



BOARD OF NURSING
Room 121A, 1400 East Washington Avenue, Madison
Contact: Dan Williams (608) 266-2112
April 12, 2018

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.

AGENDA

8:00 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

A. Adoption of Agenda (1-4)

B. Approval of Minutes of March 19, 2018 (Teleconference/Virtual Meeting) (5-6)

C. Administrative Matters - Discussion and Consideration

- 1) Board Members – Term Expiration Dates:
 - a. Paul Abegglen – 07/01/2019
 - b. Jennifer Eklof – 07/01/2021
 - c. Elizabeth Smith Houskamp 7/1/2020
 - d. Peter Kallio – 07/01/2018
 - e. Sheryl Krause – 07/01/2018
 - f. Lillian Nolan – 07/01/2019
 - g. Luann Skarlupka – 07/01/2021
 - h. Cheryl Streeter – 07/01/2018
 - i. Pamela White – 07/01/2019
- 2) Department Updates

D. Division of Legal Services and Compliance (DLSC) Annual Report – Discussion and Consideration

- 1) **APPEARANCE: Janie Brischke, Ashley Ayres, Jesse Benisch, DLSC Staff** – Professional Assistance Procedure Data/Summary – January 1, 2017 – December 31, 2017 **(7-10)**
- 2) Board of Nursing Annual Report – 2017 **(11-22)**

E. Education and Examination Matters - Discussion and Consideration

- 1) Herzing, Brookfield – Request for Authorization to Admit **(23-312)**
- 2) Out-of-State School of Nursing Approval Update

F. Legislative/Administrative Rule Matters - Discussion and Consideration (313-317)

- 1) N 8 Relating to Collaboration with Dentists
- 2) Possible Scope Amending N 8 to Clarify Advanced Practice Nurse Prescribers May Not Supervise Anesthesiologist Assistants
- 3) Update on Legislation and Pending or Possible Rulemaking Projects

G. National Council of State Boards of Nursing (NCSBN) Items - Discussion and Consideration

- 1) Update as to Nurse Compact (NLC) and Enhanced Nurse Compact (eNLC)
- 2) Update as to Online Nursing Course

H. Board of Nursing Liaison Reports – Discussion and Consideration

I. Speaking Engagement(s), Travel, or Public Relation Request(s)- Discussion and Consideration

- 1) Speaking Engagement Request for Sheryl Krause to Speak at the Wisconsin Nurses Association (WNA) 32nd Annual APRN Pharmacology and Clinical Update Conference – April 26 & 27, 2018 – Madison, WI **(318-319)**

J. Informational Items

K. Deliberation on Items Added After Preparation of Agenda:

- 1) Introductions, Announcements and Recognition
- 2) Election of Officers
- 3) Appointment of Liaison(s)
- 4) Delegation of Authorities
- 5) Administrative Matters
- 6) Education and Examination Matters
- 7) Credentialing Matters
- 8) Practice Matters
- 9) Legislative/Administrative Rule Matters
- 10) Liaison Reports
- 11) Board Liaison Training and Appointment of Mentors
- 12) Informational Items
- 13) Disciplinary Matters
- 14) Presentations of Petitions for Summary Suspension
- 15) Petitions for Designation of Hearing Examiner
- 16) Presentation of Proposed Stipulations, Final Decisions and Orders
- 17) Presentation of Proposed Final Decision and Orders
- 18) Presentation of Interim Orders
- 19) Petitions for Re-Hearing
- 20) Petitions for Assessments
- 21) Petitions to Vacate Orders
- 22) Requests for Disciplinary Proceeding Presentations
- 23) Motions
- 24) Petitions
- 25) Appearances from Requests Received or Renewed
- 26) Speaking Engagement(s), Travel, or Public Relation Request(s)

L. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85 (1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

M. Deliberation on Division of Legal Services and Compliance (DLSC) Matters

1) Attorney Amanda Florek

- a. Stipulations and Final Decisions and Orders
 - 1. 16 NUR 602 – Barbara M. Carpenter, RN **(320-326)**
 - 2. 17 NUR 475 – Debra J. Krueger, RN **(327-331)**
 - 3. 18 NUR 067 – Jonathan L. Long, RN **(332-338)**

2) Attorney Kim Kluck

- a. Administrative Warnings
 - 1. 16 NUR 615 – N.M.C. **(339-340)**
- b. Stipulations and Final Decisions and Orders
 - 1. 16 NUR 395 – Deborah R. Grossbier, L.P.N. **(341-347)**

3) Attorney Alicia Nall

- a. Stipulations and Final Decisions and Orders
 - 1. 17 NUR 309 – Ray D. Summar, R.N. **(348-354)**

4) Case Closures

5) Monitoring (355-356)

a. Department Monitor Jesse Benisch

- 1. Amanda Addison, R.N., A.P.N.P. – Requesting Full Licensure **(357-375)**
- 2. Brian Bailey, L.P.N. – Requesting Full Licensure **(376-396)**

b. Department Monitor Zoua Cha

- 1. Corrine Ahrens, R.N. – Requesting Full Licensure **(397-419)**
- 2. Samantha Schlesner, R.N. – Requesting Full Licensure **(420-439)**

c. Department Monitor Erin Graf

- 1. Matthew Elliott, R.N. – Requesting Full Licensure **(440-462)**
- 2. Matthew Heather, R.N. – Review of AODA Assessment **(463-473)**

N. Deliberation on Proposed Final Decisions and Orders

- 1) James R. Cambell, R.N., Respondent (DHA Case Number SPS-17-0030/DLSC Case Number 16 NUR 363) **(474-490)**
- 2) Timothy M. Dubois, R.N., Respondent (DHA Case Number SPS-17-0031/DLSC Case Number 16 NUR 633 and 17 NUR 435) **(491-509)**

O. Deliberation of Items Added After Preparation of the Agenda

- 1) Education and Examination Matters
- 2) Credentialing Matters
- 3) Disciplinary Matters
- 4) Monitoring Matters
- 5) Professional Assistance Procedure (PAP) Matters

- 6) Petitions for Summary Suspensions
- 7) Petitions for Designation of Hearing Examiner
- 8) Proposed Stipulations, Final Decisions and Order
- 9) Administrative Warnings
- 10) Review of Administrative Warnings
- 11) Proposed Final Decision and Orders
- 12) Matters Relating to Costs/ Orders Fixing Costs
- 13) Case Closings
- 14) Board Liaison Training
- 15) Proposed Interim Orders
- 16) Petitions for Assessments and Evaluations
- 17) Petitions to Vacate Orders
- 18) Remedial Education Cases
- 19) Motions
- 20) Petitions for Re-Hearing
- 21) Appearances from Requests Received or Renewed

P. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

Q. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

R. Board Meeting Process (Time Allocation, Agenda Items) – Discussion and Consideration

- 1) Newsletter Update

S. Board Strategic Planning and its Mission, Vision and Values – Discussion and Consideration

ADJOURNMENT

NEXT MEETING DATE: MAY 10, 2018

 MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 1400 East Washington Avenue, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board’s agenda, please call the listed contact person. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Interpreters for the hearing impaired provided upon request by contacting the Affirmative Action Officer, 608-266-2112.

**BOARD OF NURSING
TELECONFERENCE/VIRTUAL MEETING MINUTES
March 19, 2018**

PRESENT: Paul Abegglen (*joined at 10:00 a.m.*), Jennifer Eklof, Peter Kallio, Sheryl Krause (*re-joined at 9:58 a.m.*), Luann Skarlupka, Cheryl Streeter, Pamela White

EXCUSED: Lillian Nolan, Elizabeth Smith-Houskamp

STAFF: Dan Williams, Executive Director; Kimberly Wood, Program Assistant Supervisor – Advanced; and other DSPS Staff

CALL TO ORDER

Peter Kallio, Vice Chair, called the meeting to order at 9:52 a.m. A quorum of five (5) members was confirmed.

ADOPTION OF THE AGENDA

MOTION: LuAnn Skarlupka moved, seconded by Jennifer Eklof, to adopt the agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES OF MARCH 8, 2018

MOTION: LuAnn Skarlupka moved, seconded by Pamela White, to approve the minutes of March 8, 2018 as published. Motion carried unanimously.

CLOSED SESSION

MOTION: LuAnn Skarlupka moved, seconded by Jennifer Eklof, to convene to closed session to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85 (1)(b), Stats.); to consider closing disciplinary investigation with administrative warning (ss.19.85(1)(b), Stats. and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.); and, to confer with legal counsel (s.19.85(1)(g), Stats.). Peter Kallio, Vice Chair, read the language of the motion. The vote of each member was ascertained by voice vote. Roll Call Vote: Peter Kallio-yes; Jennifer Eklof-yes; LuAnn Skarlupka-yes; Cheryl Streeter-yes; Pamela White-yes. Motion carried unanimously.

At this time, all external communication contacts will be terminated for purposes of going into Closed Session.

The Board convened into Closed Session at 9:56 a.m.

RECONVENE TO OPEN SESSION

MOTION: Cheryl Streeter moved, seconded by Jennifer Eklof, to reconvene into Open Session. Motion carried unanimously.

The Board reconvened into Open Session at 10:01 a.m.

VOTING ON ITEMS CONSIDERED OR DELIBERATED ON IN CLOSED SESSION

MOTION: LuAnn Skarlupka moved, seconded by Cheryl Streeter, to affirm all motions made in closed session. Motion carried unanimously.

At this time, all external communication contacts will be terminated for purposes of going into Closed Session.

DELIBERATION ON PROPOSED STIPULATION AND INTERIM ORDER IN THE MATTER OF CASE NUMBER 18 NUR 082 CHRISTOPHER KAPHAEM, R.N.

(Sheryl Krause reconnected to the meeting at 9:58 a.m., and Paul Abegglen arrived at 10:00 a.m.)

MOTION: LuAnn Skarlupka moved, seconded by Jennifer Eklof, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Interim Order in the matter of disciplinary proceedings against Christopher Kaphaem, DLSC Case Number 18 NUR 082. Motion carried unanimously.'

ADJOURNMENT

MOTION: LuAnn Skarlupka moved, seconded by Cheryl Streeter, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 10:02 a.m.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: <i>Janie Brischke, Program Policy Analyst Advanced</i>		2) Date When Request Submitted: <i>April 2, 2018</i>	
Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting			
3) Name of Board, Committee, Council, Sections: <i>Board of Nursing</i>			
4) Meeting Date: <i>April 12, 2018</i>	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? <i>PAP Data / Summary (January 1, 2013 – December 31, 2017)</i>	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input checked="" type="checkbox"/> Yes (Fill out Board Appearance Request) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: <i>Submitting the required PAP Report to the Board for approval.</i>			
11) Authorization			
<i>Janie Brischke</i>		<i>April 12, 2018</i>	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			



BOARD OF NURSING

PROFESSIONAL ASSISTANCE PROCEDURE (PAP)

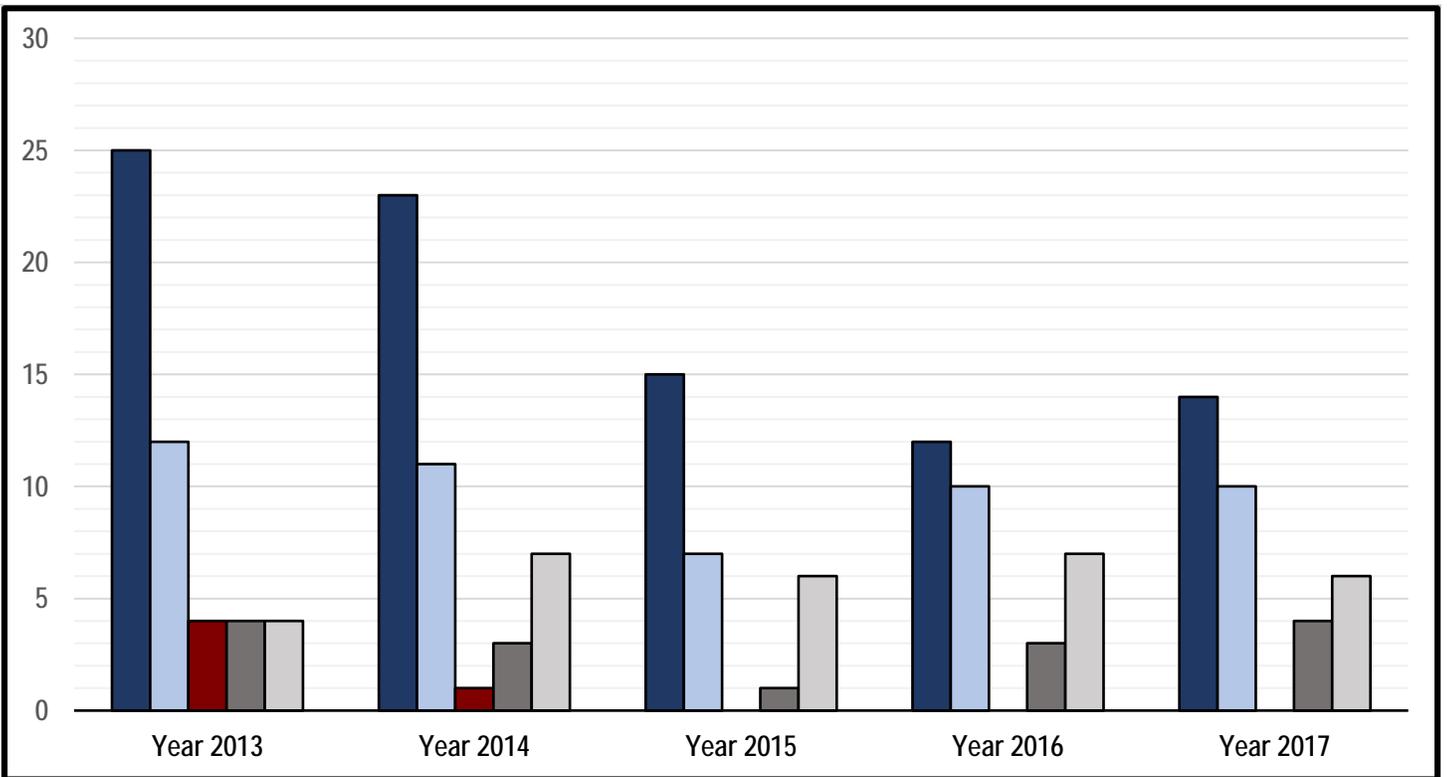
DATA / SUMMARY

JANUARY 1, 2013 – DECEMBER 31, 2017



PROFESSIONAL ASSISTANCE PROCEDURE (PAP)
PAP NURSING DATA SUMMARY/DETAILS
(January 1, 2013 – December 31, 2017)

	Year 2013	Year 2014	Year 2015	Year 2016	Year 2017
■ Nurses Applied	25	23	15	12	14
■ Nurses Accepted	12	11	7	10	10
■ Successfully Completed	4	1	n/a	n/a	n/a
■ Unsuccessful Completing Contract	4	3	1	3	4
■ Still Participating	4	7	6	7	6



- Year 2014 – Successfully completed was a participant who had a 3-year agreement.
- For the years 2015, 2016, 2017 there is no graphing for “Successfully Completed” because their 5-year PAP contract is still in effect. As the participant becomes eligible to successfully complete the above data will reflect this.
- Details of this summary page are available on page 2 for each individual year.

**PROFESSIONAL ASSISTANCE PROCEDURE (PAP)
PAP NURSING DATA SUMMARY/DETAILS
(January 1, 2013 – December 31, 2017)**

YEAR 2013

Nurses applied: 25

- Of those applicants, how many were: Denied: 11 Withdrew: 2

How many nurses were accepted: 12

- Of those accepted, how many successfully completed: 4
- How many did not successfully complete their contract: 4 (4 issued a board order)
 - How many did not complete due to a violation (other than not participating): 3
 - How many stopped participating due to cost of treatment/drug monitoring: 1
- How many are still participating: 4 (Participants are eligible for discharge in 2018)

YEAR 2014

Nurses applied: 23

- Of those applicants, how many were: Denied: 10 Withdrew: 2

How many nurses were accepted: 11

- Of those accepted, how many successfully completed: 1 (Agreement was a 3-year agreement)
- How many did not successfully complete their contract: 3 (2 issued a board order)
 - How many did not complete due to a violation: 3
 - How many stopped participating due to cost of treatment/drug monitoring: 0
- How many are still participating: 7

YEAR 2015

Nurses applied: 15

- Of those applicants, how many were: Denied: 7 Withdrew: 1

How many nurses were accepted: 7

- Of those accepted, how many successfully completed: 0
- How many did not successfully complete their contract: 1 (1 issued a board order)
 - How many did not complete due to a violation: 1
 - How many stopped participating due to cost of treatment/drug monitoring: 0
- How many are still participating: 6

YEAR 2016

Nurses applied: 12

- Of those applicants, how many were: Denied: 0 Withdrew: 2

How many nurses were accepted: 10

- Of those accepted, how many successfully completed: 0
- How many did not successfully complete their contract: 3 (2 issued a board order and 1 is pending and may result in an investigation)
 - How many did not complete due to a violation: 3
 - How many stopped participating due to cost of treatment/drug monitoring: 0
- How many are still participating: 7

YEAR 2017

Nurses applied: 14

- Of those applicants, how many were: Denied: 2 Withdrew: 2

How many nurses were accepted: 10

- Of those accepted, how many successfully completed: 0
- How many did not successfully complete their contract: 4 (2 issued a board order and 2 are pending and may result in an investigation)
 - How many did not complete due to a violation: 3
 - How many stopped participating due to cost of treatment/drug monitoring: 1
- How many are still participating: 6

**State of Wisconsin
Department of Safety & Professional Services**

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4) Meeting Date: <i>April 12, 2018</i>	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? <i>Board of Nursing Annual Report - 2017</i>	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No (<i>available if Board has questions</i>)	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: <i>Submitting the required Annual Report to the Board for approval.</i>			
11) Authorization			
<i>Janie Brischke</i>		<i>April 12, 2018</i>	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
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BOARD OF NURSING



DIVISION OF LEGAL SERVICES AND COMPLIANCE

ANNUAL REPORT

JANUARY 1, 2017 – DECEMBER 31, 2017

The Wisconsin Department of Safety and Professional Services (DSPS), Division of Legal Services and Compliance (DLSC) provides legal services to professional boards, regulated industries and the Department regarding the investigation and prosecution/discipline of licensed credential holders for violations of statute and administrative rule.

DLSC is comprised of complaint intake staff, consumer protection investigators, regulatory specialists, paralegals, attorneys/prosecutors, Board Counsel, and management staff. DLSC is responsible for the complaint intake process, monitoring compliance with disciplinary orders, administering a confidential program for impaired professionals, called the Professional Assistance Procedure (PAP), performing audits of trust accounts, and conducting business inspections for pharmacies, drug distributors and manufacturers, funeral establishments, and barber and cosmetology schools and establishments.

As the Board of Nursing (BON) is charged with ensuring competent practice of licensed nurse professionals in the State of Wisconsin by protecting the public, deterring conduct, and rehabilitating the licensee, it enlists the services of DLSC in order to accomplish these goals. The BON relies on DLSC to provide investigation and legal services for complaints of unprofessional conduct filed against these licensees. As part of these services, DLSC provides a Nursing Team comprised of the staff identified below. The following briefly summarizes the responsibilities of these positions:

- **Attorneys (Prosecutors)** – Legal experts that perform specialized legal services relating to one or more areas of law. Prepares pleadings, briefs, legal options, orders, and all types of legal documents and memorandums. Prepares findings of fact and conclusions of law and negotiates orders. Administers oaths, examines witnesses, and issues subpoenas requiring appearance of witnesses and the production of documents. Presides at and conducts formal and informal hearings of varied complexity in connection with the administration of state laws and regulations.
- **Board Counsel** – Provide legal guidance to boards and agency staff on a wide variety of issues such as a board’s authority and jurisdiction with respect to legal review of disciplinary matters, assist with legal issues related to credentialing, interpreting statutes and administrative rules affecting the Board, and prepare for and attend board meetings to present legal analysis and give advice. Board Counsel also drafts, reviews and approves a variety of documents necessary to carry out board business. Finally, Board Counsel represents the boards in hearings before administrative law judges concerning application denials.
- **Complaint Intake Staff** - Evaluate and review incoming complaints and request information; process the opening and/or closing of cases and monitor complaints in the initial review process. Also performs other administrative and program-related support to DLSC.
- **Consumer Protection Investigators** - Plan, develop and conduct comprehensive investigations involving compliance with, or violations of, a wide range of statutes, rules, regulations, and/or standards.
- **Management Staff** - Manage subordinates and programs within DLSC.
- **Paralegals** - Perform a wide range and combination of professional-level, law-related activities to assist DLSC staff attorneys in the delivery of legal services, conducts specialized or complex legal research, assist attorneys at hearings, and draft and prepare a variety of legal documents.
- **Regulatory Specialists (Monitoring and PAP)** - Regulatory work in the areas of compliance and/or enforcement for licensees who are being monitored with disciplinary orders and/or enrolled in the PAP.

In general, DSPS operates based upon a complaint-driven process, meaning the majority of compliance and disciplinary actions are the result of complaints submitted by outside sources, rather than DSPS's active search for misconduct. The complaint itself may come from a variety of sources, such as consumers, media, and credentialed professionals, who alert DSPS to the potential misconduct.

At other times, disciplinary action may be the direct result of inquiry by DSPS in conjunction with or at the request of the BON. An example of such is the violation of a board order or practicing without an active license. Actions taken by the BON on such matters are the result of information received from DSPS.

Screening

Once a complaint is received, it is routed to the attorney screener for review. The attorney screener determines if the complaint should be opened immediately, closed immediately or if the complaint should go to the entire BON Screening Panel. The BON Screening Panel consists of Board members (nurse professionals and public) as well as a DLSC prosecuting attorney. The BON screening panel brings together the professional expertise of the Board with the legal expertise of the DLSC attorney.

The Screening Panel confers and determines, based on information provided, whether a violation(s) may have occurred. The panel may consider many factors, such as the seriousness of the allegations, the harm or threat of harm, whether the dispute is already resolved, and whether the matter is primarily a civil or private dispute. If a complaint does have merit, or requires further investigation, the case is opened for investigation.

If a complaint does not warrant further action, it is closed at screening and a letter is sent out to the parties. For example, the panel may close a complaint when it is determined that no violation has occurred or if there is a lack of jurisdiction over the matter.

Investigation

When a case is opened for investigation, a case advisor will be assigned, along with a DLSC investigator, paralegal and attorney. At the conclusion of the investigation, DLSC staff will submit findings of the investigation to the case advisor, a member of the Board that provides professional expertise on the licensee's alleged misconduct. If the evidence is insufficient to prove a violation or there are other legal reasons not to pursue prosecution, the case advisor and the DLSC prosecuting attorney will determine the specific basis for closing the case.

Legal Action

If the investigation finds a preponderance of evidence that a violation has occurred, the case advisor and DLSC staff will consider options available to resolve the matter. In some circumstances, the matter may be resolved through non-disciplinary action such as an administrative warning or remedial education. However, if the licensee's misconduct cannot be corrected with a non-disciplinary option, or if the misconduct is common enough that all licensees within the profession must be alerted to its substandard nature, formal discipline may be warranted.

When formal discipline is warranted, the case advisor and DLSC legal staff will determine appropriate discipline and make specific recommendations to the BON for case resolution. Disciplinary action may be agreed to by the respondent in a stipulation, or, if an agreement cannot be reached, discipline may be pursued through the formal hearing process.

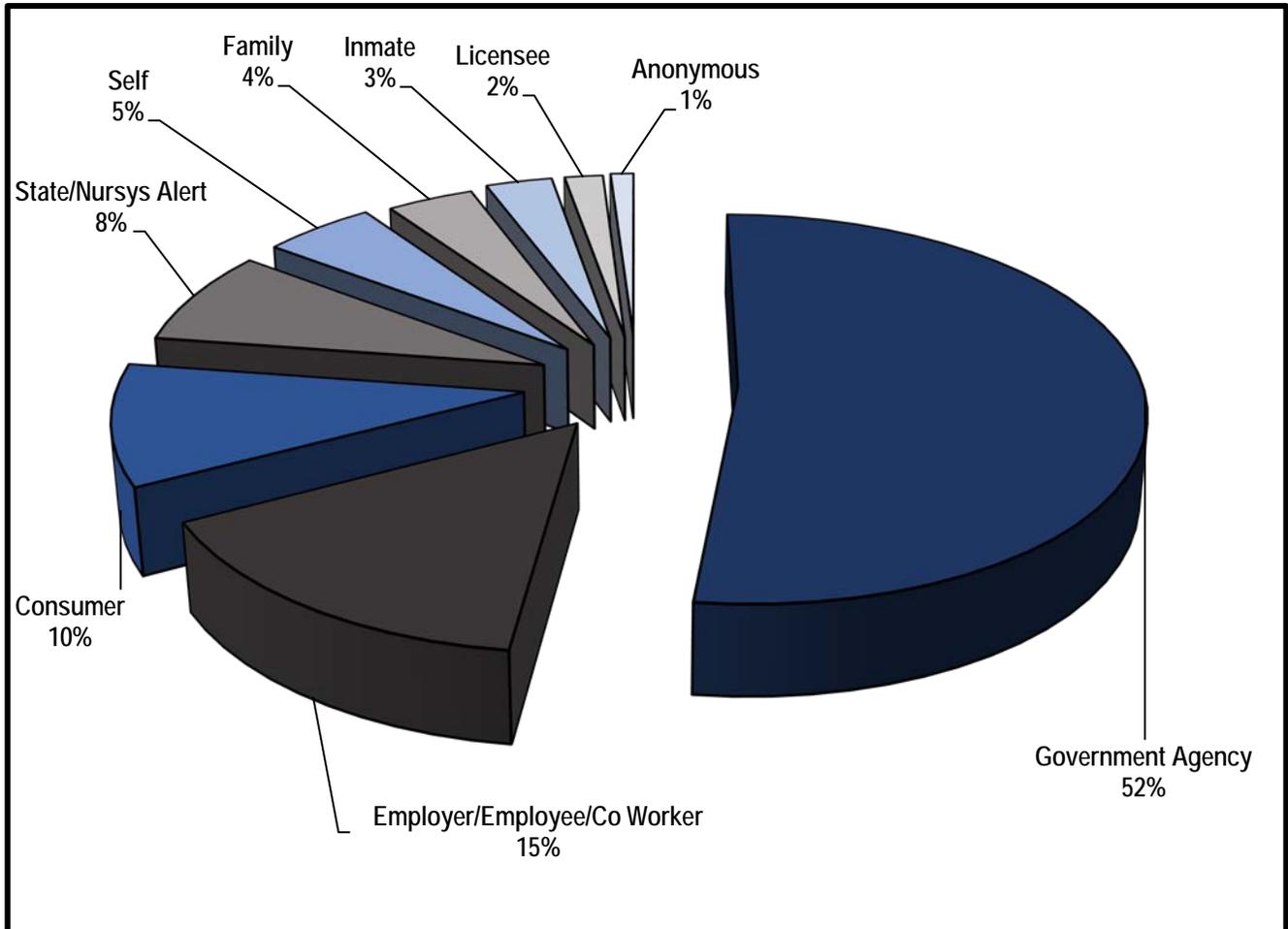
Disciplinary options available to the BON include:

- **Reprimand** – A public warning of the licensee for a violation.
- **Limitation of License** – Imposes conditions and requirements upon the credential and/or restrictions on the scope of the practice.
- **Suspension** – Completely and absolutely withdraws and withholds for a period of time all rights, privileges, and authority previously conferred by the credential.
- **Revocation** – To completely and absolutely terminate the credential and all rights, privileges, and authority previously conferred by the credential.

SOURCES OF COMPLAINTS RECEIVED

Data from January 1, 2017 to December 31, 2017

The BON received **828** complaints in 2017. There are multiple ways in which the BON may receive a complaint. Below is a graphical representation of the sources of the complaints received in 2017. It is important to note that a complaint may be received in one year however, due to the nature or course of the investigation, may not be resolved until the subsequent year(s).



