

**RS** RUSSELL SAGE COLLEGE

Department of Nursing

**BACCALAUREATE PROGRAM  
STUDENT HANDBOOK**

2025-2026



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\* These signed original forms will be placed in your student files in the Nursing Department

## PROGRAM ACCREDITATION

The Department of Nursing has earned a reputation for excellence.

### ACCREDITATION

The baccalaureate degree program in nursing, master's degree program in nursing and post-graduate APRN certificate program at Russell Sage College are accredited by the New York State Board of Regents New York State Education Department Office of the Professions. Education Bldg., 89 Washington Avenue, 2nd Floor West Wing, Albany, NY 12234, 518-474-3817. [www.op.nysed.gov/prof/](http://www.op.nysed.gov/prof/)



The baccalaureate degree program in nursing, master's degree program in nursing and post-graduate APRN certificate program at Russell Sage College are accredited by the Commission on Collegiate Nursing Education 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791. <http://www.ccneaccreditation.org>

The Department is also a member of the American Association of Colleges of Nursing (AACN), and the Council of Deans of Nursing of Senior Colleges and Universities in New York State.

## INTRODUCTION

Welcome to the Nursing Program at Russell Sage College (RSC). We hope your experiences here will be exciting and challenging. To facilitate your progress through the program, faculty and students have compiled this handbook to guide you through academic planning and acquaint you with the Nursing Program Mission, College Mission & Philosophy, the faculty, program requirements and other department policies and procedures that faculty have established to guide students through the educational process. Also included is a section on awards and honors given to nursing students throughout their years at RSC. This handbook supplements the RSC catalog and student handbooks.

Please refer to this handbook throughout your time in the nursing program. By accepting admission into this program the student assumes responsibility for all professional behaviors, policies and procedures cited in this handbook, as well as those in the College catalog. This handbook is updated annually. Students are expected to review this document at regular intervals to be aware of these changes.

We are pleased you have chosen to become a registered nurse. We wish you every success in your chosen career.

*Nursing Department Faculty and Staff*

\*Each new academic year may have an updated handbook that will supersede the previous academic year.

## ORGANIZATION OF THE DEPARTMENT

The Nursing Department at Russell Sage College (RSC) offers three nursing degree programs: Undergraduate, Graduate and Post-Masters Programs. The Master's program includes both Master's Degrees and Post Master's Certificate Program. The leadership in the Nursing Department includes a Chairperson, a Graduate Program Director, and an Undergraduate Program Director.

### MISSION AND VISION STATEMENT

#### **Russell Sage College Nursing Department Mission**

We prepare and empower dynamic leaders through the integration of arts and sciences for excellence in nursing practice, education, research, and community engagement across a global pluralistic society. To become individuals who will BE, KNOW, & DO.

Our motto is: The Sage Nurse CARES.

#### To Be

- Loving
- Kind
- Caring
- Compassionate
- Trusting
- Authentic
- Engaged
- Ethical
- A leader
- Spiritual

#### To Know

- Empirically
- Personally
- Aesthetically
- Ethically
- Emancipatory

#### To Do

- Integrating the theoretical frameworks of Patricia Benner ([Petiprin, 2016](#)) and Jean Watson ([Watson Caring Science Institute, 2020](#)) the Sage nurse CARES
- **CARES GUIDELINES FOR PRACTICE MODEL © FOR CLINICAL** (See Appendix A) through the following practice:
  - C- Condition or Concept (understanding the human condition through a conceptual framework)
  - A- Assessment (critically and holistically assessing)
  - R- Restoration of health from the altered human condition and reducing risks for alterations through intervention, prevention, & health promotion
  - E- Education & Prevention
  - S- Safety & Stewardship

## **Russell Sage Nursing Department Vision**

Achieve distinction and excellence in professional nursing education, practice, research, and community engagement. The Russell Sage College Department of Nursing strives to prepare nurses to practice in a variety of innovative health care settings within a context of rapid global and technological change. Baccalaureate and Graduate preparation provides the essential components of a nursing career in the challenging practice environment of nursing and health care.

*Reaffirmed 8/23/2023*

## **Theoretical Frameworks**

**Patricia Benner (Benner 1984, Benner 2011) ([Petiprin, 2016](#))**

### **Benner's Domains**

1. Helping Role
2. The Teaching and Coaching Function
3. Diagnostic and Patient Monitoring Function
4. Effective Management of Rapidly Changing Situations
5. Administering and Monitoring Therapeutic Interventions and Regimens
6. Monitoring and Ensuring the Quality of Health Care Practices
7. Organizational and Work Role competencies

**Jean Watson ([Watson Caring Science Institute, 2020](#))**

### **The Caritas Processes**

1. Practicing Loving-Kindness, Compassion and Equanimity Toward Self and Others
2. Being Authentically Present: Enabling Faith/Hope/Belief System; Honoring Subjective Inner Life-World of Self and Others
3. Cultivating One's Own Spiritual Practices; Deepening Self-Awareness; Going Beyond Ego-Self
4. Developing and Sustaining a Helping/Trusting Authentic Caring Relationship
5. Being Present to, and Supportive of, the Expression of Positive and Negative Feelings
6. Creatively Problem-Solving, 'Solution Seeking' Through Caring Process
7. Engaging in Transpersonal Learning Within Context of Caring Relationship; Staying Within Others' Frame of Reference
8. Creating a Healing Environment at All Levels
9. Assisting with Basic Needs as Sacred Acts, Touching Mind/Body/Spirit of Others; Sustaining Human Dignity
10. Opening to Spiritual, Mystery and Unknowns; Allowing for Miracles

American Nurses Association Code of Ethics for Nurses (ANA, 2015)

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

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

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

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

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

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

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

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

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

## GOALS OF THE BACCALAUREATE PROGRAM

UPON COMPLETION OF THE BACCALAUREATE PROGRAM THE GRADUATE WILL:

- Integrate, translate, and apply established and evolving nursing science and ways of knowing within the context of theoretical constructs and other foundational content in liberal arts, natural, and social sciences.
- Provide person-centered, evidenced-based care with compassion, respect, and cultural humility to individuals, families, and populations.
- Promote health equity across the continuum of care through health promotion and prevention, advocacy, population health assessment and engagement, and advanced public health preparedness by incorporating social determinants of health through community partnerships.
- Use critical thinking to understand, translate, synthesize, apply, and disseminate nursing scholarship to advance evidence-based, quality healthcare for individuals, families and populations.
- Promote effective, evidence-based care to individuals, families, and populations by adhering to established and emerging standards of care within a culture of safety.
- Collaborate with individuals, families, populations, interprofessional teams and key stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes (e.g. individual, professional, system).
- Apply systems-level thinking to effectively and proactively coordinate resources to provide safe, equitable, and cost-effective care in various healthcare delivery environments to diverse individuals, families, and populations.
- Demonstrate effective patterns of communication through the use of information technology in accordance with best practices, professional and regulatory standards to enhance clinical judgment and strengthen nursing care and outcomes.
- Demonstrate cultivation of a professional identity, including the behaviors of accountability, ethical understanding, and professional comportment, that reflects nursing's characteristics and values.
- Participate in activities and self-reflection to foster personal health, resilience, and well-being; contributes to lifelong learning; and supports the acquisition of nursing expertise and the assertion of leadership.

*Revised 5/16*

*Reviewed 5/19*

*Revised 8/23*

*Revised 5/24*

## NURSING CURRICULUM and CONCEPT-BASED LEARNING

### **Conceptual Learning**

Conceptual learning is increasingly viewed as a major trend for the future of education—not in nursing alone, but across numerous disciplines. This belief is based on the premise that *concepts* can be used effectively as unifying classifications or principles for framing learning while knowledge increases exponentially (Giddens, 2021).

What is a *concept*? Simply stated, a concept is an organizing principle or a classification of information. A concept can be limited or complex in scope and can be useful as a basis for education from preschool through doctoral education. In advanced applications, concepts are considered building blocks or the foundation for theory (Giddens, 2021).

By gaining a deeper understanding of a core set of concepts, a student can recognize and understand similarities and recurring characteristics, which can be applied more effectively than memorized facts. Teaching conceptually turns traditional learning upside down, focusing on generalities (concepts) and then applying this understanding to specifics (exemplars), instead of the traditional educational approach that focuses more heavily on content and facts (Giddens, 2016).

### **Concept-Based Curriculum**

Using Giddens Concepts for Nursing Practice (Giddens, 2021) you will learn to make connections and see patterns that will help you understand: the health care recipient (person), health and illness phenomenon (health), how the environment affects the two, and also, how you as a registered nurse (RN) (nurse) will understand and manage care. As you learn a concept, you will be able to apply the elements of the concepts to every developmental level. For example, when you learn about gas exchange you will understand what gas exchange is, how it affects the person who you are taking care of at any age, and what your role as the RN is in managing the condition or concept. Lynn Erickson (2014) believes that when we structure education using concepts, the learner will be able to think critically, reflectively, and creatively. Russell Sage wants our nurses to be critical, reflective, and creative thinkers. Your knowledge acquisition will occur through cognitive, psychomotor and affective learning domains.

[RSC Undergraduate Nursing Program is a proud recipient of AACN's Competency-based Education for Practice-Ready Nurse Graduates initiative](#) (see Appendix F additional information).

## ADVISEMENT AND REGISTRATION

[Russell Sage College - Academic Advising](#)

[Russell Sage College BS Nursing Program Plan](#)

[Russell Sage College RN-BS Nursing Program Plan](#)

### **Advisement**

- Each student will be assigned a professional academic advisor for the first three semesters of study during General Education coursework. Nursing Faculty Advisors will take over advisement the semester prior to beginning nursing courses. The names of the advisors are found on Self Service, see Program Evaluation or Student Profile.
- Upon admission to the nursing program, students receive a program plan which identifies required courses.
- It is ultimately the responsibility of the **STUDENT** to be familiar with all academic requirements for graduation when planning the academic program and verify their progress towards graduation.
- Each student must be aware of the all-college general education requirements, academic standards, and policies regarding transfer credit and institutional credit (i.e. 45 credits must be from Russell Sage College).
- Students are expected to attend group advising sessions every semester. Students unable to attend group advising must reach out to their faculty advisor. Changes in the program plan **MUST** be approved by the faculty advisor. Failure to obtain faculty approval may result in delayed progression. Faculty advisors can assist students who are experiencing academic difficulties and should be utilized as a resource for the student.
- Course registration may occur only after communicating with the faculty advisor and a student is “cleared” to register.
- Registration is then completed online via Self Service by the student.

