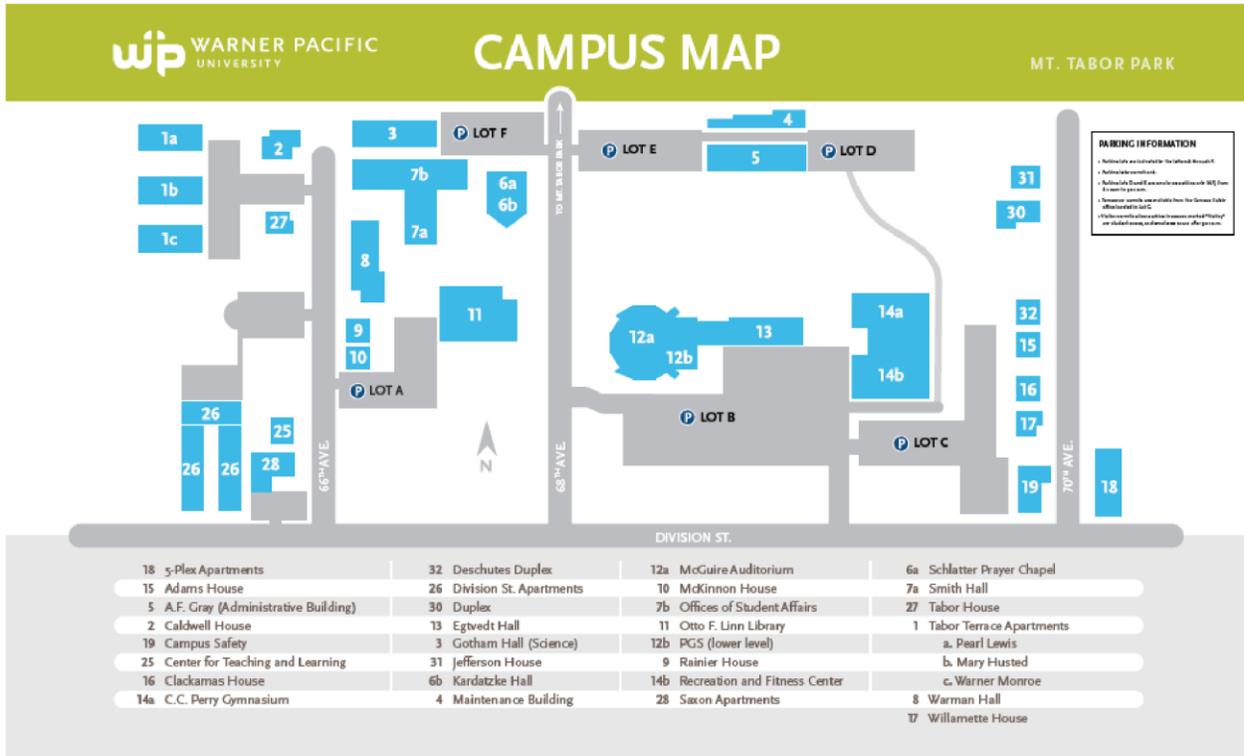
Appeal

Students may appeal dismissal decisions under the University Academic Appeal Policy. However, reinstatement into the Nursing Program following two unsuccessful attempts in N490 Leadership III is not permitted.

Related Policies
• Academic Progression Policy
• Course Remediation Policy
• Academic Appeal Policy

CAMPUS MAPS

WARNER PACIFIC UNIVERSITY — CAMPUS MAP — MT. TABOR PARK

PARKING INFORMATION

#		#		#		#	
18	5-Plex Apartments	32	Deschutes Duplex	12a	McGuire Auditorium	6a	Schlatter Prayer Chapel
15	Adams House	26	Division St. Apartments	10	McKinnon House	7a	Smith Hall
5	A.F. Gray (Administrative Building)	30	Duplex	7b	Offices of Student Affairs	27	Tabor House
2	Caldwell House	13	Egtvedt Hall	11	Otto F. Linn Library	1	Tabor Terrace Apartments
19	Campus Safety	3	Gotham Hall (Science)	12b	PGS (lower level)		a. Pearl Lewis
25	Center for Teaching and Learning	31	Jefferson House	9	Rainier House		b. Mary Husted
16	Clackamas House	6b	Kardatzke Hall	14b	Recreation and Fitness Center		c. Warner Monroe
14a	C.C. Perry Gymnasium	4	Maintenance Building	28	Saxon Apartments	8	Warman Hall
						17	Willamette House

The physical address of WP's Division of Nursing is:
Warner Pacific University
2219 SE 68th Avenue
Portland, OR 97215