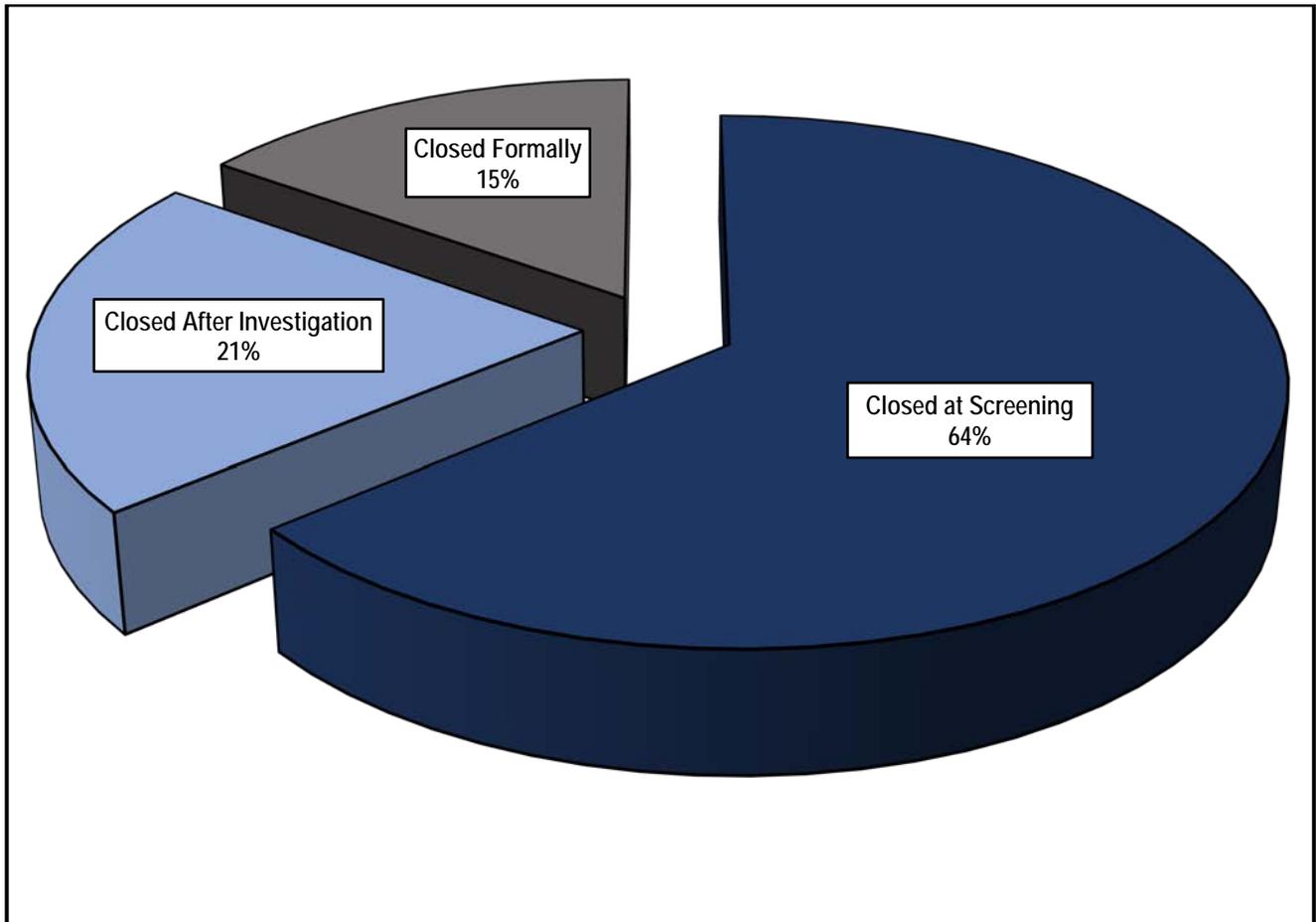
WHEN ARE COMPLAINTS OR CASES/RESPONDENTS CLOSED?

Data from January 1, 2017 to December 31, 2017

Complaints/cases may be closed in the following ways:

- The BON prescreening attorney(s) or screening panel determines that an investigation is not warranted.
- After investigation when the case advisor, in conjunction with DLSC professionals, determines that the matter does not warrant professional discipline.
- After the board issues a formal disciplinary order.

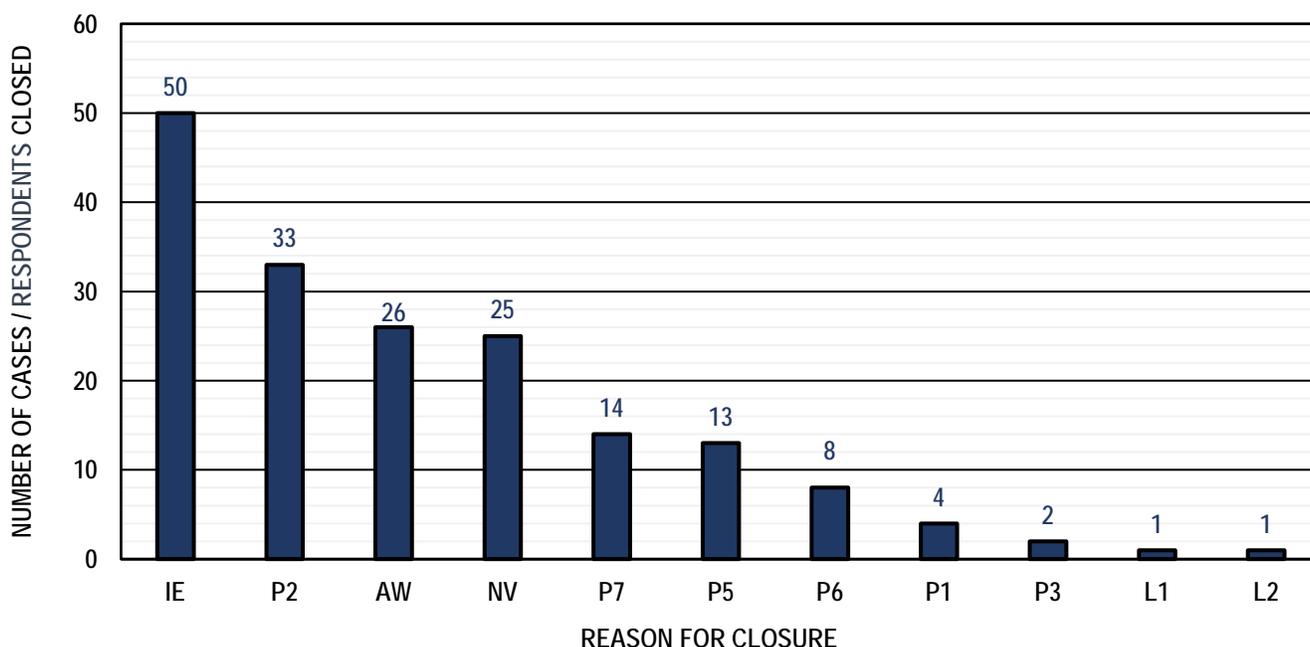
Note: The following is a graphical representation of how complaints or cases/respondents were closed in 2017. It is important to note that cases closed in 2017 may have been received in previous years.



CASES/RESPONDENTS CLOSED AFTER INVESTIGATION

Data from January 1, 2017 to December 31, 2017

177 cases/respondents were closed after investigation (without formal discipline). There are many reasons a case may not warrant formal discipline. For example, a case may be closed after investigation due to insufficient evidence to prove a violation has occurred. Or, after careful review and deliberation, the BON may exercise its discretion not to prosecute based on other considerations relating to the case. In order for a case to close after investigation, action must be taken by the BON. The following summarizes the BON cases/respondents closed after investigation, sorted by reason for closure.



- **IE - INSUFFICIENT EVIDENCE FOR PROSECUTION** - There is insufficient evidence to meet the standard of proof required to prove that a violation occurred.
- **P2 - PROSECUTORIAL DISCRETION** - There may have been a minor or technical violation, but a decision was made not to commence formal disciplinary action on the grounds that compliance with statutes or rules has been gained.
- **AW - ADMINISTRATIVE WARNING** - There was an Administrative Warning issued to the credential holder pursuant to Wis. Stat. § 440.205. Administrative warnings do not constitute an adjudication of guilt or the imposition of discipline and may not be used as evidence that the credential holder is guilty of the alleged misconduct.
- **NV - NO VIOLATION OF STATUTES OR RULES** - There is sufficient evidence to show that no violation of statutes or rules occurred.
- **P7 - PROSECUTORIAL DISCRETION** - There may have been a violation, but the regulatory authority has taken action in regard to this credential holder that addressed the conduct and further action is unnecessary.
- **P5 - PROSECUTORIAL DISCRETION** - There may have been a violation, but because the person or entity in question cannot be located, is no longer actively practicing or does not have a current credential to practice, a decision was made to close the case and place a “FLAG” on the credential in accordance with the Division’s Policy and Procedure # 425. In the event that the person or entity is located, an application for renewal of the credential is received or the credential is renewed, the case may be re-opened and reconsidered.
- **P6 - PROSECUTORIAL DISCRETION** - There may have been a violation, but litigation is pending which involves the credential holder and affects the licensing authority’s ability to investigate the case. At the conclusion of the litigation, the case will be reviewed, and the licensing authority may consider the case once again.
- **P1 - PROSECUTORIAL DISCRETION** – The incident in question may have involved a minor or technical violation but does not warrant formal disciplinary action.
- **P3 - PROSECUTORIAL DISCRETION** - There may have been a violation that is more than a minor or technical violation. However, a determination has been made that, due to the nature of the violation, the resources required to seek formal discipline would greatly exceed the value of pursuing the matter.
- **L1 - LACK OF JURISDICTION** - There is not authority to act on the subject matter of the complaint.
- **L2 - LACK OF JURISDICTION** - There is authority to act on the subject matter of the complaint, but no authority to act regarding the person or entity in question.

SUMMARY OF FINAL DECISIONS AND ORDERS (includes orders granting limited licenses)

Data from January 1, 2017 to December 31, 2017

127 cases/respondents were resolved through formal closure (order) in 2017. This represents the most serious cases that often require extensive resources, time, and investigation.

The BON case advisor works with DLSC legal staff to determine the most appropriate discipline based on the violation(s). Considerations in determining discipline include the historical practices of the BON, prior violations by the licensee, the severity of the conduct (including the risk of potential harm), and the quality of evidence. Discipline is not punitive; actions taken against a nurse should be limited to the purposes of public protection, rehabilitation, and to deter the licensee and others from engaging in similar conduct.

The following table represents the formal actions taken by the BON in 2017. Please note: The total number of disciplines/outcomes will be higher than the number of Final Decisions and Orders; a Final Decision and Order may involve multiple discipline/outcomes.

Final Decisions and Orders Details/Actions	Number
Reprimand	57
Limitation Requiring Education	38
Limitation Requiring Treatment	26
Limitation Requiring Drug and/or Alcohol Screens	26
Limitation Requiring Reports	25
Limitation Restricting Practice	22
Remedial Education	21
Suspension	20
Limitation Requiring Mentor/Supervision/Counselor	15
Limitation Requiring Assessment	13
Surrender	11
Suspension with Immediate Stay	5
Limitation – Maintain Compliance with Another State/Agency Order	3
Revocation	1
Total	283

Limitation: Per Wis. Stat. § 440.01(1)(d) means “to impose conditions and requirements upon the holder of the credential, to restrict the scope of the holder’s practice, or both.”

Remedial Education: When an allegation arises because of a deficit in knowledge, the Board may order the Respondent to take remedial education, on specific topics, for specified numbers of credit hours. Remedial education orders are non-disciplinary orders, with no finding that a rule was violated.

Reprimand: Per Wis. Stat. § 440.01(1)(e), means “publicly warn the holder of a credential.”

Revocation: Per Wis. Stat. § 440.01(1)(f), means “to completely and absolutely terminate the credential and all rights, privileges and authority previously conferred by the credential.”

Surrender: A voluntary relinquishment of a credential as a means of resolving the matter.

Suspension: Per Wis. Stat. § 440.01(h) to mean “to completely and absolutely withdraw and withhold for a period of time all rights, privileges and authority previously conferred by the credential.” Licensee may not engage in the practice of the profession during term of suspension.

OTHER ACTIONS TAKEN BY THE BOARD OF NURSING

Data from January 1, 2017 to December 31, 2017

The BON also issues orders subsequent to case closure. These orders include monitoring actions, costs assessed after hearing, dismissals, and review/rehearing denials. Below is a summary of those orders.

Other Orders/Action Issued	Number
Granting Full Licensure	44
Granting Modification(s)	39
Denying Modification(s)	38
Suspension (may include removal of stay)	29
Terminating Suspension (may include granting stay)	22
Denying Petition for Full Licensure	14
Fixing Costs	10
Granting Limited Licensure	9
Limitation Requiring Education	5
Limitation Requiring Treatment	3
Limitation Requiring Reports	2
Limitation Requiring Drug and/or Alcohol Screens	1
Limitation Restricting Practice	1
Total	217

MONITORING

As part of its role in protecting the public, the BON may direct the DLSC to monitor a licensee's compliance with a Final Decision and Order or Order Granting a Limited License.

Monitoring is housed within the DLSC's Administrative Unit, which consists regulatory specialists. Active monitoring requires considerable resources and action by monitoring staff to ensure compliance to orders and decisions. Examples of such requirements include recovery of costs, work reports, drug screenings, therapy, and education.

Below is a list of the types of disciplines/actions that are monitored:

- **Education**: The licensee is required to take continuing education in a specific topic (could be remedial or disciplinary).
- **Exam**: The licensee is required to take and pass an examination.
- **Impairment**: The licensee is suspended for a period (ordinarily five years), with the possibility of a stay of suspension that allows the licensee to practice as long as the licensee remains in compliance with the Order. The licensee must undergo random drug screens, attend AA/NA meetings, enter into treatment, submit self-reports, and arrange for therapy and work reports.
- **Limitations**: Conditions and requirements upon the credential holder, or restrict the scope of the holder's practice, or both.
- **Mentor**: The licensee is required to have a professional mentor who provides practice consultations and evaluations as specified by the Order.
- **Reports**: The licensee is required to have reports submitted by a third-party (therapists, supervisor, probation officer, etc.).
- **Revocation**: (where costs are assessed): The licensee must return their license to the Department and is prohibited from practice in the State of Wisconsin but must still pay the costs of the proceeding. If the credential holder reapplies for licensure, the BON may grant the license with or without conditions.
- **Suspension**: A licensee is suspended from practice for a set period of time or indefinitely. Some suspensions may be stayed under specific conditions.
- **Voluntary Surrender**: (where costs are assessed): The licensee surrenders the registration and/or license but must still pay the costs of the proceeding. The licensee is prohibited from practice in the State of Wisconsin. If the person reapplies for licensure, the BON may grant the license with or without conditions. Some Orders prohibit the licensee from seeking reinstatement/reapplying after surrendering.

As of March 2018, [365](#) nurse professionals (Advanced Practice Nurse Prescriber, Registered Nurse, Licensed Practical Nurse, and Nurse – Midwife) are actively being monitored as a result of a disciplinary order.

PROFESSIONAL ASSISTANCE PROCEDURE (PAP)

PAP is a program for impaired professionals that encourages individuals to seek help for their impairment through a non-disciplinary contract. As of March 2018, there are [32](#) nurse professionals (Advanced Practice Nurse Prescriber, Registered Nurse, Licensed Practical Nurse, and Nurse – Midwife) enrolled in the PAP.

If an individual is released from PAP for failure to comply with the voluntary requirements of the program, the BON's PAP Liaison and DLSC's PAP Coordinator may refer the individual to the Board for formal disciplinary procedures, if appropriate.

More information about this unique program designed to both protect the public and assist impaired professionals may be found by reading Wis. Admin. Code ch. SPS 7.

Why does the BON consider PAP an important tool?

- For the majority of chemically dependent professionals, this is an opportunity to seek treatment without losing their professional credentials.
- PAP promotes early identification of chemically dependent professionals and encourages their rehabilitation.
- PAP offers participants an opportunity to obtain treatment for chemical dependency while ensuring that immediate action can be taken should a participant relapse or drop out of treatment. It is important to note that participation in PAP will not exempt the professional from discipline.
- PAP does not provide treatment, but monitors participants' progress in treatment with an approved treatment provider, as well as their random drug and alcohol screens.

SUMMARY OF KEY STATISTICS

Data from January 1, 2017 to December 31, 2017

- Complaints Received: **828**
- Of the **828** BON complaints received in 2017, **36** complaints have not been screened as of March 28, 2018. Of the **792** already screened, **56%** were closed at screening.
- BON Cases/Respondents Resolved (Closed) – (Cases may have been received in the year 2017 or prior years):
 - Cases/Respondents **closed formally: 128**
 - Cases/Respondents **closed after investigation/informally** (without a formal order): **177**
[**26** of the **177** were **Administrative Warnings**]
 - Cases/Respondents **closed at screening: 482**
- Most common discipline issued by the BON: **license limitations** and **reprimands**
- Primary sources of complaints: **Government Agencies, Employer/Employee/Co-worker, Consumers,** and **State/Nursys Alert**
- Nurse professionals currently monitored with disciplinary or remedial education orders (active) as of **March 2018: 365**
- Nurse professionals currently enrolled in the Professional Assistance Procedure (PAP) as of **March 2018: 32**





December 28, 2017

Wisconsin Department of Safety and Professional Services
P.O. Box 8366
Madison, WI 53708-8366
dspsexaminationsoffice@wisconsin.gov

Re: Request to Admit Students to LPN Program

This letter, combined with attached Form #3027 Request for Authorization to Admit Students to a Nursing School, serves as the formal request to admit students into the Licensed Practical Nursing Program (LPN) at Herzing University-Brookfield.

The following information is included in this request for authorization:

- Verification of employment of an education administrator meeting the qualifications in N 1.08 (2). (Section 1)
- Evidence of faculty meeting the qualification in N 1.08 (3). (Section 2)
- School's philosophy and objectives. (Section 3)
- Overview of curriculum. (Section 4)
- Verification of establishment of student policies for admission, progression, retention and graduation. (Section 5)
- Updated timeline for implementing the program and intended date for entry of the first class. (Section 6)
- Verification of students' ability to acquire clinical skills. (Section 7)

Respectfully,

Dr. Deborah Ziebarth, PhD, MSN-Ed, RN-BC
Nursing Educational Administrator
Herzing University
Brookfield Campus

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366
FAX#: (608) 266-2602
Phone #: (608) 266-2112

1400E. Washington Avenue
:Madison, WI 53703
E-:tvrail: wcb(Cl)dps.wi.gov
Website: <http://7ldps.wi.gov>

BOARD OF NURSING

REQUEST FOR AUTHORIZATION TO ADMIT STUDENTS TO A NURSING SCHOOL

After authorization to plan a nursing school is granted by the Board of Nursing to an institution, the institution must submit a request to the Board for authorization to admit students to the nursing school; the application must include all of the following:

- (1) Verification of employment of an educational administrator meeting the qualifications in N 1.08 (2) including the following:
 - Current, active registered nurse license or privilege to practice in Wisconsin that is not encumbered
 - Graduate degree with a major in nursing
 - Knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation and either educational preparation or 2 years experience as an instructor in a nursing education program within the last 5 years
 - Current knowledge of nursing practice
- (2) Evidence of faculty meeting the qualifications in N 1.08(3) including the following:
 - A) For Professional Nursing Faculty:
 - Current, active registered nurse license or privilege to practice in Wisconsin that is not encumbered
 - Graduate degree with a major in nursing; interprofessional faculty teaching non-clinical nursing courses must have advanced preparation appropriate for the content being taught.
 - B) For Practical Nursing Faculty:
 - Current, active registered nurse license or privilege to practice in Wisconsin that is not encumbered.
 - Baccalaureate degree with a major in nursing.
- (3) School's philosophy and objectives
- (4) Overview of curriculum including all of the following:
 - Content
 - Course sequence
 - Course descriptions
 - Program evaluation plan
 - Course syllabi for the first year and plan for subsequent years
- (5) Verification of establishment of student policies for admission, progression, retention and graduation
- (6) Updated timeline for implementing the program and intended date for entry of the first class

#3027 (Rev. 10/14)

Ch. N 1.04 Wis. Admin. Code

Committed to Equal Opportunity in Employment and Licensing

- (7) Verification of students' ability to acquire clinical skills by providing all of the following:
- Letter of intent or contracts from clinical facilities securing clinical opportunities and documentation of the facility type, size, number of beds, and type of patients.
 - Documentation of simulation equipment and experiences.

The Board will make a decision on the application to admit students within two months of receipt of the completed application and notify the institution of the action taken on the application. Once a school receives authorization to admit, the school may begin admitting students while seeking to obtain program approval.

Withdrawal of authorization may occur if the school fails to meet and maintain standards in N 1.08.

To apply for authorization to admit students, submit the following required items to dspsexaminationsoffice@wisconsin.gov:

- (1) Form #1114 for each faculty member and for the program educational administrator
- (2) A written proposal addressing items three (3), four (4), five (5) and six (6) above.
- (3) Form #1004 for each clinical facility

Institution applying for authorization to admit students:

Name of School: Herzing University-Brookfield

Address: 555 South Executive Drive
Brookfield, WI 53005

Nursing Program(s) (ADN, BSN, Other): PN

Deborah Ziebarth
 Nursing Educational Administrator

Deborah Ziebarth
 Signature

(262) 649-1710, ext.61647
 Telephone Number

Nursing Department Chair
 Title

2/20/2018
 Date

dziebarth@herzing.edu
 Email Address

SECTION 1

Dr. Deborah Ziebarth is the Nursing Department Chair for Herzing University-Brookfield, meeting the qualifications in N 1.08

(2) which include the following:

- Current, active registered nurse license or privilege to practice in Wisconsin that is not encumbered.
- Graduate degree with major in nursing.
- Knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation and either educational preparation or 2 years' experience as an instructor in a nursing education program within the last 5 years.
- Current knowledge of nursing practice.

Dr. Ziebarth's Form #1114 and Curriculum Vitae can be found in Appendix 1-A.

SECTION 2

The Herzog University Brookfield Practical Nursing (HUB-PN) program will utilize current BSN faculty to teach within the PN courses. Paula Winters, who has experience teaching in a PN Program, will teach the NP 100 Growth and Development course. She will also co-teach in the role of mentor, the NP 120 Fundamentals of Nursing course with Rosalyn McFarland. Linda Philipps who teaches Pharmacology in the BSN program will teach the NP 110 Pharmacology course. Karen Dulin is qualified to teach Medical-Surgical NP 125 & NP 235. The Nursing Specialty Course NP 230 offers the students' knowledge and clinical experiences in Mental Health, OB, and Pediatrics. Paula Winters, content expert, will teach OB and Rosalyn McFarland, content expert, will teach mental health and pediatrics. Becky Huggins, who has experience teaching in a PN program and NCLEX preparation, will teach the NCLEX preparation course.

It is of the utmost importance that faculty workloads are maintained at 18-24 contact hours as per HU policy. The 2017 Brookfield BSN program's faculty retention rate was 8%. Faculty workloads do not exceed the workload policy of 18-24 instructional hours per week. There is flexibility within the BSN program for faculty to teach in the PN program due to the declining student admissions at this time.

The plan is to have the HUB-PN program an evening program, with admission opened every semester (A term) to 30 students. The HUB-PN program will initially use current administration (Nursing Department Chair, Simulation Coordinator, and Clinical Coordinator) from the BSN program. The goal of the HUB-PN program is to hire a HUB-PN program chair within the first year.

Opened faculty positions in the HUB-PN program may come from a mixture of newly hired faculty or current BSN program faculty, keeping in mind their content expertise, previous experiences, and workload. There are twelve full time faculty, plus four adjuncts that are qualified to teach in both the BSN and the HUB-PN program. Appendix 2-A contains Form #1114 and Curriculum Vitae for each faculty member listed above.

SECTION 3

Herzing University Vision, Mission, Guiding Principles and PRICE for Success:

VISION

The vision of Herzing University is to be the lifelong learning partner for its students, employers, and communities in optimizing their economic and human potential.

MISSION

It is the mission of Herzing University to provide high-quality undergraduate and graduate degrees and diploma programs to prepare a diverse and geographically distributed student population to meet the needs of employers in technology, business, healthcare, design, and public safety. Career-oriented degree programs include a complementary and integrated general education curriculum established to stimulate students' intellectual growth, to contribute to their personal development, and to enhance their potential for career advancement.

GUIDING PRINCIPLES

The following principles guide the University in fulfilling our mission.

1. **Foster Our Core Values** – Promote an educational and workplace culture that fosters professionalism, respect for others, personal responsibility and integrity, caring, and civic and community engagement among our students and employees.
2. **Optimize Human Potential** – Sustain a positive and effective educational environment which optimizes the personal and professional potential of our students and employees, and which respects individual contributions and perspectives.
3. **Improve the Value Equation for Students** – Continually improve the University's high-quality educational programs to increase their value to students. Innovate to optimize students' educational journeys and align learning outcomes with lifelong learning and workforce needs.
4. **Engage Students** -- Provide instructional and student-support services that create an engaging, caring, student-centered environment to facilitate student achievement of the defined learning outcomes, their educational goals, and their personal development
5. **Create Access for Diverse Group of Students** – Provide access to our programs and services to qualified students of diverse age, interests, abilities, and cultures. Respond to the dynamic needs of our diverse and geographically distributed students through face-to-face and distance education delivery modalities.
6. **Embrace Innovation for Student Success** – Provide a high-performance learning environment that utilizes new technologies, methodologies, and best practices to serve the dynamic lifelong learning needs of our students.
7. **Demonstrate Effectiveness** – Continually assess student learning outcomes as well as educational and institutional effectiveness to drive continuous improvement in the value we provide to our students, employers, and society at large.
8. **Pursue Collaboration and Partnerships** – Pursue cooperation and alliances with educational institutions, organizations and associations on a local, regional, national and international basis to fulfill our mission and public educational purpose.

9. Ensure Sustainability – Ensure effective and efficient use of our human, physical, technology, and financial resources. Utilize data and analysis to inform planning, budgeting, and decision-making processes to ensure continued improvement of our educational offerings, fulfillment of our mission, and sustained future development.

P.R.I.C.E. of Success

Herzing University's educational and organizational philosophy was founded on core values that constitute the Herzing culture. These values are essential not only for personal development, but are also the foundation for a successful, meaningful career. These core values; professionalism, respect, integrity, caring, and engagement are encompassed in a framework called "P.R.I.C.E. of Success." In order to help each student develop and strengthen these qualities, they have been incorporated into the learning environment. Students are expected to exhibit these behaviors and attributes in all interactions, inside and outside of the classroom. Students who apply themselves and embody the P.R.I.C.E. of Success characteristics will more likely reach their full human potential. These behaviors and attributes are also the foundation of our internal culture. Employees are expected to exhibit these qualities in their service to students and other daily functions. In doing so, we are building a culture that nurtures personal growth and potential. We lead by example for our students, enabling us to coach, and mentor students in their own development of these behaviors and attributes.

LPN program Mission, Vision, and Program Outcomes:

Vision

Herzing University Nursing Programs will partner with students, employers and their communities of interest to advance the health of the populations they serve.

Mission

In accordance with the Mission Statement of Herzing University, the LPN program's mission is to provide high quality nursing education to a geographically diverse student population. Students will be educated in applying nursing judgement to deliver safe and effective nursing care across the life span.

LPN Program Outcomes

1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. (Apply Level)
2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. (Analyze Level)
3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. (Apply Level)
4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. (Creating Level)

Herzing University PN program is using the NLN Curriculum LPN Framework for the development of the curriculum to ensure a systems-based approach is used. The NLN believes that four core values are critical to a transformed LPN curriculum and are closely aligned with current workforce trends. The framework acknowledges the six integrating concepts as equally important.

<p>Four Core Values NLN PN:</p> <ul style="list-style-type: none"> • Caring • Integrity • Diversity • Excellence <p>*Mapped in rationale</p>	<p>Six Concepts NLN PN:</p> <ul style="list-style-type: none"> • Safety • Quality • Team/Collaboration • Relationship-Centered Care • Systems-Based Care • Personal/Professional Development <p>*Mapped in rationale</p>
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Curriculum Framework:

The practical nurse education prepares the student to practice in a variety of healthcare settings. Consistent with the NLN Practical/Vocational Nursing Curriculum Framework (2014a) faculty believe the following competencies (Human Flourishing, Nursing Judgment, Professional Identity, Spirit of Inquiry), core values (Caring, Integrity, Diversity, Excellence), and integrating concepts (Safety, Quality, Team/Collaboration, Relationship-Centered Care, Systems-Based Care, Personal/Professional Development) are relevant for the practical nurse:

- *Human Flourishing:* "Is defined as an effort to achieve self-actualization and fulfillment within the context of a larger community of individuals, each with the right to pursue his or her own such efforts. It encompasses the uniqueness, dignity, diversity, freedom, happiness, and holistic well-being of the individual within the larger family, community, and population. Achieving human flourishing is a life-long existential journey of hopes, achievements, regrets, losses, illness, suffering, and coping (NLN, 2014b, paragraph 1)."
- *Nursing Judgment:* "Clinical judgment refers to ways nurses come to understand the problems, issues, or concerns of clients/patients, to attend to salient information, and to respond in concerned and involved ways (Benner, 2010). Nurses employ clinical judgment in complex patient care situations, working with interprofessional teams to ensure health care quality and safety. Critical components include: changes in patient status, uncertainty about the most appropriate course of action, accounting for context, and the nurse's practical experience. Making clinical decisions is rooted in the nurse's theoretical knowledge; ethical perspectives; relationships with patients, the patient's caregivers, and the community; and understanding of the influence of systems on health care outcomes (NLN, 2014c, paragraph 1)."
- *Professional Identity:* "Professional identity is defined as including both personal and professional development. It involves the internalization of core values and perspectives recognized as integral to the art and science of nursing. These core values become self-evident as the nurse learns, gains experience, reflects, and grows in the profession. Internalization of ethical codes of conduct is imperative. The nurse embraces these fundamental values in every aspect of practice while working to improve patient outcomes and promote the ideals of the nursing profession. Integral to this outcome is the nurse's commitment to advocacy for improved health care access and service delivery for vulnerable populations and to the growth and sustainability of the nursing profession (NLN, 2014d, paragraph 1)."
- *Spirit of Inquiry:* "Spirit of inquiry is a persistent sense of curiosity that informs both learning and practice. A nurse infused by a spirit of inquiry will raise questions, challenge traditional and existing practices, and seek creative approaches to problem-solving. A

spirit of inquiry suggests, to some degree, a childlike sense of wonder. A spirit of inquiry in nursing engenders innovative thinking and extends possibilities for discovering novel solutions in both predictable and unpredictable situations (NLN, 2014e, paragraph 1).”