### **Planning Your Courses:**

- You will receive an email notifying you of your group advising session.
- You should review your **STUDENT PLANNING** and tentative course choices for the following semesters. Always be aware of total credits needed, general education requirements, pre-requisites and liberal arts credits.
- Communicate/Meet with advisor to:
  - Plan schedules and verify program plans.
  - Remember you are required to follow the specified sequence in nursing courses.
  - Discuss any academic issues, concerns, and successes. Ask if there are any academic/midterm issues that you should be aware of.
  - **Reminder: The student is ultimately responsible for the accuracy and completeness of their program plan.**

[Accessibility Services](#)

[RSC Solutions Page](#)

[Academic Advising](#)

## DEPARTMENT OF NURSING

### PROFESSIONAL PRACTICE/CODE OF ETHICS

Students are to act professionally and practice nursing following the American Nurses' Association [Standards for Excellence](#) (ANA, 2018) and the [New York State Nurse Practice Act](#) (NYSED Office of the Professions, 2018) including the [American Nurses' Association Social Networking Principles](#) (ANA, 2011) and the [Health Insurance Portability and Accountability Act of 1996 \(HIPAA\) for professionals](#) (U.S. Department of Health and Human Services, n.d.) The Department of Nursing holds students to these standards in the classroom and clinical settings. Any violation of these standards and/or codes may result in course failure at the time of occurrence and may result in dismissal from the nursing program. **See Appendix C and Appendix D.**

Nursing courses provide an opportunity to build on moral responsibility as it relates to nursing care of clients, families, and communities. This is operationalized through accurate documentation, maintenance of confidentiality, safety, and accountability. The Nursing Department supports the American Nurses' Association Code for Nurses and the ANA Standards of Clinical Nursing Practice. The ANA Code for Nurses includes 11 statements based on the ethical principles of autonomy, beneficence, non-maleficence, justice, veracity, and fidelity. The Department seeks to embed these principles into students' clinical and academic practice in order to be prepared to meet the Standards of Clinical Nursing Practice.

When a violation is alleged, faculty responsible for courses or clinical supervision/internships will contact the designated faculty or program directors as soon as possible after the incident for faculty to discuss appropriate action. Any student found in violation of the department's code of ethics will not be allowed to withdraw from the course and may result in course failure.

### PROFESSIONAL CONDUCT

Students are representatives of Russell Sage College and are to act professionally in all aspects of their educational experience including the classroom, clinical and community settings.

It is inappropriate and considered unprofessional behavior to ask faculty for extra points or extra credit to raise a course grade. Grading criteria are determined and clarified at the start of each semester in each course syllabus.

Communication modes include but are not limited to:

- Class Interactions
- Class Presentations
- Clinical and Lab Settings
- Sage External Community Encounters (i.e. Students Services, Convocations)
- Verbal (i.e., voicemail, classroom and clinical, individual and group presentations)
- Written (i.e., e-mail, Moodle, Sage Advisor, scholarly papers [see Academic Honesty statements below], clinical documentation and assignments)

Failure to communicate appropriately may constitute unprofessional behavior and be subject to disciplinary action. **See Appendix D.**

Written Work or Presentations:

Faculty are using the screening program, [Turnitin.com](https://www.turnitin.com) to monitor for plagiarism. Papers may have a total similarity rate of no more 20%, with each section no greater than 2% similarity. Any similarity rates above these parameters may be considered plagiarism and will result in the initiation of the institution's [Academic Integrity](#) policy.

The Nursing Department uses the APA's Publication Manual, 7<sup>th</sup> edition, as the current style guide. Please refer to this manual for plagiarism and referencing guidelines (plagiarism section 8.2 p. 254).

Furthermore, per [Russell Sage College's 2025-2026 Student Handbook and Code of Accountability](#), "submitting substantial portions of the same academic work for credit more than once without authorization" (also referred to as "self-plagiarism") is also considered academic dishonesty/misconduct and subject to disciplinary action (p. 78).

Testing:

The Nursing Department has strict policies on testing. Testing will be conducted using Examsoft. This is a secure testing site. **An additional fee is required.** Removal or attempt to remove questions (e.g. quizzes, tests,) from a class or taking an image of online quizzes or exams is prohibited and is considered academic dishonesty.

Any violation of professional conduct will be subject to the conditions outlined in the Department of Nursing Student Handbook and Russell Sage College Student Handbook. Records of violations will be kept in student folders.

## CIVILITY

*It is everyone's responsibility to create a positive learning environment in the classroom and in the clinical setting. Your faculty will hold you accountable for the following actions in order to demonstrate civility and professionalism at all times.*

### **Be responsible for your own education**

Faculty will create an active learning environment – willingness to listen, asking appropriate questions, and completing the necessary work will add to your positive learning experience. Students are advised to limit employment hours to less than 15 hours a week and make coursework a priority.

### **Accept that Faculty's policies, procedures and teaching styles may vary**

Assignments and learning activities are at the discretion of faculty. Each faculty member has the freedom and authority to set their own course policies, learning activities, and guidelines.

### **Attend class/lab**

Students who attend all scheduled learning experiences, listen to the faculty, ask questions, and take good notes are more likely to pass with a higher grade. If you must miss a learning activity, contact your course faculty and clinical faculty at a minimum of **four hours** in advance with an email or previously approved communication modes. Failure to contact faculty may result in unexcused absence.

### **Attend clinical**

Attendance at clinical is mandatory for successful completion of the course. The only excused clinical absences are for illnesses or family emergencies/losses or [religious observance](#) in accordance with College policy. These hours need to be completed prior to the end of the semester during the clinical makeup days and will incur a makeup fee of \$250/makeup day. Unexcused clinical absences will be rescheduled based on clinical availability. If no makeup is available, the student will receive an incomplete in the course and will be required to makeup up those clinical hours the following semester when makeup time is available as determined by faculty. Excused absences will be given priority for clinical makeup time, but may need to be scheduled the following semester (see clinical expectations, Appendix E-2). Missing 20% or more of total clinical hours may result in a course failure.

### **Be on time**

The faculty will start class/clinical/lab on time and dismiss when appropriate. DO NOT ask your clinical instructor to leave early. Arriving late **is considered unprofessional behavior** and disturbs everyone. At RSC, and in the clinical (work) setting, tardiness communicates lack of interest and lack of dependability. If you will knowingly be late, discuss this with your faculty member ahead of time. Lateness greater than 15 minutes at a clinical site is not acceptable and the student will be sent off the unit and will need to make up clinical and pay the required fee of \$250/makeup (see clinical expectations, Appendix E-2). Students may not come and go from their clinical site midday without prior notice and approval from the clinical faculty (e.g. leaving and returning to the hospital without faculty knowledge).

### **Clinical makeup**

If a clinical make-up day is required based on unexcused absence or tardiness (late to clinical as indicated in the course syllabus), makeups will be arranged if possible considering clinical placement accommodations at the discretion of the clinical agency. Lack of available clinical makeup days will result in an incomplete grade for the course. Excused clinical absences will receive priority for makeup days. Make-up clinical hours, subject to faculty discretion, can not exceed 20% of total clinical hours/course.

### **Come to class/clinical/lab prepared – Turn your work in on time**

Complete assigned readings and learning activities before coming to class/clinical/lab.

Be prepared to be an active participant in your learning.

### **Practice civility**

Remember in college, as in every other area of life, politeness and respect matter.

- Do not have private conversations with your neighbors during class/clinical/lab.
- Turn off cell phones and electronic devices. The noise is distracting to other students. If a necessary communication needs to occur during a class/lab/clinical, please discuss with faculty prior to the start of class and step out to be respectful of your classmates and the learning environment.
- Do not send text messages during class/clinical/lab.
- Respect all opinions. Others may have different ideas and opinions from yours, but they deserve the same level of respect from you as you wish from them.

### **If you are concerned about your coursework, seek assistance from your faculty.**

In addition to your faculty, assistance is available through the [Academic Support Center](#).

In the event that a student has a complaint involving a faculty member or wishes to question a grade, the student should follow the procedures listed below:

- Meet or speak with the instructor involved. In the best interests of both parties, resolution ideally should be reached at this stage.
- Meet or speak with the instructor's department chairperson or program director if resolution is not reached between the student and instructor.
- Meet or speak with the Dean of the College only in the event that the student feels procedures were not followed.

The Provost is the final decision-making authority.

[Appeals of Academic Issues](#)

## **MISCONDUCT/UNPROFESSIONAL BEHAVIOR**

The following are examples of clinical misconduct/non-professional behavior:

- a. Providing nursing care in an unsafe or harmful manner: including performing a procedure incorrectly and/or without faculty/nurse guidance; negligently, willfully or intentionally resulting in physical or mental harm to a client. Failing to document care accurately and completely.
- b. Disrespecting the privacy of a client in direct violation of [HIPAA](#): this includes using Protected Health information (PHI)\* about a client (full name, last name or patient information of any sort that could identify the patient) in written assignments that will be removed from the clinical area such that the patient could be identified; discussing confidential information in inappropriate areas, discussing confidential information about a patient with third parties; and referencing or discussing patients on social networking sites and devices. [ANA Social Media Principles](#).
- c. Falsifying patient records or fabricating nursing care or patient experiences: this includes fabrication in written materials and verbal reports for the clinical area as well as written material and verbal reports. It also includes fabrication or exaggeration of the number of hours reported as being completed for clinical experience.
- d. Failing to report an error or omission in treatment or medication: failure to report the error or omission to the appropriate people including nursing staff on the unit and clinical instructor.
- e. Engaging in behavior that is contradictory to professional decorum such as exhibiting aggressive or intimidating behavior (e.g., profanities, threats, loud talking, rudeness, verbal coercion) toward or in the presence of faculty, staff, peers, patients/clients or agency personnel. Additionally inappropriate communication with patients, families or staff without review and approval from clinical faculty or designee is not permitted.
- f. Attending capstone clinical without providing/submitting the student and preceptor work schedule.
- g. Not showing up for clinical and not contacting the instructor prior to absence.
- h. Attending clinical without up-to-date Castlebranch documents.
- i. Arriving late to the clinical setting.