Four-Year Curriculum Plan for Nursing Majors	
First (Freshman) Year	
Fall Semester	**Spring Semester**
*BIO 221 4 FYLC 3 EN 111 4 HE 150 3 PE Activity Course 1 Semester Total: 15	*PSY 140 3 *CHEM 111 4 *BIO 222 4 EN 112 4 Semester Total: 15
Sophomore Year	
Fall Semester	**Spring Semester**
*SOC 140 3 Diversity Course 3 Info Tech Course 3 History/Culture Course 3 Critical Thinking Course 3 Semester Total: 15	*HD/SW 330 3 *MA 104 3 *BIO 370 4 Ethics Course 3 Elective Course 2 Semester Total: 15
Junior Year	
Fall Semester	**Spring Semester**
ILR 300 (if needed) 3 NURS 210 2 NURS 301 NURS 3 302 NURS 3 336 4 Semester Total: 12-15	REL 320 (if needed) 3 NURS 340 5 NURS 350 3 NURS 370 3 NURS 380 3 Semester Total: 14-17
Senior Year	
Fall Semester	**Spring Semester**
HUM 310 (if needed) 3 NURS 400 3 NURS 410 3 NURS 440 6 NURS 460 3 Semester Total: 15-18	NURS 470 3 NURS 480 3 NURS 490 6 Semester Total: 12

Sample First (Freshman) and Sophomore Years: 60 credits. Junior and Senior Years: 53-62 credits. SAMPLE TOTAL CREDITS: 122 credits. *Prerequisites

NURSING COHORT COURSES:		D	C/L	Co- or Prerequisites
Junior year, first semester	**12-15 credits**	**D**	**C/L**	PNC = Prerequisite Nursing Courses
NURS 210 Interprofessionalism	2	2	0	Completion of GEC***-PNC
NURS 301 Pathophysiology	3	3	0	Completion of GEC***-PNC
NURS 302 Pharmacology	3	3	0	Completion of GEC***-PNC
NURS 336 Health Assessment & Health Promotion (Didactic, Labs)	4	4	0	Co-Requisite (Co-R) NURS 210
ILR 300 Advanced Information Literacy and Research (if needed)	3	3	0	EN 111 + EN 112
Junior year, second semester	**14-17 credits**			
NURS 340 Medical-Surgical Nursing I: Providing Care (Didactic, Skills, Clinical)	5	3	2	NURS 210 NURS 301 NURS 302 NURS 336
NURS 350 Diversity, Equity & Advocacy	3	3	0	NURS 210
NURS 370 Research, Statistics & Evidence-Based Practice	3	3	0	Co-R: NURS 340 Co-R: NURS 350
NURS 380 Maternal & Neonatal Health Nursing (Didactic, Skills, Clinical Substitution/Simulation)	3	2	1	Co-R: NURS 340 Co-R: NURS 350
REL 320 Spirituality, Character, and Service (if needed)	3	3	0	Completion of GEC***-PNC

	15-18 credits			
Senior year, first semester				
NURS 400 Child & Adolescent Health Nursing (Didactic, Clinical Substitution/Simulation)	3	2	1	NURS 340 NURS 350
NURS 410 Family & Community Health Nursing (Didactic, Clinical Substitution/Simulation)	3	2	1	NURS 340 NURS 350
NURS 440 Medical-Surgical Nursing II: Managing Care (Didactic, Skills, Clinical)	6	3	3	NURS 340 NURS 350
NURS 460 Leadership I: Epidemiology, Prevention & Informatics	3	3	0	NURS 370 Co-R: NURS 410
HUM 310 Humanities Colloquy: Exploring the Human Condition (if needed)	3	3	0	ILR 300
Senior year, second semester	12 credits			
NURS 470 Mental Health Nursing (Didactic, Clinical)	3	2	1	NURS 340 NURS 350
NURS 480 Leadership II: Caring, Safety & Leadership (Didactic, NCLEX-RN Study Schedule)	3	3	0	NURS 460
NURS 490 Leadership III: Leadership & Management Capstone (Clinical Practicum, Leadership Practicum)	6	0	6	All Prior Nursing Curriculum
Total Nursing Credits	53	39	14	
Total Credits Junior & Senior (9 credits General Education)	62	48	14	
Total BSN Degree Credits	122			

NURSING COURSE DESCRIPTIONS

BSN Degree Program: Course Descriptions for the WP Catalog

NURS 210 Interprofessionalism (2) (Didactic)
Description: This didactic course socializes BSN students from the cornerstone of a liberal arts education to interprofessionalism within professional nursing practice according to an organizing framework. The framework features WP core themes, nursing metaparadigm concepts, essentials of nursing education, and standards of professional nursing practice. The course explores nursing as a theory-driven discipline and values-based profession whose members collaborate with other professionals to improve health outcomes for diverse recipients of care across the lifespan, including at end of life.
Prerequisites: Completion of General Education Core and Pre-Nursing Courses with a GPA of > 2.5.

NURS 301 Pathophysiology (3) (Didactic)
Description: This didactic course focuses on concepts of pathophysiology essential to understanding diseases and disabling conditions that can affect body systems across the lifespan. Provision of holistic, patient-centered care depends on an understanding of pathophysiology.
Prerequisites: Completion of General Education Core and Pre-Nursing Courses with a GPA of > 2.5.

