
UNIVERSITY OF LYNCHBURG



Department of Nursing Faculty Handbook

2024-2025

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To University of Lynchburg Nursing Faculty:

The Nursing Faculty Handbook is designed to provide nursing faculty with specific information on the nursing curriculum, and the policies and procedures related to the department of nursing. It was developed to supplement the information provided in the University Faculty Handbook.

General information regarding the University organizational structure, and its policies and procedures can be found in the University Faculty Handbook. The nursing curriculum, student advising, and student and faculty policies and procedures are included within this handbook.

I hope you will find this information useful to you as a nursing faculty member. It should provide you with a general orientation to our department of nursing and assist you in understanding your role as a faculty member.

Program Chair, Department of Nursing

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Program Mission and Goals

The mission of University of Lynchburg Nursing is to provide a student centered liberal arts education that develops nurse leaders to equitably serve a diverse population in a dynamic healthcare system.

Graduates of University of Lynchburg's nursing program will be able to:

1. Make appropriate nursing practice decisions using research and evidence based practice for persons of various ages and health states to promote and improve health care results (AACN BSN Essential II; ANA Standards 1-6 and 13-14; QSEN Evidence Based Practice [EBP]).
2. Provide safe, patient-centered, culturally competent nursing care across the continuum for individuals, families, communities, and populations promoting health and disease prevention (AACN BSN Essential VII & IX; ANA Standards 1-9, 13-14, and 17; QSEN Patient Centered Care, Safety & EBP).
3. Communicate effectively with patients, families, colleagues, and other professional disciplines (AACN BSN Essential VI; ANA Standards 1-6 and 8-10; QSEN Patient Centered Care, Teamwork & Collaboration).
4. Demonstrate effective, ethical use of information technologies to perform and document safe, quality patient care (AACN BSN Essentials IV & VIII; ANA Standards 1-7 and 14; QSEN Informatics and Safety).
5. Demonstrate excellence in writing skills and research by producing creative scholarship that expands nursing knowledge (AACN BSN Essential I & VI; ANA Standards 11-14; QSEN EBP and Quality Improvement [QI]).
6. Positively influence health care outcomes through Interprofessional collaboration to accomplish patient health care outcomes (AACN BSN Essentials VI & VIII; ANA Standards 4-5 and 9-11; QSEN Teamwork & Collaboration).
7. Integrate knowledge of health care policies, systems management, and finance using innovative approaches to promote continuous quality improvement in health care settings (AACN BSN Essential V & VI; ANA Standards 11-17; QSEN QI).
8. Demonstrate professional behaviors and values to model the core attributes of the nursing profession and pursue practice excellence (AACN BSN Essentials VIII & IX; ANA Standards 1-17; QSEN Patient Centered Care, Safety and EBP).

Program Values:

1. Civility
2. Clinical judgment
3. Communication
4. Compassionate care
5. Diversity, equity, and inclusion
6. Ethics

7. Evidence Based Practice
8. Health Policy

GOVERNANCE AND BY-LAWS

GOVERNANCE

Through the Nursing Faculty Organization, the department of nursing program chair and faculty share the governance of the department of nursing. All full-time faculty have appointments to standing committees which have specific functions which assist the program toward achievement of its mission and goals. Ad hoc committees are established as necessary to accomplish specific tasks.

Faculty are responsible for the management of the curriculum and the guidance of students. Faculty share in the budget and planning activities, assist in the determination of staffing needs and provide input to the program chair on the reappointment, promotion and tenure of members of the program.

BY-LAWS OF NURSING FACULTY ORGANIZATION

Article I – Name

The name of this faculty group shall be called the Nursing Faculty Organization.

Article II – Purpose

The purpose of the Nursing Faculty Organization is to:

1. Provide a mechanism for the shared governance of the program in order to carry out the specific faculty responsibilities listed in the department of nursing Faculty Handbook.
2. Conduct business related to the operations of the program.

Article III – Membership

Section 1.

All faculty of the program who meet the definition of full or regular part-time faculty as defined by the University of Lynchburg Faculty Handbook, will be voting members of this organization.

Article IV – Meetings

Section 1.

Monthly meetings are scheduled during the academic year. At the final meeting in the spring, the annual reports of standing committees are summarized.

Section 2.

Up to three nursing student representatives (typically the class presidents) may attend curriculum and assessment and progression committee meetings as non-voting

participants.

Section 2.

Called meetings are scheduled by the department of nursing program chair as necessary to complete program business.

Section 3.

The department of nursing program chair will preside at the meetings of the Nursing Faculty Organization. In her/his absence, she/he will appoint a faculty member to preside at the meetings.

Section 4.

A quorum is a simple majority of eligible voting faculty.

Section 5.

An agenda is prepared by the department of nursing program chair and distributed prior to scheduled meetings. Items to be placed on the agenda should be brought to the department of nursing program chair at least one week prior to the scheduled meeting.

Section 6.

The minutes of the meetings shall be recorded by faculty on a rotating basis or by Administrative Assistant when available and distributed to all department of nursing faculty and student representatives.

Article V - Standing Committees

Standing Committees have specific functions in carrying out the business of the program.

Section 1.

There are two standing committees of the department of nursing and each is ultimately responsible to the Nursing Faculty Organization. These committees are: Assessment and Progression (APC), Curriculum.

Section 2.

Functions of all standing committees:

- a. Hold meetings on at least a regular basis during each semester.
- b. Develop goals for the academic year.
- c. Plan activities to meet goals.
- d. Provide a committee report at program meetings on actions and recommendations.
- e. Provide an annual report on achievement of goals.

- f. Decision making: Bring to the nursing faculty for a majority vote those items that are identified by the committee as policies and substantive issues. All other items are included in a committee report addressed at the monthly program meetings.

Section 3.

Faculty are appointed yearly to Standing Committees by the department of nursing program chair. Faculty preferences for assignments to a committee(s) are considered whenever possible. Faculty may serve on more than one committee.

Section 4.

Student representatives are appointed to each committee except the Nursing Faculty Organization. Students will be excused from committee meetings during discussions related to individual students and the committee will move to an executive session.

There is student representation on committees. The role of the student on the committee involves providing input into matters that affect students. The student is expected to present their viewpoint in a professional manner and to maintain collegial relationships.

Students will be excused from committee meetings during discussions related to individual students and the committee will move to an executive session. To be respectful of students' time, business requiring student input should occur at the beginning of the meeting.

At the beginning of the regular academic year, students are provided with information on meeting times and purposes and functions of committees. Students who volunteer to serve meet with the standing committee according to the approved schedule. The student should email the committee chair if they are not going to attend the meeting.

Section 5.

Minutes are recorded for all committee meetings held. A recorder in each committee may be appointed for the year. Minutes are distributed to all voting members of the committee and kept electronically.

Section 6.

Purposes, Functions, and Membership of Each Committee

1. Assessment and Progression (APC)

- Purposes:
- a. Provide consultation to the department of nursing program chair in matters of transfer courses, appropriate substitutions of courses, and in specific student concerns.

- Functions:
- b. Facilitate assessment of outcome data related to undergraduate department of nursing
 - a. Review the academic and clinical standing of students as requested by the department of nursing program chair and nursing faculty.
 - b. Periodically review and evaluate admission, progression, and retention **policies**.
 - c. Monitor data collection of student assessment data from the outcomes section of the program evaluation plan, BSN outcomes table, and Systematic Evaluation Plan.
 - d. Review BON and CCNE standards pertaining to progression and retention. Gather data to determine compliance with standards and key elements and address deficiencies.

Membership: Minimum of 3 faculty, Class Vice Presidents

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2. Curriculum

Purposes: Consider new curricula for the program and evaluate and initiate change in the existing curricula.