[RSC Code of Accountability](#)

[Affirmative Action and Title IX](#)

**RUSSELL SAGE COLLEGE  
NURSING DEPARTMENT  
UNSAFE POLICY AND PROCEDURE**

**POLICY:**

An unsafe occurrence is an event or situation in which the student demonstrates behavior or makes decisions which actually or potentially harms a client or violates standards of professional conduct. RSC shall not knowingly assign to a facility, nor permit to continue in assignment, any student who poses a direct threat to the health or safety of others.

An action is considered unsafe when the patient, patient's family, student, faculty, healthcare agency, or college is placed in jeopardy. Every student in the program is expected to act in a safe and ethical manner consistent with the [ANA Code of Ethics for Nurses](#) (ANA, 2025). Unsafe practice in the clinical area may result in a grade of "F" for the course regardless of the student's grade on the theoretical portion of the course.

1. Unsafe practice includes:
  - a. Failure to practice within the guidelines of:
    - i. Russell Sage College Nursing Student Handbook
    - ii. The American Association of Colleges of Nursing: The Essentials of Baccalaureate Education for Professional Nursing Practice
    - iii. New York State Nurse Practice Act
    - iv. ANA Code of Ethics, including Professional Standards, Policy and Practice (as first introduced in Nursing 201)
    - v. Procedures of the healthcare agency
2. Specific examples may include, but are not limited to:
  - a. Nonadherence to seven rights of medication administration
  - b. Abandonment of patient, i.e. leaving unit without reporting off to staff nurse and faculty member
  - c. Lack of accountability and responsibility
  - d. Failure to respect the individual client, health team member, faculty, and self
  - e. Practicing the profession while the ability to practice is impaired by alcohol, drugs, physical disability or mental disability. However, any student with a disability who can safely perform the essential functions of his or her clinical position with or without a reasonable accommodation shall not be deemed to be engaging in an unsafe practice.
  - f. Negligence in patient care.
  - g. Failure to report changes in client's condition or plan of care.
  - h. Substantiated act(s) of patient abuse, either physical or verbal
  - i. Inappropriate handling or touching of clients.
  - j. Failure to observe isolation procedures and/or use appropriate personal protective equipment (PPE) and infection control measures.
  - k. Failure to adequately document and/or report nursing care given.
  - l. Inadequate preparation for assuming responsibility for client care.
  - m. Violation of HIPAA regulations (i.e. breach of clients' confidentiality).

**Any action deemed unsafe by clinical and/or course faculty will result in documentation of the incident/action by the faculty member using the Unsafe Occurrence Form (Appendix C).**

**Any sanction as an outcome of the incident on Appendix C can be appealed by the student through the Nursing Department Specific Appeal Process cited below**

**All nursing students are held to the college standards for professionalism and academic integrity outlined in the [RSC Student Handbook](#). These standards include, but are not limited to, plagiarism, cheating, academic dishonesty, and unprofessional behavior. Any violation of these standards will be documented utilizing the Professional Integrity Form (Appendix D). Any sanction on Appendix D can also be appealed through the same Nursing Department Specific Appeal Process, outlined below.**

### **NURSING DEPARTMENT SPECIFIC APPEAL PROCESS**

#### **Nursing Academic Standards Process:**

When any unsafe behavior and/or unprofessional behavior/academic dishonesty occurs, the student will be notified of the occurrence and a meeting with the student and faculty member will be held and the student will receive a copy of either the Unsafe Occurrence Form (Appendix C) or the Professional Integrity Form (Appendix D) depending on the observed behavior. The sanction will be reviewed with the student and stated on the form. If the student chooses to appeal the sanction, the appeal process is as follows:

- a. The student submits a written statement appealing to the Department Chair within two (2) business days.
- b. The Department Chair convenes a meeting of the Nursing Department Professional Behavior Committee (PBC) composed of nursing faculty. This committee will meet within five business days of receiving the student appeal or as soon as is reasonably possible under the circumstances. The committee will provide a recommendation to the Chair as to whether the sanction is upheld or another sanction/consequence is warranted (i.e. course failure, program dismissal).
- c. The Department Chair will review the recommendation of the Nursing Department PBC and render a decision. The student and Director of Undergraduate Nursing will be notified of the decision in a timely manner.
- d. The student may appeal this decision and prepare a statement of appeal to the Dean of the College explaining the behavior within two (2) business days. The student will be informed of the result of the appeal in a timely manner.
- e. The student may appeal this decision and prepare a statement of appeal to the Provost of the College explaining the behavior within two (2) business days.

During this time, the student may continue in all theory courses, including the theory components of another clinical course, but may only continue in the clinical component of all courses if deemed appropriate by the course faculty and Nursing Chair.

**If the sanction on either Appendix C or D is clinical failure or course failure, the student may not withdraw from that course.**

## ACADEMIC MATTERS

Students are required to attain and maintain a Nursing GPA of 3.000. In order for a student to enroll in Nursing courses, a minimum Nursing GPA of 3.000 is required. If a Nursing GPA of 3.000 is not achieved, the student will be placed on probation and may not progress in the Nursing sequence. The student will be provided a single semester to increase their Nursing GPA to the required 3.000 by either repeating a Nursing Course and/or required prerequisites. If the required Nursing GPA of 3.000 is achieved, the student will be allowed to progress in the Nursing sequence and come off probation. After one semester, if the cumulative Nursing GPA of 3.000 is *not* achieved, the student will be dismissed from the Nursing program.

**NOTE: STUDENTS MAY ONLY BE ON PROBATION ONCE WHILE IN THE NURSING PROGRAM AND MAY ONLY REPEAT ONE NURSING COURSE.**

### **Maintenance of Matriculation**

In order to maintain matriculation in the undergraduate nursing program, the nursing GPA must be 3.000 or greater. The following policies will be used in Academic Standards decisions:

- Students may not enroll in any nursing course (NSG prefix courses) without a cumulative nursing major GPA of 3.000 or higher.
- Students not enrolled in nursing courses (NSG prefix courses), but with nursing listed as their program major who do not achieve a 3.000 nursing major GPA at the end of each semester will receive an **early warning**. Please work with your advisor to create a plan to increase your nursing GPA.
- Student progress in the nursing program for students in nursing courses (NSG prefix courses) is reviewed at the end of each semester by the program's undergraduate Academic Standards Committee. Students who do not meet the 3.000 nursing major GPA requirement will be placed on program probation and will not be permitted to progress in the nursing sequence.
- A student must receive a grade of "C+" or higher in all Nursing courses. Failure to obtain a "C+" will result in academic probation.\*
- Failure to meet academic standards and/or probation requirements will result in dismissal from the Nursing program.

**\*For students who started their 200-level nursing courses in the Spring 2023 semester only, the minimum passing grade in all nursing courses is a "C" or higher.**

### **Nursing Academic Standards**

Students are responsible for reviewing the academic standards for nursing as outlined in the appropriate College Catalog and the Nursing Department handbook. **The first time** a student's GPA falls below 3.000 OR a grade of **less than C+** is earned in ANY nursing course, the student's academic standing will be reviewed by the Nursing Academic Standards committee and the Chair of the Nursing Department. Following this review, at the end of the academic semester **the student will be placed on probation and will not be allowed to progress in the nursing program. Students may not appeal probation.** The student will be permitted to retake only one nursing course at a time while on probation. Recommendations from the committee will be given to the student to improve the student's academic standing within the program. The student must

adhere to the recommendations. **If the student has previously repeated a nursing course, the student will be dismissed from the program.**

**The second semester that the student's cumulative nursing GPA falls below or remains below 3.000, the student will be dismissed from the Nursing Program. Once a student has been dismissed from the Nursing Program, they may not reapply or be readmitted to the Nursing Program at Russell Sage College.**

- If the student is not in agreement with the decision **to dismiss**, the student may appeal, within **2** business days, to the Undergraduate Dean of Russell Sage College (rscdean@sage.edu)
- If the student is not in agreement with the decision from the Dean, a final appeal may be made, within **2** business days, to the Provost of Russell Sage College.

### **Nursing Program Specific Withdrawal Policy**

A withdrawal after the end of the Add/Drop period is considered an attempt of a course. Students are only allowed to repeat nursing courses once.

# ACADEMIC CATALOG

## [Russell Sage Academic Catalog](#)

### NURSING DEPARTMENT POLICIES

#### **General Nursing Policies**

- It is a policy of the Nursing Department that failure in the clinical component of a course constitutes course failure.
- If a student fails either the clinical or theory portion of a nursing course, they must repeat the entire course which includes theory and clinical.
- In each course, a syllabus is distributed at the beginning of the semester. Requirements for successful completion of the course are stated in the syllabus. It is the student's responsibility to become familiar with course and clinical requirements.
- A student who has not taken a college nursing clinical course for one year or more must successfully validate nursing skills prior to reengaging in clinical course work. The validation must be completed and passed a minimum of one week prior to the semester in which the next clinical course is scheduled. The student must remediate for at least 10 hours prior to validation. The student will be charged a fee of at least \$500 for this remediation and validation. Students will have the opportunity to attempt this validation once. Failure to successfully complete the skills validation may result in course failure. If the student is currently a practicing registered nurse, they are exempt from this policy. Any missed clinical day due to this validation policy will be subject to the missed clinical fee of \$250 in addition to the revalidation fee of \$500.
- Students may withdraw from a course per college policy, however, placement in subsequent clinical rotations is not guaranteed and is based solely on facility availability. Students may not be able to retake the withdrawn course in the subsequent semester if clinical placements are not available.

## Calculating Nursing GPA

The nursing GPA includes all required support courses and nursing courses taken at Russell Sage College. The quality points for each completed course grade is multiplied by the number of credits the course is worth. All the multiplied points are added up and divided by the total number of credits completed.