NURS 302 Pharmacology (3) (Didactic)
Description: This didactic course examines pharmacotherapeutic agents used in the treatment of illness and the promotion, maintenance, and restoration of wellness in diverse individuals across the lifespan, including at end of life. Content emphasizes principles of pharmacokinetics, pharmacodynamics, and pharmacogenetics/genomics in the treatment of prevalent illnesses and pain management. The course includes concepts of safe drug administration and monitoring of the effects of selected pharmacotherapeutic agents. Content also addresses clinical prevention through principles of "farmacology" (organic and whole food approaches).
Prerequisites: Completion of General Education Core and Pre-Nursing Courses with a GPA of > 2.5.

NURS 336 Health Assessment & Health Promotion (4) (Didactic, Labs)
Description: This didactic and skills development course provides students with further application of the nursing process and critical thinking skills integral to nursing interventions for primary, secondary, and tertiary prevention. In a laboratory setting and building on knowledge from the liberal arts, students will expand and refine the observational and psychomotor skills required for assessing the health status and needs of patients across the lifespan, with a focus on the health of adult men and women and older adults.
Pre- or Co-requisites: Completion of GenEd Core and Pre-Nursing Courses with a GPA of > 2.5 and NURS 210.

ILR 300 Advanced Information Literacy and Research (3 credits) (Didactic) (If needed)
Description: Students learn critical skills related to finding, organizing, analyzing, and making meaning from information from a variety of sources, including social media, news sources, search engines, books/articles, and academic databases. They learn about the ways information is curated for them as well as how the personal data they create and share are used. They apply this knowledge to a research project in a major discipline.
Prerequisites: EN 111+112 or equivalent.

HUM 310 Exploring the Human Condition (3) (Didactic) (If needed)
Description: An interdisciplinary consideration of the relationship of the Christian faith to aspects of the human condition. Students will be challenged to infuse a personal theological perspective into their thinking about self, society and world, the cosmos, and the like.
Prerequisites: EN 111 and EN 112.

NURS 340 Medical-Surgical Nursing I: Providing Care (5) (Didactic, Clinical Experiences)
Description: This didactic, skills development, and clinical course introduces medical-surgical nursing practices in the provision of care for diverse adults and older adults, including at end of life. The course examines and applies convictions, knowledge, skills, and attitudes arising from a liberal arts foundation, professional standards, evidence-based practice guidelines, and interprofessionalism to patient care.
Prerequisites: NURS 210, NURS 301, NURS 302, and NURS 336.

NURS 350 Diversity, Equity & Advocacy (3) (Didactic)
Description: This didactic course examines the importance of cultural intelligence and advocacy in the processes of increasing quality of care, decreasing cost of care, increasing access to care, and improving interprofessional communication and collaboration on behalf of diverse recipients of care. Concepts of various socio-cultural, economic, educational, and cultural communication patterns, as well as geographical location, are examined as influences in healthcare processes for both patient and care provider. Equitable frameworks of health care are examined to develop strategies of patient and provider advocacy, to address access to quality care, and to create healthcare environments where patients and interprofessional providers are valued for their unique cultural backgrounds, empowered to engage in healthcare processes, and supported to achieve their healthcare goals.
Prerequisite: NURS 210.

NURS 370 Research, Statistics & Evidence-Based Practice (3) (Didactic)
Description: This didactic course serves as an introduction to the research process and its integration into professional nursing practice. Students learn how to discern between quantitative and qualitative research, how to locate and critically analyze nursing research, and how to identify their role in the research process as professional nurses. Statistical methods used in nursing research are introduced and applied in the context of reading current nursing research. Students apply the steps of the research process to address a patient care problem identified in clinical practice. Students also analyze and evaluate nursing research literature and various evidence-based practice models for their effect on healthcare equity and accessibility.
Prerequisites: NURS 340 and NURS 350.

NURS 380 Maternal & Neonatal Health Nursing (3) (Didactic, Simulation, and Clinical Substitution)
Description: This didactic, skills development, and clinical course extends the art and science of nursing and the various roles of the nurse as they apply to diverse and self-identified childbearing families. Students use the nursing process and QSEN competencies to relate to biophysical, psychosocial, cultural, and spiritual principles that have an impact on the childbearing family. Best evidence forms the basis for nursing care and management. The course also addresses family theories and dynamics and emphasizes a family-centered approach during antepartum, intrapartum, postpartum, and neonatal clinical experiences.
Prerequisites: NURS 340 and NURS 350.

REL 320 Spirituality, Character & Service (3) (Didactic) (If needed)
Description: This course invites and facilitates personal discernment about vocation within a framework of spirituality, character, and care for one's neighbor – and the interconnectedness of each. It offers students opportunities and experiences that invite critical self-reflection in the context of writings, beliefs, and practices of diverse views and contexts and participation in service learning in the City.
Prerequisite: None.