- Functions:
- a. Develop, implement, evaluate and revise the curricula to meet requirements of regulatory and accrediting agencies and to reflect relevant professional nursing standards and guidelines.
 - b. Formulate, implement, and refine as needed the philosophy, conceptual framework, and curriculum to achieve SON outcomes.
 - c. Evaluate the curriculum and teaching-learning practices at regularly scheduled intervals per the UL department of nursing Systematic Plan for Evaluation and use course evaluation data to foster revision in the curriculum and ongoing program improvement.
 - d. Approve plans of study, course syllabi, prerequisite course requirements, and curricular or program changes. Any decisions with fiscal or resource implications must be approved by the Vice President of Academic Affairs.
 - e. Initiate, complete and monitor curriculum self-studies for review by regulatory and accrediting bodies.
 - f. Ensure curricula policies are congruent with the University and support achievement of the expected program outcomes.
 - g. Participate in course revision by approving new courses and major changes in courses.
 - h. Analyze data from standardized tests and surveys to suggest and review curricular changes.

- i. Recommend major program changes to the department of nursing Faculty Committee, the SMHS Faculty Committee, and the University Educational Policies Committee for approval.

Membership: Minimum of 3 faculty, Class Presidents

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3. Community Advisory Board

Purposes: To cultivate a positive relationship between the University of Lynchburg department of nursing and the community of interest (COI). The objective of the Community Advisory Board is to ensure that the department of nursing has a mission statement, goals, and outcomes that are appropriate to prepare individuals to fulfill their expected roles (American Association of Universities, 2014). The program's goals will align with the goals of the COI.

Functions: a. To increase the visibility of the department of nursing within Central Virginia.
b. To identify potential resources and community needs related to the department of nursing.

Meeting Schedule: Meetings are held annually in the spring.

Membership:

The COI will consist of members of the community who are current and knowledgeable in the healthcare market who can advise regarding the "big picture" perspective. The American Association of Universities identifies the COI as the nursing profession, consumers, employers, higher education, students and their families, nurse residents, and other department of nursing's (American Association of Universities). The University of Lynchburg Board is composed of Community Members which represent the media, finance, business, community action groups, education and/or medicine.

Term of Membership is three years. A successive term is permissible.

See department of nursing program chair or file for current members.

American Association of Universities of Nursing. *CCNE Mission & Purpose*. Retrieved from <http://www.aacn.nche.edu/ccne-accreditation/about/mission-values-history>

4. Student Nurse Advisory Committee

Purposes: The committee known as the Nursing Student Advisory Committee (SNAC) was established in 2014 to serve as a link between students, faculty and program. The department of nursing program chair will meet monthly or as needed with the committee to provide program updates and gather feedback from the committee. Membership includes Nursing program chair and student leaders identified as: President and Vice President of the sophomore, junior, and senior

classes. The mission of the committee is to allow students the opportunity to participate in shared governance of the program.

- Functions:
- a. Offer feedback on items discussed at the Nursing Faculty Meeting.
 - b. Student leaders will be responsible for conveying the changes to nursing students during student meetings. Student leaders may engage in a discussion with the program chair during NSAC meetings. Formal concerns are to be submitted in writing to the School program chair within 24 hours after the student meeting is held.
 - c. To allow Student Leaders to submit suggestions for strategies to promote a sense of community among nursing students and the University.
 - d. Update and discuss happenings in the department of nursing.

Membership: Consist of the President and Vice President from each nursing class. Attendance at the monthly student advisory committee is required of its members.

Article VI - Ad Hoc Committees

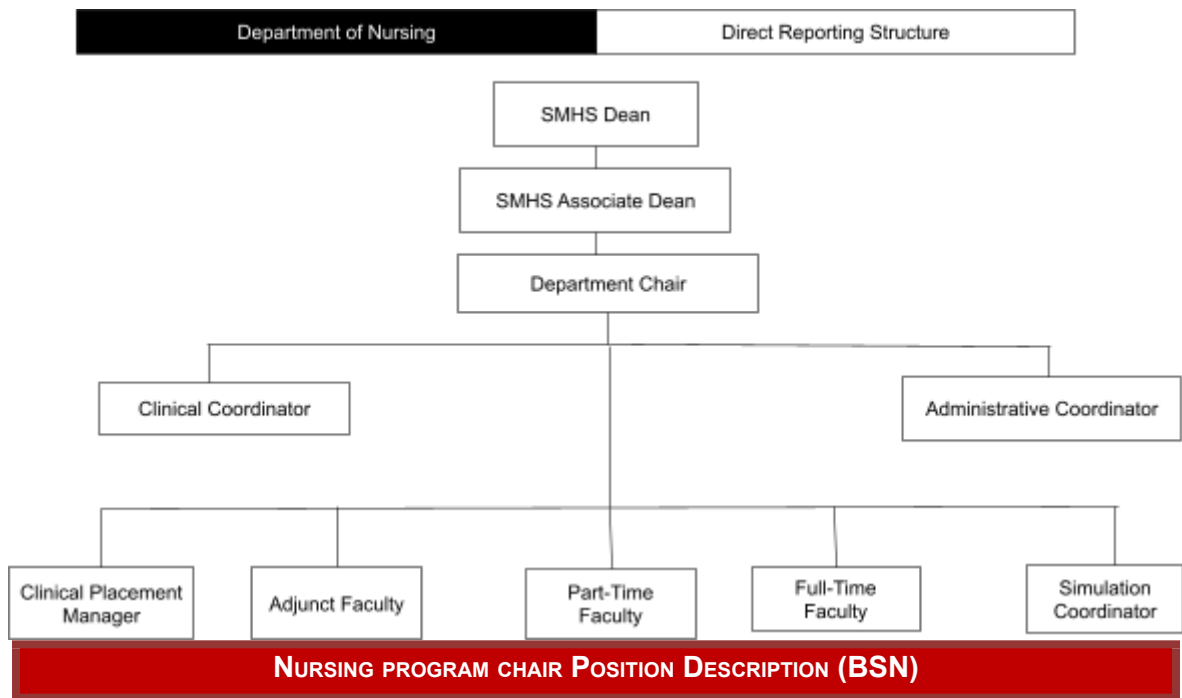
Members of the department of nursing participate on Ad Hoc Committees on a volunteer basis for purposes of completing tasks related to the operation of the organization. Ad Hoc Committees may develop proposals to be brought to the full faculty for a majority vote or provide a report at program meetings. No formal minutes are required; a progress report or action of the Ad Hoc Committee's work is noted in the program meeting minutes.

Article VII - By-Law Amendments

Amendments to the By-Laws can be drafted by an individual faculty member, a committee, or the department of nursing program chair. Proposed amendments must be distributed in writing to members of the faculty organization with the agenda of the meeting in which the amendment will be considered. Amendment will be discussed and if consensus, a vote will be taken at the meeting in which the Amendment was discussed.

Amendments will be ratified by a vote of two-thirds of the members present at a regular program meeting.

The Amendment will go into effect immediately unless an alternative time for adoption is specified.



The program chair of the department of nursing is a 12 month position with oversight of the BSN program. The program chair reports directly to the Dean of the School of Medicine and Health Sciences and to the Associate Dean. The department of nursing program chair is responsible for the management and coordination of program activities and shares the governance with the faculty. The department of nursing program chair oversees the education processes of students in the department of nursing and provides leadership and support to faculty in their roles as educators.

Candidates for the program chair position must:

- A. Hold a doctoral degree, and hold an unencumbered license as a registered nurse or a multi-state licensure privilege to practice nursing in the Commonwealth, with the additional education and experience necessary to administer, plan, implement, and evaluate the nursing education program.

Roles of the Nursing program chair

- Provide a vision for a curriculum of quality for the academic major(s) that aligns with nursing mission, vision and goals.
- Provide scheduling for the specific academic program, and cooperation for the recruitment, hiring, and mentoring of new faculty
- Implement the program and curriculum
- Oversee admission, academic progression and graduation of students
- Hire and evaluate faculty
- Recommend and administer the program budget, consistent with established policies of University of Lynchburg.