The following support courses are included in the nursing GPA: PSY101, PSY202/208, SOC 350, 1 SOC/ANT course, CHM 103/111 or Physics 101, BIO201 and 202, BIO 208 and SCI 120.

\*Only those courses that were taken at Russell Sage College will be calculated in the Nursing GPA. Transferred course grades are not calculated in the RSC Nursing GPA.

**GPA Table**

Grade	GPA	Grade Range	
		Low	High
A+	4.0	97	100
A	4.0	93	96
A-	3.7	90	92
B+	3.3	87	89
B	3.0	83	86
B-	2.7	80	82
C+	2.3	77	79
C	2.0	73	76
C-	1.7	70	72
D+	1.3	67	69
D	1.0	63	66
D-	0.7	60	62
F	0	0	59

### **GPA Calculation Example:**

Course	Credits	Grade	Quality Points	
NSG 201	4	B	3	12
NSG 207	4	B+	3.3	13.2
NSG 212	4	B+	3.3	13.2
Total:	12			38.4

$$38.4/12 = 3.200 \text{ GPA}$$

## **Attendance Policy For The Nursing Program**

Attendance at all classes, college and clinical laboratories is expected. Students should also refer to the RSC Catalog regarding attendance. Absences or lateness may jeopardize a student's standing in the course or nursing program and will be evaluated on an individual basis by the faculty. This may include a deduction of points from the final course grade per individual faculty discretion.

This includes class, lab and clinical.

A change in health status and/or medical excuse causing long absences, which cannot be made up during the regular semester will require the student to withdraw from the course, and retake the course, or request a grade of Incomplete from the course faculty. [College Policy for Incomplete.](#)

## **Transportation**

Students are responsible for providing their own transportation to and from clinical facilities. Clinical facilities are located throughout the Capital Region and nearby counties; placements are based on optimal experience for students. Students need to schedule their responsibilities (family, work, classes, etc.) so that attendance requirements are met.

## **Nursing Skills Lab**

The nursing skills lab is a learning resource lab located in the McKinstry 3<sup>rd</sup> Floor and Kellas basement. The labs are open during the semester so students can practice their skills in performing technical procedures and critical thinking. The labs provide an excellent opportunity to become proficient with equipment before using it in the clinical setting. Students are strongly encouraged to take advantage of this learning activity.

## REQUIREMENTS FOR CLINICAL COURSES

### Annual Health Evaluation

The completion of an **annual** health evaluation is your professional responsibility. Evidence of physical well-being must be submitted to [Castlebranch](#) **PRIOR** to any clinical experience, and **BE IN EFFECT FOR THE ENTIRE SEMESTER**. The following are requirements for our clinical placements. Please review these requirements with your physician. All health forms are in the Undergraduate Nursing Office.

- a. Proof of physical exam needs to be updated annually. If your physical exam expires during the semester you will be unable to attend clinical.
- b. Health agencies have become very strict about student's immunization records. Please be sure this section is completely filled out. You will not be able to start clinical without completion of the form.
- c. The NYS Health Department requires that any individual born after January 1, 1957 must show proof of two measles (Rubeola) immunizations or proof of the disease (titer).
- d. Varicella vaccines or proof of disease is also a requirement.
- e. Also, TB Screening must be a PPD or Mantoux, the Tine Test is not acceptable evidence. This must be completed annually.
- f. Proof of immunization with Hepatitis B Vaccine is also required (completion or declination).
- g. Some facilities require drug testing prior to starting clinical. You will be notified if you need to provide this testing.
- h. [NYS Department of Health](#) is requiring annual flu shots for healthcare workers. You may decline a flu shot, but will be required to sign declination paperwork and wear a mask to all clinical agencies during active flu season per NYS DOH. Policies differ by agency.
- i. N-95 fit testing may be required prior to clinical.

It is suggested that annual physicals, annual PPD tests, CPR certifications, and malpractice insurance be started and renewed every year in early May if possible, or during the summer (July), or mid-December/early January to avoid expiration during a clinical semester. Students whose insurance will not cover a physical during the needed time frame (mid Dec./Jan. or Summer) may use the Wellness Center. *\*Be aware that the Wellness Center is not open during school breaks.*

Requirements for Health and Immunization status are subject to change. Students are responsible for maintaining current health records.

### **Cardio-Pulmonary Resuscitation Certification (CPR)**

Students are required to maintain current American Heart Association (AHA) CPR certification (*CPR for the Healthcare Provider: Basic Life Support*). The class covers adult, infant and child CPR, choking, two rescuer CPR and pocket mask, AED). A copy of current CPR certification must be on file to the department. You can access American Heart Association classes via REMO (Regional Emergency Management Organization) at [www.remo-ems.com](http://www.remo-ems.com). Be aware that you must demonstrate competence with a certified AHA trainer to receive a CPR card. Many facilities are requiring (AHA) CPR for the Health Care Provider. **American Red Cross CPR certifications are no longer accepted for this requirement.**

### **Liability Insurance**

Students are required to purchase their own professional liability insurance at \$1,000,000/3,000,000. Liability insurance may be purchased with forms obtained in the Department of Nursing. Evidence of current liability insurance must be on file in the department.

### **Licensure For RN Students**

RN to BS students must present proof of current licensure to participate in courses with a clinical component (NSG 402 and NSG 404). This is to be kept on file through Castlebranch as with other required documentation.

**PLEASE KEEP COPIES OF ALL DOCUMENTS SUBMITTED TO CERTIFIED BACKGROUND FOR YOUR OWN RECORDS.**

*Failure to comply will result in dismissal from the clinical component of courses. The student will be responsible for the cost of clinical make-up time, at \$250.00 per day.*



### **Equipment Required**

1. Wrist watch with second hand
2. Sphygmomanometer for taking blood pressure
3. Stethoscope with bell and diaphragm

### **Uniforms**

#### **[K & M Uniforms.](#)**

Student uniforms are required for the clinical components of the nursing courses.

- Russell Sage ID required in all settings
- Uniform top with hunter green scrub bottoms
- Russell Sage Nursing Identification Badge
- Sleeve patch (left sleeve)
- Solid color shoes
- White lab jacket - optional (No sweatshirts or sweaters)
- Community Health: casual professional dress - refer to individual class dress codes



## STUDENT EXPENSE LISTS

These are the cost at time of print and may vary slightly

Expense	Cost
<b>Uniform</b> NSG 212 Faculty will post uniform details on course Moodle page.	\$100 estimate
<b>Stethoscope</b> MDF Stethoscope or Littmann Stethoscope Can be any color you choose	\$60-\$110
<b>Blood Pressure Cuff</b>	\$15-\$30
<b>Book Bundle</b> (with exception of 2-3 books outside the bundle)	\$1669.11
<b>Other Nursing Texts</b> (outside the bundle)	\$425
<b>Kaplan Fees</b> \$382.00 each in NSG 212 and NSG 333 (Already included as part of your tuition)	\$764 (total)
<b>Lab Fees</b> Three payments: \$300 in NSG 212, \$250 in NSG 323 and \$250 in NSG 333. (Already included as part of your tuition)	\$800.00 (total)
<b>Clinical Makeup Fee</b> For unexcused clinical absences (only if an absence occurs)	\$250 per absence
<b>American Heart Assoc. BLS Course</b> Every 2 years	\$100.00 (approx.)
<b>CastleBranch (Health Document Repository)</b> One time fee	\$49.99
<b>Professional Liability Insurance</b> Annual Fee	\$49.99 per year
<b>ExamSoft Testing Software</b>	\$46-\$48 per semester
<b>SafeMedicate Program</b> Dosage calculation education & testing. N212 faculty will give directions on how to purchase during the 1st week of classes.	\$55 per year (total \$110.00)

## PROFESSIONAL APPEARANCE AND PROFESSIONAL BEHAVIOR

*\*Faculty reserve the right to determine whether a student is safe to provide quality patient care in the clinical setting. Faculty may dismiss the student from the learning experience accordingly.*

- All students must meet the dress code standards for affiliating agencies. Students should be aware that they represent both Russell Sage College and the nursing profession and are expected to present themselves in a professional manner.
- Students must be physically and mentally prepared to attend clinical (for example, students are not permitted to work immediately prior to clinical experience).
- Professional attire must be worn during all educational presentations and events associated with nursing courses.
- For Community Health and Mental Health clinical settings, please refer to specific guidelines per course faculty/syllabi.
- Identification badges must be worn in the clinical areas at all times. All facility policies and procedures must be followed at all times.
- No visible clothing may be worn under the designated uniform, except a white short or long sleeve shirt. A plain white scrub jacket with the Russell Sage College emblem on the shoulder may be worn.
- Hair color must follow agency policy.
- Hair must be worn back and/or off the shoulders.
- Visible jewelry must be kept to a minimum. Piercings will be confined to the ears only with a small post earring(s). All other visible piercings must be removed. Must follow agency policy.
- Tattoo coverage must follow agency policy.
- Nails must be kept short and clean. No artificial nails are permitted.
- No perfume should be worn in the clinical area.
- No third-hand smoke - no odor of smoke of any kind should be on your clothing.
- Smoking is not permitted on any health institutional grounds per NYS law.
- The use, possession, sale, or other distribution, or cultivation of marijuana for recreational or medical purposes is not allowed in any RSC housing or at any other RSC property; nor is it allowed at any RSC-sponsored event or activity off campus
- Students should not leave clinical facilities without permission at any time.
- Students who are ill should contact their clinical faculty at least 1 hour prior to the start of the clinical day. Refer to Attendance Policy for the Nursing Program for further information.
- Uniforms are only worn in a clinical or lab situation when in the student role. Wearing the student uniform in any other employment or social situation is prohibited and is considered to be unprofessional.