NURS 400 Child & Adolescent Health Nursing (3) (Didactic, Simulation, and Clinical Substitution)
Description: This didactic and clinical course focuses on the art and science of providing ethical, evidence-based nursing care to diverse children and adolescents within ANA standards, National Patient Safety Goals, and the QSEN Institute's quality and safety framework. Utilizing current patient care technologies and practice guidelines, the course emphasizes the understanding of pathophysiology unique to pediatric and adolescent populations in the provision of quality nursing care. For each developmental level, course content holistically addresses relevant anticipatory guidance, health promotion, and developmentally appropriate communication strategies. In addition, the course examines health care policy, finance, and regulatory environments affecting diverse children and adolescents.
Prerequisites: NURS 340 and NURS 350.

NURS 410 Family & Community Health Nursing (3) (Didactic, Simulation, and Clinical Substitution)
Description: This didactic and clinical course introduces students to the extension of nursing to a patient's family, to health of diverse families in a larger geographic community, and to community-based health care and prevention topics, with an emphasis on social justice and equity. Students develop an understanding of the history of community health nursing, along with the various roles, delivery systems and models, and stratification of services that form the foundation of community health nursing. Students practice the role of a community health nurse with public and home health care systems, with an emphasis on reflecting increased cultural intelligence (competence and humility). Building on existing skills, students assess health needs, plan, and implement appropriate primary, secondary, and tertiary prevention interventions for diverse and vulnerable population groups in a variety of community settings, emphasizing safe and ethical practice. Evaluation of political processes related to emergency preparedness, local community health funding, and equitable patient/family/community access to healthcare is included.   Prerequisites: NURS 340 and NURS 350.

NURS 440 Medical-Surgical Nursing II: Managing Care (6) (Didactic, Clinical Experiences)
Description: This didactic, skills refresher, and clinical course presents the nurse's advanced roles of designer, manager, and coordinator of care in relation to human responses to alterations in health. The course provides students with skills to balance the maintenance of optimal health for adult and older adult recipients of care, equitable access to care, and resource management with a focus on persons' autonomy in care decisions. Content focuses on pathophysiology, corresponding medical-surgical nursing management, and the application of nursing process in the provision of holistic care for diverse adults and older adults. Content is organized around improved health outcomes and evidence-based practice models. The focus of clinical practice is continuing development of organizational skills, priority setting, critical thinking, clinical reasoning, and problem solving as the student continues to assimilate the roles of the professional nurse in complex clinical settings.
Prerequisites: NURS 340 and NURS 350.

NURS 460 Leadership I: Epidemiology, Prevention & Informatics (3) (Didactic)
Description: This didactic course extends a foundation in the liberal arts to application of a systems-based ecological model as a framework for understanding determinants of health in diverse populations. Senior students embrace responsibility and accountability for clinical leadership related to clinical prevention and population health. The course expands the nurse's role in stewardship of holistic human health and healing through principles of epidemiology and biostatistics, clinical prevention and harm reduction, and use of informatics to mitigate error and improve interprofessional communication and collaboration. Pre- or co-requisites: NURS 370 and NURS 410.

NURS 470 Mental Health Nursing (3) (Didactic, Clinical Experiences)
Description: This didactic and clinical course addresses the principles and techniques of therapeutic communication and interprofessional collaboration as applied to working with patients who present with symptoms of mental health disorders in acute care and community-based settings. Contemporary issues in the field of mental health nursing are explored from a liberal arts foundation to attend to psychosocial, spiritual, cultural, emotional, and biophysical alterations as well as economic, legal, and ethical environments of recipients of care. Based on ANA standards of practice, the role of the nurse focuses on health promotion, disease prevention, and management for patients with mental health conditions across the life span. Students apply theoretical concepts of compassionate care and emotional support in clinical areas while working with diverse individuals, families, groups, communities, and vulnerable populations with varying levels of complexity.
Prerequisites: NURS 340 and NURS 350.

NURS 480 Leadership II: Caring, Safety & Leadership (3) (Didactic)
Description: This didactic leadership course focuses on the nurse as a change agent and coordinator of human, fiscal, and material resources in the health care delivery system. Clinical judgment and beginning application of management knowledge will support the establishment of priorities for nursing care and improved health outcomes. Strategies and skills of clinical reasoning necessary for the "Healing Trinity" of caring, safety, and leadership are explored and analyzed in relation to the nursing process, performance standards, and QSEN Competencies. Content emphasizes analysis and use of outcome measures to promote quality care, patient safety, and systems leadership in healthcare delivery systems. Leadership of nursing and interprofessional teams utilizing both formal and informal power to promote quality, person-focused care is explored, with a focus on the influence of cultural and spiritual factors on decision-making for diverse recipients of care.
Prerequisite: NURS 460.

NURS 490 Leadership III: Leadership & Management Capstone (6) (Clinical Practicum of 270 hours)
Description: This pass/fail capstone seminar and clinical course builds on existing knowledge and skills, focusing on the application of leadership strategies and skills necessary for the role of the nurse as a manager of care, including reflective practice, conflict management, and cultural intelligence (competence and humility). Emphasis is on development and refinement of leadership skills, collaborative care, conflict resolution, effective interprofessional communication techniques, and resource utilization and management. Students' clinical logs will emphasize their nursing actions to establish a nurse-patient relationship, improve health outcomes, promote patient safety, and demonstrate leadership as they fulfill a capstone clinical experience as an "RN Proxy." Prerequisites: NURS 440 and NURS 480.