Administrative responsibilities

- Implement the program and curriculum
- Ongoing assessment of curriculum for compliance with AACN, CCNE, and the VBON
- Provide updates to accrediting bodies as necessary
- Attend AACN conferences to keep program aligned with Standards and Essentials
- Oversee the accreditation process: including the writing of the self-study, provision of evidence to the evaluation team, organizing the visit, and providing response to the team report
- Recommend candidates for hire and evaluate faculty
- Recommend and administer the program budget, consistent with established policies of the controlling agency.
- Regular meetings with the College program chair as appropriate for the program
- Curriculum development and/or revision within the academic program or related interdisciplinary programs
- Collaboration for scheduling that maximizes service to students
- Coordinate and chair monthly Faculty Nursing Organization and Student Nurse Advisory Committee meetings
- Oversee academic program assessment and program review, analysis of data, and application of findings
- Oversee the admission, academic progression, and graduation of students
- Consult with faculty and staff to determine responsibilities for advising and supervising program-based student activities/organization
- Maintaining currency in disciplinary trends related to the program
- Supervise the acquisition and maintenance of library, instructional technology, and other support for student learning

Academic Programs

- Support program faculty for seeking external funding when appropriate
- Supervise the selection of student award winners

- Updated program information to College program chair for web pages, brochures, newsletters, Nursing Student Handbook, Nursing Faculty Handbook, and Catalog copy
- Involvement with local community groups as appropriate for program
- Work with curriculum committee to review focus group and community advisory board meeting minutes to determine needed curricula changes to ensure continued quality education for students.
- Coordinate and convene the Community Advisory Board annually in April.
- Notify students of progression status.

Policy development

- Participate in University wide policy development regarding distance education
- Lead the undergraduate faculty discussions regarding policies for program development

Recruitment

- Work with Communications and Marketing to provide media for the department of nursing
- Contact with community University and health care agencies to promote enrollment
- Attend education fairs
- Work with the admissions director to review recruitment efforts

Enrollment

- Transcript evaluation for prospective BSN students
- Evaluate applicants for the second degree BSN program with the University admissions director, Traditional BSN program with APC committee.

Teaching

- Teach 1 course per academic year

CLINICAL COORDINATOR POSITION DESCRIPTION

Roles of the Clinical Coordinator

The Clinical Coordinator coordinates the clinical experiences and nursing laboratory used to provide learning opportunities for nursing students (including coordination of preceptor experiences with course faculty and clinical agency). The coordinator is responsible for the coordination of the assessments and evaluation of clinical sites, oversees the clinical components for undergraduate nursing program, reports to and is responsive to the needs of the department of nursing program chair/ SMHS dean, and nursing faculty, and maintains and applies knowledge of VBON Nursing Education regulations.

Responsibilities of the Clinical Coordinator

1. Responsive to the needs of the department of nursing program chair, College program chair, and nursing faculty.
2. Creates and maintains the Clinical Master Schedule for each semester
 - a. All levels including student numbers and school guidelines for the number of students assigned to a clinical section (taking into account student athletes, students on a music scholarship, any special needs).
 - b. Creating, maintaining and updating the schedule in a timely manner.
 - c. Communicates with faculty, adjunct, students, School program chair, and clinical sites regarding scheduling needs.
3. Stays abreast of clinical site guidelines (for example how many students can be assigned to any specific clinical site at any given time).
4. Send clinical schedules to clinical sites and notify sites with any changes. Be able to negotiate.
5. Act as the liaison to clinical sites. (The main clinical site is Centra, but there are many others including schools, outpatient sites, and other hospital systems).
6. Stays abreast of each site and its unique needs and “onboarding requirements” for students and faculty.
7. Manage issues with faculty/administration regarding student behavioral/performance issues during clinical experiences.
8. Initiates, explains, and assists with maintenance of clinical clearance for students and faculty which involves intensive education up front with sophomore students and continuous maintenance through their last clinical days as a senior in N419.
9. Offers clarification, reminding, and explanations to assist students to keep their clearance items up to date.
10. Aware of student wellness/illness (Clinical sites have guidelines regarding attendance when a student is ill or injured). Reschedule students as needed in collaboration with lead course faculty and adjunct faculty
11. Assesses skills lab and equipment for readiness including:
 - a. Equipment and supplies, and their security
 - b. Maintenance of equipment and supplies
 - c. Inventory and reorder needed lab supplies each semester and as needed
 - d. Organize lab supplies for each clinical lab section in collaboration with faculty weekly
 - e. Set up lab supplies for each clinical lab section weekly
12. Communicates with faculty, adjunct, program chair and appropriate individuals (i.e. vendors, other university resources) regarding equipment and supply needs.
13. Maintains and applies knowledge of VBON Nursing Education regulations (18VAC 90-27-10 et. seq. Regulations for Nursing Education Programs)
14. Create new/maintain affiliation agreements with clinical agencies/sites.
 - a. Performs annual review of affiliation agreements with communication to the clinical agency/site
 - b. Maintains and updates current clinical site representative contact information annually and as needed.

15. Communicates with clinical site representatives, their legal representatives, and UL administration at minimum once a semester.
16. Represents the department of nursing in a positive and professional manner
17. Monitor student progression every semester.
18. Maintains records of student time cards for each clinical course throughout the curriculum (ensure that each student has 500 clinical hours total).
19. Retains records using emails, spreadsheets, and secure storage.
20. Attends all faculty meetings (department, college, and University staff meetings).
21. Available in assigned office 5 days a week to maintain contact with course faculty and the program chair for the department of nursing.
22. Reports directly to the program chair of the department of nursing

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SIMULATION COORDINATOR POSITION DESCRIPTION

Department of nursing Simulation Coordinator

Job description:

- The Simulation Coordinator is responsible for the coordination of simulated direct client care clinical experiences. The coordinator incorporates best practice and evidence based research in the simulation program with a focus on standardization across the curriculum. The coordinator leads simulation faculty in the development and implementation of the simulation curriculum, which supports student learning, course and school of nursing outcomes.

Responsibilities:

- Ensure the simulated experiences are appropriate, relevant and evidence based to achieve learning outcomes
- Supervise simulation curriculum development to ensure compliance with the state Board of Nursing regulations for direct client care
- Ensure utilization of the Health Care Simulation Standards of Best Practice™ in simulation based education
- Assist in development and revision of simulation policies for the Lynchburg simulation program curriculum with a focus on continuous quality improvement
- Network with other simulation educators in the greater simulation community to learn about and promote simulation based experiences
- Chair the simulation champions committee
- Lead faculty development for the simulation champions
- Inventory simulation equipment for the department of nursing
- Oversee the state and functionality of the simulation equipment
- Communicate with manufacturers regarding maintenance and repair of equipment
- Maintains expertise in the area of simulation by completing continuing education credits and engaging in faculty development
- Complete annual review of course simulations using the Scenario Validity form
- Work with the program chair of Nursing as needed to ensure smooth coordination among simulation faculty and positive, quality learning experiences
- Act as a liaison to represent the University of Lynchburg at the Centra Health Virtual Learning Center (VLC)
- Coordinate adherence to the policies of the Virtual Learning Center

- Represent the University of Lynchburg department of nursing as a scenario developer for the Virtual Learning Center
- Collaborates with the program chair and faculty to coordinate the complementary blending of simulation, virtual simulation and the clinical experience
- Provides leadership and mentoring for faculty and others using and teaching in patient simulation scenarios
- Promotes an environment, which fosters creativity, responsiveness, and accountability within the University of Lynchburg department of nursing.

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FACULTY POSITION DESCRIPTION

The nursing faculty member is responsible for the implementation of the nursing curriculum. The faculty member participates in the development, revision and evaluation of courses and curriculum within the overall framework of the philosophy of the department of nursing and the University. Supervise and evaluate students' clinical performance and provide written and verbal feedback to students regarding their achievement of the course objectives.

Department of Nursing Faculty must:

Faculty shall hold a master's degree in nursing with an earned doctorate in nursing or related discipline, preferred. Faculty members with a graduate degree in fields other than in nursing shall have a baccalaureate degree with a major in nursing. Faculty must also hold an unencumbered license as a registered nurse or a multistate licensure privilege to practice nursing in the Commonwealth. Knowledge and experience in baccalaureate nursing education preferred.