**DEPARTMENT OF NURSING  
MEDICATION ADMINISTRATION POLICY**

**Guidelines for Medication Administration**

1. Students must complete all dosage calculation exams and all modules assigned within the SafeMedicate program for each program level (NSG 212 and NSG 323). Students must pass the medication assessment exams associated with the program level (NSG 212, NSG 323, NSG 333, and NSG 355) before administering medications in the simulation or clinical site. Students must pass the medication assessment exams with 100% accuracy prior to attending simulation or clinical. Students must remediate with their course instructor and complete assigned remediation assignments if unsuccessful prior to retesting. Until a student achieves 100% accuracy on the medication dosage test the student will pay \$250 for each missed clinical day. Students must follow all policy guidelines for the agencies.
2. Prior to the administration of any medication, the three checks of the 7 rights of medication administration must be followed. The drug, dose, route, time, patient and documentation will be verified by a faculty member or faculty designated clinical preceptor.
3. A faculty member or faculty designated preceptor must be present in a client's room for the administration of any medication. IV push medications may be given only under the direct supervision of the clinical faculty or designated RN preceptor.
4. Knowledge of the drug including therapeutic range/dose, frequency, action, drug/drug interaction, drug/food interaction, and side effects should be reviewed prior to administration.
5. Students may not access an automated medication dispensing system (i.e. Pyxis, Omni-Cell) without the clinical faculty member present. In NSG 450, the designated RN preceptors on a clinical unit will provide supervision for student medication administration. Students may not access controlled substances without a faculty member or designated preceptor present.
6. Unsafe medication administration may be grounds for failure of a clinical course.

\*Students who do not meet safety standards will be required to remediate in the lab or clinical setting to practice medication administration with faculty.

**Restrictions:**

- No blood products, chemotherapeutic agents, titrated IV drugs, or experimental drugs may be administered.
- Insertion of peripheral IV's are not permitted unless supervised in capstone with unit approval.

## STUDENT PROGRAMS, ACTIVITIES AND HONORS

### **Department of Nursing Committees**

Student representatives are sought to serve on departmental committees: Baccalaureate Program, Master's Program, and Department.

Students also serve on various departmental and ad hoc committees. Student input is an important factor in many departmental decisions. Students who are willing to participate on committees should notify the Director of the Baccalaureate Program.

### **Student Nurse Association of Russell Sage College (SNARSC)**

Russell Sage College has an active Student Nurse Association Chapter. This group provides opportunities to experience camaraderie, leadership, and responsibilities at the local, state, and federal levels. All nursing students are invited to join the Student Nurse Association and attend their meetings held throughout each semester.

### **Sigma Theta Tau International Honor Society of Nursing (SIGMA)**

[Sigma Theta Tau](#) is the international honor society for nursing. Sigma is committed to fostering excellence, scholarship, and leadership in nursing to improve health care worldwide. Nursing students at Russell Sage College who meet eligibility requirements will be invited for membership into Sigma and may apply to the Delta Pi Chapter. Students are eligible for induction in their senior year.

Students invited to apply must meet the expectations of academic integrity as described below.

- Completed 1/2 of the nursing curriculum
- Rank in the upper 35 percent of their graduating class

### **Financial Aid**

Within the Department of Nursing, the Julia O. Wells Scholarship Fund is available to provide financial assistance to students on a semester basis. Applications are available from the undergraduate secretary. Additional financial aid information regarding TAP, PELL, Stafford, loans/grants, Collegiate Science and Technology Entry Program (CSTEP), or Higher Education Opportunity Program (HEOP) information is available through the Student Financial Aid Office 518 292-1758 (SCA). Students who have tuition reimbursement benefits should fill out the "Student Tuition Sponsorship Agreement" form which also serves to meet the Health Alliance information requirements.

- Julia O. Wells Memorial Foundation, Inc. - The Foundation provides scholarship monies to the Department of Nursing for distribution to undergraduate, graduate, and doctoral students entering or continuing professional nursing education. Scholarships are provided to encourage and facilitate career opportunities for nurses and students and to foster and advance the visibility, prestige and perception of the profession of nursing.
- Health Systems Alliance Program - The program, a collaborative venture between Russell Sage College and companies/healthcare organizations in the area, allows employees to improve their job-related skills and knowledge, to acquire the education necessary to enhance their skills or prepare for career-related promotional opportunities. Russell Sage College will discount tuition if it is matched by tuition assistance provided by the participating employer.

Educational assistance benefits have traditionally included some or all of the financial support needed for career-related education. For more information about all levels of education contact the Office of Admission, Sage College of Albany at 518-292-8615

### **Student Awards**

The Sage Colleges Department of Nursing confers awards to graduating seniors and other students each Spring. Each award has specific criteria with which to select the recipient. Announcement of the awards takes place at the Baccalaureate ceremony in the Spring. Receipt of a letter from the Deans of Russell Sage College requesting attendance at Spring Honors Convocation should be acknowledged. **Attendance is expected.**

#### **RSC Nursing Student Awards:**

- THE LOUIS KARP AWARD:
  - To an outstanding baccalaureate nursing student for clinical performance.
- THE GERTRUDE E. HODGMAN AWARD:
  - To the nursing student who demonstrates active involvement in college and/or community affairs and who displays high professional goals in memory of Gertrude E. Hodgman, former chairperson, division of nursing.
- THE OLGA ANDRUSKI AWARD:
  - To a senior nursing student who is a scholar and a leader.
- M. GRACE JORGENSEN NURSING ACHIEVEMENT AWARD & THE BELLEVUE HOSPITAL NURSING ACHIEVEMENT AWARD:
  - To two third-year Russell Sage students majoring in nursing who display academic and personal excellence, who demonstrate interest in women's health, who show promise of making significant contributions to the health-related professions and who show interest in working in cooperation with others rather than in competition with others.\*
  - \*These two awards are given by Dr. Jorgensen (M. Grace Jorgensen's daughter) and need to be applied for by the students. The award applications are available in February for students who have completed NSG 323 the previous fall semester or are in NSG 323 in the spring semester. An essay is required that addresses women's health issues. Each award is substantial and applications and essays are screened by faculty.
- THE FUTURE NURSE LEADER AWARD: Sponsored by ANA-NY
- THE DAISY-IN-TRAINING AWARD

#### **RN-BS in Nursing Student Awards:**

- THE MARTHA KARP PALMER AWARD
  - To an outstanding Registered Nurse student.
- THE ROSLYN & MORRIS KOFFMAN NURSING AWARD
  - To a senior RN Nursing student.
- DEPARTMENT AWARDS
  - RN/BS Award
  - Excellence in Nursing
- COLLEGE HONORS
- RN/BS students may consult the college catalog for honors

**RUSSELL SAGE COLLEGE REQUIRED COURSES  
For Pre-Licensure Baccalaureate Student**

- Graduation Requirement: 120 credits - 60 Liberal arts, 54 Nursing, 6 Electives
- You may transfer up to 60 credits from an Associates Degree Program, or up to 75 credits from a Baccalaureate Program.
- A minimum of 45 credits must be taken at Russell Sage College, and the last 30 credits must be taken at Russell Sage College
- No nursing credits will be accepted from another nursing school.

The following list of courses is required of **Russell Sage College Students**.

<b>Required Support Courses</b>	<u>Credit Hours</u>
Biological Sciences <ul style="list-style-type: none"> <li>● BIO 201 and BIO 202: Anatomy &amp; Physiology I and II (8 credits)</li> <li>● BIO 208: Microbiology (4 credits): must be taken after BIO 201 &amp; BIO 202</li> </ul>	12
Physical Sciences <ul style="list-style-type: none"> <li>● Intro to Gen Chemistry I (CHM103 or CHM 111) (4 credits)   OR</li> <li>● General Physics I (PHY101) or equivalent (4 credits)</li> </ul>	4
Nutrition (SCI 120) (3 credits)	3
Intro to Psychology (PSY101) (3 credits)	3
Developmental Psychology (PSY 202 or 208) (3 or 4 credits)	3-4
Intro to Sociology (SOC101) (3 credits)	3
Research for the Professions (SOC 350) (3 credits)	3
<b>General Education Core - (15 credits) + General Education Distribution (21 credits)</b>	36
<b>Core Credits - WRT 101, WRT 201, RSC 101, RSC 201, RSC 301</b>	15.0
<b>Distribution Credits - Art, Humanities, Natural Science, Quantitative Reasoning, Social Science, Wellness/Thrive, Distribution Elective (3 credits each)</b>	21

### Required Curricular Pattern: Basic Freshman Plan of Study

Fall	Credits	Spring	Credits
<b>First Semester</b>		<b>Second Semester</b>	
WRT 101	3.00	WRT 201	3.00
#PSY 101	3.00	#BIO 201	4.00
#SOC 101 (OR OTHER SOC)	3.00	#SCI 120	3.00
#CHM 103	4.00	General education requirement	3.00
RSC 101	3.00	Elective	3.00
<b><i>Semester sum</i></b>	<b>16</b>	<b><i>Semester sum</i></b>	<b>16</b>
<b>Third Semester</b>	Credits	<b>Fourth Semester</b>	Credits
#PSY 208	3.00	#BIO 208	4.00
#BIO 202	4.00	#SOC 350	3.00
RSC 201	3.00	General Education Requirement	3.00
General Education Requirement	3.00	General Education Requirement	3.00
General Education Requirement	3.00	General Education Requirement	3.00
<b><i>Semester sum</i></b>	<b>17.00</b>	<b><i>Semester sum</i></b>	<b>16.00</b>
<b>Fifth Semester</b>	Credits	<b>Sixth Semester</b>	Credits
NSG 201	3.00	NSG 323	6.00
NSG 207	4.00	NSG 325	3.00
NSG 212	5.00	NSG 326	4.00
		NSG 345	3.00
<b><i>Semester sum</i></b>	<b>12.00</b>	<b><i>Semester sum</i></b>	<b>16.00</b>
<b>Seventh Semester</b>	Credits	<b>Eighth Semester</b>	Credits
NSG 333	6.00	NSG 405	2.00
NSG 425	4.00	NSG 409	2.00
NSG 355	4.00	NSG 450	8.00
RSC 301	3.00		
<b><i>Semester sum</i></b>	<b>17.00</b>	<b><i>Semester sum</i></b>	<b>12.00</b>

#: Required support courses included in Nursing GPA **TOTAL must equal.....120 cr.**