WARNER PACIFIC UNIVERSITY
Academic Integrity Violation Report

Student Name: _____ Student ID: _____

Faculty Name: _____ Division/Department: _____

Course: _____ Date of Incident: _____

Location of Incident: _____ Program: ☐ TRA ☐ PGS ☐ sou

Anticipated Grad Date: _____

Type of Academic Dishonesty:

☐ Cheating *(the use or attempted use of unauthorized materials, information, or study aids)*

☐ Fabrication/falsification *(intentional falsification or invention of information, including false sign-in)*

☐ Plagiarism *(the use of another's ideas, words, data, or product, including tables and figures, without proper acknowledgment)*

☐ Identical work *(submitting work for multiple purposes without permission, or work that closely parallels another student's submission when collaboration is not allowed)*

☐ Assisting in dishonesty *(helping or attempting to help another commit an act of academic dishonesty, tampering with evaluation materials, distributing unauthorized questions or answers related to an examination/test)*

☐ Misuse of electronic resources *(the use of unauthorized electronic resources to complete an assignment)*

☐ Other: _____

Description of Incident (attach evidence):

Student's Explanation (admission of guilt, denial, comments):

Students must be given the opportunity to explain before any penalty is issued beyond oral reprimand/counseling.

Action(s) Taken (mark all that apply):

☐ Oral reprimand [by faculty member]

☐ Requirement to resubmit work or retake an examination/test [by faculty member]

☐ Reduction of grade or failing grade on assignment/exam [by faculty member with Division Chair/Dean or CAO]

☐ Reduction of grade for the course [by faculty member with Division Chair/Dean or CAO]

☐ Failing grade for the course [by faculty member with Division Chair/Dean or CAO]

☐ Suspension from the university [by CAO], *for repeated offenses*

☐ Administrative dismissal from the university [by CAO], *for repeated offenses*

☐ Other: _____

Faculty Signature: _____ **Date:** _____

  Chair/Dean Signature: _____ **Date:** _____

  Student Signature: _____ **Date:** _____

Student's signature is acknowledgement that this report has been reviewed and student has been apprised of penalties. If student is unavailable or unwilling to sign, faculty member should note how this report was communicated to student:

The student has the right to appeal, in accordance with [Warner Pacific University 2022-2023 Catalog](#) guidelines. Order of Appeal: 1) Division Chair/Dean; 2) Chief Academic Officer; 3) Academic Policies Committee; 4) President.

Please submit completed form to the VPAA/CAO (copy to Division Chair/Dean and VP Student Life).

> **IMPORTANT: This report may only be shared with the individual to whom it pertains and with those within the university who have a legitimate educational need for the information on the report. Should the report name additional students, their privacy must be protected by blocking out their names on any copy of the report shared with the student about whom the report is filed.**

Outcome of Student Appeals

1. Appeal to the Division Chair/Dean

Result of Appeal: _____

Chair/Dean Signature: **Date:**

                   _____   _____

2. Appeal to the Chief Academic Officer

Result of Appeal: _____

_____

_____

CAO Signature: **Date:**

                   _____   _____

3. Appeal to the Academic Policies Committee

Result of Appeal: _____

_____

_____

APC Chair Signature: **Date:**

                   _____   _____

4. Appeal to the President

Result of Appeal: _____

_____

_____

President Signature: **Date:**

                   _____   _____

Notes:

ACADEMIC INTEGRITY/ HONOR CODE FORM

WARNER PACIFIC UNIVERSITY
Division of Nursing
Honor Code Pledge

I pledge to support this Honor Code of the Division of Nursing, Warner Pacific University.

the I will refrain from any form of academic and professional dishonesty or deception in classroom, clinical, and other learning settings. The behaviors I will not participate in include cheating, plagiarism, violation of client confidentiality, falsification of data, falsification of records, and/or aiding and abetting dishonesty.

Student's Name: _____

Signature: _____

Date: _____

Failure to sign this form does not exempt the student from compliance with the Honor Code of the Division of Nursing, Warner Pacific University.

The signed document will be placed in the student's advising file and/or ACEMAPP repository.