LPN Program Outcomes Rationale

1. *Human Flourishing*: Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice.
Core Values: caring-care
Concepts: quality, safety, relationship centered care
2. *Nursing Judgement*: Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families.
Core Values: caring, diverse
Concepts: team/collaboration, systems based care
3. *Spirit of Inquiry*: Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse.
Core Values: integrity, caring-care
Concepts: safety (standards)
4. *Professional Identity*: As a coordinator of care, identify system and professional resources for health and wellness which facilitates patient, family, personal, and professional growth. (Synthesis Level)
Core Values: excellence (growth)
Concepts: personal/professional development, systems based care

Licensed Practical Nurse Program Philosophy is a continuing reflection of the mission of the University. The faculty of the Department of Nursing recognizes that nursing is a dynamic profession rooted in the arts and sciences and that nurses work collaboratively with the person and the community to achieve positive health outcomes in a culturally diverse society. They believe nursing is a practice discipline based on caring, that is both an art and science, in which theories and knowledge from nursing and other disciplines are used to educate clients toward maximum health and wellness.

References

- Benner, P., Sutphen, M., Leonard, V., Day, L. (2010). *Educating Nurses: A Call for Radical Transformation*. San Francisco: Jossey-Bass
- National League for Nurses (2014a). *NLN Practical/vocational nursing curriculum framework*. Retrieved from <http://www.nln.org/docs/default-source/default-document-library/nln-practical-nursing-framework-guidelines-final.pdf?sfvrsn=0>
- National League for Nurses (2014b). *Practical/vocational program outcome: Human flourishing*. Retrieved from <http://www.nln.org/docs/default-source/default-document-library/human-flourishing-final.pdf?sfvrsn=0>
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National League for Nurses (2014d). *Practical/vocational nursing program outcome: Professional identity*. Retrieved from <http://www.nln.org/docs/default-source/default-document-library/professional-identity-final.pdf?sfvrsn=0>

National League for Nurses (2014e). *Practical/vocational nursing program outcome: Spirit of inquiry*. Retrieved from <http://www.nln.org/docs/default-source/default-document-library/spirit-of-inquiry-final.pdf?sfvrsn=0>

SECTION 4

LPN Program and course description

Program Description:

The HUB-PN program provides academic, theoretical, and clinical instruction in geriatric, medical, surgical, obstetric, pediatric, and mental health nursing. The program will familiarize students with the foundations of the healthcare delivery system, nursing as a profession, and interdisciplinary collaboration in caring for multicultural populations across the lifespan. Wellness, disease, legal, and ethical issues, confidentiality, and effective communication skills are emphasized. The student will acquire skills in asepsis, measurement of vital signs, CPR, and basic first aid and will understand medical asepsis, infection control, and universal precautions applicable to all areas of healthcare. The importance of safe practice and the use of proper body mechanics are stressed. The administration of medications, body structure and function, nutrition, and personal, family, and community concepts are studied. Clinical, lab, and simulation experiences are an integral part of the program. Graduates will be eligible to take the National Council Licensing Examination for Practical Nurses (NCLEX-PN).

Course descriptions

NP100 Growth and Development

This course is a survey of normative human life span development. Emphasis is on major theories and perspectives as they relate to the physical, cognitive, and psychosocial aspects of development from conception to death. Significant milestones, and developmental tasks will be discussed. 1 credits.

NP110 Pharmacology for Nursing with Lab

The basic concepts of pharmacology will be taught related to actions, therapeutic effects, and adverse effects of traditional and nontraditional medications. Students will demonstrate collection of data, clinical judgment, and integration of knowledge to administer medication safely. The student will use the knowledge gained from this course for safe pharmacological interventions, dosage calculation, medication administration techniques, and documentation.

2 credits.

NP120 Fundamentals of Nursing with Lab and Clinical

This course introduces the role of the practical nurse as a member of the interprofessional health care team, basic nursing concepts, and psychomotor nursing skills. Students learn skills necessary for maintaining patient safety and strategies for therapeutic communication. At the conclusion of this course, the student will demonstrate competency in performing basic nursing skills across the lifespan. 5 credits

NP125 Medical-Surgical Nursing I for LPNs

This course explores the care of adults using a body systems approach. Focus is placed on nursing interventions and developing knowledge required to provide quality nursing care in a safe manner. Content areas include musculoskeletal, urinary, respiratory, integumentary, neurologic, gastrointestinal, reproductive, and sensory systems. Furthermore, nutrition, communication, fluids & electrolytes, end of life, cultural diversity, and legal/ethical issues are integrated throughout the systems. The clinical component of this course allows the student a hands-on experience in providing relationship-centered care for patients with different disease processes in the health care system. Microbiology concepts related to safety and infection control are emphasized. 5 credits

NP235 Medical-Surgical Nursing II for LPNs

This course explores the care of adults using a body systems approach. Focus is placed on nursing interventions and developing knowledge required to provide quality nursing care in a safe manner. Content areas include cardiovascular, hematologic, endocrine, and lymphatic systems. Furthermore acid base balance, cancer, bioterrorism, disaster, and trauma are integrated throughout the course. The clinical component of this course allows the student a hands-on experience in providing relationship-centered care for patients with different disease processes in the health care system.

5 credits

NP230 Nursing Specialties for LPNs

This course prepares the practical nursing student with entry level knowledge and skills needed to care for obstetric, neonatal, pediatric, and mental health patient. Learning experiences focus on the normal growth and development of the specialty patients and commonly encountered disorders. Coordination of care, documentation, medication administration, and legal and ethical issues, historical perspectives and emerging trends within the specialties will be emphasized. 4 credits.

NP275 LPN Clinical Experience

This is the final clinical course, where the student will utilize nursing skills and nursing judgement to perform safe, moral, quality, and prudent patient care in the health care system. The role of the practical nurse is stressed in physiology, pathophysiology, and psychosocial context as it relates to the care of patients. The course will assist in the personal and professional development needed to transition from student to practical nurse. 3 credits.

NP280 Preparation for NCLEX-PN®

This course is designed to assist the student to prepare for the practical nursing licensure exam (NCLEX-PN) and entry into practice. Students will have the opportunity to develop and improve their test-taking skills through computer simulations and practice tests. The NCLEX PN test plan assessment of knowledge deficits and development of individual study plans based on results of weekly assessments will be utilized. In addition, a NCLEX review course will be provided.

3 credits.

Course syllabi is found in Appendix 4-A, the program evaluation plan can be located in Appendix 4-B and the course content can be located in Appendix 4-C. Table 3 describes sequentially how courses will be administered by the program.

Table 3: Curriculum and Sequential Flow of Courses

Semester	Term	Course Code	Course Title	Lecture Credit hrs	Lab Credit hrs	Clinical Credit hrs	Total Credit Hrs	Pre-reqs	Co-reqs
1	A	SC 144	Intro to Anatomy and Physiology with Lab	3	1		4	None	None
	A	NP 110	Pharmacology for Nurses with lab	1.5	0.5		2	None	None
	B	HC 101	Medical Terminology	1			1	None	None
	B	NP 120	Fundamentals of Nursing with Lab and Clinical	3	1.5	0.5	5	None	None
				8.5	3		12		
2	A	NP 100	Growth and Development	1			1	None	None

	A	NP 125	Medical-Surgical Nursing I for LPNs	3		2	5	NP110, NP120	None
	B	EN 104	English Composition I	3			3	None	None
	B	NP 230	Nursing Specialty	3		1	4	NP125	None
				10		3	13		
3	A	NP 235	Medical Surgical Nursing II for LPNs	3		2	5	NP125	None
	A	PD 202	Professional Development II	1			1	None	None
	B	NP 280	Preparation for NCLEX-PN	3			3	All PN program courses	NP275
	B	NP 275	LPN Practical Experience			3	3	All PN program courses	NP280
				7		5	12		
				25.5	3	8.5		Total Credits	37
				382.5	90	382.5		Total Contact	855

SECTION 5

Student policies for admission, progression, retention, and graduation can be found in the Herzing University Undergraduate Catalog and in the Brookfield Campus Nursing Student Handbook located at <http://catalog.herzing.edu/>. Excerpts are included in this section to address the specific areas required by the WBON in developing a new program.

UNCONDITIONAL ADMISSION TO UNDERGRADUATE PRE-LICENSURE NURSING PROGRAMS

Nursing students admitted unconditionally to Herzing University's pre-licensure nursing programs must meet the criteria as defined below in addition to the university-wide "Undergraduate Admissions Criteria." International applicants also must comply with all "International Undergraduate Student Admission" application requirements.

Practical Nursing (PN) Program Admission Option:

Applicants must meet all of the following criteria:

- Is 18 years or older (Wisconsin standard)
- A high school or college grade point average of at least *2.0 or higher
- Achieve a minimum composite score of 48 on the most current version of the Test of Essential Academic Skills (TEAS); TEAS score must be from within one year of anticipated date of matriculation.

ADDITIONAL ADMISSION REQUIREMENTS FOR NURSING, DENTAL, AND OTHER HEALTHCARE PROGRAMS

Applicable Programs. These additional admissions requirements apply to all programs with direct patient contact in clinical or internship settings. This includes, but may not be limited to, the following programs.

- Dental Assisting
- Dental Hygiene
- Emergency Medical Technician
- Insurance Billing and Coding Specialist
- Medical Assisting Services
- Medical Laboratory Technician
- Nursing
- Occupational Therapy Assistant
- Physical Therapist Assistant
- Radiologic Technology
- Surgical Technology
- Therapeutic Massage

Drug Testing. Students in the above-listed programs may be required to pass a drug test prior to entering the first clinical or internship course that includes direct patient contact. For specific requirements for students enrolled in nursing programs, please check with the Nursing Program Director.

Immunizations and Health Checks. Verification of immunization history is required for all students admitted to the above-listed programs no later than 45 days after the first day of class or as indicated by the specific program. Students in some programs may be required to have the Hepatitis B immunization series. Students in healthcare programs may be exposed to blood borne infectious diseases. Also,

additional verification of the status of a student's health may be required during the program if deemed necessary to meet safety requirements. For specific requirements for students enrolled in nursing programs, please check with the Nursing Program Director.

Vaccination Policy. Herzing University does not generally require any specific immunizations beyond those requirements that may be imposed by state or federal law. However, if it is determined that a public health situation arises that warrants implementation of a vaccination requirement, such requirements will be communicated out to students as soon as possible. Some healthcare programs at Herzing University that include a clinical site or internship/externship component may require proof of vaccination against certain diseases prior to participation in the clinical or internship/externship courses. Individual program requirements are communicated at the time of enrollment and in advance of attendance in the relevant course. If you have any questions regarding our vaccination policy, please email consumerinfo@herzing.edu.

Healthcare Policy Acknowledgement. These professions and the educational processes that lead to entry into those professions have a number of unique requirements and standards. All nursing, dental, and other healthcare students must accept and acknowledge the following statements of policy to enter or continue in any of these programs. For specific requirements for students enrolled in nursing programs, please check with the Nursing Program Director.

1. A student convicted of a felony or a misdemeanor other than a minor traffic violation for which a pardon has not been granted:
 - a. May not be able to work in clinical sites required in the program (and thus would not be able to complete the program).
 - b. May not be able to obtain a license from the state, even if the program is completed.
 - c. May not be able to secure a job, even if licensed.
2. A student may be required to pass a criminal background check and substance abuse test to the satisfaction of the clinical site prior to each scheduled clinical course.
3. A student may be subject to drug and/or alcohol screening in conjunction with clinical classes, and a positive result from a screening could result in dismissal from the clinical and from the program.
4. Clinical hours may be scheduled at any time-of-day or day-of-the-week—day, night, late night, weekends, or holidays—and the student must be available to attend clinical sites at any time the student is assigned. Clinical sites will require the student to have his/her immunizations up to date prior to the start of the clinical.
5. A student may be required to complete a physical exam showing that the student is free of disease that may be transmitted to patients, families, or employees and includes:
 - a. Proof of TB skin testing and follow-up.
 - b. Proof of Hepatitis B vaccination series or proof of immunity.
 - c. Proof of MMR and Chickenpox vaccinations or proof of immunity.
6. Some clinical sites may require that a student be covered by his or her own personal or family health insurance.
7. Successful completion of clinical classes may require that the student be able to perform common physical tasks related to his/her duties to the satisfaction of each clinical site.
8. Patient privacy and the privacy of patient records must be protected, and failure on the part of the

student to protect patient privacy or patient records could result in dismissal from the clinical site and/or from the program.

9. Missing clinical site assignments can be a basis for dismissal from the program unless the student has well-documented mitigating circumstances that are acceptable to the University.
10. Although initial class hours are established for the first semester, class hours after that period of time can change due to availability of facilities, faculty, or other factors, and classes may be scheduled mornings, afternoons, evenings, weekends, or holidays.
11. Students in the following courses must achieve at least a grade of 76% in each core course to make satisfactory academic progress, in addition to any other satisfactory academic progress criteria of the University: dental hygiene (DH), dietetics and nutrition (DN), dental science (DS), emergency medical technician (EM), medical laboratory (MT), nursing (NA, NB, NF, NM, NO, NU, NW and PN), occupational therapy assistant (OT), physical therapist assistant (PT), radiologic technology (RT), and surgical technology (ST). A grade of less than C is equivalent to failing the course, and the course must be repeated at the student's cost. There is only one repeat allowed, and there may not be an immediate opportunity to repeat a course, depending on when it is next offered.
12. The cost of tuition and fees at Herzing University includes:
 - a. The cost of instruction and the use of the University facilities, library, employment assistance, other normal services provided by the University to students, and supplies that are the normal part of lab courses (does not include personal writing instruments or stationery).
 - b. Two nursing uniforms (not to include shoes or stockings).
 - c. Students will be provided an eBook/electronic material for any course in which the University has adopted an eBook/electronic material; however, if an eBook/electronic material is not available, students will be loaned or provided a physical textbook. Students who participate, when applicable, in a campus textbook loaner program, are accountable for returning the textbook and/or software in a condition as describe in the *Herzing University Textbook Loan Program Policy*. Fees may be assessed based on the condition of the textbook and/ or software upon return to include non-return by the due date described within the Policy. If an eBook/ electronic material is available for a course in which the University has adopted the eBook/electronic material, but a student prefers the physical textbook, the student will have the option to purchase (at their cost) the physical textbook for the difference in price between the cost of the eBook and the cost of the physical textbook, including shipping.
13. The student further understands that the cost of tuition and fees at Herzing University does not include the following:
 - a. The cost of any required immunizations.
 - b. The cost of personal health insurance that may be required to work at a clinical site.
 - c. The cost of transportation to and from school or clinical sites, including parking.
 - d. The cost of additional uniforms and apparel other than the two issued uniforms.
 - e. The cost of criminal background checks or substance abuse tests.
 - f. Any other cost that is not specifically identified above as being part of Herzing University tuition and fees.
14. A student in this program is a potential representative of the healthcare profession, and the student's actions and inactions may reflect on Herzing University and the clinical sites to which the student is assigned. Therefore, the student must conduct himself or herself in a professional manner, with integrity and responsibility. Failure to behave professionally can be a basis for dismissal from the program.

Background Checks: Students planning a program of study leading to employment in some disciplines (including, but not limited to: healthcare, nursing, law enforcement, and public safety) may be required to undergo a background check before working in that discipline. If this process results in an adverse finding, the student may not be able to complete the internship course, complete the program, sit for certification examinations, or be employed in that discipline. A student may be required to pass a criminal background check and substance abuse test to the satisfaction of the clinical site prior to each scheduled clinical course. For specific requirements for students enrolled in nursing programs, please check with the Nursing Program Director.

GENERAL POLICIES AND GUIDELINES

The Nursing Student Handbook is supplemental to the Herzing University Undergraduate Catalog and Herzing University Undergraduate Student Handbook. The student should review and adhere to the Herzing University Undergraduate Catalog, Herzing University Undergraduate Student Handbook, and Herzing University-Brookfield Nursing Student Handbook policies and guidelines.

UNDERGRADUATE NURSING ADMISSION REQUIREMENTS

See the Herzing University Undergraduate Catalog for admission details. See also, "Unconditional Admission to Undergraduate Pre-Licensure Nursing Programs" in the Herzing University Undergraduate Catalog.

CRIMINAL BACKGROUND CHECK, DRUG SCREENING, AND MEDICAL REQUIREMENTS CRIMINAL BACKGROUND CHECKS

Caregiver Background checks are required for all persons working or training in facilities that provide care for others or who have access to people who receive care (per 1997 Wisconsin Act 27). Nursing students are required to meet this requirement. Additionally, students must meet the requirements of the individual clinical facilities that are our education sites. Background checks for Herzing University-Brookfield are obtained through a vendor organization called Castle Branch®.

Students are asked to complete the Wisconsin Background Information Disclosure (BID) form (F-82064A), which is used to begin the credentialing process. If a student has lived outside the State of Wisconsin within the past three years, additional state background checks may be required. All students must also clear the Federal Watch list of Medicare and Medicaid fraud. Please note that the disclosure form must be accurately completed. For example, if you respond "No" to question 1 on the form and a past conviction or pending charge comes back as part of the background report, you are considered to have falsified the records. Falsified or missing information on the BID is grounds for an agency to bar you from clinical practice and dismissal from the Nursing Program (see details in Appendix A). Herzing University students must comply with State and Federal laws as well as the requirements of the clinical facilities with which we work. Students are responsible for the cost of the background check.

A complete background check as proscribed under Wisconsin law includes:

- The completed Background Information Disclosure form (BID);
- An electronic status check of professional licenses and credentials through the Department of Regulation and Licensing;
- An electronic criminal history search from the Department of Justice; and
- An electronic review of records kept by the Department of Health and Family Services for any substantiated findings of abuse and/or neglect and license restrictions or denials.

Based on the information obtained, additional research may include an out-of-state criminal history search, tribal courts criminal history search, a check of relevant military records, and a check of county or other

local records. If a criminal background is verified, this could prevent a student from completing clinical and course requirements and affect their eligibility to take the NCLEX-PN exam for licensure. We are obligated to release all background information concerning students to all clinical facilities as well as to the State Board of Nursing. Clinical facilities, as well as the State Board of Nursing, have the right to reject any student who fails to meet the required standards.

If a clinical facility will not accept a student based on his/her criminal background check, the student will not be able to successfully complete the Nursing Program at Herzing University-Brookfield. If a student determines that the background report is incorrect, or wishes to take legal action regarding past criminal activity, he/she must do so independently, and must obtain and pay for any legal or other assistance required independently. A student is ineligible for placement at a clinical facility until a corrected or revised background check is available. A student (or a representative of the student) **may not** contact the facility or its liaison to debate or challenge the facility's decision to deny clinical opportunities.

The purpose of these requirements is to:

- Comply with Federal and State law.
- Comply with clinical affiliates who require a student background check as a condition of their contract.
- Provide early identification of students who may have difficulty meeting eligibility for NCLEX licensure requirements.
- Promote and protect patient/client safety.

If there is a break in a student's enrollment the Background Check and BID form must be repeated. Background checks and BIDs must be repeated every two years.

DRUG SCREENING

The following recommendation was agreed upon by the Southeastern Wisconsin Nursing Alliance (SEWNA) of which Herzing University-Brookfield is a member:

- All nursing students will undergo a 10-panel urine drug screen prior to clinical start; a negative result will require no further screens unless indications of impairment are present, in which case, additional screens may be requested. If there is a break in a student's enrollment the 10-panel urine drug screen will need to be repeated.
- Any student may be subject to periodic drug screening when there is suspected impairment or drug use.
- Positive drug tests will result in the student being suspended for a minimum of one (1) semester. The student will not be able to participate in a clinical placement and will be withdrawn from all nursing courses. It is recommended that the student receive drug counseling.
- Students will be required to pay for the drug screen (this is part of the Castle Branch© plan) and any subsequent testing.
- The student will also be required to complete the drug screen before being considered for re-entry to the program.
- Students who are readmitted following a positive drug screen are subject to drug testing(s) at any point during the program.
- A second occurrence of a positive drug screen will result in permanent suspension from the nursing program.

MEDICAL REQUIREMENTS

See "Additional Admission Requirements for Nursing, Dental, and Other Healthcare Programs" in the Herzing University Undergraduate Catalog.

In order to enroll in, and attend clinical courses, documentation of the following requirements must be

provided to the Nursing Department at Herzing University-Brookfield:

- Health history and examination by a physician, nurse practitioner, or physician assistant, completed within one year from the start date of the first clinical course. Reasonable accommodations will be made for students whose health examination indicate the need. If there are any physical restrictions, a request for participation in clinical must be submitted and approved by the Clinical Coordinator for Herzing University-Brookfield and the clinical site.
- After a clinical absence due to illness, the student may be required to submit to the Clinical Coordinator a return to clinical without restrictions form from his/her healthcare provider, and the statement must be on letterhead from the provider. The student may not return to clinical until cleared.
- If a student is pregnant, the student must notify the Clinical Coordinator and submit a medical clearance form to continue in clinical. The student is also required to submit a medical clearance form and notify the Clinical Coordinator when returning after delivery.
- Proof of vaccination or lab report of titer as follows:
 - Measles (Rubeola): two doses of a live measles vaccine given after the first birthday or evidence of measles immunity. A blood titer is required to prove immunity.
 - Mumps: two doses of a live mumps vaccination given after the first birthday or evidence of mumps immunity.
A blood titer is required to prove immunity.
 - German measles (Rubella): two doses of a live German measles vaccination given after the first birthday or evidence of German measles immunity. A blood titer is required to prove immunity.
 - Tetanus, Diphtheria, and Pertussis (Tdap): Tetanus, Diphtheria, and Pertussis booster within the last ten years.
 - Hepatitis B: documentation of three immunizations or start of immunization series or a student may sign a Release of Responsibility form or provide a titer showing immunity. A blood titer is required to prove immunity.
 - Varicella: two doses of a Chickenpox vaccine given after the first birthday or evidence of
 - Varicella immunity. A blood titer is required to prove immunity.
 - Seasonal Flu Vaccine: Proof of vaccination for the annual flu vaccine. Annual date of vaccination cannot expire during the enrolled semester.
- Results of the Tuberculin (TB) Skin Test within past year and every year thereafter (chest x-ray and physician documentation of freedom from TB are required if skin test results are positive), or the Tuberculosis QuantiFERON blood test is required by some agencies in the State of Wisconsin. Results must be valid through the end of the clinical semester.
- Evidence of the American Heart Association health Care Provider CPR (cardiopulmonary resuscitation) certification valid through the end of the clinical semester.
- Current health care insurance coverage.
 - If a clinical agency requires repeat or additional drug screening or other tests, the student is responsible for meeting those requirements.
 - On an ongoing basis throughout the Nursing Program at Herzing University-Brookfield, students must meet these additional requirements:
- Annual health status documentation (See Appendix F)
- Annual documentation of freedom from Tuberculosis
- Negative drug screen at any time a screen is required. Any student who tests positive on a drug screen may be dismissed from the Nursing Program and/or clinical classes.
- Continued certification in CPR.

It is the student's responsibility to ensure that all documentation meets the above requirements and remains current throughout their program. In addition, clinical requirements cannot expire prior to the end of the academic semester. All health and Castle Branch© forms are submitted four weeks prior to the beginning of the semester to our clinical facilities. Failure to meet submission deadlines

for these requirements results in the inability to attend clinical for the semester. Students will NOT be allowed to submit health or required documentation after the deadline date. The final recommendation is made by the Nursing Program Director in collaboration with the Clinical Coordinator.

Students who do not meet the submission deadline will not be allowed to participate until the following semester, if all requirements are fulfilled at that time.

The Nursing Program and its contracted agencies reserve the right to request repeat background checks or drug screens at any time during enrollment. Failure to comply with this request may result in dismissal from the program.

CLASSROOM AND ONLINE ATTENDANCE POLICIES GRADING

See "Courses with Separate Lab or Clinical Components" in the Herzing University Undergraduate Catalog.

METHODS OF EVALUATION FOR NURSING COURSES

Any or all measures of student learning may be administered in the classroom, on a computer, in clinical nursing lab, or in the clinical setting at faculty discretion. All required course work as outlined in the syllabus is considered in the calculation of the final grade. There will be no rounding up of exam or final course grades. No extra credit assignments may be used.

GRADING POLICIES

See "Minimum Passing Grade" and "Grade Scale" in the Herzing University Undergraduate Catalog.

CLASSROOM ATTENDANCE POLICY

See "Attendance Policy and Procedures" in the Herzing University Undergraduate Catalog.

The Nursing Department at Brookfield requires class attendance. Students are expected to inform faculty when they will miss a class. Students returning to class from an absence are expected to address missed materials with the instructor outside of the scheduled class; therefore, the student must schedule an appointment with the faculty member. Missed assignments fall under the "Late Assignment Submission Policy" and points may be lost for missed assignments or tests. Please see the "Clinical Policies: Absences and Tardiness" policy for important notes.

LATE ASSIGNMENT SUBMISSION GUIDELINES

All assignments must be submitted using the course drop box in Blackboard®. All assignments are to be submitted at the designated time. Assignments submitted after the time due will be subject to the following reduction:

Papers: Students are expected to submit required work on time. Make-up work will not be given. The late penalty is as follows and the percentage represents a reduction in the total grade available for an assignment. Sundays and school holidays do not count as late days as the university is not open.

- 20% for up to one school day late
- 40% for up to two school days late
- 60% for up to three school days late
- 80% for up to four school days late
- No late work will be accepted five (5) school days after the due date for either theory or clinical and the grade for the assignment will be "0" points (or "F").

EXAM AND MAKE-UP POLICY

- Students are expected to take exams on the scheduled date and time for the class in which they are

officially registered.

- Examinations will be timed.
- Students will not be allowed to leave the test area once the exam has started.
- The student will earn ZERO points on the exam if absent on the day and time of the exam. If an extenuating circumstance that *could not have been prevented, anticipated, and/or planned for* is the cause of missing an exam, the student must contact the instructor.
- If scratch paper is needed during the exam, it will be provided. It will be collected at the end of the exam.
- The classroom door will be closed at the start of the exam. The clock on the instructor's computer in the front of the classroom will be used to determine the starting and ending time of exams. If a student is late to class, they will be granted only the remaining time for the exam.
- The final exam may be cumulative at the discretion of the course lead instructor.
- Exam grades will be provided to students within five school days following the exam.
- Students are encouraged to review the results of their exams throughout the course. If time constraints do not allow for an exam to be reviewed during class, the instructor will work with the student to schedule an alternate time for reviewing the student's exam(s).
- At no time may students reproduce the test questions in any format, including, but not limited to, screenshots and photos.

STUDENT CHAIN OF COMMAND

For issues related to the classroom, clinical, and/or lab component of a NP nursing course:

1. Communicate and resolve the issue with the assigned classroom, clinical, and/or lab instructor.
2. If the issue cannot be resolved, the instructor and student will include the Course Lead in the resolution.
3. If the issue is still unresolved, the Dean of the Nursing Program, the Associate Director of the Nursing Program, and/or the Clinical Coordinator of the Nursing Program will be consulted.
4. If the issue remains unresolved, the "last step" is to consult with the Academic Dean.

PROGRESSION POLICIES

SPECIAL STANDARDS FOR CLINIC BASED HEALTHCARE PROGRAM

See "Licensed Practical Nursing (LPN)" in the Herzing University Undergraduate Catalog.

For students enrolled in the nursing program, the progression standards mean the following:

1. Any general education course may be repeated.
2. Any course with the prefix SC or HC required for nursing may be repeated two times.
3. The second failure of a nursing course (prefix NP) will result in dismissal from the nursing program.
4. Students must maintain a 76% or above average in all science, math, and nursing courses in order to progress.
5. Nursing grades are not rounded.

ACADEMIC WARNING

See "Academic Warning and Probation" in the Herzing University Undergraduate Catalog.

DISMISSAL FROM THE UNIVERSITY FOR LACK OF SATISFACTORY ACADEMIC PROGRESS

See "Undergraduate Standards of Satisfactory Academic Progress" in the Herzing University Undergraduate Catalog.

NURSING DEPARTMENT GRADE APPEAL PROCEDURE

Any student who contests a course grade shall first attempt to resolve the matter within the Department of Nursing. A grade appeal must be submitted in writing within one week of an exam and within 5 days of grade issuance for a nursing course. Additional time is allocated should the appeal need to proceed to the

University "Grade Appeals" procedure found in the Herzing University Undergraduate Catalog.

1. The student shall present the appeal in writing to the Course Instructor. The written statement shall limit itself to citations of evidence pertaining to the valid grounds for the appeal.
2. If resolution is not achieved, the Nursing Program Director will review the appeal. If the Nursing Program Director affirms the Instructor's decision, the Director will notify, in writing, the faculty member and the student, as appropriate. If the Nursing Program Director supports the student's appeal, it shall prescribe the method by which the student will be reevaluated. If it is a final grade, the faculty of record shall submit the corrected grade to the Registrar.
3. Should the student still contest the grade, then the student may proceed to the University "Grade Appeals Procedure" outlined in the University Undergraduate Catalog. The Nursing Program Director will provide the Nursing Department's documentation to the Academic Dean.

PROCEDURES FOR APPEAL OF DISMISSAL FROM THE UNIVERSITY AND/OR TERMINATION OF FINANCIAL AID ELIGIBILITY

See "Appeal, Grievance, and Arbitration Procedures" in the Herzing University Undergraduate Catalog.