## NURSING COURSES

Fifth Semester	Credits	Sixth Semester	Credits
NSG 201 Theoretical Basis of Nursing Practice	3.00	NSG 323 Nursing Interventions/Concept II 80 clinical hours	6.00
NSG 207 Health Assessment and Promotion Strategies 25 lab hours	4.00	NSG 325 Family Community Health I 40 clinical hours	3.00
NSG 212 Nursing Interventions/Concept I 80 clinical hours	5.00	NSG 326 Psychiatric Mental-Health Nursing 40 clinical hours	4.00
		NSG 345 Nursing Pharmacology	3.00
<b><i>Semester sum</i></b>	<b><i>12.00</i></b>	<b><i>Semester sum</i></b>	<b><i>16.00</i></b>
Seventh Semester	Credits	Eighth Semester	Credits
NSG 333 333 Nursing Concept III 80 clinical hours	6.00	NSG 405 Leadership/Management	2.00
NSG 425 Family and Community Health II 80 clinical hours	4.00	NSG 409 Professional Role: Challenges and Issues	2.00
NSG 355 Reproduction and Sexuality 80 clinical hours	4.00	NSG 450 Transitions in Professional Practice 240 clinical hours	8.00
RSC 301	3.00		
<b><i>Semester sum</i></b>	<b><i>17.00</i></b>	<b><i>Semester sum</i></b>	<b><i>12.00</i></b>

#: Required support courses included in Nursing GPA

**720 total clinical hours**

## NURSING COURSE DESCRIPTIONS

### **NSG 201 Theoretical Basis of Nursing Practice**

3 Cr.

The focus of this course is to assist students in developing an understanding of the roles of professional nurses within the current social, economic, psychological, political and philosophical climate. The student identifies the autonomous and collaborative components of nursing practice within the health care delivery system. Concepts which contribute to professional development such as critical thinking, communication, accountability, ethics, and legalities are explored. Students trace historical evolution of the profession from its early beginnings to current theories of nursing and identify the value of research to the future of nursing and health care. A conceptual framework is utilized. 3 credit(s). Prerequisite(s): CHM-103 or CHM-111 or PHY-101; and BIO-208; and BIO-213; and PSY-101; and SCI-120. Open only to matriculated students in the BS in Nursing program who have attained a minimum major GPA of 3.000.

### **NSG 207 Health Assessment and Promotion Strategies**

4 Cr.

The focus of this course is on the development of assessment and critical thinking skills needed by the nurse in the data collection and includes communication and interviewing, nursing history, vital signs, interpretation of routine laboratory data, and the physical examination. Opportunities will be provided for skill development in communicating effectively and in a caring manner while collecting and recording subjective and objective data, identifying factors that present health risks or actual overt alteration in functional patterns and health status, developing outcome and interventions related to the helping and teaching domains of practice, and documenting all aspects of the nursing process are covered. A conceptual framework is utilized. 4 credit(s). Prerequisite(s): CHM-103 or CHM-111 or PHY-101; and BIO-208; and BIO-213; and PSY-101; and SCI-120. Open only to matriculated students in the BS in Nursing program who have attained a minimum major GPA of 3.000. Co-requisite(s): NSG-207L and NSG-207R

### **NSG 212 Nursing Interventions/Concept I**

5 Cr.

This course focuses on individualized interventions related to the prevention and alleviation of common health problems in the client experiencing alterations in functional health patterns. In simulated and actual clinical settings the student practices in a professional role while utilizing critical thinking skills in an environment that values the concept of caring. The focus on implementation of care reflects cultural, developmental level for adults (older adult/Hartford Geriatric Curriculum), and advocacy needs of the client using the application of Benner's domains of practice. A conceptual framework is utilized. 4 credit(s). Prerequisite(s): CHM-103 or CHM-111 or PHY-101; and BIO-208; and BIO-213; and PSY-101; and SCI-120. Open only to matriculated students in the BS in Nursing program who have attained a minimum major GPA of 3.000. Co-requisite(s): NSG-212L, NSG-212R

### **NSG 323 Nursing Interventions/Concept II**

6 Cr.

The purpose is to identify, clarify, and conceptualize pathological changes in major health problems across the lifespan which provides a theoretical base for the nurse in the Benner's domains of practice. The concept of caring is reflected in the seeking of knowledge regarding pathophysiology and nursing interventions. Using a student centered learning environment, students have an opportunity to demonstrate critical thinking skills in applying pathophysiological and nursing principles. Students integrate theory into the care of the acutely

ill client in practice settings. A conceptual framework is utilized. (Theory 50 hrs., Clinical 80 hrs.) 6 credit(s). Prerequisite(s): NSG-201, NSG-207, NSG-212. Co-requisite(s): NSG-323L, NSG-323R

**NSG 325 Family Community Health I**

3 Cr.

This course assists students in examining factors that promote health or act as barriers to health across the life span. Students will explore multidimensional factors including culture, religion, and economics that influence health behaviors. Clinical experiences in a variety of community settings will provide students with knowledge to develop and implement specific health promotion strategies using a dynamic interdisciplinary approach. Application of learning theory will be applied to groups in the community. 3 credit(s). Prerequisite(s): NSG-212. Co-requisite(s): NSG 325L

**NSG 326 Psychiatric Mental-Health Nursing**

4 Cr.

This course is designed to refine students' communication skills and therapeutic use of self for application with clients who are experiencing behavioral difficulties in living. Theory and practice in psychiatric-mental health nursing is directed toward the development of skill and comfort in intervening with these clients. Theory consists of content related to emotional/mental disorders with the expectation that the student applies this knowledge in the practicum. The course examines clients across the life span, with emphasis on the adult, and from various socio/cultural backgrounds. Primary focus is on the nurse/client individual relationship. Students collaborate with other health care providers, and accountability and clinical judgment are emphasized. [3 theory/classroom credits with 1 clinical credit].

**NSG 333 Nursing Concept III**

6 Cr.

The purpose is to identify, clarify, and conceptualize advanced pathological changes in major health problems across the lifespan which provides a theoretical base for the nurse in the Benner's domains of practice. The concepts of caring is reflected in the seeking of knowledge regarding pathophysiology and nursing interventions. Using a student centered learning environment, students have an opportunity to demonstrate critical thinking skills in applying pathophysiological and nursing principles. Students integrate theory into the care for the acutely ill client in practice settings. Students develop and expand their clinical judgment and skills in selected domains of practice. A conceptual framework is utilized. Offered Fall and Spring (Theory 50 hrs., Clinical 80 hrs.) 6 credit(s). Prerequisite(s): NSG-201, NSG-207, NSG-212, NSG-323, NSG-325 Co-requisite(s): NSG-333L

**NSG 345 Nursing Pharmacology**

3 Cr.

The major focus of this course is on the scientific application of drug actions and their effect on an individual's wellness/illness state across the lifespan. This course enhances the students' critical thinking abilities related to pharmacological concepts within a caring framework. Drug classifications are presented, analyzing pharmacokinetics and pharmacodynamics, within a framework of an individual's physiological and psychological functioning. Socioeconomic concerns, cultural diversity, age-related changes, legal constraints and ethical issues related to drug therapy are explored. Nursing GPA of 3.000 required to enroll. 3 credit(s). Prerequisite(s): NSG-201, NSG-207, NSG-212

**NSG 355 Reproduction and Sexuality**

4 Cr.

This course provides in-depth coverage of health care concepts with nursing applications. This course provides continuing opportunities for development of clinical judgment skills. The course lends itself to a concept-based approach. This course examines the nursing role in the maintenance and restoration of the family during the childbearing, and child rearing phases of family development. Students are encouraged to explore interactions which contribute to the family's functioning and interaction with the community. Caring is the overriding construct which directs interventions identified in the domains of helping, teaching-learning, and diagnostic-monitoring of therapeutic regimes. Offered: Fall and Spring. (Theory 30 hrs., Clinical 80 hrs.) 4 credit(s). Prerequisite(s): NSG-201, NSG-207, NSG-212, NSG-323, NSG-325 Co-requisite(s): NSG-355L

**NSG 405 Leadership/Management**

2 Cr.

The baccalaureate graduate, as a professional practitioner, assumes responsibility for planning, delegating, supervising, and evaluating nursing care given by other staff in health care agencies. The nature of organizations, the behavior of individuals and groups in the organization, patterns of delivering care in various health care settings, and the evaluations of services are explored. A major focus is developing clinical judgment in the domains of monitoring and ensuring quality of health care practice, and organizational work role competencies. 2 credit(s). Prerequisite(s): Senior status or permission of the instructor.

**NSG 409 Professional Role: Challenges and Issues**

2 Cr.

The development of the baccalaureate nurse's commitment to and leadership in the profession of nursing is the emphasis of this course. Emphasis is on professional responsibility for helping to shape the future of healthcare, for advancing human caring as a public agenda, and for influencing developments within the profession. In seminar discussion, students investigate and analyze the impact of specific professional, ethical, political, social, legal, and economic issues in nursing and health care. 2 credit(s). Prerequisite(s): Senior status or permission of the instructor.