Division of Nursing
Academic Pathway to Success Form

This form is used to address success pathways with students who are not meeting, or who are at risk for not meeting, course or program expectations and/or outcomes. This form may be used at any point during the semester as a means of communication and may be used in combination with all other forms of communication to foster student success. When possible, it is preferred to meet and discuss with the student recommended pathways to success. If scheduling does not allow for in-person interaction in a timely way, faculty should communicate their concerns via this form through email with the student. This form is not to be used for violations of Academic Integrity. If a faculty member needs to report an Academic Integrity violation, please use the **Academic Integrity Violation Report Form.**

Date:

Student Name:

Course Prefix/Number:

Course Title:

Course Faculty Name:

Evidence to warrant concern related to course or program outcomes, using SBAR format:

    Situation:

    Background:

    Assessment:

    Recommendation(s) (See check boxes on next page to summarize referrals and options):

Plan to address areas of concern, using SMART goal format:

    S-Specific (What will be accomplished? What actions will the student need to take?):

    M-Measurable (What data will measure the goal? How much? How well?):

    A-Achievable (Is the goal doable? Does the student have the necessary skills/resources?):

    R-Relevant (How does the goal align with outcomes? Why is the result important?):

    T-Time-Bound (What is the time frame for accomplishing the goal?):

Division of Nursing

Academic Pathway to Success Form, Page Two

Faculty Role (i.e., what the faculty will do to facilitate achievement of the plan):

Consequences (if no improvement):

Any Additional Comments:

Referrals & Options Discussed:

> **Referred student to Academic Advisor.**
> **Referred student to Dean/Associate Dean.**
> **Referred student to the WP Catalog/DON Student handbook and/or clinical guidelines.**
> **Student will address areas of concern and continue in course.**
> **Student may withdraw from the course. (Faculty to contact Registrar for appropriate procedure.)**
> **Student may go on Leave of Absence or withdraw from DON. (Student completes WP LOA/Withdrawal form.)**

Faculty Signature & Date:

(Type name if communication is via email)

Student Signature & Date:

(Type name if communication is via email)

Copies to: Student Advisor, Faculty of Record, Student & DON Student File, Associate Dean or Dean

APPENDIX F
PETITION TO THE NURSING DIVISION REVIEW PANEL (NDRP)

Name _____ ID No. _____

STUDENT NOTICE
It is your responsibility to read all instructions and complete all student portions of this form.
Your letter and this completed form must be submitted to the Program Manager of the Division of Nursing at least two days prior to the NDRP meeting (dates available in the Program Manager's office). Within two days of the meeting, the Division of Nursing Dean will notify you of the results in an official letter sent via email.

Policy exception:

    Academic Dismissal from the BSN Degree Program

    Other_____

In addition to this form, address a TYPED letter to the Panel in which you specifically explain 1) the policy exception you are requesting and 2) the reason(s) for the request. The inclusion of additional documentation and/or letters of support is encouraged.

In petitions dealing with academic dismissal, you should describe any extenuating circumstances that impacted your academic performance in the past, and specifically identify the actions/steps you will take in the future to assist you in your efforts to reach academic success.

Relevant Course or Clinical Instructor: I have reviewed this request with the student.

    o   I support this petition. o I support with reservations.

    o   I do not support.

Comments: _____

_____

_____

Instructor Name: _____   Signature: _____

FOR OFFICE USE

Submission Date _____

Panel Review Date _____ ☐Approved ☐Denied

CLINICAL-LAB MAKE-UP FORM

PLEASE TYPE OR PRINT CLEARLY

Student Name: Cohort #:		WP ID #:			
Check all that apply:	Semester/Year:	Skills or Clinical Course:			
☐ Skills Lab	☐ Fall _____	☐ NURS 336	☐ NURS 410		
☐ Simulation Lab	☐ Spring ____	☐ NURS 340	☐ NURS 440		
☐ Clinical Shift	☐ Summer ____	☐ NURS 380	☐ NURS 470		
		☐ NURS 400	☐ NURS 490		
		☐ Other (specify):	_____ _____		
		Agency Name:	_____		

Date(s) of Absence:

☐ 8 hour shift   ☐ 12 hour shift   ☐ Other (specify):

Reason for absence:

Faculty Advisor/ Clinical Placement Coordinator   Faculty Name:

Coordinator Name:

Signature:

Advisor/ Clinical Placement

Signature:

Student Signature:

Date:

Office Use Only:

☐ Student Copy   ☐ Clinical File Copy

APPENDIX H
CLINICAL DOCUMENTATION

Clinical Guidelines
- The student will submit a signed clinical guideline document to the course instructor through MyWP (then click on the link for Canvas) before the clinical rotation starts.

Planning and Evaluation Form (PEF)
The student will submit the PEF (in progress, according to reflection on at least half of clinical outcomes) to their clinical instructor a week before the midterm ECCO is completed.

- The clinical instructor will return the PEF with comments to the student ahead of the completion of the midterm ECCO.
- The student will submit their PEF (according to reflection on remaining clinical outcomes) to their clinical instructor a week before the final ECCO is completed.
- The clinical instructor will return the PEF with comments to the student ahead of the completion of the final ECCO.
- The student will submit their completed PEF through MyWP (then click on the link for Canvas) no more than 48 hours after completing their final shift.