Every faculty member shall maintain professional competence through such activities as nursing practice, continuing education programs, conferences, workshops, seminars, academic courses, research projects, and professional writing. Clinical Faculty shall meet the licensing requirements of the jurisdiction in which that practice occurs. When faculty are supervising students who are giving direct care, the faculty shall be on site solely to supervise students. Ensure enrolled students understand they may perform tasks that would constitute the practice of nursing. Ensure the student understands that the student is responsible and accountable for the safe performance of those direct patient care tasks to which s/he has been assigned.

Specific Responsibilities:

- Develop, implement, and evaluate the philosophy and objectives of the nursing education program;
- Design, implement, teach, evaluate, and revise the curriculum;

- Develop and evaluate student admission, progression, retention, and graduation policies within the framework of the controlling institution;
- Participate in academic advisement and counseling of students;
- Provide opportunities for student and graduate evaluation of curriculum and teaching and program effectiveness; and
- Document actions taken in faculty and committee meetings.
- Participates in classroom and clinical teaching;
- Advises nursing and non-nursing students regarding courses, mid-semester and semester grades, planning to meet major and degree requirements, formulating realistic plans for graduate education and/or vocation, and other concerns as necessary;
- Completes workload plan and evaluation reports as described in University Faculty Handbook;
- *Attends regularly scheduled faculty, school and program meetings;
- *Participates in convocations and commencement exercises;
- Participates in standing and ad hoc committees within the University;
- Participates in committees, projects, and program assessment in the department of nursing.
- Maintains expertise in clinical practice;
- Participates in professional organizations;
- Engages in activities which promote professional development;
- Participates in community service;
- Maintains professional ethics and personal conduct congruent with Professional Standards and the University Faculty Handbook

Clinical Practice of Students:

- In accordance with §54.1-3001 of the Code of Virginia, a nursing student, while enrolled in an approved department of nursing, may perform tasks that would constitute the practice of nursing. The student shall be responsible and accountable for the safe performance of those direct patient care tasks to which he/she has been assigned.
- Faculty members or preceptors providing supervision in the clinical care of patients shall be responsible and accountable for the assignment of patients and tasks based on their assessment and evaluation of the student's clinical knowledge and skills. Supervisors shall also monitor clinical performance and intervene if necessary for the safety and protection of the patients.
- When preceptors are utilized for specific learning experiences in clinical settings, the faculty member may supervise up to 15 students.
- Faculty in the clinical settings may supervise a maximum of 10 students per the Virginia Board of Nursing regulations.

The clinical adjunct nursing faculty member is responsible for the implementation of the nursing curriculum. The faculty member supervises and evaluates students' clinical performance and provides written and verbal feedback to students regarding their achievement of the course objectives.

Department of Nursing Clinical Adjunct Faculty must:

Faculty shall hold a master's degree in nursing with an earned doctorate in nursing or related discipline, preferred. Hold an unencumbered license as a registered nurse or a multi-state licensure privilege to practice nursing in the Commonwealth. Knowledge and experience in baccalaureate nursing education preferred. Faculty members with a graduate degree in a field other than in nursing shall have a baccalaureate degree with a major in nursing. Every faculty member shall maintain professional competence through such activities as nursing practice, continuing education programs, conferences, workshops, seminars, academic courses, research projects, and professional writing. Clinical Faculty shall meet the licensing requirements of the jurisdiction in which that practice occurs. When faculty are supervising students who are giving direct care, the faculty shall be on site solely to supervise students. Ensure enrolled students understand they may perform tasks that would constitute the practice of nursing. Ensure the student understands that the student is responsible and accountable for the safe performance of those direct patient care tasks to which s/he has been assigned. Responsible for teaching and monitoring student performance and progress in the clinical setting. The clinical faculty member will support and uphold the goals and objectives of the lecture course and those specified within the clinical syllabi throughout the clinical experience, ensuring that each student has similar clinical opportunities and experiences. He/ she will supervise and evaluate student clinical performance and provide written and verbal feedback to each student regarding their achievement of the clinical course objective

SPECIFIC RESPONSIBILITIES OF 1st YEAR CLINICAL ADJUNCT FACULTY

1. Communicate with lead faculty a minimum of **six times during 1st semester**, with the first time being a week prior to student orientation.
 - a. At the first meeting the following will be reviewed:
 - i. Clinical paperwork, manuals, syllabi, etc.
 - ii. The process of making clinical assignments
 - iii. The clinical's nursing diagnosis handbook and other necessary textbooks
 - iv. Examples of poor and excellent clinical paperwork
 - v. Technology to be used in course (i.e. Moodle) and others associated with the University of Lynchburg department of nursing (i.e. MyLynchburg, examsoft, iPads).
 - vi. Clinical adjunct faculty mentor

1. The mentor will be an individual appointed by the lead faculty if the lead faculty is unable to act as the mentor
2. Attend student orientation or meet with an assigned clinical group prior to 1st clinical day.
3. Attend clinical faculty meetings as arranged by lead faculty.
4. Meet with the clinical site manager and spend time at the assigned clinical site with one of the site's experienced staff members.
 - a. At this meeting the following will be reviewed by the manager, unit or clinical nursing staff, or assigned faculty mentor:
 - i. Policies and procedures for the clinical site, including where to locate these as needed
 - ii. Documentation
 - iii. Clinical site's daily routines
 - iv. Clinical site's staff and how to contact staff as needed
 - b. The amount of time to spend at a specified clinical facility will be at the designated mentor's discretion

SPECIFIC RESPONSIBILITIES OF RETURNING CLINICAL ADJUNCT FACULTY

1. Communicate with the lead faculty or designated mentor at least two to- three times throughout the semester to discuss clinical policies, updates on clinical settings, and any additional changes from prior clinical teaching experiences.
 - a. If teaching a different clinical, review of clinical paperwork, manuals, syllabi, etc. will need to be completed with the lead faculty prior to student orientation.
2. Attend student orientation or meet with an assigned clinical group prior to the first clinical day.
3. Attend clinical faculty meetings as arranged by lead faculty.
4. Faculty teaching at a clinical site with prior clinical faculty experience will communicate with the clinical site manager each semester and review clinical site updates regarding policies, documentation, etc.
5. Faculty teaching at a new clinical site will meet with the clinical site manager and spend time at the assigned clinical site as needed with one of the site's experienced staff members.

- a. At this meeting the following will be reviewed by the manager, unit or clinical nursing staff, or assigned faculty mentor:
 - i. Policies and procedures for the clinical site, including where to locate these as needed
 - ii. Documentation
 - iii. Clinical site's daily routines
 - iv. Clinical site's staff and how to contact staff as needed
- b. The amount of time to spend at a specified clinical facility will be at the lead faculty's or designated mentor's discretion.

Faculty must provide to the clinical coordinator:

1. Evidence of current CPR certification (AHA BLS)
2. Evidence that immunization guidelines have been followed.

Immunization Guidelines* <https://www.cdc.gov/vaccines/adults/rec-vac/hcw.html>

Faculty should obtain:

- a. An original series of tetanus, diphtheria immunization, plus booster every 10 years.
- b. An original series of polio vaccines.
- c. A second immunization for measles, mumps, & rubella, (MMR) or positive titer. The only persons excused from this requirement are those persons born prior to 1956 who have all three diseases documented with dates.
- d. Hepatitis B vaccine series or positive titer.
- e. It is required that faculty have an annual influenza vaccination. Consistent with the Centers for Disease Control (CDC) guidelines, if a faculty member elects not to receive the vaccination, he/she must sign a waiver form explaining the reason for declining the vaccination. In this case, the student must wear a mask during flu season.
- f. Two Varivax, physician diagnosed case of chickenpox or shingles, or positive titer.
- g. Tuberculosis (TB) Screening.
 1. Initial TB Screening Requirement –
Option 1 – A TB Two-Step Screening administered within 1-3 weeks of each other and both results read within 48-72 hours.
 - If a complete TB Two-Step Screening has been done before, then that screening can be submitted for the Initial TB Screening requirement no matter when the Two-Step Screening was completed.
 - If the Two-Step Screening was completed over one year ago, then an Annual TB One-Step Screening, which is one PPD injected and read within 48-72 hours with the measurement listed may be submitted.
 - Option 2** – Results for one IGRA blood test completed within the past year.
 - Option 3** – Radiology report for a Chest X-Ray specifically screening for TB taken within the past 10 years. If the chest x-ray is over one year old, then a current TB Screening Questionnaire Symptoms Checklist completed by your Healthcare Provider within the past year stating you do not have any TB symptoms must also be submitted. Another chest x-ray is not required.