**NSG 425 Family and Community Health II**

4 Cr.

The epidemiological prevention process, community theory and family theory provide the basis for nursing care in the community. The course emphasizes application of this knowledge base to improve the health of the community. The course emphasizes application of this knowledge base to improve the health of the community through program planning and effective use of the health care resources. Emphasis will be placed on achieving positive outcomes of nursing management for individuals, families, and specific population groups through dynamic interdisciplinary practice. Offered Fall and Spring. (Theory 30 hrs., Clinical 80 hrs.) 4 credit(s). Prerequisite(s): NSG-201, NSG-207, NSG-212, NSG-323, NSG-325 Co-requisite(s): NSG-425L

**NSG 450 Transitions in Professional Practice**

8 Cr.

This capstone course is designed to help the student synthesize the concepts of nurse, environment, person, health and caring as they apply to the domains of nursing practice in various health care settings. Students will examine the clients total experience of the health care system and its complexities to support culturally sensitive care within a diverse environment. Complex dimensions of the domains of practice will be analyzed with implications for the graduate leadership roles. By synthesizing knowledge of nursing theory/research, and previous practice, students will make the initial transition to professional practice models. Certification

preparation is incorporated in seminars. Offered Fall and Spring (Theory 18 hrs. [6 seminars, 3 hours/seminar], Clinical 240 hrs.) 8 credit(s). Prerequisite(s): NSG-201, NSG-207, NSG-212, NSG-323, NSG-325, NSG-326, NSG-333, NSG-355, NSG-425 Co-requisite(s): NSG-450L

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## Appendix A

### CARES GUIDELINES FOR PRACTICE MODEL © FOR CLINICAL

#### Appendix A-1

#### OBJECTIVES FOR CARES GUIDELINES FOR PRACTICE MODEL® FOR CLINICAL

<b>C</b>	<p><b>Condition (Concept)</b> <b>Objectives</b></p> <ul style="list-style-type: none"><li>• Student will be able to integrate liberal arts education into the understanding of the condition (concept)</li><li>• The student will integrate and utilize previous nursing coursework to assist in developing and understanding of the condition (concepts)</li><li>• The student will be able to summarize the pathophysiology of the condition (concept)</li><li>• The student will be able to identify and explain the risk factors or potential causes of the condition (concept)</li><li>• The student will be able to identify and explain the potential consequences of this condition (concept) as it relates to the client experiencing the condition (concept)</li></ul>
<b>A</b>	<p><b>Assessment</b></p> <ul style="list-style-type: none"><li>• The student will be able to integrate and utilize previous nursing coursework to explain, demonstrate, and apply a holistic assessment as it relates to the condition (concept)<ul style="list-style-type: none"><li>○ Developmental considerations</li><li>○ Health History</li><li>○ Physical assessment</li></ul></li></ul>
<b>R</b>	<p><b>Restoration Plan</b> (returning client to optimal health)</p> <ul style="list-style-type: none"><li>• The student will be able to interpret the findings of the holistic assessment to develop a nursing diagnosis or diagnoses for the client experiencing the condition</li><li>• The student will be able to utilize the nursing diagnosis to develop a plan of care for the client that integrates and utilizes previous nursing coursework focusing on the following:<ul style="list-style-type: none"><li>○ Interventions &amp; treatments</li><li>○ Management of care</li><li>○ Identifying potential and existing ethical considerations</li><li>○ Use of informatics</li><li>○ Use of evidence-based practice</li></ul></li><li>• The student will be able to identify the successful outcome of the restorative plan or identify the need for alteration of the plan and re-evaluation</li><li>• The student will be able to demonstrate effective communication of the plan of care to the patient, family and other disciplines involved in the patient's care.</li></ul>

	<ul style="list-style-type: none"> <li>• The student will integrate theoretical frameworks into the plan and care of the client (always consider Benner and Watson) but encourage the use of other frameworks</li> </ul>
<b>E</b>	<p><b><i>Education &amp; Prevention</i></b></p> <ul style="list-style-type: none"> <li>• The student will integrate and utilize previous nursing coursework in the development of a teaching plan.</li> <li>• The student should be able to develop a teaching plan for their client as it relates to the condition (concept) that includes: <ul style="list-style-type: none"> <li>○ Pathology of the condition, Interventions and Management of Care related to the condition</li> <li>○ Prevention</li> <li>○ Health Promotion strategies</li> <li>○ Adherence to regimen</li> </ul> </li> <li>• The student should be able to demonstrate teaching of the client as it relates to the condition (concept)</li> </ul>
<b>S</b>	<p><b><i>Safety &amp; Fiscal responsibility</i></b></p> <ul style="list-style-type: none"> <li>• The student will be able to explain, apply and demonstrate safe practice and safe care of the client utilizing the QSEN competencies for safety and the integration and utilization of previous nursing coursework</li> <li>• The student will be able to explain and demonstrate fiscal responsibility related to the care of your client.</li> </ul>

## Appendix A-2

### CARES GUIDELINES FOR PRACTICE MODEL © FOR CLINICAL

All undergraduate nursing students are expected to follow the CARES guidelines for practice.

#### CARES © Guidelines for Practice

<b>C</b>	<b>Condition (concept)</b> <ul style="list-style-type: none"><li>● What condition or problem is your client experiencing?</li><li>● What is the pathophysiology of the condition?</li><li>● What are the risk factors or potential causes that led to the condition?</li><li>● What are the potential consequences of this condition to your client and their health?</li><li>● What other concepts should be considered related to the patient condition?</li><li>● What personal experiences, if any, do you have with this condition?</li></ul>
<b>A</b>	<b>Assessment</b> <ul style="list-style-type: none"><li>● Developmental considerations<ul style="list-style-type: none"><li>○ What things need to be considered related to the age of your client in relation to the current condition?</li><li>○ What are normal findings that need to be considered with your client related to their age and the systems that this condition is affecting?</li></ul></li><li>● Health Hx<ul style="list-style-type: none"><li>○ Past medical<ul style="list-style-type: none"><li>■ Does past medical history and treatment relate to the patient's current condition? Why?</li></ul></li><li>○ Family Hx<ul style="list-style-type: none"><li>■ Does the patient's family health hx place them at risk for this condition? Why?</li></ul></li><li>○ Psychosocial<ul style="list-style-type: none"><li>■ What are the psychosocial factors that may have lead to this patient's condition? Explain why and how?</li></ul></li><li>○ Culture/spirituality<ul style="list-style-type: none"><li>■ Is cultural or spirituality affecting treatment decisions related to the health condition?</li><li>■ Does the client have any special needs related to culture and spirituality?</li></ul></li><li>○ Adherence<ul style="list-style-type: none"><li>■ Is the client adherent to current &amp; previous treatment plans? If not, why?</li></ul></li></ul></li></ul>

## A (con't)

- Functional ability
  - Assess how the condition is affecting the clients ADLs & functional patterns
  - What is the client's current functional state?
  - What are the barriers to optimal functional ability?
  - How can you assist your client in adaptation methods to improve functional ability?
- Review of symptoms
  - Identify symptoms in other systems that may be related to the current condition.
  - Determine the symptoms that are not related to the current condition but that are related to a different condition and use that information to determine the plan of care for that new problem.
- Physical assessment
  - VS
  - Pain
  - Diagnostics
  - I/O
  - 60 second assessment
  - Mental Status
    - A-appearance
    - B-behavior
    - C-cognition
    - T-thought process
  - Skin, Heart & PV, Lungs and Abdomen
  - Use the patient condition and potential consequences of the condition to help guide your focused system assessments
    - What are the normal desired findings that you expect for your client related to these systems?
    - What are the present findings related to your client and their condition?

## R

### **Restoration Plan (returning the client to optimal health)**

- Nursing Dx (alterations in functional ability related to condition)
  - Based on data collection r/t condition and assessment
- Interventions to consider for this condition
  - Pharmacological & Parenteral Therapies
  - Non-pharmacological
- Management of Care
  - Prioritize your care
    - Level 1
      - Airway problems
      - Breathing problems
      - Cardiac/circulation problems
      - Vital sign concerns (e.g., high fever)
    - Level 2

<p>CARES © Guidelines for Practice</p> <p><b>R (con't)</b></p>	<ul style="list-style-type: none"> <li>● Mental status change (e.g., confusion, decreased alertness)</li> <li>● Untreated medical problems requiring immediate attention (e.g., a person with diabetes who has not had insulin)</li> <li>● Acute pain</li> <li>● Acute urinary elimination problems</li> <li>● Abnormal laboratory values</li> <li>● Risks of infection, safety, or security (for the patient or for others)</li> <li>● Mental status change (e.g., confusion, decreased alertness)</li> <li>● Untreated medical problems requiring immediate attention (e.g., a person with diabetes who has not had insulin)</li> <li>● Acute pain</li> <li>● Acute urinary elimination problems</li> <li>● Abnormal laboratory values</li> <li>● Risks of infection, safety, or security (for the patient or for others)</li> <li>■ Level 3 <ul style="list-style-type: none"> <li>● Health problems that do not fit into the previous categories (e.g., problems with lack of knowledge, activity, rest, family coping)</li> </ul> </li> <li>○ Basic care and comfort</li> <li>○ Keep the patient at the center of the care that you provide (mind, body, &amp; spirit)</li> <li>○ Caregiver (who is providing care with you (client's family and friend) &amp; how can you support them and include them in the plan)</li> <li>○ Palliative care considerations or end-of-life planning (when applicable)</li> <li>○ Leadership-what leadership role do you take with the care of this client</li> <li>○ Delegation (UAP and LPN/LVN)</li> <li>● Ethical issues related to care and plan of care <ul style="list-style-type: none"> <li>○ See provisions of ethics in nursing below (ANA)</li> </ul> </li> <li>● The use of technology and informatics related to care of the client</li> <li>● Evidence-based practice used in the care of the client <ul style="list-style-type: none"> <li>○ Guidelines for practice</li> <li>○ Hospital protocols and/or Standards of care</li> </ul> </li> <li>● Evaluation of the effectiveness of the plan <ul style="list-style-type: none"> <li>○ Evaluation - did the client meet the expected outcomes that you determined or did your plan for the client have to be readjusted</li> </ul> </li> </ul>
<p><b>E</b></p>	<p><b>Education &amp; Prevention</b></p> <ul style="list-style-type: none"> <li>● Educate your client on the following related to the current condition <ul style="list-style-type: none"> <li>○ Pathology of the condition, Interventions and Management of Care related to the condition</li> <li>○ Prevention measures related to the condition</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>■ Primary</li> <li>■ Secondary</li> <li>■ Tertiary</li> <li>○ Health Promotion strategies</li> <li>○ Discuss the importance of adherence to regimen</li> </ul>
<p><b>S</b></p>	<p><b>Safety &amp; Stewardship</b></p> <ul style="list-style-type: none"> <li>● Consider safety and protection measures that need to be taken with your client related to this condition <ul style="list-style-type: none"> <li>○ Hand hygiene</li> <li>○ Asepsis</li> <li>○ Environmental <ul style="list-style-type: none"> <li>■ Bed position and side rails</li> <li>■ Call bell placement</li> <li>■ Room placement</li> <li>■ Equipment safety and position</li> <li>■ Home environment</li> </ul> </li> <li>○ Communication (SBAR)</li> <li>○ Collaboration</li> <li>○ Health Care Quality initiatives used in the care of the client</li> <li>○ Secondary prevention measures <ul style="list-style-type: none"> <li>■ Braden Scale</li> <li>■ Fall risk Scale</li> </ul> </li> </ul> </li> <li>● How did you demonstrate fiscal responsibility related to the care of your client <ul style="list-style-type: none"> <li>○ Improve quality of care, reduce waste, and increase profitability</li> <li>○ Did you effectively and efficiently use your time</li> </ul> </li> </ul>