Evaluation of Clinical Course Outcomes (ECCO)
- The clinical instructor (or supervisor) fills out the ECCO at midterm and final via DocuSign.
- The clinical instructor will obtain information from the PEF submitted from the student a week before the midterm evaluation and fill out the ECCO accordingly, along with feedback from any unit RNs working with the student.
- The clinical instructor will submit the completed midterm ECCO to the course instructor via DocuSign within 48 hours.
- The course instructor will review and return the midterm ECCO form via DocuSign to the clinical instructor so the final evaluation may be entered on the same form.
- The clinical instructor will obtain information from the completed PEF submitted from the student a week before the final evaluation and fill out the ECCO accordingly, along with feedback from any unit RNs working with the student.
- The clinical instructor will submit the completed ECCO via DocuSign no more than 48 hours after the final shift.
- The course instructor will review for grading purposes and sign the final ECCO in DocuSign.
- The clinical placement coordinator will forward all executed ECCO forms electronically to the student and the student will print accordingly for filling.

It is the student's responsibility to verify submission of all clinical documents by these due dates.

APPENDIX I

WARNER PACIFIC
UNIVERSITY

Accident Report Form

Indicate Work Status of Person(s) Involved: Employee ☐   Student ☐   Student Employee ☐

Volunteer ☐   Visitor ☐   Other (Specify) ☐ _____

Personal Information

Name of Person Involved _____

SSN _____-____-_____ Other Identification _____

Current Address_____ Apt. No. _____

City _____ State_____ Zip Code _____

Cell phone _____ Home Phone _____ Work Phone _____

Date of Birth ____/____/____ Age ____ Gender: Male ☐ Female ☐

Emergency Notification Name _____ Phone _____ Relationship_____

Accident Information

Date of Accident/Incident ____/____/____ Time of Accident/Incident _____ a.m. ☐ p.m. ☐

Date Reported ____/____/____ Time Reported _____ a.m. ☐ p.m. ☐

Location of Accident/Incident _____

Job Title(s) of Person(s) Involved _____

_____

Organization(s) & Department(s) _____

Was person performing regular job duties? Yes ☐ No ☐

Did person complete shift following the accident? Yes ☐ No ☐

Will person lose time from work other than day of accident? Yes ☐ No ☐

Description of Accident/Incident _____

_____

_____

_

_____

_

_____

_

_____

Bodily Injury

Description of Injury _____

_____

Probably Cause of Injury _____

_____

Describe initial First Aid or Medical Treatment, including on-site treatment and follow-up treatment at ER or other (where, by whom, what was done) _____

_____

_____

Property Damage

Name of Property Owner _____ Phone _____

Address _____

City _____ State _____ Zip _____

Description of Property _____

_____

_____

Witnesses

1. Name _____ Phone _____

   Address _____

   City _____ State _____ Zip _____

2. Name _____ Phone _____

   Address _____

   City _____ State _____ Zip _____

Corrective Action Taken

_____

_____

Report Completed By

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Organization _____ Job Title _____ Date ____/____/____

Supervisor

Name _____ Phone _____

Supervisor's Organization _____ Position _____

Supervisor's Signature _____ Date ____/____/____

APPENDIX J

FAQs

What does "Zoom" etiquette look, feel, and sound like? Participants will:
- Attend meetings with the camera on. Adjust the background as needed to keep the camera on.
- Mute when another speaker is talking.
- Be mindful of what is placed in the chat. Consider appropriateness and professionalism: Could a particular comment be said out loud during an in-person meeting?
- Ask questions.
- Let others ask questions.
- Be respectful of other people's opinions, questions, and comments.
- Be attentive and engaged as you would at a face-to-face meeting.
- If Internet signal strength is poor at your place of residence, come to campus and use a classroom.
- Practice showing up for your patients as a nurse by showing up for your classmates and course instructor in Zoom meetings.
- Show up on time.

What if I am confused about how to do an assignment or need further clarification about a Program expectation?
If it is a matter of clarification on an assignment within a specific course, go to your course instructor.
If it is a matter of obtaining further clarification regarding the BSNDP, review this BSN Student Handbook or go to the Program Manager, who has a number of roles, including Clinical Placement Coordinator (CPC). Do not make a generic request of your entire cohort as if it is someone else's responsibility to seek clarification.

What if I need help communicating with my course instructor?
You are an adult entering a profession. Take the time to have a one-on-one meeting with your course instructor. Because of our usual cohort size of 40 students, make an appointment to meet during scheduled office hours. Begin with the end in mind in a brief statement: "I would like to understand why this answer was right on Quiz 2 but wrong on Quiz 3." Then, as needed, explain and show where the difficulty begins and ends to gain a better understanding of rationales, facilitate a correction, or communicate lingering concerns. Do not involve other students.
Students are expected to follow the established chain of command when addressing questions, concerns, or issues related to academic courses or program progression. The appropriate sequence for communication is as follows:
1. **Course Instructor**
2. **Academic Advisor**
3. **Dean of Nursing** (if the concern cannot be resolved at the previous levels)

Students must first make a good-faith effort to address concerns at the course level prior to escalating to advising or program leadership. Concerns that bypass the established communication pathway may be redirected to the appropriate level for follow-up.

For which assignments do I have to cite sources?

Students must appropriately cite sources for ALL assignments, whether exams, written papers, group presentations, or other projects requiring use of knowledge beyond their current scope of thinking.

Can I use previous students' course work?