2. Annual TB Screening Requirement – An Annual TB Screening is required to continue participating in patient care in healthcare facilities.

Further Information about Acceptable TB Screening Options

–Acceptable Screening Options include a Mantoux Tuberculin Skin Test (TST), an Interferon Gamma Release Assay (IGRA) blood test, or a Chest X-Ray specifically screening for TB. A Tine test is not acceptable.

a. Mantoux Tuberculin Skin Test (TST) – Faculty choosing TST testing must initially have a Two-Step TST, then yearly One-Step screening. Two-Step tuberculin screening requires a second intradermal injection, 1-3 weeks after the first injection.

- A positive test usually indicates the person has the tuberculosis bacteria or latent tuberculosis, and will require further testing which includes a chest x-ray to rule out active tuberculosis.
- Faculty who have had previous two-step testing must submit documentation and should not have a repeat two-step test.
- Individuals who have had a past positive TST should never have a repeat TST.

b. Interferon Gamma Release Assay (IGRA) - Individuals born in high incidence countries (according to the World Health Organization), including most countries in Asia, Africa, Central America, South America, Eastern Europe and other countries, or who have received the immunization BCG (Bacille Calmette-Guerin) should preferably have IGRA testing (i.e. Quantiferon Gold or T spot), to avoid a possible false positive result for tuberculosis.

o Faculty may choose to have interferon testing especially if they have had a previous positive TST.

c. Faculty who have had a chest x-ray for tuberculosis screening should not have another chest x-ray to screen for TB unless symptoms of TB are present. Symptoms of tuberculosis may include cough, chest pain with breathing, chills, unexplained weight loss, fatigue, night sweats or coughing up blood.

A yearly review of symptoms and assessment by a Health Care Provider will be required for those with past positive TB screening. A copy of this exam signed by a Health Care Provider will be required yearly instead of other types of tuberculosis screening.

h. TdaP recommended.

RECRUITMENT

See University of Lynchburg Faculty Handbook.

EVALUATION

Faculty Evaluation

See University of Lynchburg Faculty Handbook.

Adjunct Faculty Position Description

See University of Lynchburg Faculty Handbook.

Adjunct Faculty Evaluation

Adjuncts are required to obtain student evaluations for contracted teaching responsibilities: clinical, classroom, or both. If desired, adjuncts may seek peer evaluation and evaluation from clinical agency staff. Adjuncts should use department of nursing evaluation tools.

The student evaluation tools should be provided to the student in the clinical or classroom setting and time made available for these to be completed.

FACULTY UNIFORM GUIDELINE

Information regarding clinical attire will be provided upon beginning clinical faculty positions. Individual faculty are responsible for the purchase of any attire.

Faculty are expected to convey professionalism through their dress and behavior in all clinical experiences. A Lynchburg nursing faculty photo ID badge must be displayed above the waist during clinical experiences. Agency specific ID badges may also be required to be worn; this is determined by clinical agency.

Community Setting: Professional attire appropriate for the clinical agency.

Hospital and Simulation Setting:

Gray, red, or black scrub tops, pants and lab coats

For tops and lab coats: "Lynchburg Nursing" is suggested to be embroidered on the left chest and/or a Lynchburg Nursing patch may be adhered to the left sleeve

Any University of Lynchburg tops, including but not limited to: polos and short or long sleeve t-shirts.

FACULTY RESOURCES

Listed below are a few reminders about faculty development opportunities, duties you should be aware of, and general information you may find helpful. Most of the following links will take you to our internal Faculty Resources pages where you may find answers for many of the questions you will have this year.

Teaching and Learning Center

The Center's mission is to provide a range of resources and support to faculty members who wish to gain knowledge and skills related to innovative, evidence-based pedagogy, leading to more effective learning environments for University of Lynchburg students. Led by Faculty Fellows, the Center offers leadership and expertise to all teaching faculty. Activities include professional development opportunities, pedagogical research, and recognition of teaching excellence.

Course Evaluation Process

Student opinion surveys are to be gathered primarily for formative purposes, including instructional development and course development. Non-tenured faculty, including regular part-time and adjunct faculty, will gather student opinion data in every course taught. This is an electronic process that is sent from ITR to students for each course taught. Tenured faculty will gather student opinion data in at least one course, determined by the program chair, each semester. Tenured faculty who are applying for sabbatical leave or promotion should solicit student opinion in each course taught in the semester preceding such application. Program chairs may, if deemed necessary, also require student opinion data in each course taught by a particular faculty member in a given semester. Faculty shall use an instrument provided by the University and approved by the Faculty Development Committee. Faculty may also use instruments of their own choosing to supplement those provided by the University. Student opinion data gathered using the University's instrument are reported after each term to the faculty member, the appropriate Program chair, and the Vice President and program chair for Academic Affairs. Further information may be found at the academic affairs faculty resources page.

Credit Hour Calculator

Information regarding policy and procedures can be found at the academic affairs faculty resources page.

Faculty Development Deadlines

Funds are available for professional development; see University Faculty Handbook for policies. Guidelines and application forms can be found in the academic affairs faculty resources page.

J-Term

A formal January term offers a variety of online and residential courses, as well as study abroad, internships and student research. See Catalog/University Academic calendar for dates.

Plagiarism and Turnitin.com

Faculty may wish to review definitions of plagiarism with students and/or reference relative portions in syllabi. University of Lynchburg's Statement of Plagiarism appears in *The Hornet*, the student handbook. Unfortunately, with easy access to the Internet, plagiarism is often common, and sometimes not well understood by students. It is wise to make clear how you define plagiarism and how you respond when you discover it. Material included in the Handbook for New & Adjunct Faculty on Turnitin.com provides one mechanism useful to students and faculty to uncover and correct when ideas are not expressed in the student's own words. Sometimes students don't realize what plagiarism is and Turnitin.com is a useful teaching tool. Please read University of Lynchburg's Statement on Plagiarism and learn more about Turnitin.com. Further information may be found at the academic affairs faculty resources page.

Student Application for Funding

Funds are available for undergraduate students accepted to present or perform at a conference. A student must have a faculty sponsor, and after being informed of his/her acceptance, this application should be completed and funding approved **prior to** the conference. Funds are limited and will be awarded to students in good standing on a first come, first served basis. Further information may be found at the academic affairs faculty resources page.

Syllabi

A detailed syllabus shall be prepared by the instructor and be distributed to enrolled students during the **first class session**. One copy of the syllabus must also be provided to the school administrative assistant and, when appropriate, the nursing program chair. The syllabi needs to be uploaded to the academic affairs website. It is the responsibility of each faculty member to prepare the syllabus and to update it each time the course is taught. For additional information, refer to further information may be found at the academic affairs faculty resources page. Faculty should refer to the following links for nursing syllabus templates.

Please refer to the following [Link for the Orientation Program Document](#).

COURSE ORIENTATION FOR FACULTY

Course Orientation for Faculty

This document serves as a resource for current course faculty to orient incoming faculty to the course. Ideally this orientation will transpire at least a month prior to the start of the course but may change based on the needs of the program.

	Course Concepts to Review
	Course Syllabus
	Course Assignments and how they are tied to program outcomes
	ATI Matrix and implementation within course
	Student Success Algorithm
	ATItesting.com <ul style="list-style-type: none">• Log-in• ATI Academy (as needed)• ATI book
	Textbook (paper or electronic) and its resources (Prep-U)
	DocuCare orientation and Login
	ATI Custom Assessment Builder
	LSMAC (if applicable)
	Orientation to clinical/simulation policies and requests
	Nursing Program Policies and Handbook <ul style="list-style-type: none">• Testing Policy• Remediation Policy• Civility Charter• Course Revision Policy
	Moodle
	NCLEX blueprint
	Room request procedures

COURSE REVISION PROCESS

Please refer to the following [Link](#) to make proposed course changes.