## APPENDIX B

### Acts of bias, hate, discrimination & harassment

**APPENDIX C**  
**Russell Sage College Nursing Department**  
**Unsafe Occurrence Form**

1. Student name and email address:	2. Student ID Number:
2. Instructor Name and email address:	4. Course, section and semester of incident:
5. Campus/Clinical Location:	6. Date of unsafe occurrence:
7. Description of Unsafe occurrence:	
8. Proposed recommendations/remediation:  Proposed clinical sanction(s): <ul style="list-style-type: none"> <li><input type="checkbox"/> A Written Reprimand</li> <li><input type="checkbox"/> A Clinical Failure</li> <li><input type="checkbox"/> Dismissal from the Nursing Program</li> </ul>	
9. Student Comments:	
I have discussed, orally or in writing, the allegation(s), academic sanction(s) and all related evidence with the student.	
_____ Instructor Signature	_____ Date
_____ Student Signature	_____ Date

**TO BE COMPLETED BY THE STUDENT:**

- I understand my rights and responsibilities as described in the Russell Sage College Student Handbook and the Nursing Department Handbook.
- I understand that I have the right to accept or contest the allegation(s) and/or academic sanction(s) assigned by the instructor.
- I understand that if I choose to contest the allegation(s) and/or academic sanction(s), the outcome of the process will be decided by the Professional Behavior/Academic Integrity Committee (PB/AI) that will determine the final academic sanction(s) if I am found responsible. A process of appeals can then be set in motion per the Nursing Student Handbook.
- I understand that I am required to either accept or contest the allegation(s) and/or academic sanction(s) within two (2) business days of the date on the form. If I do not respond within that period, the case will continue as if I chose not to contest the allegation(s) and/or academic sanction(s).
- I understand that I may be subject to additional sanctions not identified on this form if it is determined that I have prior academic integrity violations.

**PLEASE SIGN for your acknowledgement of receipt of this form:**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Your completed form should be returned to \_\_\_\_\_ (faculty member).

**APPENDIX D**  
**Russell Sage College Nursing Department**  
**Professional Integrity Form**

1. Student name and email address:	2. Student ID Number:
3. Instructor Name and email address:	4. Course, section and semester of incident:
5. Campus/Clinical Location:	6. Date of occurrence:
6. Description of alleged incident/violation:	
7. Proposed academic sanction(s): <input type="checkbox"/> A Written Reprimand <input type="checkbox"/> A zero of "F" in assignment(s) involved <input type="checkbox"/> A "F" in course <input type="checkbox"/> Revocation or change of grade	
I have discussed, orally or in writing, the allegation(s), academic sanction(s) and all related evidence with the student. _____ Instructor Signature <span style="float: right;">_____</span> <span style="float: right;">Date</span>	

**TO BE COMPLETED BY THE STUDENT:**

- I understand my rights and responsibilities as described in the Russell Sage College Student Handbook and the Nursing Department Handbook.
- I understand that I have the right to accept or contest the allegation(s) and/or academic sanction(s) assigned by the instructor.
- I understand that if I choose to contest the allegation(s) and/or academic sanction(s), the outcome of the process will be decided by the Professional Behavior Committee (PBC) that will determine the final academic sanction(s) if I am found responsible. A process of appeals can then be set in motion per the Nursing Student Handbook.
- I understand that I am required to either accept or contest the allegation(s) and/or academic sanction(s) within two (2) business days of the date on the form. If I do not respond within that period, the case will continue as if I chose not to contest the allegation(s) and/or academic sanction(s).
- I understand that I may be subject to additional sanctions not identified on this form if it is determined that I have prior academic integrity violations.

**PLEASE SIGN for your acknowledgement of receipt of this form:**

\_\_\_\_\_  
 Student Signature \_\_\_\_\_  
Date

Your completed form should be returned to \_\_\_\_\_ (faculty member).

**APPENDIX E**  
**STUDENT POLICY SIGNATURE SHEETS**

**Appendix E-1**

Dear Sage Nursing Students,

The faculty of the Department of Nursing has clarified the policy and process for a situation in which a student does not act professionally or within accepted standards of practice. This policy is in effect as of this date.

These procedures are attached to this memo. Please sign at the bottom of this memo to acknowledge that you have received a copy of the policy.

Please read this material carefully. If you have questions or concerns, please contact faculty, program directors, or the nursing department chair. Thank you for your attention to this policy.

I have received, reviewed, and understand the content of the Nursing Student Handbook 2025-2026 and have had my questions answered.

I have received a copy of the policy related to the Nursing Code of Ethics.

Professional conduct, academic matters, (academic standards, academic honesty, advisement, as well as policies regarding clinical requirements are very important and should be carefully reviewed and clarified if there are questions.

I have reviewed the above policies in the Nursing Student Handbook 2025-2026

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Printed Name: \_\_\_\_\_

This original copy will be placed in the student's file.

## Appendix E-2

### RSC Nursing Department Clinical Expectations

Student Name (please print) \_\_\_\_\_

Anticipated Graduation Year \_\_\_\_\_

To successfully pass the clinical portion of your clinical courses, it is important that you are aware of all clinical expectations. The following are expectations for ANY clinical course within the Nursing curriculum. Additional expectations may be given in specific courses that you are also required to be aware of and follow. These additional expectations will be provided in class.

1. **Arrival** – Arrive on time. Clinical begins at the time determined by your clinical instructor. Be prepared to obtain your assignment and research your patient prior to receiving the report.

**Lateness:** Any student arriving at clinical more than 15 minutes late will be sent home and will need to pay for a clinical make-up day (\$250/day). Failure to notify faculty by phone (NOT text message) one hour prior to the start of the clinical day is grounds for a clinical warning for the first offense and clinical failure for the second offense. Repetitive lateness (more than once) is considered unprofessional behavior and is grounds for clinical failure. Lateness and failure to notify clinical faculty will be documented in the student's clinical evaluation and a copy will be placed in their student file. A clinical failure will result in course failure.

2. **Professionalism** - You are expected to act professionally at all times during clinical. You are representing yourself, your instructor and Russell Sage College. This includes but is not limited to social media use, privacy violations, sleeping during clinical, studying during clinical, and the use of unprofessional language. Under no circumstances should you talk about clinical or patients on social media sites or in public places. Professionalism also includes professional dress according to the Russell Sage Nursing Handbook. You are encouraged to develop collegial relationships with unit staff and your clinical instructor. To ensure the safety of the client and provide the best learning experience for you, the primary resource is the instructor. If there are any changes in the client's condition, the instructor and the covering nurse *must* be notified immediately. You may work with the staff nurse only after your instructor has given permission for each situation, e.g. assisting RN with urinary catheter insertion. The CARES model will be used as a guideline for communication. In the instance of unprofessional behavior, a clinical

warning will be given to the student. Repetitive unprofessional behaviors will jeopardize your academic standing in the course and will result in clinical failure. Course failure will follow.

2. **Absence** - You are required to attend all clinical days as scheduled. If an emergency arises or you are sick, the absence is excused and you need to make up the clinical at your expense and according to faculty schedules. You must call (not email or text message) the instructor in a timely manner and notify them of your absence. **Failure to notify the clinical faculty of absence constitutes a “no call/no show” and is grounds for clinical failure.** Do not call the nursing department or any other faculty except your clinical instructor. You need to provide written documentation of the reason for missing the clinical. Failure to show without appropriate notification is considered unprofessional behavior and may result in failure of the course.

3. **Post-conference** - This takes place in the clinical setting following departure from the unit. Clinical post-conference is mandatory. Times will vary per course. The instructor may keep you slightly longer to allow completion of clinical objectives, assignments, etc. Clinical does not end until dismissed by the clinical instructor. Professional behavior and participation during post-conference are required. Unprofessional behavior and/or lack of participation in clinical post-conference may jeopardize your academic standing in the course.

4. **Clinical Assignments**- In addition to patient care activities, students are required to complete all activities assigned by course and clinical faculty. These activities include but are not limited to post-conference discussion boards, reflective journals, clinical documentation, and other clinical learning activities. These clinical assignments are an extension of the clinical experience and by not completing them, you have not fulfilled the clinical objectives. Failure to complete these assignments by the scheduled due date will result in the failure of clinical and subsequently the course.

**By signing below, the student acknowledges receipt and understanding of these guidelines. The student understands that this signature indicates they will follow these guidelines through all nursing courses up to and including Capstone.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

This original copy will be placed in the student's file.

## APPENDIX F

### **AACN announces RSC chosen as 1 of 10 Undergraduate Nursing Schools across the nation to receive funding to accelerate innovation in Nursing Education.**

In April 2021, U.S. nursing schools affiliated with the American Association of Colleges of Nursing (AACN) endorsed a bold, new approach to educating nurses for entry-level and advanced roles as outlined in [The Essentials: Core Competencies for Professional Nursing Education](#). The AACN Essentials calls for a competency-based education (CBE) approach to preparing nurses, which requires students to demonstrate that they possess the knowledge, attitudes, motivations, self-perceptions, and skills expected of today's nurse as they progress through a program of study. AACN is supporting schools of nursing and their practice partners through educational sessions, free webinars, and regional workshops; a network of Champions identified for each school; a curriculum coaching program, CBE guidelines, a teaching resource database, and video spotlights. With grant funding, AACN has launched a pilot initiative involving 10 schools of nursing, which are focused on Essentials implementation. The undergraduate nursing program at RSC has been chosen as a pilot school by AACN. Resources developed and lessons learned will be disseminated to schools nationally.