READMISSION/REENTRY

See "Re-Admission/Re-Entry" in the Herzing University Undergraduate Catalog.

CLINICAL POLICIES CLINICAL PLACEMENTS

Clinical placements are designed to meet psychomotor use of the nursing process and critical thinking required as course outcomes. Clinical placements are typically within a 75-mile radius of the student's home campus and are determined by best opportunity for learning success and clinical site availability. Students are not placed for assignment on clinical units on which they are employed, and, where possible, in facilities where employed. The student may not have worked another job eight (8) hours prior to the start of an academic clinical experience as the sum total for hours for safe practice may be exceeded.

STUDENT RESPONSIBILITY IN THE LAB

Lab Preparation

The nursing lab has a lab coordinator on each campus. Faculty teaching courses with a lab component plan lab experiences and are assisted by the lab coordinator.

- **Lab Instruction:** The course instructor will collaborate with the lab coordinator to develop a schedule of open lab hours in addition to scheduled lab classes to allow for student practice time. All faculty will have expectations that students will complete 2 practice checks with an instructor/lab coordinator prior to the final skills check-off. The course instructors monitor for completion of skills check-offs. The lab coordinator will assist with skills check-offs. The lab coordinator will assist with skills check-offs as time permits.
- **Lab Cleaning and Maintenance:** Students have the responsibility to help maintain the labs as a safe and clean environment. Assistance with lab clean up after use is expected.
- **Ordering of Supplies:** Faculty request supplies. If there are items student(s) feel are needed, he/she should share with the instructor. Our goal is to assure students have what is needed to meet the course objectives.
- **Simulation Lab:** The course instructor, in collaboration with the lab coordinator, will plan and set up the simulations for their classes and participate with the running and debriefing of the simulation. Students are evaluated on the announced objectives for the experience. Preparation is essential. Faculty will assist with the evaluation of students in collaboration with the lab coordinator. All simulations have a debriefing experience. Students are encouraged to form small groups and do

practice simulations also. These times should be scheduled with the laboratory coordinator.

Lab Hours

Lab hours are reviewed each semester and scheduled to meet the needs of the students. The laboratory schedule is posted for student convenience. Students may also check with the lab coordinator for additional lab time.

DRESS CODE

The Nursing Program at Herzing University-Brookfield has an official uniform that is worn at all clinical facilities as required. Uniforms are expected to be kept clean, in good repair, and pressed for the clinical experience. Substitution of other clothing or uniform types is permitted when requested by the clinical site and/or agency. Students must present a professional appearance whenever they are in the skills lab and/or clinical facilities; therefore, uniforms are to be worn to class in the nursing lab and at the clinical sites. The required uniform consists of:

- Two official Herzing scrub sets with the embroidered Herzing logo and one lab jacket. Uniforms are provided by Herzing and will be issued to all students at the time of the first lab. Student are responsible for providing stockings or socks, and shoes. Students are able to wear a long sleeve white shirt under their scrub top.
- White shoes with closed heels and toes, and rubberized soles.
- White or dark socks.
- Name badges (student ID), which will be worn in all clinical settings.
- Lab coat, which will be worn on clinical units to do preparation prior to clinical experiences.
- Alternate uniforms (as defined by the agency) generally require the following:
 - Business casual dress clothing
 - Closed toed shoes
 - No visible cleavage
 - If wearing dresses, no shorter than just above knee level
 - Name badge worn in clinical setting
 - Lab coat may be optional

EQUIPMENT REQUIREMENTS

For both classroom practice and clinical experiences use each nursing student is expected to have the following:

- Watch with a second hand
- Stethoscope with bell and diaphragm capabilities
- Black ink pen

PROFESSIONAL APPEARANCE

In order to comply with infection control policies and enhance the comfort of patients/clients, the student must be clean, neat, and in compliance with the Nursing Program at Brookfield and agency dress code when reporting for clinical experiences.

Non-compliance with the professional appearance practices may result in dismissal from the clinical setting for the day.

- **Jewelry:** Wedding or engagement rings and a maximum of two stud earrings per ear are allowed. No dangling earrings, hoops, necklaces, facial piercings, or tongue piercings are allowed to be worn. The student should bring a large safety pin for pinning jewelry to clothing when rings must be taken off for certain clinical areas (i.e. surgery, OB delivery, nursery, etc.).
- **Hair:** Hair is to be clean, neat, pulled back and secured so that hair does not come in contact with the patient/client or the sterile field. Men must be shaven or have neatly trimmed beards and/or mustaches.
- **Nails:** Nails are to be kept short, clean, and in good repair without polish. No artificial nails or nail

enhancements are permitted (this includes artificial nail tips, appliques, acrylic gels, and any additional items applied to nail surface).

- **Body Art:** Any tattoos or other form of body art should be covered by the uniform.

All students in clinical settings must wear their Herzing University student ID and whatever other identification the facility may require at all times. If a student arrives without the appropriate name/ID badge, they will not be allowed to participate in clinical or to provide patient/client care. This will count as a clinical absence and hours must be made up. See below for clinical absence policy.

ABSENCES AND TARDINESS

Students are expected to be at clinical on time according to their schedule. However, emergencies do happen. The following policy is in effect:

First occurrence: If 15 minutes or less from stated clinical start time—written warning. If greater than 15 minutes from stated clinical start time—student will not be allowed to participate in clinical or to provide patient/client care; counts as a clinical absence—**hours must be made up and paper required. See No Call/No Show policy below for instructor notification requirements.**

Second occurrence: Any tardiness after first occurrence—student will not be allowed to participate in clinical or to provide patient/client care; counts as a clinical absence—**hours must be made up and completion of an instructor specified activity will be required.**

There are no clinical absences permitted. This means that any missed time must be made up either at the clinical site or in the lab. This time is made up at the discretion of the instructor. The student who misses clinical jeopardizes achievement of the course objectives and may receive an unsatisfactory clinical grade. An unsatisfactory clinical grade results in failure of the course. Should an emergency arise, the student is expected to contact the professor immediately.

Herzing University-Brookfield does not provide make-up opportunities for students who take elective vacations or time off during the semester. These absences may result in failure of the course.

NO CALL/NO SHOW

Any student who does not show up for clinical and who does not call the instructor within 15 minutes after the stated start time of clinical will be automatically failed from clinical. No call/no show is an automatic clinical failure. Extenuating circumstances will be reviewed and considered by the instructor and the Program Director.

DISMISSAL FROM CLINICAL

Students will be dismissed from clinical if any of the following occur:

- Being unprepared for the clinical experience
- Being inappropriately dressed for the clinical experience
- Demonstrating unsafe behaviors
- Delivering unsafe care to assigned patient(s)/client(s)
- Exhibiting inappropriate professional behaviors
- Violations of the facility or Herzing University-Brookfield policies, expectations, or standards

REQUIRED NURSING ABILITIES

Students accepted into the nursing program will need the cognitive ability, emotional stability, physical ability, and endurance to complete the nursing program and practice professional nursing. The nursing student cannot pose a significant risk or direct threat to the health or safety of themselves or others. The

nursing student must be able to: exercise safe judgments based on assessment data, remain visibly calm in emergency situations, effectively respond to the evaluation process, be flexible, and demonstrate honesty and integrity.

Specific functions, abilities, and physical requirements for the nursing student are:

- Delivers nursing care that may involve standing, sitting, kneeling, bending, pushing and pulling, carrying, lifting, walking, reaching, and twisting. The ability to lift at least 50 pounds is essential to assist clients with ambulation, transfers, position changes, and to transport clients within the health care setting. Students with injuries may be required to submit a health care provider's statement regarding their ability to perform the above duties. Manual dexterity is essential in the performance of many nursing tasks (i.e. preparation of certain medications, administration of treatments such as dressing changes and intravenous fluids, obtaining vital signs, etc.) and CPR certification without restrictions is required.
- Follows written and verbal directions.
- Communicates knowledge both verbally and in writing (electronically or hand-written). This includes the ability to read, write, hear, and see. Students must be able to speak clearly enough to participate in individual and group discussions in a variety of settings. They must be able to use the computer without restrictions.
- Observes and interprets client data and incorporates that data into the plan of care. This includes assessment and analysis of the physiological, psychosocial, spiritual, and cultural needs of the client. The ability to see, hear, feel, and smell is essential to the collection of data.
- Implements and evaluates nursing care based on the plan of care for a group of clients in all settings in which nursing care is provided. This includes the ability to utilize standard nursing equipment.
- Provides education for clients and their families, including discharge planning. There are additional educational tasks the nursing student performs which involve teaching peers and others.

This description of the essential abilities of the nursing student is meant to include the major areas of responsibility and is not intended to be limited to the above information. If a student believes he/she needs a reasonable accommodation to be able to perform these essential functions, please contact the Nursing Program Clinical Coordinator.

Please note that although we consider pregnancy to be a normal event, for the student's safety, the Nursing Department requires a statement from the student's healthcare provider providing permission to continue the clinical experience or delineate any special needs or restrictions.

Students who need other assistance for test taking, class work and/or clinical work accommodations should follow the procedures outlined in the Herzing University Undergraduate Catalog. Any illness, injury, or condition in which physician or practitioner intervention was sought requires a signed release statement with limitations or restrictions listed before attendance at clinical.

TRANSPORTATION TO CLINICAL SITES

The Nursing Program at Herzing University-Brookfield uses a variety of clinical facilities for student learning experiences. The facilities are located in various areas of the community and require students to provide transportation to/from the facility. Students are responsible for their transportation to/from health care agencies for clinical experiences. Under no circumstances are students allowed to transport patients/clients in their private vehicles.

SAFE PRACTICE GUIDELINES SUPERVISION OF A STUDENT IN CLINICAL

A faculty member, clinical lab personnel, or preceptor will be available to a nursing student at all times to provide guidance and evaluation of student's performance. Preceptors are used for specialized clinical

experiences and are selected according to University policy to meet particular course objectives and enhance the variety of clinical experiences for the student.

SAFE NURSING PRACTICE DEFINITION

Safe nursing practice is essential to all clinical courses. Safe nursing practice is defined as the application of scientific principles and nursing theory in performing nursing care. Care is provided in a reasonable and prudent manner providing for the welfare and protecting the well-being of the patient/client. Safe practices imply that the student can demonstrate awareness of the potential effect of actions and decisions. Such actions and decisions shall not endanger the integrity of the patient/client.

UNSAFE NURSING PRACTICE

- An act or behavior of the type which puts the patient/client or staff at risk for injury or harm.
- An act or behavior which violates the Code for Nurses of the American Nurses' Association (www.nursingworld.org).
- An act or behavior which threatens or has the potential to threaten the physical, emotional, mental, or environmental safety of the patient/client, a family member or substitute familial person, another student, a faculty member, or other health care provider.
- An act or behavior which constitutes nursing practice for which a student is not authorized or educated at the time of the incident.

UNSAFE PRACTICE PROCEDURES

Safe practice is an essential requirement for progression to the next course and will be judged by the clinical support personnel. A student who engages in unsafe practices will receive an unsatisfactory grade for the clinical portion of the course, resulting in a grade of "F" for the course. Documentation of unsafe practices will be formulated by faculty and discussed with, and signed by, the student(s). Faculty will determine if the student is to be dismissed for the day or the remaining portion of the course. In addition, unsafe practices may result in release of the student from the Nursing Program at Herzing University-Brookfield.

PROFESSIONAL STUDENT CONDUCT

The Nursing Educational Administrator and faculty will implement policies related to student conduct that incorporates the standards for safe nursing care, including, but not limited to the following:

- A student shall, in a complete, accurate, and timely manner, report and document nursing assessments or observations, the care provided by the student for the patient/client, and the patient's/client's response to that care.
- A student shall, in an accurate and timely manner, report to the appropriate practitioner errors in or deviations from the current valid order.
- A student shall not falsify any patient/client record or any other document prepared or utilized in the course of, or in conjunction with, nursing practice. This includes, but is not limited to, case management documents or reports, time records or reports, and other documents related to billing for nursing services.
- A student shall implement measure to promote a safe environment for each patient/client.
- A student shall delineate, establish, and maintain professional boundaries with each patient/client.
- At all times when a student is providing direct nursing care to a patient/client the student shall:
 - Provide privacy during examination or treatment and in the care of personal or bodily needs; and
 - Treat each patient/client with courtesy, respect, and with full recognition of dignity and individuality.
- A student shall practice within the appropriate scope of practice as set forth in the Board of Nursing standards for the registered nurse (or practical nurse).
- A student shall use universal blood and bodily fluid precautions.
- A student shall not:

- Engage in behavior that causes or may cause physical, verbal, mental, or emotional abuse to a patient/client; or
- Engage in behavior toward a patient/client that may reasonably be interpreted as physical, verbal, mental, or emotional abuse.
- A student shall not misappropriate a patient's/client's property or:
 - Engage in behavior to seek or obtain personal gain at the patient's/client's expense;
 - Engage in behavior that may reasonably be interpreted as behavior to seek or obtain personal gain at the patient's/client's expense;
 - Engage in behavior that constitutes inappropriate involvement in the patient's/client's personal relationships; or
 - Engage in behavior that may reasonably be interpreted as inappropriate involvement in the patient/client personal relationships.
- A student shall not:
 - Engage in sexual conduct with a patient/client;
 - Engage in conduct in the course of practice that may reasonably be interpreted as sexual;
 - Engage in any verbal behavior that is seductive or sexually demeaning to a patient/client;
 - Engage in verbal behavior that may reasonably be interpreted as seductive, or sexually demeaning to a patient/client.
- A student shall not self-administer or otherwise take into the body any dangerous drug in any way not in accordance with a legal, valid prescription issued for the student, or self-administer or otherwise take into the body any drug that is a Schedule I controlled substance.
- A student shall not habitually or excessively use controlled substances, other habit-forming drugs, alcohol, or other chemical substances to an extent that ability to practice is impaired.
- A student shall not have impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care because of habitual or excessive use of drugs, alcohol, or other chemical substances that impair the ability to practice.
- A student shall not have impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care because of the use of drugs, alcohol, or other chemical substances.
- A student shall not have impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care because of the use of drugs, alcohol, or other chemical substances.
- A student shall not have impairment of the ability to practice according to acceptable and prevailing standards of safe nursing care because of a physical or mental disability. (As required by Federal and State law, appropriate and reasonable accommodations will be made to students with qualifying disabilities if requested according to procedures set forth in the Herzing Undergraduate Student Handbook).
- A student shall not assault or cause harm to a patient/client or deprive a patient/client of the means to summon assistance.
- A student shall not misappropriate or attempt to misappropriate money or anything of value by intentional misrepresentation or material deception in the course of practice.
- A student shall not obtain or attempt to obtain money or anything of value from a patient.
- A student shall not have been adjudicated by a probate court of being mentally ill or mentally incompetent, unless restored to competency by the court.
- A student shall not aid and abet a person in that person's practice of nursing without a license, practice as a dialysis technician without a certificate issued by the Board, or administration of medications as a medication aide without a certificate issued by the Board.
- A student shall not prescribe any drug or device to perform or induce an abortion, or otherwise perform or induce an abortion.
- A student shall not assist suicide.
- A student shall not submit or cause to be submitted, any false, misleading, or deceptive statements, information, or document to Herzing University-Brookfield, its administrators, faculty or preceptors, or to the board.

- A student shall maintain the confidentiality of patient information. The student shall communicate patient/client information with other members of the health care team for health care purposes only, shall access patient/client information only for purposes of patient/client care or for otherwise fulfilling the student's assigned clinical responsibilities, and shall not disseminate patient/client information for purposes other than patient/client care or for otherwise fulfilling the student's assigned clinical responsibilities through social media, texting, emailing, or any other form of communication.
- To maximum extent feasible, identifiable patient health care information shall not be disclosed by a student unless the patient/client has consented to the disclosure of identifiable patient health care information. A student shall report individually identifiable patient/client information without written consent in limited circumstances only and in accordance with an authorized law, rule, or other recognized legal authority.
- For the purposes of professional boundaries; provision of direct patient/client care; physical, verbal, mental, or emotional abuse; misappropriation of the patient's/client's property; engage in sexual misconduct; or consent to sexual activity, a student shall not use social media, texting, emailing, or other forms of communications with, or about a patient, for non-health care purposes or for purposes other than fulfilling the student's assigned clinical responsibilities.
- A student shall not violate the policies and guidelines of the clinical agency to which they are assigned.

SUBSTANCE ABUSE

Herzing University-Brookfield requires that nursing students at all times be capable of providing safe and effective patient care. To that end, the University is committed to a substance-free workplace and environment. This means that nursing students must not be impaired by any substances during any part of the Nursing Program, including classroom work, lab assignments, and clinical settings in which the nursing students participate. See "Drug and Alcohol Policy" in the Herzing University Undergraduate Student Handbook for additional information. Therefore, any situation where a student's ability or performance is impaired by drugs or alcohol will be dealt with in the following manner within the Nursing Department:

- The student will be removed from the clinical site, lab, or classroom.
- The student will be required to obtain drug testing at the testing facility identified by the Nursing Department.
- If the results are positive, the student will be released from the nursing program for at least 1 semester to allow time for treatment and reflection.
- The student may apply to return to the program after 1 semester's absence. A statement for the health care provider stating that the student is without mental or physical impairment that would inhibit safe nursing care is required.
- If allowed to return, the student will be placed based on space available and repeat the drug screen.
- A second repeat of the substance abuse policy will result in permanent release from the Nursing Program at Herzing University-Brookfield.
- The student is afforded the right of challenge under the procedure set forth in the Herzing University Undergraduate Catalog. Student conduct hearings at Herzing University are bound by the published guidelines in the Herzing University Undergraduate Catalog.

Reasons to suspect impairment include, but are not limited to the following:

- Alcohol on the breath or odor of alcohol
- Flushed face and/or bloodshot eyes
- Tremors of the hands
- Unsteady gait
- Patterned absenteeism
- Frequent breaks or disappearance during clinical day
- Repeated tardiness

- Memory lapses, difficulty concentrating, confusion
- Lack of coordination/dexterity
- Slurred or incoherent speech
- Deterioration of appearance
- Dilation or constricted pupils
- Anger, hostility, irritability, mood swings, agitation
- Presence of drug paraphernalia
- Drowsiness and sleepiness

STUDENT ORGANIZATIONS AND DEPARTMENT COMMITTEES DEPARTMENT OF NURSING COMMITTEES

Student representation is expected on committees within the Nursing Program. These include:

- Curriculum Committee
- Evaluation Committee
- Faculty Retention & Recruitment Committee
- Faculty Student Awareness Committee
- Nursing Department Advisory Board

STUDENT NURSES ASSOCIATION (SNA)

The Herzing University-Brookfield Chapter of the Wisconsin Student Nursing Association (WSNA) is an officially recognized organization of Herzing University and the Nursing Program. The SNA is the official representative of the nursing student body and coordinates, within the policies of Herzing University, events and activities. Members function under the charter of the organization and the leadership of elected officers. Advisors are elected/appointed from the Nursing Program faculty. The faculty advisors are expected to be in attendance at the meetings of the organization.

The advisor's role is to provide clarity, to interpret Nursing Program and University policies/procedures, and to provide general consultation. The purpose of SNA is to provide networking and mentoring opportunities for the nursing student to foster their developing professional role. The organization promotes active engagement at the local, state, and national levels to contribute to advances in nursing education, promote advocacy for health care, and provide service opportunities.

CONFIDENTIALITY STATEMENT: STATEMENT OF CONFIDENTIALITY

All information that a student learns about a client/patient while providing care is private and confidential. This information is not to be shared with anyone except an instructor and those members of the health team directly involved with the care of the client/patient. The right of privacy is paramount; therefore, confidential information about the client acquired from any source is to be safeguarded. With the nurse-client relationship based on trust, the client's welfare and the reputation can be jeopardized by inappropriate disclosure and the nurse-client relationship destroyed. Students are expected, without exception, to observe the patient's/client's right to privacy. Serious consequences such as release from the Nursing Program may result if the student fails to maintain this privacy. Students are reminded that confidentiality has legal and ethical implications and that an inappropriate break of confidentiality may expose the student and University to liability.

The Herzing University Undergraduate Catalog can be found at <http://catalog.herzing.edu/>

SECTION 6

Horzing University-Brookfield intends to admit students beginning May 2018. The schematic shows the steps in the admissions process that will be undertaken:

Step 1

- Upon receipt of Authorization to Admit, Students approval from WBON, enrollment can begin (Anticipated May, 2018)

Step 2

- Apply for Candidacy Status Spring 2019
- Submit Application for Initial Approval from WBON after graduation of first class (anticipated Spring, 2019)

Step 3

- Anticipated site visit Fall 2019

SECTION 7

The curriculum includes clinical experiences in a variety of long-term care/acute rehab, specialty, and community care settings to ensure that the student demonstrates competencies in the role of the practical nurse upon graduation from the PN program. The current curriculum plan utilizes 6 affiliations which the clinical experience focus varies. The 8 clinical settings for the HUB-PN program are listed in Table 4. Table 5 shows the alignment of courses to clinical sites and partnership agreements. Copies of Form #1004, clinical contracts, LPN job descriptions, and Memoranda of Understanding (MOU) forms for each clinical site is located in Appendix 1-D. There are also email communications between HUB-PN program and each clinical site verifying each clinical site's commitment to the PN program that can be requested.

Table 4: Clinical Sites

Organization	Facilities	Address
Luther Manor	Skilled Nursing, Acute Rehab, Assisted Living	4545 N 92nd St. Milwaukee, WI 53225
Rogers Memorial Behavior Health Systems - West Allis	Mental Health (child-adolescent and adult)	11101 W Lincoln Ave. West Allis, WI 53227
Rogers Memorial Behavior Health Systems - Oconomowoc	Mental Health (child-adolescent and adult)	34700 Valley Rd. Oconomowoc, WI 53066
Rogers Memorial Behavior Health Systems - Brown Deer	Mental Health (child-adolescent and adult)	4600 W Schroeder Dr. Brown Deer, WI 53223
Brookfield Rehab	Skilled Nursing, Acute Rehab	18740 W Bluemound Rd. Brookfield WI 53045
Ascension Madison Medical Affiliates	Medical Clinic	788 N Jefferson St. STE 400. Milwaukee, WI 53202
Franciscan Villa	Skilled Nursing, Acute Rehab, Assisted Living	3601 S Chicago Ave South Milwaukee, WI 53172
Royal Family Kids Camp	Community Based Care	4970 S Swift Ave. Cudahy, WI 53110

Table 5: Courses - Clinical Sites – Partnership Agreements

Clinical Course	Clinical Site	MOU or emails included (included)	Clinical Contract (included)	LPN Job Description (included)
NP120 Fundamentals of Nursing	<ul style="list-style-type: none"> Luther Manor Assisted Living 	X	X	X
NP125 Medical Surgical Nursing I	<ul style="list-style-type: none"> Luther Manor Skilled Nursing OR <ul style="list-style-type: none"> Brookfield Rehab Skilled Nursing 	X	X	X
NP225 Medical Surgical Nursing II	<ul style="list-style-type: none"> Luther Manor Acute Rehab 	Same as above	Same as above	Same as above
NP230 Nursing Specialty	<ul style="list-style-type: none"> Roger's Memorial Inpatient (Mental Health & child-adolescent) Royal Family Kids Camp (Pediatric) Madison Clinic (OB) 	X X X	X X X	X X X

NP235 Medical Surgical Nursing III	<ul style="list-style-type: none"> Brookfield Rehab Acute Rehab 	Same as above	Same as above	Same as above
NP270 Clinical Experience	<ul style="list-style-type: none"> Franciscan Villa Skilled Nursing & Acute Rehab 	X		X

In addition to clinical sites, the laboratory facilities at the Brookfield campus provides students with three nursing laboratories - one designated as a high fidelity simulation lab, one traditional basic care lab and a skills lab. The traditional nursing lab contains low to moderate fidelity simulation with four beds for use to practice medical-surgical care. In the simulation lab, the students have access to a simulated clinical environment with a high fidelity mannequin to enhance learning.

Appendix 1-A

**Dr. Deborah Ziebarth's
Form #1114 and CV**

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
 Madison, WI 53708-8366
 FAX #: (608) 266-2602
 Phone #: (608) 266-2112

1400 E. Washington Avenue
 Madison, WI 53703
 E-Mail: dsps@wisconsin.gov
 Website: dsps.wisconsin.gov

BOARD OF NURSING

FACULTY / EDUCATIONAL ADMINISTRATOR QUALIFICATION RECORD

New nursing school seeking authorization to admit students: Completion of this form is required for each faculty member and the educational administrator. This form must be submitted to the Board of Nursing along with the request for authorization to admit students.

Nursing school approved by the Board of Nursing: Completion of this form is required for each faculty member and the educational administrator. The form must be kept on file in the school of nursing office and made available to the Board upon request for all faculty members and educational administrators hired by the nursing school.

Change in educational administrator: Institutions are required to notify the Board of Nursing within 48 hours of the termination, resignation or retirement of an educational administrator and designate an interim educational administrator (EA) within five (5) business days. Completion and submission of this form is required as part of the notification process.

Faculty/EA Name (*Last, First*): Ziebarth, Deborah WIRN License #: 80495-30

School of Nursing Employed By: Herzing University

Type of Nursing Program(s) (ADN, PN, BSN, etc.): PN

Position Educational Administrator Faculty

Appointment Effective Date: 6/22/2016

FACULTY APPOINTMENTS (complete Section A below).

Fully-qualified faculty must have a current, active Registered Nurse license or privilege to practice in Wisconsin that is not encumbered and a graduate degree with a major in nursing.

A. EDUCATIONAL PREPARATION

Name of Institution	Location City/State	Graduation Date	Degree Earned or # of Credits	Major	Minor

#1114 (Rev. 12/14)
 Ch. N 1.08 Wis. Admin. Code

Committed to Equal Opportunity in Employment and Licensing

Wisconsin Department of Safety and Professional Services

EDUCATIONAL ADMINISTRATOR APPOINTMENTS

Fully-qualified educational administrator must have current, active Registered Nurse license or privilege to practice in Wisconsin that is not encumbered, a graduate degree with a major in nursing, knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation, current knowledge of nursing practice, and **either** educational preparation (master's degree in nurse education or doctorate degree in nurse education) or at least two (2) years experience as an instructor in a nursing education program within the last five (5) years.

NOTE: Applicant must complete Section A below; complete Section B below only if teaching experience is being applied toward the requirements in lieu of an earned master's or doctorate degree in nurse education.

List most recent education preparation and teaching experience first. Attach additional pages as necessary.