SIMULATION REVISION PROCESS

Please refer to the following link to make proposed changes to the simulation process.
[Link](#)

PROCESS FOR APPLICATION TO NURSING MAJOR

Please refer to the [University undergraduate catalog](#) based on student admission year.

NURSING 397 – INDEPENDENT STUDY IN NURSING (1-3 CREDITS)

Students may take an independent study in nursing to pursue study in a topic not covered by available courses. Students must receive approval from a faculty sponsor and school program chair, and must have junior or senior status. One to three credits can be allotted for independent study.

Prior to approval students must complete the University of Lynchburg department of nursing Independent Study Form and the form below that is a requirement for University of Lynchburg. Both forms must be completed and submitted at least 30 days prior to the semester in which the independent study will take place.

This form must be completed and submitted: [Link](#)

Required forms by University of Lynchburg:

[INDEPENDENT STUDY & SPECIAL PROBLEMS REGISTRATION FORM](#)

CLINICAL EVALUATION FORMS (JUNIOR/SENIOR LEVEL)

[Immediate Feedback Form](#) for all clinical courses.

Student Clinical Evaluation Form [Link](#) for all clinical courses.

[Clinical Performance Alert](#)

Refer to the [following](#) for 419 Preceptor evaluation form.

[UL School of Nursing: Faculty Evaluation of Clinical Site](#)

STUDENT INJURY POLICY

STUDENT MEDICAL EMERGENCY AND/OR INJURY POLICY

In the event that a nursing student medical emergency and/or injury (or potential injury) that occurs on campus (classroom or skills lab), those practices that govern on-campus behavior will be followed (example, contact University of Lynchburg EMS or Call 911 or Follow Campus Bloodborne Pathogen Exposure Plan). The only exception is that in addition to following usual University of Lynchburg practices, the Medical Emergency/Injury Form will be completed and placed in the student's file within the Nursing Department.

In the event that a student medical emergency and/or injury (or potential injury) occurs at a clinical site (including the simulation center), the agency policy regarding work-related injuries will be followed.

Administrative Notification (Regardless of Location)

As soon as possible, the faculty member will verbally notify the program chair of Nursing and/or the Dean of School of Medicine and Health Science. Details should include specific information about the medical emergency/injury as well as what follow-up steps were taken. Within 24-hours, the faculty member will submit written documentation to the department of nursing program chair recording the events.

Student/ Faculty Responsibilities and Documentation

1. Student Responsibilities:

- a. **Notify clinical faculty members as soon as possible.**
- b. If a clinical faculty member is not immediately available, contact the responsible agency staff.
- c. Within 24 hours, document the actual/potential injury including:
 1. Date, time, & location of the medical emergency and/or injury.
 2. Specific details regarding how the medical emergency and/or injury occurred.
 3. Specific details regarding the nature of the medical emergency and/or injury (or potential injury).
 4. Follow-up medical treatment (if applicable).
- d. The 'Student Medical Emergency/Injury Report' (see below) will be used to record the required documentation.

2. Faculty Responsibilities:

- a. If the medical emergency/injury occurs on campus, follow usual campus practices
 - a. Determine if University of Lynchburg EMS and/or 911 services are needed and act accordingly.

- b. If the student has been exposed to blood/body fluids, follow the University Exposure Control Plan – Bloodborne Pathogens Policy (available on the Nursing Faculty's Moodle2 Site)
 - b. If the program chair of the department of nursing and/or Dean of the College of Health Sciences are not available, make the appropriate campus notifications the nursing faculty should initiate this process.
 - c. If the medical emergency/injury occurs off campus, agency policy regarding work-related injury should be followed.
 - d. Advise students regarding the appropriateness of medical follow-up.
 - e. Notify program chair of department of nursing and Dean of School of Medicine and Health Science
 - f. Notify the student of the requirement to document the event. If the student is medically unable to complete the required documentation, the faculty member will assume this responsibility.
 - g. Assure that student documentation is accurate and complete.
 - h. Co-sign student's documentation of injury.
 - i. Complete the Notification portion of the 'Student Medical Emergency/Injury Report'
 - j. Give the program chair of the department of nursing a copy of the documentation.
 - k. File original copy of documentation in student's department of nursing file.
3. Program Chair of department of nursing Responsibilities:
- a. In the event that the Faculty needed to call 911 to address the student emergency/injury, the director should notify Campus Safety and Security.
 - b. In the event that the student is admitted to the hospital (emergency department and/or inpatient), the Chaplain's office should be notified. The Chaplain's office will determine if a member of Spiritual Life should be with the student at the hospital.
 - c. In the event that a student is exposed to blood/body fluids a Nursing class or lab on campus, the program chair of the department of nursing will work with Student Health to determine if HIV/HepB blood testing of the Source Individual & Exposed Individual is warranted (See University Exposure Control Plan – Bloodborne Pathogens Policy)
 - d. It is the responsibility of the program chair of the department of nursing to determine if it is appropriate to notify other University administrators.

Regardless of where the injury occurred, the student is responsible for all related health care costs. Neither University of Lynchburg nor the department of nursing is responsible for the payment of hospital or other health care expenses incurred by the student.

Student Name
Today's Date
Date of Emergency/Injury
Location of Emergency/Injury
Details Regarding:
How Emergency/Injury Occurred (Be specific, but do not violate patient privacy)
Emergency/Injury or Potential Injury
Follow-up Medical Attention, if
Needed (Be Specific)
Student Signature Date Faculty Co-Signature Date

ACADEMIC ADVISING

ADVISING

Advising students is an important responsibility of the University of Lynchburg Faculty. Advising involves not only assisting students to plan schedules and meet criteria for progressing through the curriculum in the major, but becoming involved with students so that advisors are seen as individuals who can provide assistance to help students make decisions and to use other University resources as the need arises. Faculty should remind students that they (students) not parents, faculty, or others, are ultimately responsible for the decisions made and for ensuring all degree requirements are met. Since students DO NOT always follow through when faculty and students discuss options, faculty are encouraged to use the students' electronic advising summary to record their discussions with students and keep this record in the student file.

ADVISING PROCESS

Nursing faculty will be informed of their student advisees each fall, in addition to the new advisees assigned as new students enter the major. The Nursing Administrative Assistant keeps a record of all advisee lists. Electronic student files are maintained by the Office of Academic Advising on the University of Lynchburg student management system. The nursing department creates electronic files for each student and these are filed according to class in the files in the Administrative office.

While students are notified of the name of their advisor, they often do not initiate contact. Faculty should send a note to a new advisee indicating the need to meet and become acquainted.

Faculty are advised to bring to students' attention the course progression information so that students can make plans which fulfill requirements for nursing major courses and general education in a timely sequence. Notices and information concerning course requirements and course offerings come from the Registrar periodically throughout the academic year, via E-mail, and can be found on the online faculty web pages

(www.lynchburg.edu/facultyonline). Faculty should review this information carefully and share updated information with advisees.

FRESHMAN ADVISING PROGRAM

Freshmen are involved in advising programs.

ADVISING HINTS

For generic students **to complete the program** within 4 academic years (without summer school), progression through nursing courses and the number of gen. ed. credits need to be consistent with 15 - 16 credits each semester.

Encourage students to take the specific general education courses that they *must have* (strongly prefer) in freshman and sophomore years since once students get to the junior/senior levels, it is much more difficult to schedule classes due to the clinical commitments on Tuesdays and Thursdays. For example, if a student wants a certain art course, it is easier to schedule during freshman or sophomore year.

Students may take some courses, no required general education or major courses, as “**pass/fail**.” (NOTE: A student can only take 4 P/F courses total).

Students who wish to participate in **athletics** should consider their usual performance levels to determine if course loads should be reduced during the athletic season. It is often better for students to plan on taking a summer course or two than to try to combine sports with a full 16 credit load and not do well. These decisions should be made with students after discussing student potential and wisest course of action.

Dell education requirements

Advisors should refer students to the University catalog or general education web page to determine which specific courses meet general education requirements. Some information which is helpful to counseling nursing majors follows:

PROGRESSION IN THE MAJOR

Please refer to the [University undergraduate catalog](#) based on student admission year.