No, you cannot use previous students' course work as a guide. Even though you may be tempted to use their work, if you have questions about an assignment, go to the course faculty, not to other students.

Can I find my own clinical placements?

No! And yet, someone tries to violate our placement process every semester! You are not to speak with or even hint to unit managers about any preference for any clinical rotation. WP's BSNDP follows a protocol provided by our ACEMAPP/StudentMAX Consortium, and the CPC handles ALL requests and negotiations. If these rules are not followed, we could lose specific clinical partners or even our membership in the consortium. In addition, we must have a fully executed affiliation agreement with each clinical partner before a student may be placed there for a rotation. Please note: All clinical placement personnel FORBID going behind the scenes to get a rotation, which means a student could be dismissed on the spot from our BSNDP! Consider for one moment that our most supportive clinical partner accepts more than 400 students a semester from about 10 nursing schools. What if each student committed this offense?!

Can I pick and choose my clinical placement within an assigned agency?

No, you cannot. The Program Manager assigns and tracks all individual student's rotations. Clinical placements are historical and thus in short supply. We take what we receive from our clinical partners and pursue sites others have not considered. Our BSNDP began in 2019SP, and the CPC has developed affiliation agreements with 30+ partners, including previously denied sites, such as Randall Children's, the Portland VA Medical Center, and a couple of facilities affiliated with OHSU.

Can I communicate to the unit manager ahead of my assignment?

Only when told to do so because of some necessity (e.g., for a Capstone interview). Communication in nearly all cases and for nearly all reasons occurs between the CPC and clinical partner.

Clinical Documentation: Do I really have to put my name on all pages?

Yes! Do not expect anyone else to "know" who you are. You are one person; however, we place up to 96 students each semester across medical-surgical and mental health clinical rotations. Double-check before submitting any assignment or other documentation for accuracy and completion of required information.

I have questions about clinical hours, such as how many hours are required for each clinical rotation. Where do I look?

Refer to this BSN Handbook: Section III, "Clinical Guidelines." Note: OSBN has recently made adjustments to required hours. We have greater flexibility as long as students meet course and clinical outcomes as documented on relevant PEFs and ECCOs. Check this BSN Handbook annually for updates. As occurred during the COVID-19 pandemic, when emergencies arise and bring about new rules, BSNDP personnel will attend to alternative ways to meet clinical requirements. Students are not asked to attend to clinical substitution beyond following new directions (e.g., to complete a Shadow Health module or to submit hours from a live simulation).

What if I am assigned to a clinical placement that I have been to before?
Re-assignments happen from time to time due to limited availability of certain units. Consider the powerful benefit of expanding knowledge from a previous rotation as students meet different course and clinical outcomes in a familiar setting. Memorize this quotation: "Someone who is in a position to bless you is always watching you!"

How do you choose where students go for clinical placements?
- When there are no particular factors to consider, students are randomly chosen, once the request per clinical rotation has been made and approved with ACEMAPP/StudentMAX.
- Clinical partners sometimes request particular students, such as their employees.
- We determine best fit if a partner has made a mission-related request (e.g., for a near-peer at an eating disorders unit or for someone fluent in another language to improve rapport with a particular population being served).
- We look at schedules to allow affected students to take non-nursing courses within our curriculum in the designated semester. Note: We do not take requests based on an individual's work or other personal schedule.
- To the extent possible, we consider geographic location, but it is not the highest priority.

What if I have a conflict with a clinical day? Can I change the day?
No. We have asked students to be available Monday through Friday to facilitate becoming a well-prepared Warner Pacific University Nurse. We expect students to attend every clinical shift, just as when required for a paid position. We are unable to change days as there are multiple metro-area nursing programs assigned to specific units, days, and times with our clinical partners. Please rearrange your personal schedule to attend every assigned clinical shift. If the conflict must be accommodated, contact the CPC.

Am I allowed to work during nursing school?
Yes; however, we do not recommend more than 5-10 hours/week of outside work during the four semesters of courses and clinical rotations. We HIGHLY encourage you to NOT WORK during nursing school. For students who cannot set aside outside employment, we encourage them to limit work to summer and winter breaks, on Saturdays and/or Sundays, and/or per diem. Students who do not make nursing school their priority risk course and/or clinical failure. When failures occur, students drop a

cohort, which creates additional time and financial resources for progression and is on a space-available basis.

How do I obtain CNA employment?
After grades are posted for the second junior semester, students are eligible to pursue CNA employment per the OSBN through a certification exam and a letter of endorsement from the dean, which the student must request via email, while also providing the following details: their name, student ID#, date of the letter of admission to the BSNDP, and current nursing GPA. CNA and CMA employees must stay within their scope of practice; however, we encourage students to view the work of a nursing or medical assistant simultaneously through the lens of the Nursing Process (Assessment, Nursing Diagnosis, Outcomes Identification, Planning, Implementation or Intervention, and Evaluation). Time spent as an "assistant" will be relatively brief. Consider the implications of role confusion and adjustment, limited scope of contribution, and necessarily stunted skills.