A. EDUCATIONAL PREPARATION

Name of Institution	Location City/State	Graduation Date	Degree Earned or # of Credits	Major	M i
UW-Milwaukee	Milwaukee, WI	5/2016	PhD	Nursing	
Cardinal Stritch	Milwaukee, WI	5/2008	MSN	Nursing	
Cardinal Stritch	Milwaukee, WI	5/2001	BSN	Nursing	
MATC	Milwaukee, WI	5/1981	ADN	Nursing	

B. NURSING INSTRUCTION EXPERIENCE*

***Complete this section only if a master's or doctorate degree in nurse education has not been earned and teaching experience is being applied in lieu of a master's or doctorate degree in nursing.**

From Month/Year	To Month/Year	Part-time or Full-Time	Employer/School	Location City/State	Position/Job Title

Stephen McEvoy

 Educational Administrator

Stephen P. McEvoy

 Signature

262-649-1710 x61667

 Telephone Number

Academic Dean

 Title

12/19/2017

 Date

SMcEvoy@herzing.edu

 Email Address

Curriculum Vitae

Licensures, Certifications, Training

- Registered Nurse in State of Wisconsin - Current
- Board Certified FCN through ANCC (2014- 2018)
- FCN Foundations Faculty Course Training (2013)
- Work Force Analytics Leadership Training (2010)
- "Just Culture" for Leaders Training (2010)

Awards

- 2013 Received Herzing University (Brookfield Campus) 2013 Academic Scholarship Award for Excellence in Academia
- 2012 Received Herzing University 2012 National Academic Scholarship Award for Excellence in Academia
- 2012 Received Herzing University (Brookfield Campus) 2012 Academic Scholarship Award for Excellence in Academia
- 2011 Received Herzing University (Brookfield Campus) 2011 Academic Scholarship Award for Excellence in Academia
- 2010 Received Wisconsin Nursing Association (WNA) 2010 "100 Faces of Nursing over 100 years" Award
- 2008 Received Volunteer Hospital Association (VHA) 2008 "Best in Class" Award for Community Health Programming
- 2006 Received the American Hospital Association (AHA) 2006 "Nova Award" for Community Health Programming

Professional Memberships and Board Positions

- Wisconsin Nurse Association (WNA) since 1999
 - Wisconsin FCN Coalition (WNA MIG)
 - Education Chair since 2003-2014
- ANCC FCN CEP 2013 -2017
- Saint Joseph's Free Clinic, Waukesha Foundation Board (Coordinator of Fund Development) – 2011-2013
- Susan G. Komen Foundation Board (Grant's Committee) - Southeastern Wisconsin Affiliate 2009-2011
- Medical College of Wisconsin Academic/Community Advisory Board and Translational Research Committee (2005-2011)
- National Children Study Advisory Board Member (2008-2011)
- Healthiest Wisconsin 2020 Implementation Board Member- Madison, Wisconsin (2010-2011)
- Federal Funded Health Clinic Project Development and Implementation Committee (2008-2011)
- American Hospital Association (AHA) Association of Community Health Initiatives (ACHI) 1999 - 2011
- Wisconsin Public Health Association (WPHA) 2009- 2013
- Westberg Institute
 - Content Expert Curriculum Reviewer 2013
 - Continuing Education Module Development Chair 2007
 - HMA/ANA Task Force Member to update Faith Community Nurse Scope and Standards of Practice 2010-2011
- Carroll University Hispanic Nursing Project Board Member (2005-2009)
- WCTC Adult Education Board Member (2006-2010)
- Waukesha Hispanic Collaborative Network (Chair from 2004-2008)

Published Works

Research

- Ziebarth, D. (2017) Exploring Standardized Nursing Languages. *International Journal of Faith Community Nursing*. In Press.
- Ziebarth, D. (2017) Exploring Termination in Faith Community Nursing. *International Journal of Faith Community Nursing*. In Press.
- Ziebarth, D. (2016). Altruistic and economic measurements used for prevention health services: Faith community nursing program. *Journal of Evaluation and Program Planning*, 57, 72-79.
- Ziebarth, D., & Hunter, C. (2016). Moving Toward a Virtual Knowledge Platform for Faith Community Nurses. *CIN: Computers, Informatics, Nursing*, 34(11), 503-512.
- Ziebarth, D., & Campbell, K. P. (2016). A Transitional Care Model Using Faith Community Nurses. *JCN*, 33(2), 112-118.
- Ziebarth, D. J. (2016). Wholistic Health Care: Evolutionary Conceptual Analysis. *Journal of religion and health*, 55(5), 1800-1823. DOI 10.1007/s10943-016-0199-6
- Ziebarth, D. (2015) "Demonstration: Development of a Minimum Set of Parish Nurse Educational Outcomes and Behavioral Objectives," *International Journal of Faith Community Nursing*; Vol. 1: Iss. 3, Article 4. Available at: <http://digitalcommons.wku.edu/ijfcn/vol1/iss3/4>
- Ziebarth, D. (2015) "Factors That Lead To Hospital Readmissions and Interventions that Reduce Them," *International Journal of Faith Community Nursing*; Vol. 1: Iss. 1, Article 1. Available at: <http://digitalcommons.wku.edu/ijfcn/vol1/iss1/1>.
- Ziebarth, D. (2015). Why a Faith Community Nurse Program: A five finger response. *JCN*. 32 (2), 88-93.
- Ziebarth, D. (2014). Evolutionary Conceptual Analysis: Faith Community Nursing. *Journal of Religion and Health*, 53(6), 1817-1835.
- Ziebarth, D. J. (2014). Discovering Determinants Influencing Faith Community Nursing Practice. *JCN*. 31(4), 235-239.
- Ziebarth, D., Healy-Haney, N., Gnad, B., Cronin, L., Jones, B., Jensen, E., & Viscuso, M. (2012). A community-based family intervention program to improve obesity in Hispanic families. *Wisconsin Medical Journal*, 111(6), 261-266.
- Ziebarth, D. and Miller, C. (2010, May). Exploring Parish Nurses' Perceptions of Parish Nurse Training. *Journal of Continuing Education in Nursing*, 41(6), 273-280.
- Ziebarth, D. (2006, June). Innovation Betters Community Health. *Creative Nursing Management Journal*, 12(2), 6-7.

Articles

- Ziebarth, D. (2016). Research and its importance to FCN; FCN research Gaps; Increases in FCN research; Reviewing FCN research. *Perspectives*. 15(3).P 1; 3; 6; 8-9.
- Ziebarth, D. (2014). Evidence-Based Practice: Faith Community Nurse Transitional Care Program. *Perspectives*. 13 (3), 6-9.
- Ziebarth, D. (2014) Summer Safety: Simple Ways of Minimizing Dangers of Summer Fun. *Nanny Magazine*. Pp 22-28
- Ziebarth, D. (2013) Continuing Education of Rural Nursing. Letter to the editor. *Journal of Continuing Education in Nursing*. Vol. 44 Issue 1, p3.
- Ziebarth, D. (2011, April). Hospital Transportation Program: Changing a Culture and Reducing Cost. *Article Base*. Retrieved at <http://www.articlebase.com>, 1-8.
- Ziebarth, D. (2011, March). Transitional Nursing Care. *Wisconsin STAT*, 6-7.
- Ziebarth, D. (2010, August). Community Health Workers Help Hospital Reach Hispanics. Milwaukee Area Health Education Center E-Newsletter. Retrieved at <http://www.milwaha.org/component/content/article/138-community-health-worker-help-h>, 1-4
- Ziebarth, D. (2010, February). Wisconsin Parish Nurse Education Standards. *Wisconsin STAT*. 7, 5-6.
- Ziebarth, D. (2008, February). Quality Education Provided. *Wisconsin STAT*. 7(1), 3-4.
- Ziebarth, D. (2007, January). Specialty Celebrates 10 Years of Caring. *Nursing Matters*, 18(1), 4, 21.

- Ziebarth, D. (2004, February). Exceptional Community Care as Evidenced by Clinical Outcomes. *Wisconsin STAT*, 3(1), 5-6.
- Ziebarth, D. (2005, December). Introduction to Shared Governance. *Wisconsin STAT*, 4(4), 5-6.
- Ziebarth, D. (2005, August). Community Automatic External Defibrillator Policy. *Wisconsin STAT*, 4(3), 5.
- Ziebarth, D. (2005, May). Developing a Blood Pressure Policy. *Wisconsin STAT*, 4(2), 4-5.
- Ziebarth, D. (2002, July). Blood Pressure: Part II [I]. *Wisconsin STAT*, 1(3), 5-7.
- Ziebarth, D. (2002, April). Six-Month Blood Pressure Outcomes. *Wisconsin STAT*, 1(2), 4-5.

State Nursing Education Standards

- Ziebarth, D. (2010). Wisconsin Minimum Set of Basic Parish Nurse Education Outcomes and Behavioral Objectives. (pp. 1-69). Madison, Wisconsin. Wisconsin Nursing Association.

Nursing Textbook Chapter

- Ziebarth, D. (2005). Policies and Procedures for the Parish Nursing Practice. In P. Solari-Twadell & M. McDermott (Eds.), *Parish Nursing: Development, Education, and Administration* (pp. 257-282). St. Louis, MO: Elsevier Mosby.

Published Papers/Presentations

- Ziebarth, (2017, August) FCN Transitional Care. Saint Cloud, Minnesota
- Ziebarth (2017, March) FCN Transitional Care. Sioux fall, South Dakota and Fargo, North Dakota.
- Ziebarth (2016, April) FCN Transitional Care. Westberg Symposium, Skokie, Ill.
- Ziebarth (2015, April). FCN Transitional Care. Westberg Symposium. Memphis, Tenn.
- Ziebarth (2015, April). Evolutionary Conceptual Analysis: Faith Community Nursing. Westberg Symposium.
- Ziebarth (2014, Dec). Transitional Care. IHI Conference, Orlando, Fl.
- Ziebarth, D. (4-25-2014) Helen Westberg Memorial Lecture Panel Session: Transitional Care Models. Presented at the Westberg Symposium, Olive Branch, Mississippi.
- Healy-Haney, N. & Ziebarth, D. (2011, September). Reducing Cardiac Risk in Hispanic Families: A Collaborative Approach. Presented at the Public Health Conference. Stevens Point, Wisconsin.
- Healy-Haney, N. & Ziebarth, D. (2011, February). Reducing Cardiac Risk in Hispanic Families: A Collaborative Approach. Presented to Southern Wisconsin LEAP Professionals at quarterly meeting. Waukesha, Wisconsin.
- Ziebarth, D. (2010, Oct.). Wisconsin Minimum Set of Basic Parish Nurse Education Outcomes and Behavioral Objectives. Wisconsin Nursing Association Conference.
- Ziebarth, D. (2009, Sept). Research: Exploring Parish Nurses' Perceptions of Parish Nurse Training. Paper presented at the 23rd Annual Westberg Symposium. Saint Louis, Missouri.
- Ziebarth, D. (2005, Sept. 30-Oct. 2). Promoting Leadership and Professionalism through the Implementation of a Shared Governance Model. Paper presented at the 19th Annual Westberg Symposium, (pp. 115-128). St. Louis, Missouri.

Abstracts/Posters

- Ziebarth (2017, November). FCN Transitional Care. APHA International Conference, Atlanta, Georgia.
- Ziebarth (2015, April). Transitional Care Model. Westberg Symposium. Memphis, Tenn.
- Ziebarth (2014, Dec). Transitional Care Model. IHI Conference, Orlando, Fl.
- Ziebarth, D. (2010, Oct). Research: Exploring Parish Nurses' Perceptions of Parish Nurse Training. Poster presented at the 100th Anniversary of the Wisconsin Nursing Association Annual Convention. Madison, Wisconsin.
- Ziebarth, D. (2010, Oct). Project: Wisconsin Minimum Set of Basic Parish Nurse Education Outcomes and Behavioral Objectives. Poster presented at the 100th Wisconsin Nursing Association Annual Convention. Madison, Wisconsin.
- Ziebarth, D. (2004, Sept. 29-Oct. 1). Hypertension Identification with Blood Pressure Control & Heart Disease risk Identification and Lifestyle Change. Poster presented at the 18th Annual Westberg Symposium, (p. 279). St. Louis, Missouri.
- Ziebarth, D. & Wisnepske, K. (2005, Sept. 30-Oct. 2). A Strategy to Promote Leadership, Professionalism and Scholarship through a Partnership with a State Nursing Association. Poster presented at the 19th Annual Westberg Symposium, (p. 214). St. Louis, Missouri.

Curriculum (Published/Unpublished)

- Ziebarth, D. & Campbell, K. (2014) Faith Community Nurse Transitional Care Curriculum. Church Health Center. Memphis, Tenn.
- Ziebarth, D. (1998; 2013). Health Ministry Mentoring Curriculum (p.1-360).

Published Booklets

- **Volunteer Program Development: For Faith Communities (2017).**
https://www.amazon.com/Volunteer-Program-Development-Faith-Communities/dp/1973994925/ref=sr_1_fkmr1_1?s=books&ie=UTF8&qid=1510854806&sr=1-1-fkmr1&keywords=Developing+a+Volunteer+program+for+a+faith+community
- **Faith Community Nurse Visitation Guidelines. (2017).** <https://www.amazon.com/Visitation-Guidelines-Faith-Community-Nurses/dp/1546311459>
- **Community Nurse Visitation Guidelines. (2017).**
https://www.amazon.com/s/ref=nb_sb_noss?url=search-alias%3Dstripbooks&field-keywords=Community+Nurse+Visitation+Guidelines

Appendix 2-A

Faculty Form #1114 and CVs

Wisconsin Department of Safety and Professional Services

EDUCATIONAL ADMINISTRATOR APPOINTMENTS

Fully-qualified educational administrator must have current, active Registered Nurse license or privilege to practice in Wisconsin that is not encumbered, a graduate degree with a major in nursing, knowledge of learning principles for adult education, including nursing curriculum development, administration and evaluation, current knowledge of nursing practice, and **either** educational preparation (master's degree in nurse education or doctorate degree in nurse education) or at least two (2) years experience as an instructor in a nursing education program within the last five (5) years.

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List most recent education preparation and teaching experience first. Attach additional pages as necessary.

E. EDUCATIONAL PREPARATION

Name of Institution	Location City/State	Graduation Date	Degree Earned or # of Credits	Major	M i

F. NURSING INSTRUCTION EXPERIENCE*

*Complete this section only if a master's or doctorate degree in nurse education has not been earned and teaching experience is being applied in lieu of a master's or doctorate degree in nursing.

From Month/Year	To Month/Year	Part-time or Full-Time	Employer/School	Location City/State	Position/Job Title

Deborah Ziebarth

Educational Administrator

Dr. Deborah Ziebarth

Signature

262-649-1710 x61647

Telephone Number

Nursing Department Chair

Title

12/15/2017

Date

DZiebarth@herzing.edu

Email Address

Karen L. Dulin

2121 N. North Drive
Oconomowoc, WI 53066
(262) 646-2216 Home
(262) 391-5844 Cell
Kdulin666@wi.rr.com

OBJECTIVE

I am a dedicated RN with over 15 years of experience in critical care within Columbia-St. Mary's Regional Burn Center seeking transition into a faculty/clinical teaching position within a nursing school. I offer a solid foundation in critical care, research methodologies, and current health care advancements.

Special experience in conducting clinical improvement projects within the critical care environment of burn specialization. Strong background as a department unit educator developing orientation programs to new nurses as well as continuing education to established staff. Community educator for the American Burn Association for Advanced Burn Life Support programs aimed at emergency medical technicians in the field and hospital support staff at state and local emergency departments.

WORK EXPERIENCE

11/20/99-Present, Columbia-St. Mary's Regional Burn Center, Milwaukee, WI (Ascension)

Staff RN in an acuity adaptable critical care unit caring for patients undergoing grafting and surgical interventions. Assisting surgeons and surgical teams with operative procedures performed at the bedside as well as daily wound cares for a highly specialized patient population.

Highlights of Contributions

- Eden's Grant recipient for a clinical improvement project for teaching "Preoperative and Postoperative Skin Grafting" to patients who are undergoing a grafting procedure.
- Ascension Grant for developing a discharge video of patient's personalized burn therapies for them to take with them after discharge to rehabilitation centers.
- Nursing team lead on International research study for "Nexabrid". Nexabrid is a chemical debridement product (Mediterranean pineapple) project that is undergoing extensive study on burn patients in the United States seeking FDA approval.
- One of two national American Burn Association Instructors at Columbia-St. Mary's Regional Burn Center.
- Annual instructor as nursing skills fair for Ascension.
- Community educator for annual EMT conference.
- Unit based Quality Improvement Representative for 5+ years.
- Department Unit Educator for 7+ years until the hospital based position was eliminated by Ascension.

EDUCATION

2001 Carroll University-BS Nursing

2010 AACN-CCRN Certification

2013 University of Phoenix-MSN Nursing Education

ADDITIONAL INFORMATION

Reputation as a loyal team player with an unwavering commitment to providing quality care and evidenced based practices.

Wisconsin Department of Safety and Professional Services

EDUCATIONAL ADMINISTRATOR APPOINTMENTS

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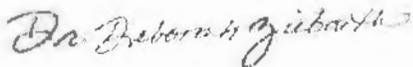
H. NURSING INSTRUCTION EXPERIENCE*

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From Month/Year	To Month/Year	Part-time or Full-Time	Employer/School	Location City/State	Position/Job Title

Deborah Ziebarth

Educational Administrator



Signature

262-649-1710 x61647

Telephone Number

Nursing Department Chair

Title

12/15/2017

Date

DZiebarth@herzing.edu

Email Address

REBECKA J HUGGINS, RN

64 Torrey St. Clintonville, WI 54929
(h)715-460-3389 • (c) 715-460-4656
rhugsm@gmail.com

PROFESSIONAL OBJECTIVE

To be an active faculty member participating in role of educating nursing students.

PROFESSIONAL EXPERIENCE

UNIVERSITY OF WISCONSIN- OSHKOSH, OSHKOSH, WI
01/15-04/15

INSTRUCTIONAL ACADEMIC STAFF

As a collegiate faculty member, I worked in two different nursing programs within the college of nursing, the traditional undergraduate and the accelerated online nursing program. In the traditional program, I taught two different clinicals, one on a medical-surgical floor and one split between an assisted living facility and a rehabilitation floor in a hospital. Responsibilities for those clinicals included facilitating and monitoring of students with nursing skills, medication monitoring, assessments, care planning, documentation, nursing cares, therapeutic communication, and reporting off to the next nurse and charge nurse. In addition, to working with the students at the facility, I also was responsible for all the grading of assignments and having availability for them to ask/answer questions. In the accelerated online option, I was assigned to a community health clinical. My responsibilities were to meet with the preceptor and student at the beginning of the clinical and the end of the clinical. During the clinical experience, I would have weekly, and more often if needed, communication with both the preceptor and student. During the clinical time, there were chats the students needed to attend that I was responsible to facilitate in which students from the clinical would gather and discuss a variety of topics related to the clinical. In addition, I was responsible for grading all assignments and having communication often with the student.

SHAWANO COUNTY , SHAWANO, WI
08/15-10/15

MENTAL HEALTH REGISTERED NURSE

I worked as a mental health registered nurse with clients living in the community. I collaborated daily with the psychiatrist, social workers, and deputy director. I was responsible for medication administration for those who needed monitoring, court ordered medications, obtaining of laboratory results, monitoring of laboratory schedules of medications, creation of policies regarding medications, laboratory medication levels and monitoring of those levels. I also helped out with any nursing care that was needed with clients in our service.

COLLEGE OF MENOMINEE NATION, KESHENA, WI
8/10-5/15

NURSING FACULTY

As a collegiate faculty member, I was responsible for the management and operation of the Associate Degree Nursing Program curricula. I taught and evaluated didactic content, instructed and evaluated basic nursing skills, and taught and evaluated nursing students in the clinical area. Faculty rank was assigned by the Dean of Nursing based on policy. Each faculty member was expected to abide by and promote the mission, philosophy, framework, and policies of the College of Menominee Nation and the Nursing and Health Careers Program. In addition to the curricula that was taught, I was the chair of the Nursing Program Evaluation committee and co-chair of Nursing Curriculum committee.

PINE MANOR HEALTHCARE CENTER, CLINTONVILLE, WI

12/09-

12/10

REGISTERED NURSE

This is a long-term care facility that houses residents that need a variety of care needs. At this facility, care is provided following the facilities policies and protocols. Administration of medications, application of treatments, monitoring of blood glucose levels, proper documentation, and guidance of ancillary nursing staff are some of the responsibilities of the registered nurse. Collaboration of care includes the resident, resident's family, nursing staff, social services, and therapy departments.

NORTHEASTERN WISCONSIN TECHNICAL COLLEGE, GREEN BAY, WI

06/09-04/10

NURSING INSTRUCTOR

As an adjunct instructor, I have taught the nursing assistant classes; didactic and skills, including the clinical component and introduction to practical nursing clinical.

ST. JOSEPHS RESIDENCE, NEW LONDON, WI

09/08-12/09

REGISTERED NURSE

This is a long-term care facility that houses residents that need a variety of care needs. At this facility, care is provided following the facilities policies and protocols. Administration of medications, application of treatments, monitoring of blood glucose levels, proper documentation, and guidance of ancillary nursing staff are some of the responsibilities of the registered nurse. Collaboration of care includes the resident, resident's family, nursing staff, social services, and therapy departments.

NURSES PRN, KIMBERLY, WI
NURSE

03/08-10/10, 11/15-12/15 REGISTERED

Most recently, I worked in a psychiatric setting, mostly working with patients detoxing from alcohol and substance abuse. Responsibilities included following established protocols for the detoxing patient and assessments, medication administration, documentation, admissions, discharges, and providing emergency management if indicated. As the unit had been newly re-opened, I helped to create checklists for admissions and discharges for other agency nurses. I work at various long-term care facilities and have worked within the insurance industry. My service is to provide care to the residents/patients at the facilities per standards and protocols, including but not limited to medication administration, application of treatments, blood glucose monitoring, head-to-toe assessments, admissions, discharges, and care planning. I complete charting and paperwork in a timely manner including minimum data sets, temporary care plans, and care plans. I work many evening and night shifts, in which management is only available by phone. I supervise the ancillary nursing staff, communicate with physicians when needed when resident safety is the primary concern. Within the insurance industry, I would approve or reject procedures based on the policy type the insured would have.

CRASSOCIATES, INC., NEWINGTON, VA

04/07-

09/07

RN ADMINISTRATOR

I served as the administrator at the Veteran's Outpatient Clinic in Wausau, Wisconsin, serving over 4000 veterans receiving medical care and an additional 300 veterans receiving mental health services. I oversaw the day-to-day operations of the clinic. Operations included supervising physicians, nurse practitioners, nursing support staff and clerical staff, maintaining enrollment status with the veterans, veteran complaints, billing, budgeting, weekly and

monthly reports to corporate office, QI/QA initiatives, performance improvement projects, performance appraisals for employees, action plans for deficits, hiring of new personnel, disciplinary actions, and maintaining contact with Outpatient Coordinator. During my short tenure, I managed to double the patient satisfaction scores of the veteran's receiving care at this facility.

WINNEBAGO MENTAL HEALTH INSTITUTE, WINNEBAGO, WI.
NURSE CLINICIAN 2

07/00-06/06

I provided skilled nursing care to mental health and dual diagnosis inmates/patients; provided assessment and treatment; managed medications; assisted physicians in providing medical services; provide emergency care and maintenance of treatment records.

- I created a power point program for the patients teaching them the different types of medications that are used to treat the different types of mental illness
- The program consists of the presentation for the patients, instructor notes, quizzes, and a final examination

EDUCATIONAL BACKGROUND

Doctorate of Philosophy in Nursing, PhD- currently working on
UNIVERSITY OF WISCONSIN- MILWAUKEE- Milwaukee, Wisconsin

Master's of Science in Nursing, MSN- (2008)
Master's of Science in Healthcare Administration, MHA-(2008)
UNIVERSITY OF PHOENIX- Phoenix, Arizona

Bachelor of Science in Nursing, BSN (2000)
UNIVERSITY OF WISCONSIN OSHKOSH – Oshkosh, Wisconsin

LICENSURE

Registered Nurse (RN), State of Wisconsin (exp. 2018)
American Heart Association CPR (exp. 2017)

Wisconsin Department of Safety and Professional Services

EDUCATIONAL ADMINISTRATOR APPOINTMENTS

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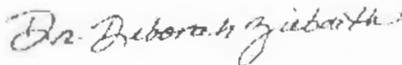
P. NURSING INSTRUCTION EXPERIENCE*

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From Month/Year	To Month/Year	Part-time or Full-Time	Employer/School	Location City/State	Position/Job Title

Deborah Ziebarth

Educational Administrator



Signature

262-649-1710 x61647

Telephone Number

Nursing Department Chair

Title

12/15/2017

Date

DZiebarth@herzing.edu

Email Address

Dr. Rosalyn McFarland DNP, RN, APNP, FNP-BC
11214 West Peregrine Way
Greenfield, Wisconsin 53228

- Ordering referrals, consultations, laboratory tests, preventive screening tests, and other diagnostic testing as appropriate.

PUBLICATIONS

CME Article on Pancreatic Cancer in Primary Care 2012
Clinician Reviews/ Peer-Reviewed Journal

Awards and Honors

Milwaukee Journal Sentinel 40 Under 40 Award- Awarded 01/2016
American Association of Nurse Practitioners-State Award of Excellence- Award 06/2016

Research Experience

SAMHSA Grant- Awarded 08/2015 Integrating Primary and Behavioral Healthcare(PBHCI)-
Project Primary Care Lead

PRESENTATIONS

Speaker Presentation
Approved CNE through the Wisconsin Nurses Association for Nurses of MCFI
January 23rd, 2014-Milwaukee, WI.
The Role of the Registered Nurse in delegating tasks to unlicensed professionals

Speaker Presentation
American Association of Medical Assistants
The Greater Milwaukee Medical Assistant Group
October 17th, 2013-Milwaukee, WI.
Pharmacology and the Medical Assistant

Speaker Presentation
American Association of Medical Assistants
The Greater Milwaukee Medical Assistant Group
March 21st, 2013- Milwaukee, WI.
Infection Control and Prevention

Speaker Presentation
Batzner Pest Control 3rd Annual Bed Bug Seminar
July 18th, 2013-Brookfield, WI.
Speaker on Bed Bugs and Social Service Agencies

Professional Panel Speaker
MCFI Conference Center
The Marquette University Educational Opportunity Program (EOP) Upward Bound Students
July 1st, 2013-Milwaukee, WI.
Professional panel speaker

Primary Presenter
Poster presentation at the American Academy Nurse Practitioners National Conference
June 2010-Phoenix, AZ
Childhood Obesity

Primary Presenter
6-Minute Lecture at the American Academy Nurse Practitioners National Conference
June 2010-Phoenix, AZ
Childhood Obesity

Primary Presenter
Poster Presentation at the American Academy of Nurse Practitioners National Conference
June 2012-Orlando, FL
Collaborative Interprofessional Education Model: Applying an Interprofessional Model of Health Care Delivery to Improving
Primary Care Health Outcomes

Primary Presenter

6-minute lecture at the American Academy of Nurse Practitioners National Conference

June 2012-Orlando, FL.

Collaborative Interprofessional Education Model: Applying an Interprofessional Model of Health Care Delivery to Improving Primary Care Health Out

BOARD CERTIFICATIONS/LICENSING

Wisconsin Department of Regulation and Licensing

- Wisconsin Board of Nursing
Registered Nurse
Licensed: July 15th, 2003-February 28th, 2018 Registered Nurse
144841-030
- Wisconsin Board of Nursing Advanced
Practice Nurse Prescriber
Licensed: August 28th, 2008-September 30th, 2018 Advanced
Practice Nurse Prescriber #3483-33

DEA License

Licensed: September 2008-January 2020

License number available upon request

American Nurse Credentialing Center Family Nurse Practitioner

Certified: August 16, 2008-August 15, 2018

National Certification: 2008005619

CERTIFICATIONS

Basic Life Support for Healthcare Professional

November 2012-October 2018

Basic EKG

May 2002-ongoing

Certified in EKG interpretations

HOSPITAL AFFILIATIONS/PRIVILEGES

Aurora St. Luke's Medical Center- Hospital Privileges 04/2014 with sponsor Dr. Ibsa Aurora Sinai Medical Center

-Hospital Privileges 04/2014 with sponsor Dr. Ibsa

MEMBERSHIPS AND ASSOCIATIONS

- Wisconsin Nurses Association/American Nurses Association-January 2006-
January 2018
- Metro Milwaukee Nurse Practitioner -June
2008-June 2018
- American Association of Nurse Practitioners-December
2008-January 2018
- Doctor of Nursing Practice -May
2011-Ongoing

Wisconsin Department of Safety and Professional Services

EDUCATIONAL ADMINISTRATOR APPOINTMENTS

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W. EDUCATIONAL PREPARATION

Name of Institution	Location City/State	Graduation Date	Degree Earned or # of Credits	Major	M i

X. NURSING INSTRUCTION EXPERIENCE*

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From Month/Year	To Month/Year	Part-time or Full-Time	Employer/School	Location City/State	Position/Job Title

Deborah Ziebarth

Educational Administrator

Dr. Deborah Ziebarth

Signature

262-649-1710 x61647

Telephone Number

Nursing Department Chair

Title

12/15/2017

Date

DZiebarth@herzing.edu

Email Address

Curriculum Vitae

Linda M. Phillips, FNP-C
12023 W. Cleveland Ave. West Allis, WI 53227
Home Phone: 414-455-3255
Office Phone: 262-650-4931
lphillip@carrollu.edu

PROFESSIONAL EXPERIENCE

9/2005 – Present Carroll University; 100 N. East Ave., Waukesha, Wisconsin 53186

Position: Clinical Assistant Professor of Nursing

Teaching responsibilities:

Pathophysiology (9/05-present) and Pharmacology (9/07-present). Created numerous case studies and exercises to assist with student learning for nursing and health science students. Have consistently had student evaluation scores for both courses above average. Many students have commented about their appreciation of the multi-faceted support and materials to help them succeed at two very difficult courses. Please see publications regarding materials developed for the Pharmacology and Pathophysiology course.

Served on the University's General Education and Cross Cultural Committee, as well as the Cross Cultural Experiences and Cross Cultural Seminar subcommittees, helping to develop the cross cultural curriculum for the University. Also served on the pilot group for the development of the Cross Cultural Seminar courses.

Sophomore level clinical 0/05-1/08. Developed several assignments to help students' better grasp fundamental concepts including navigating patient information and care plan construction.

September, 2008 initiated a First Year Studies This course was converted to a "Cross Cultural Seminar" in the Fall of 2011 in alignment with the new International Curriculum. This is an essentially new course on immigration with an emphasis on health issues such as medical care for refugees and other immigrants.

January, 2009 began co-teaching Family-centered Mental Health nursing course. Assisted with lab portion Fall, 2009. Faculty with this specialty were hired by the end of the semester so I am no longer involved with these.

Spring, 2010 developed an International Health Care Course. This was approved and offered Spring Semester, 2012, and was also a pilot course. May, 2012 traveled to Guatemala where 10 students delivered teaching-intervention projects to 3 villages, and did an extensive village assessments. Have travelled to Guatemala seven times with groups of students. Developed a course that helps students understand the challenges of providing health care

to underserved populations as well as providing education and sustainable aid. Am the Faculty Advisor for the Sigma Theta Tau local chapter.

5/13-8/14 Interra Health

Position: Float Pool NP at various clinics in their small network of clinics that provide Urgent Care and Primary Care for County and City employees with which they have contracts. Worked 30 hours per week the summer of 2013 and during the winter break; they had little need for extra help the past year.

10/13-present Spaulding Clinical

Position: Conduct physical exams on those enrolled in research studies. Am able to schedule as hours as desired.

5/10-present Medical Resources

Position: locum tenem positions in quick care clinics. Worked independently as a nurse practitioner, also did patient registration, basic nursing care and extensive patient education as time permitted. Have not had any hours with this organization since 2010 due to a decrease in demand and full-time teaching position.

9/09-12/09 Blue Cross Blue Shield

Position: Did in home visits to obtain medical history for those on Medicare applying for supplemental insurance coverage.