ADVISING COMMUNICATIONS

Documentation of student\advisor communication is essential. Faculty should document all contacts with students using the online system.

Alert System

Faculty should use the alert system available online to identify students at risk for being unsuccessful in a course at any time during the semester. The student and his or her advisor receive this communication. In the case of student athletes, coaches may also be placed on the alert, in order to facilitate positive communication about the student's academic progress.

POLICY FOR STUDENT AWARD NOMINATIONS

Please refer to the following [Link](#) for Student Award Nominations information.

DEPARTMENT OF NURSING COURSE AND TESTING POLICIES

FACULTY

This handbook is dedicated to the nursing faculty in their resolve for high teaching and testing standards as they assist their students towards NCLEX success. The testing procedures and policies pertain to objective tests and exams throughout the nursing curriculum. Throughout this handbook the terms *exam* and *test* will be synonymous.

Part I: Course Development

All nursing theory courses that have a clinical counterpart will require a minimum of 75% of the evaluation methods to be in the form of objective tests and exams with an additional 10% being allocated for ATI Proctored Assessments. Other assessments, which may include Clinical Care Plan (CCP), papers, presentations, quizzes, and/or case studies will account for the remaining 15% of the grade.

- 75% Tests and Exams
- 10% ATI proctored assessment
- 15% Other, including but not limited to: CCP, papers, presentations, quizzes, and/or case studies

Part II: Exam Construction Guidelines

Design

Exams *may be designed* following the most up to date NCLEX-RN Test Plan. Question designs will include multiple-choice, alternate item formats, and Next Gen style questions. Test items will increase in difficulty as the student progresses through the course and program as indicated in the chart below.

	Sophomore level	Junior level	Senior level
Knowledge/Comprehension	30-40%	20-30%	10-20%
Application/Analysis	60-70%	70-80%	80-90%
Alternative Item- includes Next Gen and Med Calculations	10-20%	20-30%	Greater than 40%
Mastery	<10%	<10%	<10%

Mastery items are items that faculty expect 100% of the students to answer correctly.

Next Gen Items should not be used on a test unless they are used in teaching before the exam, allowing the student sufficient time to become familiar with these item types. Item styles may include these styles as provided by the NCSBN®'s NextGen NCLEX®.

Next Gen items include:

- Cloze
- Extended drag and drop
- Matrix
- Enhanced hot spot
- Extended multiple response (SATA).

All types of alternative items options should be experienced by students in the classroom and testing environments. Alternative item options include:

- Select all that apply - multiple response (5 or 6 answer options) (most difficult)
- Fill in the blank - math calculations only (most difficult & time consuming)
- Drag and drop - ordered response (most time consuming)
- Hot spot
- Multiple choice (4 answer options)
 - Chart exhibit (answer options)
 - Table and graphs (most difficult and time consuming)
 - Audio
 - Video

Medication calculation testing - testing for medication calculation should be reflective of the style used for teaching, allowing students sufficient time to become familiar with this type of question.

If questions are used from previous exams, faculty should review the prior statistics on that question and modify the question as necessary to maintain testing standards (see exam evaluation section).

Multiple response items will receive partial scoring. See the [NCSBN® scoring guidelines](#) for partial credit scoring descriptions and examples.

Development

Exam development includes knowing what chapters or information the exam is to cover; preparing an exam blueprint; deciding the number of questions to ask; the amount of time allowed for the exam; and whether alternate forms of the exam are needed.

The information for each test item needs to be important for an entry-level, generalist nurse to know. The item should identify how well the student achieved the course/unit learning outcomes. The item should use familiar vocabulary (unless testing medical terminology). The item should be written at a 10th to 12th grade reading comprehension level. Use language that is consistent with NCSBN guidelines - i.e. parent rather than mother/father; client rather than patient, etc.). (National Council of State Boards of Nursing, 2016). The NCLEX bolds key words such as best, most, essential, first, priority, immediately, highest, initial, next, refute, increased, decreased and support. Avoid culture specific words, brand names, geographic-specific terms, and slang.

Exam blueprint. An exam blueprint outlines the relevant knowledge to be tested. A simple rule is to take the number of chapters and divide 50 questions over those chapters. Example: if 5 chapters were covered equally, then develop 10 questions from each chapter of content. At a minimum, each item should be blueprinted to the course student learning outcomes. Additional areas of blueprinting include Bloom's Taxonomy, NCLEX® Client Needs categories, nursing process, QSEN, CCNE competencies, and Level 3 of the NCSBN® Clinical Exam and Testing Policy.

Exam questions. Writing questions to test critical thinking and clinical judgment can be difficult. One way a faculty member can know he/she has written a good critical thinking question is to look at the answer. If the answer can only be found by reviewing several combined resources and not in one paragraph in a text, it is usually considered a critical thinking question. Every question should have a written rationale and a reference validating the best answer.

Faculty should consider piloting items and/or a peer review of the test. Proofread for grammar, punctuation, and spelling. At least 2 sets of eyes should review every test before administration.

Use	Avoid
Client “reports”	Client “complains of”
Focus on the client, i.e. the client who has/diagnosed with diabetes	Labeling the client, i.e. the diabetic client
Only relevant information	Gender, age, marital status, race (unless pertinent to testing point)
Provider	Physician, doctor, nurse practitioner, physician assistant
Generic	Trade names
Active present tense, i.e. “should do”. Make it clear what the question is asking.	Awkward, wordy sentences
A nurse, a client	Personal pronouns
Use full word, i.e. hypertension	Abbreviations, i.e. HTN
Indwelling urinary catheter	Foley catheter

Ross, Bonnie. (2022). *Overview of NCLEX® Style Item Writing* [PowerPoint slides].
Assessment Technologies Institute

Cheating Prevention. Evidence suggests using caution when utilizing online or publisher test bank questions as these questions may be compromised. Questions and options should be randomized. The [University of Lynchburg Nursing Test Script](#) should be read aloud before every exam or placed in the test instructions.

Timing exams. The NCLEX exam is timed [145 maximum questions over a maximum of 5 hours] and classroom time is limited. Therefore, placing a time limit on an exam is another way to prepare students for NCLEX. See the chart below for timing considerations.

K/C Items	A/A Items	Alternative Item-Traditional	Alternative Item-Medication Calculation	Alternative Item-Next Gen
1.0 min/item	1.5 mins/item	1.5 mins/item	2.0 mins/item	2.5 mins/item

Backward Navigation. Backward navigation on tests and exams will be disabled for all students.

Exam Evaluation

1. Each exam will be statistically evaluated using Examsoft software resources. Faculty will complete an item analysis after test administration prior to posting of the assessment grades. The goal is for the *p-value* to be between 30-80%, the point biserial for the key to be a positive number, and the point biserial for the distractors to be a negative number. Here are some resources for test item analysis. This [resource from ATI](#) describes item difficulty and item discrimination. This [resource from ExamSoft](#) explains test statistics.
2. Item difficulty (*p-value*): If only 30% or less get a question right, action should be taken. Further action could include analysis for discrimination or omission. After assessing data, faculty may also choose to take no action. However, when taking action concerning omitting test questions, the question should be omitted for everyone. So if 2 questions are thrown out on a 50 item test, give everyone credit for the 2 questions that were thrown out and keep the total number of questions at 50.
3. Point biserial: If the key's point biserial is below 0.10 action should be taken. Further action could include analysis for discrimination or omission. After assessing data, faculty may also choose to take no action. However, when taking action concerning omitting test questions, the question should be omitted for everyone. For example, if a 50 question test was given with two questions omitted, then the score would be based on a 48 item test for the entire class.
4. The exam score should be rounded to the tenth place and recorded in the grade book. For example, 85.48 would be recorded as 85.5 in the grade book.

Starting with the Class of 2027 (Freshman starting in Fall 2023 and beginning nursing courses in Fall 2025): The exam score should be recorded to the hundredth place and recorded in the grade book. **No grade will be rounded upward.** For example, 85.48 would be recorded as 85.48 in the grade book. See Progression Policy for more details.