5/2006 – 1/12 Pro-Health Care Medical Associates

Position: Family Nurse Practitioner

Responsibilities:

Providing Occupational health services and urgent care for several clinics.

Work full-time as an FNP during breaks from school, part-time for the remainder of the year. Consulted with patients that were traveling to or relocating overseas regarding health requirements and concerns. Also have provided care for uninsured and underinsured clients that do not qualify for care through area free clinics.

Spring, 2008 supervised an FNP student from Concordia University in her 1st semester of clinical and shared such with other FNPs periodically. Department restructured 10/11 with resulting layoff of most of staff including me.

10/2010-10/2011 Bellin Health

Position: Family Nurse Practitioner

Responsibilities:

Was hired by them after working several months for them through Medical Resources, at various quick care clinics. Worked independently as a nurse practitioner, also did patient registration, basic nursing care and extensive patient education as time permitted. Left this organization due to extensive travel and approaching winter weather.

9/2003 – 5/2005 North Central Technical College; Wausau, WI 54403

Position: Adjunct instructor.

Teaching responsibilities: Medical Terminology, 1-2 classes per semester

9/2000 – 5/2006 Memorial Health Center; 135 S. Gibson; Medford, WI 54451

Position: FNP in Urgent Care/ER

Responsibilities:

A 2004 patient satisfaction survey by an independent organization reported 9.4% of our patients felt the care given in Urgent Care met or exceeded their expectations, and 99.7% said they would recommend our services to others. Member of the Emergency Department Committee. Developed patient education materials.

6/2001 – 10/2005 Aspirus Hospital and Clinics; 425 Pine Ridge Boulevard; Wausau, WI

Position: FNP as needed

Responsibilities:

Provided coverage for area Physicians during their vacations or while they attended conferences. Provided care for a variety of patients with chronic illnesses and acute injuries and illnesses, plus preventative serves such as Well Child check-ups. This averaged one day a week.

Worked with 2 nursing pools while in graduate school but both are no longer operating.

11/1997 – 5/1999 American Red Cross; Deckner Ave.; Green Bay, Wisconsin, 54301

Position: RN in screening and blood donations collection

1/1990 – 11/1997 Wisconsin Evangelical Lutheran Synod; 2929 N. Mayfair Rd.

Milwaukee, Wisconsin

Position: Director of The WELS medical mission in Bulgaria, Eastern Europe

Responsibilities:

From Dec., 1993 until Nov., 1997. Developed Medical Mission Program there which was, in 1997 turned over to Bulgarian management. Did an assessment of resources and research before developing the programs. Also procured medical equipment and supplies to area clinics and hospitals. Also developed a series of lectures which were recorded and distributed throughout western Bulgaria. Wrote monthly health newsletters covering topics such as nutrition, common medications and significant side effects, common illnesses and treatment of them. After the program for families was started, wrote monthly newsletters on topics of concern to them including childhood vaccines and illnesses, and common problems such as nightmares and how to manage them. Also gave lectures on health topics. Went into the area Gypsy camps periodically, providing basic health care, checking blood pressures and giving talks on hygiene, nutrition and illness prevention. Ten years ago started a non-profit organization to continue aid and staffing to some of these

organizations; this project is still running. The largest of these projects employs older women to work one-on-one with developmentally disabled children in an orphanage. This has resulted in the children developmentally meeting more milestones and becoming eligible for adoption.

From Jan. 1990 until Dec. 1993 worked at a rural clinic in Zambia, Africa. Developed an extensive village health care and midwifery program and village health program.

EDUCATIONAL BACKGROUND

May, 2000 Concordia University, Mequon, WI

Degree: MSN as Family Nurse Practitioner, cumulative GPA 3.9

May, 1990 Seneca College; Toronto; Ontario, Canada,

Certificate in International Health, six month program in international health.

December 1982 University of Wisconsin – Milwaukee, WI

Degree: BSN, cumulative GPA 3.7

PUBLICATIONS

Winter, 2001 The Journal of Christian Nursing. "Listening and Learning." Article on developing medical mission projects in Eastern Europe. This was my graduate school project.

June, 2007 Pro- Health monthly magazine. Wrote article on the need for travel medicine consultations.

Have had two case studies published; more were to be published but the publisher has had to put this project on hold due to economic limitations.

Publications:

Materials for a pathophysiology workbook currently being reviewed by Elsevier and have been hired by them as a content expert and developer for a pathophysiology project. This is an animation project of major pathological processes and I've been assigned seventy-five of the animation scripts.

Mastering Pharmacology text accepted by Pearson Prentice- Hall: Includes: medication review sheets, exercises, and medication study guides, to help students test their understanding of drug mechanism of action and interactions, and assist with learning drug names.

Contracted to write a chapter for a Pathophysiology Textbook for Pearson Prentice-Hall on thyroid and parathyroid disorders.

Served as a reviewer for Lippincott for RN to BSN pathophysiology text.

Wrote discussion questions for the above text December, 2014.

GRANTS

March 2011 Pioneer Scholars Grant

Awarded to develop and carry out research on the causes and possible interventions of the high maternal mortality rate in Guatemala. Worked with a student on this and have given many presentations on it.

PRESENTATIONS

May, 2013 Poster presentation on the contribution of an international health care experience to professional nurse development.

Have done numerous presentations on medical mission work, cross cultural education and on international education for nursing.

CONTINUING EDUCATION

7/21-22/2008 ATI Test Item Writing Conference. Kansas City, KS

Have attended numerous continuing education lectures, seminars and conferences for Nurse Practitioners.

2005, '06, '07. 09 WNA Pharmacology Yearly Update

January, 2007 Mosby Faculty Development Institute –San Diego, California.

Attended several continuing education programs on various topics including updates on emerging infections, international education, nursing education, and many pediatric conferences sponsored by Children's Hospitals in the Milwaukee area during the last 2 years.

Numerous continuing education credits beyond those required for certification, last one attended was March, 2015 Children's Hospital "Best Practices" Pediatric conference.

PROFESSIONAL LICENSES

Registered Nurse - Wisconsin

Advanced Practice Nurse Prescriber – Wisconsin

ANCC – Board Certification as Family Nurse Practitioner

CPR current

Wisconsin Department of Safety and Professional Services

EDUCATIONAL ADMINISTRATOR APPOINTMENTS

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Deborah Ziebarth

 Educational Administrator

Dr. Deborah Ziebarth

 Signature

262-649-1710 x61647

 Telephone Number

Nursing Department Chair

 Title

12/15/2017

 Date

DZiebarth@herzing.edu

 Email Address

Paula Winters
6520 W Girard Ave
Milwaukee, WI 53210
414-731-3563
Sagefemme58@att.net

TITLE: RN, BSN, MSN, CNM, CPT (ret) US Army

EDUCATIONAL DEGREES with AREA OF SPECIALIZATION

Bachelor of Science in Nursing (1980) - University of Wisconsin, Madison WI

Masters of Science in Nursing, Specialty of Midwifery (1999) Marquette University, Milwaukee WI

CURRENT EDUCATIONAL STUDY (in progress)

Masters of Science in Oriental Medicine / Bachelors of Science in Nutrition

Midwest College of Oriental Medicine, Racine WI

RELEVANT WORK EXPERIENCE

Labor & Delivery Nurse - St Joseph's Hospital, Milwaukee, WI (1986-1999)

Certified Nurse-Midwife - Central OB/GYN, Milwaukee, WI (1999-2003)

- Shafi Medical Center, Milwaukee, WI (2003-2008)

- William Beaumont Army Medical Center, El Paso, TX (2008-2012)

-Nursing faculty Herzing University (2012-present)

TEACHING EXPERIENCE

Assistant Professor- Herzing University

Clinical instructor – Marquette University , Milwaukee WI

Instructor- US Army Practical Nurse Course, Ft Bliss, El Paso, TX

TEACHING RESPONSIBILITIES WHILE AT HERZING UNIVERSITY- BROOKFIELD/KENOSHA

Lead instructor:

NB 100 Growth and Development

NB 400 Family Nursing

NB 210 Introduction to Clinical Nursing

NB 335 Legal and Ethical Issues in Nursing

NB 010 NCLEX Preparation

Clinical Instructor

NB 210 Introduction to Clinical Nursing(Lab and Clinical Component)

NB 215 Adult Health I (Lab Component)

NB 400 Family Nursing (Obstetrical Component)

NB 209 Health Assessment

PROFESSIONAL ORGANIZATIONS

American College of Nurse –Midwives

Midwives Association of North America
American Society of Clinical Hypnosis

CERTIFICATIONS

Nurse- Midwifery
Basic Life Support
Neonatal Resuscitation

Appendix 4-A

Course Syllabi

HERZING[®]

— UNIVERSITY —

COURSE SYLLABUS

FACULTY CONTACT INFORMATION	
INSTRUCTOR	Click here to enter text.
PHONE NUMBER	Click here to enter text.
HERZING E-MAIL	Click here to enter text.

DAY	OFFICE HOURS (CENTRAL TIME)
	00:00 am – 00:00 am

Instructional Delivery Method	On Campus		
Class Location			
Semester			
Course Code	NP 100		
Course Title:	Growth and Development		
Course Description	This course is a survey of normative human life span development. Emphasis is on selected theorist and perspectives as they relate to the physical, cognitive, and psychosocial aspects of development from conception to death. Significant milestones, and developmental tasks will be emphasized.		
Credit Hours Contact Hours	1 Semester Credit Hours		
	Lecture Hours	Laboratory Hours	Clinical Hours
	15	0	0
	Total Contact Hours		
	15		
Study Time	<p>Lecture, Lab, or Internship/Externship/Clinical/Practicum hours as indicated on the syllabus represent scheduled hours spent engaged in learning activities. Students should expect to spend a minimum of two additional hours engaged in learning activities outside of class for each one hour identified as lecture; students should expect to spend one hour engaged in learning activities outside of class for each two hours of scheduled laboratory time. Learning activities outside of class support the achievement of one or more course learning objectives and may be spent reading textbook material, completing homework assignments, preparing for lab assignments, engaged in drill and practice exercises, working on case studies, completing workbook activities, or conducting library research. Additional study time outside of scheduled Internship/Externship/Clinical hours is typically not expected.</p> <p>The total amount of time that students spend engaged in learning activities is consistent, regardless of instructional delivery method. For example, students enrolled a three credit lecture course should expect to spend 45 hours in scheduled class time and an additional 90 hours engaged in learning activities outside of the classroom. Online or blended students should expect to spend the equivalent total of 135 hours engaged in learning activities if they are enrolled in the same course.</p> <p>Determination of the amount of time that a student should expect to spend engaged in learning activities is based upon faculty judgment regarding the average student. The amount of time spent engaged in learning activities is expected to vary among students, based upon previous knowledge of the content, learning style, learning ability, difficulty of the course, and student motivation.</p>		

	<i>The timeframes provided below are estimates based upon the average student.</i>	
Guide to Student Engagement in Learning Activities	Lower level reading (10-20 pages) 1 hour Higher level reading (10-20 pages) 2 hours Construction of 1 page paper (250 words) 2 hours Development of 10 minute speech 2 hours Watch video lecture 1 hour Read, research and respond to discussion board posting 1 hour Preparation for unit examination 2 hours	
Course Length	8 Weeks	
Prerequisites	None	
Co-requisites	None	
Course Learning Objectives	Upon successful completion of this course, students should be able to: 1) Explain physical, cognitive, and psychosocial changes of a diverse population that occur across the lifespan. 2) Apply selected developmental theories to the population across the lifespan. 3) Distinguish between normal and abnormal patterns of development.	
Program Learning Outcomes Supported	Program Learning Outcome	Course Learning Objective Supported
	1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. 2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. 3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. 4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth.	2 1 3 2
Required Textbook(s)	Leifer, G. & Fleck, E. (2013). Growth and development across the lifespan: A health promotion focus (2nd ed.). St. Louis, MO: Elsevier.	
Optional Textbook(s)	NONE	
Additional Learning Material(s)	Evolve: https://evolve.elsevier.com Resources for your e-book can be found here. Simulation will be included as permitted by the respective Board of Nursing. E-book page numbers subject to change based upon publisher updates. Please check with instructor for updated page numbers as needed.	

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
Unit 1	[class date]	<p>Topic(s): Healthy People 2020: What healthy people 2020 is, leading health indicators, determinants of health, health status, progress and goals yet to be achieved, leading causes of death by age group, life expectancy at birth by country, issues and goals related to phases of the life cycle, prenatal and infant health, childhood health, adolescent and young adult health, older adult health, geriatric adult health, role of the health-care worker in achieving healthy people 2020 goals, world health</p> <p>Government Influences on Health Care: Health-care legislation, hospitals and nursing schools, the multidisciplinary health-care team, nurse practice acts, patient's bill of rights, the patient care partnership: understanding expectations, rights, and responsibilities, the government's role in health care, united states department of health and human services, direct services, financing, medicare and medicaid, policy setting, the rising costs of health care, health care delivery systems, private health insurance, health promotion, health-care reform, resurgence of self-care, the future of health care.</p> <p>Reading: Chapters 1 & 2 Textbook/E-Book: p. 1-12, 13-26</p>	1		
Unit 2	[class date]	<p>Topic(s): Cultural Considerations Across the Lifespan & in Health & Illness: Definition, variations of selected cultural groups, culture and pregnancy, culture and the child, culture and the adolescent, culture and the adult, culture and the older adult, culture and health beliefs, culture and illness, culture and death, culture and teaching, culture and food, complementary and alternative therapies and culture.</p> <p>The Influence of Family on Developing a Lifestyle: Definition, family structure, effect of family on growth and development of the child, ten potential challenges in dual-career families, various types of family structures, size of family, spacing of siblings, divorce, responses to divorce by age group, stepchildren and foster children, chronic illness, use of child-care services, understanding chronic illness at various ages, understanding families through theories, family systems theory, the family apgar, developmental theories, growth and development of the family, developmental tasks of the family life cycle, the growth and development of a parent, role of the health-care worker, growth and development of the family, childrearing styles, effect of culture on the family, influence of electronic media and technology, teaching parents how to manage media, the growth of social networking sites, resources for internet safety, effects of a disaster on family and development, support systems, role of the health-care team, effect of community on family and development, healthy lifestyle habits, family-centered health care</p> <p>Reading: Chapters 3 & 4 Textbook/E-Book: p. 27-36, 37-56</p>	1,3		

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
		Assessment(s): Quiz #1	1,3	20
		Assessment(s): Exam #1	1,3	80
Unit 3	[class date]	<p>Topic(s): Theories of Development: Definition, importance of understanding developmental theories, lifespan considerations, psychoanalytic theory (Freud), defense mechanisms for coping, Freud's stages of psychosexual development, psychodynamic theory (Jung), stages of the life cycle: a psychosocial theory (Erikson), Erikson's stages of the life cycle, stages of parenting behaviors, cognitive theory (Piaget), Piaget's four stages of development, hierarchy of needs (Maslow), behaviorist theory (Watson), behaviorist theory of personality (Pavlov and Skinner), social-learning theories of personality (Bandura and Mischel), theory of moral development (Kohlberg), Kohlberg's stages of moral development, development of self-image (Cooley and Mead), developmental tasks of the older adult (Peck), developmental stages of retirement (Atchley), additional influences on growth and development.</p> <p>Prenatal Influences of Health Development: The human genome project, heredity, genetic counseling, gene therapy, screening procedures and therapies, fetal development, embryonic and fetal development, twins, the prenatal phase, critical periods, exercise during pregnancy, health promotion, toxins, maternal adaptations during the prenatal phase, the birth process, the newborn infant, the transition to motherhood, postnatal exercise, fathers or significant others, siblings, grandparents, the influence of culture, developmental tasks and responses of the neonate, parent teaching, development of intelligence, neurological reflexes of infancy, play activities and neonatal development.</p> <p>Reading: Chapters 5 & 6 Textbook/E-Book: p. 57-71, 72-93</p> <p>Assessment(s): Quiz #2</p> <p>Assessment(s): Exam #2</p>	1,3	20
Unit 4	[class date]	<p>Topic(s): The Infant: Definition, cultural considerations, developmental tasks, trust versus mistrust, intelligence, understanding cause and effect, memory, emotional development, attachment, temperament, language development, motor development, physical activity, autonomy, the development of locomotion, prehension, and perception, physical activity guidelines for infants, sleep patterns, health promotion, role of play in fostering growth and development, health maintenance, nutrition, cultural considerations breastfeeding, teeth, immunizations, parent teaching, accident prevention, safety alert.</p> <p>Early Childhood: Definition, developmental tasks, physiological changes, nutrition, psychosocial development, language development and communication skills the toddler, the preschooler, cognitive development, literacy milestones, when a child with a communication disorder needs help, moral development, discipline, the</p>	1,3	80

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
		<p>operant theory of effective discipline techniques, sexuality, sexual behavior in early childhood, physical activity, play, day care, teaching techniques, safety and accident prevention, how to prevent hazards caused by the behavioral characteristics of toddlers, immunizations, health promotion.</p> <p>Child Immunizations: Schedule of immunizations Reading: Chapters 7, 8, & Appendix A Textbook/E-Book: p. 94-110, 111-130, 257-261 Assessment(s): Quiz #3 Assessment(s): Exam #3</p>	<p>1,3 1,3</p>	<p>20 80</p>	
Unit 5	[class date]	<p>Topic(s): Middle Childhood: Definition, physiological changes, exercise and play, health promotion, summary of growth and development and health maintenance of school-age children, cognitive development, mastery of tasks necessary for school success, cognitive deficits and their effect on school performance, moral behavior includes three phases, cognitive styles, communication skills, cultural considerations, intelligence tests, psychosocial development, task of industry, peer relationships, latchkey children, guidance for latchkey families, sexuality, sex education of the school-age child, teaching techniques, discipline,</p> <p>Adolescence: Definition, health promotion, developmental tasks, physiological changes, physical activity, three phases in the growth and development of the adolescent, puberty, boys, girls, birth control options, teen pregnancy, patient teaching, cognitive development, psychosocial development, teen violence, development of responsibility, culture and the adolescent, peer relationships, sexuality, teaching techniques, patient teaching, health promotion.</p> <p>Adolescent Immunizations: Schedule of immunizations Reading: Chapters 9, 10, Appendix A Textbook/E-Book: p. 131-150, 151-165, 257-261 Assessment(s): Quiz #4 Assessment(s): Exam #4</p>	<p>1,3 1,3</p>	<p>20 80</p>	
Unit 6	[class date]	<p>Topic(s): Young Adulthood: Definition, developmental tasks, physiological changes, health promotion, physical activity, health promotion, women's health, breast self-examination, stress/coping/domestic violence, men's health, psychosocial development, intimacy, cognitive ability, moral reasoning, sexuality, marriage, parenting, teaching techniques.</p> <p>Middle Adulthood: Definition, developmental tasks, challenges, midlife crisis, sandwich generation, sexuality, reproductive health, women's health, men's health, Box 12-2 essential health screenings, physical activity, teaching techniques.</p> <p>Late Adulthood: Definition, challenges and problems, psychosocial development, psychosocial issues, grandparenting, postmenopause, driving safety, health screenings, sexuality, memory loss, emotional health, clinical disease, physical activity, teaching techniques .</p> <p>Adult Immunizations: Schedule of Immunizations</p>	<p>1,3</p>		

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
		<p>Reading: Chapters 11, 12, 13, & Appendix A Textbook/E-Book: p. 166-182, 183-194, 195-211, 257-261</p> <p>Assignment: <i>Development Project Due</i></p> <p>Assessment(s): Quiz #5</p> <p>Assessment(s): Exam #5</p>	<p>1,2,3</p> <p>1,3</p> <p>1,3</p>	<p>200</p> <p>20</p> <p>80</p>
Unit 7	[class date]	<p>Topic(s): Advance Old Age & Geriatrics: Definition, theories of the aging process, physiological changes: bones and cartilage, blood vessels, lungs, kidneys and bladder, metabolism, digestion, teeth, skin, eyes, ears, nervous system; sexuality, factors that influence sexuality, the impact of illness on sexuality, psychological changes, developmental tasks, lifespan considerations, role of the health care worker.</p> <p>Planning for the End of Life: Death as part of the life cycle, cultural considerations, lifespan considerations, signs and symptoms of death, the process of dying, psychological responses of the dying patient, behaviors and stages of dying, family behaviors related to the dying process, therapeutic communication, dying rituals of various cultures, options for end of life care, acute care of dying patient, hospice care, ethical and legal issues, advance directives, assisted suicide and euthanasia, role of the health care worker in end of life, death of a child, developmental concepts of death and dying, table 15-4, physical care after death.</p> <p>Loss Grief & Bereavement: Normal losses during the life cycle, responses to loss, tasks associated with death, grief, grief process, culture, religion and death, normal grief responses, common death rituals of selected cultures, common religious practices related to death, dysfunctional grieving, role of the health care worker, communicating with the bereaved, tasks of the family, grief early in the life cycle: pregnant women, infants, children, adolescents, young adults; the healing process, reintegration and adjustment, mastering tasks leading towards grief healing, helping grieving survivors, condolence.</p> <p>Reading: Chapters 14, 15, & 16 Textbook/E-Book: p. 212-226, 227-241, 242-256</p> <p>Assessment(s): Quiz #6</p> <p>Assessment(s): Exam #6</p>	<p>1,3</p> <p>1,3</p> <p>1,3</p>	<p>20</p> <p>80</p>
Unit 8	[class date]	<p>Assessment(s): Final Exam</p>	<p>1,3</p>	<p>200</p>

Grade Summary	Points
Assignment Development Project	200
6 Quizzes (20 pointsX6)	120
6 Exams (80 points eachX6)	480
Final Exam	200
Totals	1000

Grade Scale		Quality Points
A	90.00% - 100.00%	4.0
B	80.00% - 89.99%	3.0
C	76.00% - 79.99%	2.0
F	0.00% - 75.99%	0.0
I	Incomplete	

POLICIES

UNIVERSITY POLICIES, SUCH AS ATTENDANCE PHILOSOPHY, NOTIFICATION OF ABSENCES, EXTENUATING CIRCUMSTANCES, ACCOMMODATION REQUESTS, ACADEMIC DISHONESTY, GRADING AND GRADING SYMBOLS, AND STUDENT CONDUCT ARE INCLUDED IN THE UNIVERSITY CATALOG. STUDENTS SHOULD REFERENCE THE CATALOG FOR THE COMPLETE LISTING OF POLICIES.

NOTE: IN SOME CASES, PROGRAM AND/OR COURSE SPECIFIC INFORMATION MAY BE APPENDED TO THE SYLLABUS. IN THESE INSTANCES, STUDENTS MUST CONSIDER THE SYLLABUS TO BE INCLUSIVE OF ANY APPENDED INFORMATION, AND AS SUCH, STUDENTS MUST ADHERE TO ALL COURSE REQUIREMENTS AS DESCRIBED IN THE DOCUMENT IN ITS ENTIRETY.

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COURSE SYLLABUS

FACULTY CONTACT INFORMATION	
INSTRUCTOR	Click here to enter text.
PHONE NUMBER	Click here to enter text.
HERZING E-MAIL	Click here to enter text.

DAY	OFFICE HOURS (CENTRAL TIME)
	00:00 am – 00:00 am

Instructional Delivery Method	On Campus			
Class Location				
Semester				
Course Code	NP 110			
Course Title:	Pharmacology for Nursing with Lab			
Course Description	The basic concepts of pharmacology will be taught related to actions, therapeutic effects, and adverse effects of traditional and nontraditional medications. Students will demonstrate collection of data, clinical judgment, and integration of knowledge to administer medication safely. The student will use the knowledge gained from this course for safe pharmacological interventions, dosage calculation, medication administration techniques, and documentation.			
Credit Hours Contact Hours	2 Semester Credit Hours			
	Lecture Hours	Laboratory Hours	Clinical Hours	Total Contact Hours
	22.5	15	0	37.5
Study Time	<p>Lecture, Lab, or Internship/Externship/Clinical/Practicum hours as indicated on the syllabus represent scheduled hours spent engaged in learning activities. Students should expect to spend a minimum of two additional hours engaged in learning activities outside of class for each one hour identified as lecture; students should expect to spend one hour engaged in learning activities outside of class for each two hours of scheduled laboratory time. Learning activities outside of class support the achievement of one or more course learning objectives and may be spent reading textbook material, completing homework assignments, preparing for lab assignments, engaged in drill and practice exercises, working on case studies, completing workbook activities, or conducting library research. Additional study time outside of scheduled Internship/Externship/Clinical hours is typically not expected.</p> <p>The total amount of time that students spend engaged in learning activities is consistent, regardless of instructional delivery method. For example, students enrolled a three credit lecture course should expect to spend 45 hours in scheduled class time and an additional 90 hours engaged in learning activities outside of the classroom. Online or blended students should expect to spend the equivalent total of 135 hours engaged in learning activities if they are enrolled in the same course.</p> <p>Determination of the amount of time that a student should expect to spend engaged in learning activities is based upon faculty judgment regarding the average student. The amount of time spent engaged in learning activities is expected to vary among students, based upon previous knowledge of the content, learning style, learning ability, difficulty of the course, and student motivation.</p>			

Guide to Student Engagement In Learning Activities	<i>The timeframes provided below are estimates based upon the average student.</i>	
	Lower level reading (10-20 pages)	1 hour
	Higher level reading (10-20 pages)	2 hours
	Construction of 1 page paper (250 words)	2 hours
	Development of 10 minute speech	2 hours
	Watch video lecture	1 hour
	Read, research and respond to discussion board posting	1 hour
	Preparation for unit examination	2 hours
Course Length	8 Weeks	
Prerequisites	None	
Co-requisites	None	
Course Learning Objectives	<p>Upon successful completion of this course, students should be able to:</p> <ol style="list-style-type: none"> 1) Discuss basic pharmacokinetics and pharmacodynamics for clients across the lifespan. 2) Document appropriate collection of data for safe administration of pharmaceutical agents. 3) Apply math principles to calculate medication dosages across the lifespan. 4) Demonstrate appropriate techniques for medication administration to include oral, rectal, parenteral, topical, and injectable medications. 	
Program Learning Outcomes Supported	Program Learning Outcome	Course Learning Objective Supported
	<ol style="list-style-type: none"> 1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. 2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. 3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. 4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. 	<p>2,3,4</p> <p>2</p> <p>2,4</p> <p>1</p>
Required Textbook(s)	Morris, D. (2018). Calculate with confidence (7th ed.). St. Louis, MO: Elsevier Workman, M & LaCharity, L. (2016). Understanding pharmacology: Essentials for medication safety (2nd ed.). St. Louis, MO: Elsevier Skidmore, L. (2017). Mosby's drug guide for nursing students (12th ed.). St. Louis, MO: Elsevier Clinical Skills Essentials Package Evolve	
Optional Textbook(s)	NONE	
Additional Learning Material(s)	<p>Evolve: https://evolve.elsevier.com Resources for your e-book can be found here.</p> <p>Simulation will be included as permitted by the respective Board of Nursing.</p> <p>E-book page numbers subject to change based upon publisher updates. Please check with instructor for updated page numbers as needed.</p>	

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE	
		<p>effects, clinical pitfall, do not confuse.</p> <p>Drug Therapy for Hypertension: Arteriosclerosis and atherosclerosis review of related physiology and pathophysiology, general issues for antihypertensive therapy, types of antihypertensive drugs, memory jogger, clinical pitfalls, drug alert, do not confuse, common side effects.</p> <p>Drug Therapy for Heart Failure: Heart failure review of related physiology and pathophysiology, treatment for heart failure, general issues for heart failure therapy, types of drugs used to treat heart failure, memory jogger, do not confuse, common side effects, drug alert, clinical pitfalls.</p> <p>Drug Therapy for Dysrhythmias: Dysrhythmia related physiology and pathophysiology, general issues related to antidysrhythmic therapy, types of antidysrhythmic drugs, drugs for tachydysrhythmias, unclassified antidysrhythmic drugs, memory jogger, clinical pitfalls, drug alert, common side effects, do not confuse.</p> <p>Reading: Workman Chapters 15, 16, 17, & 18; Morris Chapters 10 & 11 Textbook/E-Book: Workman p. 239-251, 253-269, 272-289, 291-309; Morris p. 126-158</p> <p>Assessment(s): Quiz #3 Assessment(s): Exam #3</p> <p>Lab: Intradermal, subcutaneous, & intramuscular medication administration sites, types of syringes, insulin syringes, insulin pen, and document</p> <p>Math in Lab: Medication administration, understanding & interpreting medication orders</p> <p>Assessment(s): Math Exam #3</p>	<p>1</p> <p>1</p> <p>2,4</p> <p>3</p> <p>3</p>	<p>20</p> <p>80</p> <p>25</p>	
Unit 5	[class date]	<p>Topic(s): Drug Therapy for High Blood Lipids: Overview, review of related physiology and pathophysiology, coronary artery disease, familial hyperlipidemia, general issues for antihyperlipidemic therapy, types of lipid-lowering drugs, statins, bile acid sequestrants, cholesterol absorption inhibitors, fibrates, nicotinic acid agents, memory jogger, drug alert, do not confuse, common side effects clinical pitfalls.</p> <p>Drugs That Affect Blood Clotting: Overview, review of related physiology and pathophysiology, clot formation, thrombosis, embolus, general issues for anticoagulant therapy, types of drugs that affect blood clotting, anticoagulant drugs, drugs that improve blood clotting, memory jogger, drug alert, clinical pitfalls, common side effects, do not confuse.</p> <p>Drug Therapy for Gastrointestinal Problems: Overview, nausea and vomiting, review of related physiology and pathophysiology, types of drugs for nausea and vomiting, antiemetic drugs, constipation, review of related physiology and pathophysiology, types of drugs for constipation, laxatives, lubricants, and stool softeners, diarrhea, review of related physiology and pathophysiology, types of drugs for diarrhea, antimotility, adsorbent/absorbent, and antisecretory drugs, memory jogger, drug alert, clinical pitfalls, do not confuse, common side effects.</p> <p>Drug Therapy for Gastric Ulcers and Reflux: Overview, review of related physiology and pathophysiology.</p>	1		

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE	
	<p>gastrointestinal ulcers, gastroesophageal reflux disease, general issues for drugs for PUD and GERD, Types of drugs for PUD and GERD, histamine H2 blockers, proton pump inhibitors, antacids, cytoprotective drugs, promotility drugs, other drugs used to treat ulcers, antibiotics for H. pylori Infection, memory jogger, clinical pitfalls, drug alert, do not confuse, common side effects.</p> <p>Reading: Workman Chapters 19, 20, 22, & 23; Morris 13, 16, & 17</p> <p>Textbook/E-Book: Workman p. 311-320, 324-335, 356-371, 373-386; Morris p.179-193, 270-275, 292-317</p> <p>Assessment(s): Quiz #4</p> <p>Assessment(s): Exam #4</p> <p>Lab: Intradermal, subcutaneous, & intramuscular medication administration techniques, ampule, vials, mixing medications in same syringe, mixing insuling, types of insulin, and document.</p> <p>Review Skills</p> <p>Math in Lab: Reading medication labels, dosage calculation, oral medications</p> <p>Assessment(s): Math Exam #4</p>	<p>1</p> <p>1</p> <p>2,4</p> <p>3</p> <p>3</p>	<p>20</p> <p>80</p> <p>25</p>		
Unit 6	[class date]	<p>Topic(s): Drug Therapy with Nutritional Supplements: Review of related physiology and pathophysiology, vitamins, minerals, types of nutritional supplements, enteral nutritional supplements, memory jogger, common side effects, drug alert.</p> <p>Drug Therapy for Seizure: Review of related physiology and pathophysiology, causes of seizures, types of seizures, treatment of seizures, types of antiseizure drugs, general issues related to drug therapy for seizures, first-line drugs for partial and generalized seizures, first-line drugs for absence seizures, second-line, alternative drugs for seizures, drug alert, memory jogger, clinical pitfalls, do not confuse, common side effects.</p> <p>Drug Therapy for Alzheimer's and Parkinson's Diseases: Alzheimer's disease, review of related physiology and pathophysiology, types of drugs for Alzheimer's disease, cholinesterase/acetylcholinesterase and memantine, Parkinson's disease, review of related physiology and pathophysiology, types of drugs for Parkinson's disease, dopaminergic/dopamine agonists, COMT inhibitors, MAO-B inhibitors, anticholinergics, memory jogger, do not confuse, common side effects, drug alerts.</p> <p>Drug Therapy for Psychiatric Problems: General issues related to drug therapy for psychiatric problems, depression, review of related physiology and pathophysiology, types of drugs for depression, antidepressants, anxiety, review of related physiology and pathophysiology, types of drugs for anxiety, antianxiety drugs, psychosis, review of related physiology and pathophysiology, types of drugs for psychosis, antipsychotics, clinical pitfalls, drug alert, memory jogger, do not confuse, common side effects.</p> <p>Reading: Workman Chapters 24, 25, 26, & 27; Morris 18, 19, 20, & 21</p>	1		

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
		Textbook/E-Book: Workman p. 389-396,401-415, 416-427, 430-447; Morris p. 359-386, 428-445, 483-498, 515-521 Assignment(s): Assignment Due Assessment(s): Quiz #5 Assessment(s): Exam #5 Lab: Rectal suppository, vaginal suppository/foam, and document, Reconstitution of Powder Math in Lab: Parenteral medications, reconstitution of solutions, insulin, intravenous solutions & equipment Assessment(s): Math Exam #5	1 1 1 2,4 3 3	50 20 80 25	
Unit 7	[class date]	Topic(s): Drug Therapy for Insomnia: Insomnia, review of related physiology and pathophysiology, drugs for insomnia, clinical pitfall, common side effects, drug alert. Drug Therapy for Eye Problems: Review of related physiology and pathophysiology, physiology, pathophysiology, general issues for local eye drug, types of drugs for glaucoma, memory jogger, clinical pitfall, drug alert, common side effects, do not confuse. Drug Therapy for Male Reproductive Problems: Benign prostatic hyperplasia, review of related physiology and pathophysiology, types of drugs for benign prostatic hyperplasia, male hormone replacement therapy, review of related physiology and pathophysiology, erectile dysfunction, review of related physiology and pathophysiology, memory jogger, common side effects, drug alert, do not confuse, clinical pitfall. Drug Therapy for Female Reproductive Issues: Review of related physiology and pathophysiology, menopause, types of premenopausal hormone replacement drugs, conjugated estrogens, contraception, types of drugs, memory jogger, do not confuse, common side effects, clinical pitfall, drug alert. Reading: Workman Chapters 28, 29, 31, & 32; Morris Chapters 22, 23, 24, & 25 Textbook/E-Book: Workman p. 450-454, 456-467, 481-490, 492- 499; Morris: 536-576, 603-609, 630-636, 684-689 Assessment(s): Quiz #6 Assessment(s): Exam #6 Lab: Administering medications through NG & PEG tube, and document Math in Lab: Intravenous calculations, heparin calculations, pediatric & adult based on weight. Assessment(s): Math Exam #6	1 1 1 2,4 3 3	20 80 25	
Unit 8	[class date]	Assessment(s): Final exam class	1	200	

Grade Summary	Points
Assignment	50
6 Quizzes (20 pointsX6)	120
6 Exams (80 points eachX6)	480
6 Math Exams (25 points X6)	150
Final Exam	200
Totals	1000

Grade Scale		Quality Points
A	90.00% - 100.00%	4.0
B	80.00% - 89.99%	3.0
C	76.00% - 79.99%	2.0
F	0.00% - 75.99%	0.0
I	Incomplete	

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COURSE SYLLABUS

FACULTY CONTACT INFORMATION	
INSTRUCTOR	Click here to enter text.
PHONE NUMBER	Click here to enter text.
HERZING E-MAIL	Click here to enter text.

DAY	OFFICE HOURS (CENTRAL TIME)
	00:00 am – 00:00 am

Instructional Delivery Method	On Campus			
Class Location				
Semester				
Course Code	NP 120			
Course Title:	Fundamentals of Nursing with Lab and Clinical			
Course Description	This course introduces the role of the practical nurse as a member of the interprofessional health care team, basic nursing concepts, and psychomotor nursing skills. Students learn skills necessary for maintaining patient safety and strategies for therapeutic communication. At the conclusion of this course, the student will demonstrate competency in performing basic nursing skills across the lifespan.			
Credit Hours Contact Hours	5 Semester Credit Hours			
	Lecture Hours	Laboratory Hours	Clinical Hours	Total Contact Hours
	45	45	22.5	112.5
Study Time	<p>Lecture, Lab, or Internship/Externship/Clinical/Practicum hours as indicated on the syllabus represent scheduled hours spent engaged in learning activities. Students should expect to spend a minimum of two additional hours engaged in learning activities outside of class for each one hour identified as lecture; students should expect to spend one hour engaged in learning activities outside of class for each two hours of scheduled laboratory time. Learning activities outside of class support the achievement of one or more course learning objectives and may be spent reading textbook material, completing homework assignments, preparing for lab assignments, engaged in drill and practice exercises, working on case studies, completing workbook activities, or conducting library research. Additional study time outside of scheduled Internship/Externship/Clinical hours is typically not expected.</p> <p>The total amount of time that students spend engaged in learning activities is consistent, regardless of instructional delivery method. For example, students enrolled a three credit lecture course should expect to spend 45 hours in scheduled class time and an additional 90 hours engaged in learning activities outside of the classroom. Online or blended students should expect to spend the equivalent total of 135 hours engaged in learning activities if they are enrolled in the same course.</p> <p>Determination of the amount of time that a student should expect to spend engaged in learning activities is based upon faculty judgment regarding the average student. The amount of time spent engaged in learning activities is expected to vary among students, based upon previous knowledge of the content, learning style, learning ability, difficulty of the course, and student motivation.</p>			

Guide to Student Engagement in Learning Activities	<i>The timeframes provided below are estimates based upon the average student.</i>	
	Lower level reading (10-20 pages)	1 hour
	Higher level reading (10-20 pages)	2 hours
	Construction of 1 page paper (250 words)	2 hours
	Development of 10 minute speech	2 hours
	Watch video lecture	1 hour
	Read, research and respond to discussion board posting	1 hour
	Preparation for unit examination	2 hours
Course Length	8 Weeks	
Prerequisites	None	
Co-requisites	None	
Course Learning Objectives	<p>Upon successful completion of this course, students should be able to:</p> <ol style="list-style-type: none"> 1) Practice safe, moral, relationship-centered care that promotes optimal patient and family health outcomes. 2) Examine the role of the practical nurse in relation to the scope of practice. 3) Demonstrate safe and appropriate basic nursing care. 4) Document subjective and objective data appropriately and accurately. 	
Program Learning Outcomes Supported	Program Learning Outcome	Course Learning Objective Supported
	<ol style="list-style-type: none"> 1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. 2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. 3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. 4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. 	<p>1,2,3,4</p> <p>1</p> <p>2,3</p> <p>2</p>
Required Textbook(s)	<p>Silvestri, L. & Silvestri, A. (2018). Saunders 2018-2019 strategies for test success (5th ed.). St. Louis, MO: Elsevier ISBN: 9780323479578</p> <p>Williams, P. (2018). DeWit's fundamental concepts and skills for nursing (5th ed.). St. Louis, MO: Elsevier.</p> <p>Williams, P. (2016). <i>Basic Geriatric Nursing</i> (6th ed.). St. Louis, MO: Elsevier ISBN: 9780323239691</p> <p>Clinical Skills Essentials Package Evolve</p>	

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE	
		<p>Mobility/Toileting/Safety, Preventing Urinary Infections, Assisting with Urinal/Bedpan, Helping with Urination, Catheterization, Condom Catheter, Performing Urinary Catheterization, Types of Urinary Catheters, Documentation, Home Care Catheterization, Older Adult Considerations with Catheterizations, Preventing Catheter Related Urinary Tract Infections, Care of Indwelling Catheter, Suprapubic Catheter, Self Catheterization, Bladder Irrigation, Types of Incontinence, Continence Training, Kegel Exercises, Urinary Diversions Care, Documentation. Promoting Bowel Elimination: Review of Structure & Function of Gastrointestinal System, Normal/Abnormal Characteristics of Stool, Hypoactive Bowel/Constipation, Promoting Bowel Elimination, Medications cause Constipation, Life Span Considerations, Hyperactive Bowel/ Diarrhea, Fecal Incontinence, Ambulation/Privacy/Toileting Practices Affecting Bowels, Rectal Suppositories, Enemas, Fecal Management Systems, Fecal Impaction, Bowel Training fro Incontinence, Digital Removal of Stool, Ostomy Types, Continent Ostomy, Ostomy Care, Education on Ostomy Care/Diet, Skin Care, Stoma Color, Applying Ostomy Device, Irrigating Colostomy.</p> <p>Reading: Williams Chapters 29, 30 Textbook/E-Book: Williams p. 542-571, 572-592</p> <p>Assessment(s): Quiz #2 Assessment(s): Exam #2</p> <p>Lab: Urine Specimens, Timed Urine, Urine Dipsticks, Cath Irrigation, Condom Cath, Suprapubic Catheter, Bedpan/Fracture/Urinal/Briefs, Insert/Remove Inwelling, Straight Cath, Cath Care, Stool Specimen, Enema, Colostomy, Occult Blood, Documentation</p>	<p>1,3 1,3 1,3,4</p>	<p>20 80</p>	
Unit 4	[class date]	<p>Topic(s): Diagnostic Tests & Specimen Collection: Patient Education Diagnostic Test, Hematology, Phlebotomy, Urinalysis, Biopsy, Ultraonography, Radiology, Urine Dipstick, Radionuclide Scans, Parasites/Ova Stool, Nuclear Scans and Pregnancy, Computed Tomography, Magnetic Resonance Imaging, Electrocardiogram, Cardiac Catheterization, Treadmill Stress Test, Angiography, Arteriography, Pulmonary Function Tests, Bronchoscopy, Gastroscopy, Proctosigmoidoscopy, Colonoscopy, Cystoscopy, ERCP, Aspirations, EEG, Other Tests, PAP. Concepts of Basic Nutrition & Cultural Considerations: Dietary Guidelines, My Plate, Protein, Vegetarian Diets, Carbohydrats, Fats, Vitamins, Minerals, Water, Factors that Influence Nutrition, Cultural Influences on Nutrition, Nutritional Needs throughout the Life Span, BMI, Signs of Malnutrtn, Assigning of Feedng Responsibilities, Patient and Family Education. Nutritional Therapy & Assisted Feeding: Goals of Nutritional Therapy, Postoperative Patient, Health Issues Related to Nutrition, Full Liquid, Clear Liquid, Anorexia Nervosa, Bulimia Nervosa, Obesity, Pregnancy, Substance Related, Disease Processes that Benefit from Nutritional Therapy, Cardiovascular Disease,</p>	<p>1</p>		

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
		Diabetes Mellitus, Dysphagia, Nasogastric/Enteral Tubes, PEG/J-Tube, HIV/AIDS, Assisted Feeding, Feeding Tubes & Pumps, TPN/PPN. Reading: Williams Chapters 24, 26, 27 Textbook/E-Book: Williams p. 408-433, 459-483, 484-507 Assessment(s): Quiz #3 Assessment(s): Exam #3 Lab: Throat Culture, Assisting a Patient with Feeding, Inserting/Removing NG Tube, Feeding Pump, Administering Nasogastric or Percutaneous Endoscopic Gastrostomy Tube Feeding, Nasogastric Irrigation, Reading Nutritional Label, Oral Hydration, Calculating Intake and Output, Documentation	1,3 1,3 1,3,4	20 80
Unit 5	[class date]	Topic(s): Providing Wound Care & Treating Pressure Injuries: Types of Wounds and the Healing Process, Phases of Wound Healing, Factors Affecting Wound Healing (Age, Nutrition, Lifestyle, Medications, Infection, Chronic Illnesses) , Complications of Wound Healing (Hemorrhage, Infection, Dehiscence, Evisceration), Treatment of Wounds, Wound Closure, Drains, Drainage Devices, Debridement, Dressings, Binders, Negative Pressure Wound Therapy, Treatment of Pressure Injuries or Vascular Ulcers, Wound Cleansing, Irrigation, Packing, Home Care Considerations, Patient Education Wound Care, Older Adult Considerations, Suture/Staple Removal, Ear, Eye, Vaginal Irrigations, Heat/Cold Therapy. Promoting Musculoskeletal Function: Systemic Effect of Immobilization, Psychosocial Effects of Immobilization, Types of Immobilization, Splint, Traction, Casts, External Fixators, Devices used to Prevent Problems of Immobility, Specialty Beds, Pressure Relief Devices, Continuous Passive Motion Machine, Fracture/Cast Care, Neurovascular Assessment, Bandage Techniques, Paraplegic, Quadriplegic, Braces/Splints/Prostheses. Reading: Williams Chapters 38, 39 Textbook/E-Book: Williams p. 760-788, 789-812 Assignment(s): Assignment Due Assessment(s): Quiz #4 Assessment(s): Exam #4 Lab: Sterile Field, Sterile Dressing Change, Wound Irrigation, Wet to Dry Dressing, Closed Wound Drainage, Hydrocolloid Dressing, Removing Sutures or Staples, Irrigating the Eye/Ear Cast Care, Care of Traction, Continuous Passive Motion Machine, Elastic Bandage, Steri-Strips, Drains, Documentation	1 1,3 1,3 1,3 1,3,4	200 20 80
Unit 6	[class date]	Topic(s): Assisting with Respiration & Oxygen Delivery: Review Structure & Function of Respiratory System, Hypoxemia, Airway Obstruction & Respiratory Arrest, Clearing Respiratory Secretions, The Effective Cough, Deep Breathing and Coughing, Sputum Sample, Postural Drainage, Oxygen Administration, Safety Alerts, Teaching, Humidifier, Flowmeter, Concentrator, Nasal Cannula, Masks, Venturi Mask, Artificial Airways, Nasopharyngeal Suctioning, Tracheobronchial Suctioning, Tracheostomy, Tracheostomy Care, Nebulizer	1	

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE	
		<p>Treatments, Suctioning at Home, Chest Drainage Tubes.</p> <p>Pain, Comfort & Sleep: Pain & Discomfort, Types of Pain, Perception of Pain, Data Collection for Pain, Pain Scales, Nonpharmacological Pain Control, Pharmacological Pain Control, Cannabis, Older Adult Considerations, Patient Controlled Analgesic, Changing Catheter Dressings, Sleep, Functions of Sleep, Stages of Sleep, Normal Sleep Requirements, Factors Affecting Sleep, Insomnia, Sleep Apnea, Snoring, Narcolepsy.</p> <p>Complementary & Alternative Therapies: Mind and Body Interventions, Accupuncture, Yoga, Chiropractic, Massage Therapy, Imagery, Meditation, Biofeedback, Reiki, Hypnotherapy, Music/Art/Dance Therapy, Humor, Prayer, Natural Products, Herbal/Dietary Supplements, Aromatherapy, Homeopathic Medicine, Naturopathic Medicine, Traditional Chinese Medicine, Ayurveda, Shamanism, Folk Medicine, American Indian Medicine, Nurses Role.</p> <p>Reading: Williams Chapters 28, 31, 32 Textbook/E-Book: Williams p. 508-540, 594-613, 614-620</p> <p>Assessment(s): Quiz #5</p> <p>Assessment(s): Exam #5</p> <p>Lab: Administering Oxygen, Incentive Spirometer, Nasopharyngeal Suctioning, Endotracheal & Tracheostomy Suctioning, Providing Tracheostomy Care, Maintaining a Disposable Water Seal Chest Drainage System, TENS Unit, PCA, Changing Epidural Catheter Dressing, Complementary & Alternative Therapies, Documentation</p>	<p>1,3</p> <p>1,3</p> <p>1,3,4</p>	<p>20</p> <p>80</p>	
Unit 7	[class date]	<p>Topic(s): Administering Intravenous Solutions and Medications: Intravenous Therapy, LPN/LVN role in IV Therapy, Accountability, Responsibility of IV Therapy, Policies & Procedures of Intravenous Procedures, Types of IV Solutions, Equipment for IV Administration, Administration Sets, Infusion Pumps & Controllers, Venous Access Devices, Intravenous Needles & Catheters, Central Venous Catheters, Peripherally Inserted Central Catheters, Infusion Port, Complications of IV Therapy, Embolus, Infiltration, Extravasation, Phlebitis, Bloodstream Infection, Air Embolus, Showering & Bathing, Intravenous Therapy Guideline, Inserting IV, Starting Primary Line, Sites for Intravenous Cannula, Managing Intravenous Solution, Changing Intravenous Tubing, Troubleshooting Intravenous Flow, Administering Piggyback, Adding Medication to an Intravenous Solution, Discontinuing an Intravenous Solution, Discontinuing Saline Lock, Monitoring Blood/Blood Products & LPN Role, Total Parenteral Nutrition, IV Meds in the Home, Documentation. Blood Draws, Nurse Practice Act based upon State Board of Nursing, Scope of Practice</p> <p>Reading: Williams Chapters 36 Textbook/ E-Book: Williams p. 700-731</p> <p>Assessment(s): Quiz #6</p> <p>Assessment(s): Exam #6</p>	<p>2</p> <p>1,3</p> <p>1,3</p> <p>1,2,3,4</p>	<p>20</p> <p>80</p>	

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
		Lab: Starting an IV, Starting the Primary Intravenous Infusion, Hanging a New Solution using an Existing Piggy-Back Tubing, Saline Flush, Changing Intravenous Tubing, Adding Medication to an Intravenous Solution, Discontinuing an Intravenous Infusion or PRN Lock, Documentation, Blood Draw, Blood and Blood Products, Central Venous Access Devices, Total Parenteral Nutrition		
Unit 8	[class date]	Assessment(s): Final Exam	1,2,3	200

Grade Summary	Points
Assignment	200
6 Quizzes (20 pointsX6)	120
6 Exams (80 points eachX6)	480
Final Exam	200
Lab	P/F
Clinical	P/F
Totals	1000

Grade Scale		Quality Points
A	90.00% - 100.00%	4.0
B	80.00% - 89.99%	3.0
C	76.00% - 79.99%	2.0
F	0.00% - 75.99%	0.0
I	Incomplete	

POLICIES

UNIVERSITY POLICIES, SUCH AS ATTENDANCE PHILOSOPHY, NOTIFICATION OF ABSENCES, EXTENUATING CIRCUMSTANCES, ACCOMMODATION REQUESTS, ACADEMIC DISHONESTY, GRADING AND GRADING SYMBOLS, AND STUDENT CONDUCT ARE INCLUDED IN THE UNIVERSITY CATALOG. STUDENTS SHOULD REFERENCE THE CATALOG FOR THE COMPLETE LISTING OF POLICIES.

NOTE: IN SOME CASES, PROGRAM AND/OR COURSE SPECIFIC INFORMATION MAY BE APPENDED TO THE SYLLABUS. IN THESE INSTANCES, STUDENTS MUST CONSIDER THE SYLLABUS TO BE INCLUSIVE OF ANY APPENDED INFORMATION, AND AS SUCH, STUDENTS MUST ADHERE TO ALL COURSE REQUIREMENTS AS DESCRIBED IN THE DOCUMENT IN ITS ENTIRETY.



HERZING UNIVERSITY

LPN PROGRAM

Clinical Performance Evaluation Tool NP 120 Fundamentals of Nursing with Lab and Clinical

Grading Scale:
 5 = Independent (pass)
 4 = Supervised (pass)
 3 = Assisted (pass)
 2 = Marginal (fail)
 1 = Dependent (fail)
 X = Unable to Evaluate

See detailed explanation
of grading scale at the end.

Student Name _____ Instructor Name _____
 Term _____ Cohort _____

Clinical Objectives: There are specific clinical learning objectives that must be met to successfully pass this course. These are part of the broader expected universal expected behaviors listed on the last pages, which must be met to signify the student has mastered the program outcomes. A passing grade must be received in all objectives and outcomes by final evaluation in order to pass the course.

This clinical evaluation tool is designed based upon program outcomes, NLN Core Competencies, and six Integrating Concepts. Program Outcomes 1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. 2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. 3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. 4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. NLN PN Core Competencies: Spirit of Inquiry, Professional Identity, Nursing Judgement, Human Flourishing NLN PN Integrating Concepts: Safety, Quality, Teamwork/Collaboration, Relationship-Centered Care, Systems-Based Care, Personal/Professional Development	Midterm		Final	
	S	F	S	F
Course Description: This course introduces the role of the practical nurse as a member of the interprofessional health care team, basic nursing concepts, and psychomotor nursing skills. Students learn skills necessary for maintaining patient safety and strategies for therapeutic communication. At the conclusion of this course, the student will demonstrate competency in performing basic nursing skills across the lifespan. Upon completion of this course, the PN student will be able to: Safety Program Outcomes 1,2,3; Course Learning Objectives 1,2,3 Demonstrate safe medication administration.				

Explain principles of safety, including safe use of equipment, safe environment, recognizing patient safety needs, and reducing safety risks.				
Utilize information management as it pertains to health records, nursing science, and evidence-based practice.				
Practice clinical skills and procedures correctly.				
Give examples of coordinating care.				
Communicate using SBAR with the interdisciplinary team.				
Identify the scope of practice that governs LPN practice.				
Recall microbiology concepts related to infection control.				
Quality				
Program Outcomes 1,2,3; Course Learning Objectives 1,3,4				
Recognize concepts of teaching and learning to improve quality of health care.				
Identify relevant health care data that needs collected and organized.				
Assists in the identification of health needs and problems.				
Explain basic nursing care concepts while maintaining integrity in addressing the physiological, psychological, cultural and spiritual needs of patients.				
Discuss the importance of communication with patients, families and significant individuals.				
Give examples of when to document nursing care within health information system.				
Recall examples of health promotion and maintenance.				
Recognizes personal capabilities and knowledge base when making decisions about safe care delivery.				
Recognize a clinical example of nursing judgement.				
Translate the importance of patient/family satisfaction as a key determinant of quality into practice.				
Recognize evidenced-based care.				
Teamwork/Collaboration				
Program Outcomes 1,2; Course Learning Objectives 1,2				
Select appropriate team members to notify of changes in patient status.				
Collaborate with patients, families, other members of the health care team, and other individuals significant to the patient.				
Identify clinical experts when situations are beyond expertise and scope of practice.				
Make use of data collection and care planning to collaborate with the health care team.				
Recognize members of the health care team in meeting the needs of patients and their families.				
Compare health care team members for expert knowledge about patient care needs.				
Relationship-Centered Care				
Program Outcomes 1,2,4; Course Learning Objectives 1,2,3				
Define verbal and non-verbal communication principles to improve relationship-centered interactions.				
Implement and contribute to the plan of care for a patient with multiple medical conditions.				
Identify pharmacological interventions related to patient diagnosis and condition.				
Relate healing, health maintenance, health promotion, disease prevention, and rehabilitation to clients across the lifespan and the continuum of health care environments.				
Define the LPN role in encouraging patient self-advocacy.				
Provide caring, compassionate, culturally competent, and evidence-based care while using the nursing process in the health care setting.				
Systems-Based Care				
Program Outcomes 1,2,3; Course Learning Objectives 2,3				
Recognize the patient's right to minimal exposure to risk through systems thinking.				
Contributes to the interdisciplinary health care team in addressing the patients physiological, psychological, cultural, and spiritual needs.				
Report data to assist in the formulation of health care goals/outcomes, in collaboration with patients, their families, and health care team members.				
Practices collaboratively as a member of the interprofessional health care team to support the unique contributions of the LPN to a robust nursing workforce.				

Interpret the Nursing Code of Ethics, Standards of Practice, and policies and procedures of the clinical agency and Herzing University.				
Recognizes that both individuals and systems are responsible for patient safety.				
Demonstrates competencies with emerging clinical technologies.				
Personal/Professional Development				
Program Outcomes 2,3,4; Course Learning Objectives 3				
List personal beliefs, values, and biases in regard to respect for human dignity, equality, and justice.				
Interpret self-reflection to assess personal level of competence, adequacy of knowledge base, and areas needing improvement to grow professionally.				
Recognize responsibility for own learning and accept constructive guidance.				
Demonstrates a persistent sense of curiosity to think creatively.				
Interact with team members, faculty, and fellow students in a positive, professional manner.				
Attend clinical on time, dressed professionally, prepared, and ready to work.				
Demonstrate respectful appropriate behavior.				
Additional experiences not expected but available: (eg. IV)				

Midterm Comments (Strengths and Weaknesses)

Instructor:

Student:

Remediation strategy for any unsatisfactory areas:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Final Comments:

Instructor:

Student:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Grading Scale Explanation

Scale Label	Quality Of Performance	Assistance
Independent 5	Safe at all times Proficient Coordinated Confident Competent Occasional expenditure of excess energy within realistic time frame Consistently demonstrates synthesis of theory	Functions with occasional rare supporting cues
Supervised 4	Safe at all times Efficient Coordinated Confident Competent Functions with some expenditure of excess energy within a reasonable time period Relates theory to practice with occasional direction	Functions with occasional supportive cues
Assisted 3	Safe with occasional guidance required Sometimes inefficiency Sometimes uncoordinated Occasionally confident Skillful in most behaviors but does expend excessive energy Functions within delayed time period Recognizes theory to practice with frequent direction	Occasional physical and supportive ones
Marginal 2	Requires constant supervision for safe performance Unskilled Inefficient Lacks confidence Expend considerable expenditure of excessive energy Functions only in prolonged time period Occasionally recognizes the relationship of theory to practice with constant direction	Continuous verbal and physical cues required
Dependent 1	Unsafe even with close supervision Unskilled Inefficient Lacks confidence, coordination Constantly expends excessive energy Unable to function within a prolonged time period Unable to relate theory to practice	Continuous verbal and physical cues

Universal Expected Behaviors

1.	<ul style="list-style-type: none"> ○ Implements patient care within a timely manner. ○ Organizes time, resources, and self in the delivery of care. ○ Maintains safe client environment. ○ Is cost conscious while delivering care. ○ Uses nursing and other appropriate theories.
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	<ul style="list-style-type: none"> ○ Apply comprehensive knowledge of health problems and cultural diversity in performing nursing interventions. ○ Uses nursing judgment and decision-making skills to solve problems. ○ Engages in self-reflection and collegial dialogue with instructors and others about practice. ○ Conforms with Patient's Bill of Rights ○ Follows the Code of Conduct.
2.	<ul style="list-style-type: none"> ○ Collects comprehensive data appropriate to the patient (individual, family, group, or population). ○ Conducts thorough data collection techniques in a organized and timely manner. ○ Analyzes all data collected to contribute to the plan of care. ○ Prioritizes nursing diagnoses. ○ Incorporates nursing knowledge and standards of care in the collection of data. ○ Uses principles, established protocols, and practice standards to implement nursing care.
3.	<ul style="list-style-type: none"> ○ Implements interventions based on data collection and nursing diagnoses from the plan of care. ○ Understands outcome criteria that are measurable. ○ Discusses the plan of care with the RN. ○ Communicates care, consideration, and privacy to the client at all times. ○ Uses language expected of a practical nurse when communicating with other professionals. ○ Uses therapeutic communication strategies when communicating with patients.
4.	<ul style="list-style-type: none"> ○ Prepares for clinical experience by acquiring the knowledge, skills, and equipment needed for patient care. ○ Uses medical equipment according to policy and procedures. ○ Respects equipment. ○ Cleans equipment appropriately. ○ Maintains proper storage of equipment. ○ Understands the relationship of the data collected from technological equipment in relation to the patient's condition. ○ Uses technology to obtain and share data.
5.	<ul style="list-style-type: none"> ○ Maintains confidentiality. ○ Adheres to HIPAA standards. ○ Allows for patient privacy. ○ Treats patients in a dignified and respectful manner. ○ Maintains professional boundaries. ○ Practices standard safety precautions. ○ Communicates appropriate and critical information to faculty and staff in a timely manner. ○ Documents data collected, interventions, and response to interventions in a thorough and accurate manner.
6.	<ul style="list-style-type: none"> ○ Assumes the functions of a patient advocate. ○ Is honest and demonstrates personal integrity. ○ Behaves and dresses professionally. ○ Arrives in the clinical area on time and prepared for the day's assignment. ○ Demonstrates self-motivation for learning.
7.	<ul style="list-style-type: none"> ○ Considers developmental, physical, psychological, sociocultural and spiritual needs of the patient in nursing care. ○ Provides relevant and sensitive health education.