5. Extra credit should not be applied to test scores.

Please see the most up to date NCLEX test plan at
<https://www.nclex.com/test-plans.page>

Best Practices for Item Writing (adopted from ATItesting.com at
https://atitesting.com/docs/default-source/policies-research/ati-policy-recommendations/ati-best-practices-for-item-writing_10052022.pdf?sfvrsn=702d4ad7_3)

Best Practices and Guidelines for Writing an Item Stem.	
1.	It should be clearly and concisely written. Try to omit unnecessary words.
2.	Its content should be appropriate for the examinee ability level.
3.	It should be stated positively. Try to omit negative words such as “not” or “except.”
4.	It should present a clear scenario for examinees to apply their content knowledge.

5.	It should be grammatically compatible with all options, including the key and distractors.
6.	Avoid stems with definition questions. Correct responses require little job-related mastery.
7.	Avoid open-ended stems. They lack sufficient direction for examinees to respond.
8.	Avoid similar language in the stem and key. It may provide a cue for selecting the key.
9.	Avoid vague terms such as “most,” or “often.” Item terms should be clear and explicit.
10.	Avoid similar language in the stem and key. It may provide a cue for selecting the key.

General Best Practices and Guidelines for Writing Item Options	
1.	They should be independent and not overlap. Similar options are usually not correct.
2.	Avoid introducing new information in the options. It may cue the key or distractors.
3.	Avoid all-inclusive options (e.g., “All of the Above”). Items may be answered with partial knowledge.
4.	Avoid using lists for the options. They are typically confusing and add reading comprehension.
5.	Avoid fill-in-the-blank options.* They usually measure recall and not application of knowledge.
6.	Avoid paired options (e.g., “Both A and B”). Items may be answered with partial knowledge.

*An exception to this best practice would be dosage calculation items.

General Best Practices and Guidelines for Writing Item Keys	
1.	It should clearly answer the question posed in the stem.
2.	It should be defensible. Each key should have a reference to indicate why it is correct.
3.	It should be parallel in length, complexity, grammar, and structure with the other options.
4.	It should be short and concise.
5.	Avoid similar language in the key and stem. It may provide a cue for selecting the key.
6.	Avoid obvious keys like “within legal guidelines.” They are easily identified.
7.	Avoid vague terms like “often” or “usually.” They may provide cues for selecting the key.
8.	Avoid using mutually exclusive options. Usually, one of the paired options is the key.

Best Practices and Guidelines for Writing Item Distractors.	
	They should be plausible, but not correct.*
	They should incorporate common and logical misconceptions regarding the content.
	They should help to diagnose levels of understanding for remediation.
	They should be parallel in length, complexity, grammar, and structure with other options.
	They should be short and concise.
	Avoid absolute terminology such as “always” and “never.” These options are rarely correct.
	Avoid creating option subsets. It provides unintended cues to eliminate distractors.

*A helpful strategy for creating a plausible, but incorrect, distractor is to write a specific rationale explaining “why” the distractor is incorrect.

Policy adopted from Nurse Tim Nurse Think Exam and Testing Policy
Rev. 8/10, 6/15, 7/16, 5/21, 5/23, 2/24

What does ATI offer?

- Assessment Technologies Institute (ATI) offers an assessment driven comprehensive review program designed to enhance student NCLEX® success.
- The comprehensive ATI review program offers multiple assessment and remediation activities. These include assessment indicators for academic success, critical thinking, and learning styles. Additionally, online tutorials, online practice tests, and proctored tests are provided and span major content areas in nursing. These ATI tools, in combination with the department of nursing content, assist students to prepare effectively, helping to increase their confidence and familiarity with nursing content.
- ATI information and orientation resources can be accessed from your student home page. **It is highly recommended that you spend time navigating through these orientation materials.** (www.atitesting.com)

ATI Individualized Study Plan

- [ATI Content Mastery Series Independent Study Plan](#)
- [NRSG 419 ATI Individualized Study Plan](#)
- [Dosage and Calculation Individualized Study Plan](#)

RN Content Mastery Proficiency Level Definitions

A student meeting the criterion for Proficiency Level 1:

- a. is expected to just meet NCLEX-RN® standards in this content area
- b. should demonstrate the minimum level of knowledge in this content area required to support academic readiness for subsequent curricular content
- c. should meet the absolute minimum expectations for performance in this content area.

A student meeting the criterion for Proficiency Level 2:

- a. is expected to readily meet NCLEX-RN® standards in this content area
- b. should demonstrate a level of knowledge in this content area that more than adequately supports academic readiness for subsequent curricular content
- c. should exceed minimum expectations for performance in this content area.

A student meeting the criterion for Proficiency Level 3:

- a. is expected to exceed NCLEX-RN® standards in this content area
- b. should demonstrate a high level of knowledge in this content area that confidently supports academic readiness for subsequent curricular content
- c. should exceed most expectations for performance in this content area.

Source: Executive Summary, RN Content Mastery Series 2019 National Standard Setting Study, ATI

CURRICULUM MATRIX

The following table outlines University of Lynchburg department of nursing's placement of ATI resources within the curriculum. It is the expectation that faculty teaching in courses below incorporate the following ATI content within specified courses.

University of Lynchburg ATI Curriculum Matrix must be followed according to the agreed upon matrix.

[University of Lynchburg Nursing Curriculum Matrix](#)
[ATI Curriculum Matrix](#)
[VBON Curriculum Matrix](#)
[NCLEX Curriculum Matrix](#)

POST-CLINICAL TEMPLATE AND REPORT SHEET

Post clinical template:

All Clinical groups are required to complete post clinical templates. Please click this [Link](#) to access directions. It is the expectation that for each clinical this will be completed.

[Report Sheet with NextGen:](#)

POLICY FOR OFF-CAMPUS PROJECT OR STUDY ABROAD

Please refer to the University faculty handbook (4.7) for the use of University Vehicles policy and policy for off-campus projects or study abroad.

GUIDELINES FOR ADMINISTRATIVE ADMINISTRATIVE STAFF SERVICES

OFFICE SUPPLIES

Supplies are located at 337 college street.

If you need a supply and cannot locate it, or if you take the last item, notify one of the Administrative Assistant.

Please share all departmental receipts with the Administrative Assistant for budget documentation.

LIBRARY PROCEDURES

LIBRARY REQUESTS

Each year, purchase of library materials for nursing are made until library funds for nursing acquisitions have been used. Requests for library purchases in areas where library holdings are deficient are given greater priority for purchase by the School of Health Sciences Library & Media Committee. **Normally current course textbooks are**

not considered for library purchase. This [form](#) is used to suggest new materials for the library to purchase.

PROGRAM EVALUATION PLAN BY AREA

University of Lynchburg department of nursing [Total Program Systematic Evaluation Plan](#)

EVALUATION FORMS

Rev. 7/09, 8/11, 8/24

The following forms are used in the department of nursing for evaluation:

- End of Course Evaluation
- Classroom Observation Report/Observation Feedback Form
- Faculty Evaluation by Agency
- Clinical Performance alert

University-wide faculty/course evaluation forms are distributed at the end of every semester/term to collect data from students. Evaluations will be sent electronically directly to the students with a link via email. Faculty will be sent an email by the Academic Affairs office, once the evaluations have been processed. Faculty will be able to access the evaluation results online.

CLINICAL AGENCY DESCRIPTION

University of Lynchburg department of nursing

When a new clinical agency is established, faculty should use this [Link](#)

ASSESSMENT OF CLINICAL AGENCY

All clinical agencies must undergo an assessment. An electronic version of the form below will be sent electronically to each nursing student enrolled in a clinical course at the end of each semester. The survey results will be sent to both the lead faculty members of the clinical coordinator.

Faculty will complete this form on each unit in the course. The Clinical Coordinator will schedule evaluations on a regular basis (new sites every year x2 and then every 2 years) and will remind faculty in the year/semester the evaluation is due. Forms will be available on the Nursing Network and in the copy room. Please send a copy to the Clinical Coordinator to file. These forms will be kept on file for five years in the agency folder.

10/00, rev 08/10

Use the following [Clinical Site Evaluation Form](#) to make a copy and add sections labeling each of your clinical sites.