	<ul style="list-style-type: none">○ Integrating traditional and complementary health care practices per the plan of care.○ Communication shows sensitivity to sociocultural needs of client.○ Elicits and clarifies patient preferences and values.
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HERZING[®]

— UNIVERSITY —

COURSE SYLLABUS

FACULTY CONTACT INFORMATION	
INSTRUCTOR	Click here to enter text.
PHONE NUMBER	Click here to enter text.
HERZING E-MAIL	Click here to enter text.

DAY	OFFICE HOURS (CENTRAL TIME)
	00:00 am – 00:00 am

Instructional Delivery Method	On Campus			
Class Location				
Semester				
Course Code	NP 125			
Course Title:	Medical-Surgical Nursing I for LPNs			
Course Description	This course explores the care of adults using a body systems approach. Focus is placed on nursing interventions and developing knowledge required to provide quality nursing care in a safe manner. Content areas include musculoskeletal, urinary, respiratory, integumentary, neurologic, gastrointestinal, reproductive, and sensory systems. Furthermore, nutrition, communication, fluids & electrolytes, end of life, cultural diversity, and legal/ethical issues are integrated throughout the systems. The clinical component of this course allows the student a hands-on experience in providing relationship-centered care for patients with different disease processes in the health care system. Microbiology concepts related to safety and infection control are emphasized.			
Credit Hours Contact Hours	5 Semester Credit Hours			
	Lecture Hours	Laboratory Hours	Clinical Hours	Total Contact Hours
	45	0	90	135
Study Time	<p>Lecture, Lab, or Internship/Externship/Clinical/Practicum hours as indicated on the syllabus represent scheduled hours spent engaged in learning activities. Students should expect to spend a minimum of two additional hours engaged in learning activities outside of class for each one hour identified as lecture; students should expect to spend one hour engaged in learning activities outside of class for each two hours of scheduled laboratory time. Learning activities outside of class support the achievement of one or more course learning objectives and may be spent reading textbook material, completing homework assignments, preparing for lab assignments, engaged in drill and practice exercises, working on case studies, completing workbook activities, or conducting library research. Additional study time outside of scheduled Internship/Externship/Clinical hours is typically not expected.</p> <p>The total amount of time that students spend engaged in learning activities is consistent, regardless of instructional delivery method. For example, students enrolled a three credit lecture course should expect to spend 45 hours in scheduled class time and an additional 90 hours engaged in learning activities outside of the classroom. Online or blended students should expect to spend the equivalent total of 135 hours engaged in learning activities if they are enrolled in the same course.</p>			

	Determination of the amount of time that a student should expect to spend engaged in learning activities is based upon faculty judgment regarding the average student. The amount of time spent engaged in learning activities is expected to vary among students, based upon previous knowledge of the content, learning style, learning ability, difficulty of the course, and student motivation.	
Guide to Student Engagement in Learning Activities	<i>The timeframes provided below are estimates based upon the average student.</i>	
	Lower level reading (10-20 pages)	1 hour
	Higher level reading (10-20 pages)	2 hours
	Construction of 1 page paper (250 words)	2 hours
	Development of 10 minute speech	2 hours
	Watch video lecture	1 hour
	Read, research and respond to discussion board posting	1 hour
	Preparation for unit examination	2 hours
Course Length	8 Weeks	
Prerequisites	NP110: Pharmacology for Nurses with Lab NP120: Fundamentals of Nursing with Lab	
Co-requisites	N/A	
Course Learning Objectives	<p>Upon successful completion of this course, students should be able to:</p> <ol style="list-style-type: none"> 1) Apply the practical nurse scope of practice to the care of the adult patient. 2) Determine important concepts including nutrition, communication, and cultural diversity for patients with different medical disorders. 3) Demonstrate microbiology principles that affect infection control. 4) Identify elements in a systems based environment appropriate in caring for the adult population during wellness, acute, and chronic illnesses. 5) Verify pharmacologic therapy for clients based on an understanding of expected pharmacologic actions, safe administration methods, and data collection for patients. 	
Program Learning Outcomes Supported	Program Learning Outcome	Course Learning Objective Supported
	1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice.	1,3,5
	2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families.	2
	3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse.	1
	4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth.	4
Required Textbook(s)	<p>Ackley, B., Ladwig, G. & Makic, M. (2017). Nursing diagnosis handbook: An evidence- based guide to planning care (11 ed.). St. Louis, MO: Elsevier.</p> <p>deWit, S., Stromberg, H., & Dallred, C. (2017). Medical-surgical nursing: Concepts and practice (3rd ed.). St. Louis, MO: Elsevier.</p> <p>Pagana, K., & Pagana, T. (2018). Mosby's manual of diagnostic and laboratory tests (6th ed.). St Louis, MO: Elsevier</p>	
Optional Textbook(s)	NONE	

Additional Learning Material(s)

Evolve: <https://evolve.elsevier.com> **Resources for your e-book can be found here.** Simulation will be included as permitted by the respective Board of Nursing. E-book page numbers subject to change based upon publisher updates. Please check with instructor for updated page numbers as needed.

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
Unit 1	[class date]	<p>Topic(s): The Musculoskeletal System: A/P review, musculoskeletal disorders, age related changes, nursing process, diagnostic tests and procedures, laboratory tests for musculoskeletal disorders, consequences of immobility, teaching ambulation with assistive devices, common problems related to the musculoskeletal system, common therapeutic measures, health promotion, older adult care, safety alert, clinical cues.</p> <p>Care of patients with Musculoskeletal & Connective Tissue Disorders: Sprains/strains, bunion, carpal tunnel, dislocation, rotator cuff tear, fractures, traction, fixation, casts, complications of fractures, inflammatory disorders, osteoarthritis, RA, nursing care, hip/knee replacement, gout, osteoporosis, surgical intervention amputation, management of knee replacement, health promotion, older adult care, safety alert, clinical cues.</p> <p>Topic(s): Care of Preoperative & Intraoperative: Surgery introduction, categories of surgical procedures, terminology, technology advances, transfusion for procedures and cultural considerations, preoperative assessment (data collection), commonly ordered preoperative lab tests, surgical risk factors, complications, patient and family teaching, preoperative considerations and teaching, checklist, the surgical team and suite, nursing roles in the OR, anesthesia, intraoperative complications, cultural considerations, older adult care, safety alert, clinical cues, legal and ethical considerations.</p> <p>Care of Postoperative Surgical Patients: Post anesthesia care unit (PACU), postoperative patient assessment, postoperative nursing interventions and care (health promotion), wound healing and care, prevent postoperative complications, teaching and discharge instructions and teaching, assignment considerations, home care considerations, clinical cues cultural considerations, older adult care, safety alert.</p> <p>Reading: deWit Chapters 31, 32, 4, 5 Textbook/E-Book: deWit p. 719-721, 721-734, 736-747, 747-763, 60-77, 80-92, 94-96</p>	1,2,4		
Unit 2	[class date]	<p>Topic(s): Care of Patients with Pain: Pain theories, classification of pain, sources and processes of pain, pain perception, acute vs. chronic pain, assessment pain, pain scales, focused assessment questions, documentation for pain, management of pain, commonly used pain medications, nursing responsibilities for administering medications for pain, nonpharmacologic pain treatment approaches, community care options for pain treatment, older adult care point, safety alert, cultural considerations, clinical cues, legal & ethical</p>	1,2,4,5		

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
	<p>considerations.</p> <p>Chronic Illness/Rehabilitation: Overview of chronic illness & immobility, prevention of the common hazards of immobility, rehabilitation programs, rehabilitation team/role of LPN in rehabilitation team, functional independence measure scoring, categories home care, the LPN role in home care, nursing care plan for an immobilized resident, assignment considerations, The Joint Commission's National Patient Safety Goals, problems and disorders that increase the risk of falls, Fall Risk Assessment, interventions to help prevent falls, measures helpful to prevent the need for security devices, principles related to use of security and safety devices, use of common assistive-adaptive devices, restraints, Functional Independence Measure scoring categories, older adult care point, safety alert, clinical cues, legal & ethical considerations.</p> <p>Topic(s): The Urinary System: Disorders of the urologic system, causes, prevention, and diagnostics tests and procedures, common diagnostic tests for urologic disorders, focused assessment box, data collection for the urinary system, common causes of variations in the color of urine, terminology related to urine output and flow, nursing diagnosis, planning, and implementation for common urologic problems, care of urinary catheters and intake & output, principles of urinary catheter and tube care, urinary incontinence, drugs commonly used to treat urinary incontinence and retention, urinary retention, patient teaching, health promotion, examples of potentially nephrotoxic substances, clinical cues, older adult care point, legal and ethical considerations, focused assessment, patient teaching Kegel exercises.</p> <p>Care of Patients with Disorders of the Urinary System: Cystitis, drugs commonly used to treat urinary tract infections, urethritis, pyelonephritis, acute and chronic glomerulonephritis, nephrotic syndrome, hydronephrosis, renal stenosis, renal stones, urologic system cancers, renal failure acute & chronic, common drugs used to treat chronic renal failure, nursing management of patient with kidney failure or disease, dietary restrictions of a patient with renal failure, community care, safety alert, older adult care point, patient teaching, clinical cues, health promotion, legal and ethical.</p> <p>Reading: deWit Chapters 7, 9, 33, 34 Textbook/E-Book: deWit p. 124-131, 133-141, 178-180, 183-194, 769-784, 787-809, 810-814, <i>Microbiology for Nurses Due</i></p> <p>Assessment(s): Quiz #1</p> <p>Assessment(s): Exam #1</p> <p>Simulation: Medication Administration</p>	<p>3</p> <p>2</p> <p>2</p>	<p>5</p> <p>20</p> <p>80</p>	
Unit 3	[class date]	<p>Topic(s): The Gastrointestinal System: Anatomy and physiology of GI system, organs and structures, functions of GI system, effects of aging on the GI system, structures and locations of accessory organs, functions</p>	1,2,4	

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
	<p>of gallbladder, liver, and pancreas, effects of aging on the accessory organs of digestion, the GI system, diagnostic tests for GI issues, nursing management, common problems related to GI system, anorexia, gas, constipation, diarrhea, bowel training, patient teaching, health promotion, cultural considerations, older adult care points, clinical cues.</p> <p>Care of Patients with Disorders of the Upper Gastrointestinal System: Eating disorders, anorexia nervosa, bulimia nervosa, obesity, bariatric surgery, upper GI disorders, stomatitis, dysphagia, cancer of the oral cavity, cancer of the esophagus, hiatal hernia, GERD, gastroenteritis, gastritis, peptic ulcer, surgical treatment, gastric cancer, common therapies for disorders of the GI system, decompression, enteral nutrition, TPN, older adult care points, clinical cues, safety alert, patient teaching, cultural considerations.</p> <p>Topic(s): Care of Patients with Disorders of the Lower Gastrointestinal System: Disorders of the abdomen and bowel, IBS, diarrhea or constipation, diverticula, intestinal obstruction, abdominal and inguinal hernia, nursing management, bowel ischemia, inflammatory bowel disease, ulcerative colitis and crohns disease, appendicitis, peritonitis, malabsorption, cancer of the colon, ostomy surgery and care, colostomy, ileostomy, preoperative nursing care, nursing management, anorectal disorders, hemorrhoids, pilonidal sinus, anorectal abscess and fistula, community care, clinical cues, safety alert, older adult care points, cultural considerations, health promotion, patient teaching.</p> <p>Care of Patients with Disorders of the Gallbladder, Liver, and Pancreas: Disorders of the gallbladder, cholelithiasis, cholecystitis, disorders of the liver, hepatitis, cirrhosis, liver transplantation, cancer of the liver, disorders of pancreas, acute pancreatitis, chronic pancreatitis, cancer of the pancreas, community care, cultural considerations, older adult care points, patient teaching, clinical cues, health promotion, home care considerations, safety alerts.</p> <p>Reading: deWit Chapters 27, 28, 29, 30 Textbook/E-Book: deWit p. 624-641, 644-654, 658-666, 667- 673, 676- 691, 694-708, 710-716</p> <p>Assessment(s): Quiz #2</p> <p>Assessment(s): Exam #2</p>	2 2	20 80	
Unit 4	[class date]	<p>Topic(s): The Respiratory System: Causes of respiratory disease, respiratory disorders, prevention, risk factors for respiratory disease, care of older adults and respiratory disease, diagnostic procedures and labs tests, history taking/data collection, sputum characteristics and possible causes, normal lung sounds, physical/clinical appearance, common respiratory patient care problems, altered breathing patterns, older adult care points, health promotion, clinical cues.</p> <p>Care of Patients with Disorders of the Upper Respiratory System: Disorders of the nose and sinuses,</p>	1,2	

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE	
		<p>upper respiratory infections and rhinitis, sinusitis, epistaxis, pharyngitis, tonsillitis, obstruction and trauma, airway obstruction and respiratory arrest, obstructive sleep apnea, nasal fracture, cancer of the larynx, health promotion for cancer of the larynx, endotracheal intubation and tracheostomy, care of a tracheostomy, home health care, older adult care points, clinical cues, patient teaching, health promotion, home teaching, rehabilitation, community care, safety alert.</p> <p>Care of Patients with Disorders of the Lower Respiratory System: Acute bronchitis, influenza, health promotion, pneumonia, atelectasis, fungal infections, tuberculosis, restrictive pulmonary disorders, obstructive pulmonary disorders, emphysema, chronic bronchitis, asthma, lung cancer, pulmonary embolism, primary pulmonary hypertension, pneumothorax, hemothorax, pulmonary edema, respiratory failure, intrathoracic surgery, oxygen therapy, mechanical ventilation, older adult care points, legal & ethical considerations, safety alert, clinical cues, health promotion, cultural considerations.</p> <p>Topic(s): Fluid and Electrolytes: Distribution and regulation of body fluids, movement of fluid and electrolytes, fluid imbalance, deficient fluid volume, nausea and vomiting, edema, home care, osmolality, electrolyte imbalances.</p> <p>Reading: deWit Chapters 12, 13, 14, 3 Textbook/E-Book: deWit p. 255-270, 273-287, 290-324, 29-44</p> <p>Assessment(s): Quiz #3 Assessment(s): Exam #3</p>	<p>2 2</p>	<p>20 80</p>	
Unit 5	[class date]	<p>Topic(s): The Sensory System: Eye and Ear: The eye, eye disorders, eye injury, diagnostic test for eye problems, assessment/data collection, eye disease, abnormalities of lid positions, clinical signs and symptoms of eye diseases, eye medication, the ear, hearing loss, conductive versus sensorineural hearing loss, diagnostic test and exams, data collection, communication with a person who is hearing impaired, caring for a hearing aid, instilling otic medication, dizziness and vertigo, tinnitus, rehabilitation for hearing loss, older adult care, safety alert, clinical cues, health promotion.</p> <p>Care of Patients with Disorders of the Eyes and Ears: Common disorders of the eye, errors of refraction, uveitis, dry eye, corneal disorders, eye trauma, planning, cataract, glaucoma, open angle glaucoma, narrow-angle glaucoma, retinal detachment, retinopathy, macular degeneration, preoperative care, postoperative care, common disorders of the ear, external otitis, impacted cerumen and foreign bodies, otitis media, labyrinthitis, meniere disease, acoustic neuroma, otosclerosis and hearing loss, nursing care of patients having ear surgery, preoperative care/postoperative care, older adult</p>	1,2,4,5		

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
		<p>considerations, safety alert, cultural considerations, clinical cues, health promotion</p> <p>Topic(s): End of Life: psychological process of death, fear, palliative care, anticipatory guidance, terminal hydration, end stage symptom management, grieving, spiritual beliefs and practices regarding death, dyspnea, death rattle, delirium.</p> <p>Topic(s): The Integumentary System: Age related changes in skin and its structures, integumentary system, risk factors for skin tears in older adults, measures to prevent skin tears</p> <p>Reading: deWit Chapters 25, 26, 41; Williams Chapter 15</p> <p>Textbook/E-Book: deWit p. 574-588, 590-594, 597-603, 604-606, 609-615, 616-621, 172-175, 957-966; Williams p. 245-260</p> <p>Assessment(s): Quiz #4</p> <p>Assessment(s): Exam #4</p>	2 2	20 80	
Unit 6	[class date]	<p>Topic(s): Care of Patients with Integumentary Disorders and Burns: Inflammatory infections, dermatitis, acne, psoriasis, Stevens-Johnson syndrome, bacterial infections, viral infections, herpes simplex, herpes zoster, fungal infections, tinea pedis, parasitic infections, pediculosis and scabies, noninfectious disorders of skin, skin cancer, best practice for the prevention of pressure ulcers, burns, first aid for minor burns, pain management, debridement, grafting management of burns, community care, older adult care points, safety alert, clinical cues, health promotion, patient teaching, nutritional considerations.</p> <p>Topic(s): Care of Women Reproductive Disorders: Sexual maturation, menopause & health risks, health promotion, managing menopause, aging related concerns, normal menstruation, normal breast, menstrual dysfunction, contraception, legal & ethical morning after pill, infertility, art procedures, health screening & assessment/breast self-examination, the pelvic exam, diagnostic procedures, culture & women's health, gynecologic surgical procedure, cystocele/rectocele/enterocele/uterine prolapse, polycystic ovarian syndrome, dysfunctional uterine bleeding, fibroids, hysterectomy, endometriosis, comparison of bacterial vaginosis & yeast infection, toxic shock syndrome, cancer of the reproductive tract, disorders of the breasts, risk factors for breast cancer, patient teaching older adults, older adult care points, clinical cues, cultural considerations, health promotion, legal & ethical considerations, patient teaching.</p> <p>Care of Men with Reproductive Disorders: Age related changes, fertility, contraception, PSA, diagnostic tests, erectile dysfunction, treatment options for erectile dysfunction, ejaculation disorders, infertility, hydrocele, varicocele, testicular torsion, priapism, benign prostatic hyperplasia, surgical interventions for male urogenital problems, inflammation & infections of the male</p>	1,2		

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE	
		<p>reproductive tract, cultural considerations, cancer of the male reproductive tract, safety alert, older adult care points, clinical cues, health promotion, patient teaching.</p> <p>Care of Patients with Sexually Transmitted Infections: Sexually transmitted infections, PID, candidiasis, bacterial vaginosis, risk factors for transmission of STIs, cultural considerations, prevention of HPV, reporting STIs, common diagnostic tests, common STIs, health promotion, prevention of STIs, clinical cues, cultural considerations.</p> <p>Reading: deWit Chapters 42, 38, 39, 40 Textbook/E-Book: deWit p. 970-998, 885-896, 897-901, 904-919, 924-940, 943-952, 954</p> <p>Assignment(s): <i>Assignment Due</i></p> <p>Assessment(s): Quiz #5</p> <p>Assessment(s): Exam #5</p>	<p>2</p> <p>2</p> <p>2</p>	<p>195</p> <p>20</p> <p>80</p>	
Unit 7	[class date]	<p>Topic(s): Neurologic System: Functions of the divisions of the brain, cranial nerves & their functions, neurotransmitters that affect transmission of nerve impulses, autonomic effects on various organs of the body, aging related changes, causative factors involved in neurologic disorders, classification of common neurologic disorders, prevention of neurologic disorders, evaluation of neurologic status, common neurologic patient care problems, quick assessment of cranial nerves, diagnostic tests for neurologic disorders, Glasgow coma scale, pupillary abnormalities and possible causes, safety alert, clinical cues, patient teaching.</p> <p>Care of Patients with Head and Spinal Cord Injuries: Traumatic brain injuries, decreasing levels of consciousness, increased intracranial pressure, guidelines for patients with increased intracranial pressure, injuries of the spine and spinal cord, level of spinal cord damage, function present, & activities possible, stages of grief and associated behaviors, drugs commonly used to treat head and spinal cord injuries, back pain and ruptured intervertebral disk, older adult care points, legal & ethical considerations, safety alert, clinical cues.</p> <p>Topic(s): Care of Patients with Brain Disorders: Seizure disorder and epilepsy and medications commonly used, transient ischemic attack, cerebrovascular accident and drugs commonly used, brain tumor, infectious and inflammatory disorders of the nervous system, bacterial meningitis, viral meningitis, encephalitis, headaches, cluster headaches, cranial nerve disorders, TIC, Bell Palsy, clinical cues, safety alert, patient teaching, health promotion, cultural considerations, safety alerts, nutrition considerations.</p> <p>Care of Patients with Peripheral and Degenerative Neurologic Disorders: Parkinson's disease and nursing implications and commonly used drugs, multiple sclerosis, Alzheimer disease, amyotrophic lateral sclerosis, Guillain-Barre syndrome, Huntington disease,</p>	1,2		

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
		myasthenia gravis, signs and symptoms of cholinergic crises and myasthenia crisis, restless leg syndrome, safety alert, patient teaching, clinical cues. Care of Patients with Cognitive Disorders: Overview of cognitive disorders, delirium, dementia, Alzheimer disease, behavioral patterns in mild, moderate, and severe Alzheimer disease, ten warning signs of Alzheimer disease, vascular dementia, restraints, alternatives to and guidelines for the use of restraints, suggestions for families caring for a person with Alzheimer disease, community care, older adult care points, health promotion, legal & ethical considerations, safety alert, clinical cues, cultural considerations Reading: deWit Chapters 21, 22, 23, 24, 47 Textbook/E-Book: deWit p. 472-497, 500-521, 524-549, 553-568, 1092-1106 Assessment(s): Quiz #6 Assessment(s): Exam #6		
		2 2	20 80	
Unit 8	class date]	1,2,4	200	

Grade Summary	Points
Assignment	195
Microbiology for Nurses	5
6 Exams (80 points eachX6)	480
6 Quizzes (20 pointsX6)	120
Final Exam	200
Clinical	P/F
Totals	1000

Grade Scale		Quality Points
A	90.00% - 100.00%	4.0
B	80.00% - 89.99%	3.0
C	76.00% - 79.99%	2.0
F	0.00% - 75.99%	0.0
I	Incomplete	

POLICIES

UNIVERSITY POLICIES, SUCH AS ATTENDANCE PHILOSOPHY, NOTIFICATION OF ABSENCES, EXTENUATING CIRCUMSTANCES, ACCOMMODATION REQUESTS, ACADEMIC DISHONESTY, GRADING AND GRADING SYMBOLS, AND STUDENT CONDUCT ARE INCLUDED IN THE UNIVERSITY CATALOG. STUDENTS SHOULD REFERENCE THE CATALOG FOR THE COMPLETE LISTING OF POLICIES.

NOTE: IN SOME CASES, PROGRAM AND/OR COURSE SPECIFIC INFORMATION MAY BE APPENDED TO THE SYLLABUS. IN THESE INSTANCES, STUDENTS MUST CONSIDER THE SYLLABUS TO BE INCLUSIVE OF ANY APPENDED INFORMATION, AND AS SUCH, STUDENTS MUST ADHERE TO ALL COURSE REQUIREMENTS AS DESCRIBED IN THE DOCUMENT IN ITS ENTIRETY.



HERZING UNIVERSITY

LPN PROGRAM

Clinical Performance Evaluation Tool NP 125 Medical Surgical Nursing I for LPNs

Grading Scale:
 5 = Independent (pass)
 4 = Supervised (pass)
 3 = Assisted (pass)
 2 = Marginal (fail)
 1 = Dependent (fail)
 X = Unable to Evaluate

See detailed explanation
of grading scale at the end.

Student Name _____ Instructor Name _____

Term _____ Cohort _____

Clinical Objectives: There are specific clinical learning objectives that must be met to successfully pass this course. These are part of the broader expected universal expected behaviors listed on the last pages, which must be met to signify the student has mastered the program outcomes. A passing grade must be received in all objectives and outcomes by final evaluation in order to pass the course.

This clinical evaluation tool is designed based upon program outcomes, NLN Core Competencies, and six Integrating Concepts.	Midterm		Final	
<p style="text-align: center;">Program Outcomes</p> <ol style="list-style-type: none"> Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. <p style="text-align: center;">NLN PN Core Competencies: Spirit of Inquiry, Professional Identity, Nursing Judgement, Human Flourishing</p> <p style="text-align: center;">NLN PN Integrating Concepts: Safety, Quality, Teamwork/Collaboration, Relationship-Centered Care, Systems-Based Care, Personal/Professional Development</p>				
<p style="text-align: center;">Course Description:</p> <p>This course explores the care of adults using a body systems approach. Focus is placed on nursing interventions and developing knowledge required to provide quality nursing care in a safe manner. Content areas include musculoskeletal, urinary, respiratory, integumentary, neurologic, gastrointestinal, reproductive, and sensory systems. Furthermore, nutrition, communication, fluids & electrolytes, end of life, cultural diversity, and legal/ethical issues are integrated throughout the systems. The clinical component of this course allows the student a hands-on experience in providing relationship-centered care for patients with different disease processes in the health care system. Microbiology concepts related to safety and infection control are emphasized.</p> <p>Upon completion of this course, the PN student will be able to:</p>	S	F	S	F

Safety				
Program Outcomes 1,2,3; Course Learning Objectives 1,2,3,5				
Integrate safe medication administration.				
Implementing principles of safety, including safe use of equipment, safe environment, recognizing patient safety needs, and reducing safety risks.				
Utilize information management as it pertains to health records, nursing science, and evidence-based practice.				
Perform clinical skills and procedures correctly.				
Demonstrate coordination of care.				
Communicate using SBAR with the interdisciplinary team.				
Explain the scope of practice that govern LPN practice.				
Interpret microbiology concepts related to infection control.				
Quality				
Program Outcomes 1,2,3; Course Learning Objectives 2				
Explain concepts of teaching and learning to improve quality of health care.				
Predict relevant health care data that needs collected and organized.				
Discuss health needs and problems.				
Apply basic nursing care concepts while maintaining integrity in addressing the physiological, psychological, cultural and spiritual needs of patients.				
Paraphrase the importance of communication with patients, families and significant individuals.				
Perform documentation of nursing care within health information system.				
Interpret health promotion and maintenance behaviors.				
Match personal capabilities and knowledge base when making decisions about safe and holistic care delivery.				
Clarify a nursing judgement decision.				
Make use of the importance of patient/family satisfaction as a key determinant of quality in practice.				
Prevent complications through the selection of evidenced-based care.				
Teamwork/Collaboration				
Program Outcomes 1,2; Course Learning Objectives 1,4				
Summarize appropriate team members to notify of changes in patient status				
Collaborate with patients, families, other members of the health care team, and other individuals significant to the patient.				
Utilize clinical experts when situations are beyond expertise and scope of practice.				
Take part in data collection and care planning to collaborate with the health care team.				
Compare members of the health care team in meeting the needs of patients and their families.				
Select health care team members for expert knowledge about patient care needs.				
Relationship-Centered Care				
Program Outcomes 1,2,4; Course Learning Objectives 2,4,5				
Summarize verbal and non-verbal communication principles to improve relationship-centered interactions.				
Implement and contribute to the plan of care for a patient with multiple medical conditions.				
Compare pharmacological interventions related to patient diagnosis and condition.				
Explain healing, health maintenance, health promotion, disease prevention, and rehabilitation to clients across the lifespan and the continuum of health care environments.				
Demonstrate the LPN role in encouraging patient self-advocacy.				
Provide caring, compassionate, culturally competent, and evidence-based care while using the nursing process in the health care setting.				
Systems-Based Care				
Program Outcomes 1,2,3; Course Learning Objectives 1,2,4				
Explain the patient's right to minimal exposure to risk through systems thinking.				
Contribute to the interdisciplinary health care team in addressing patient physiological, psychological, cultural, and spiritual needs.				

Report data to assist in the formulation of health care goals/outcomes, in collaboration with patients, their families, and health care team members.				
Practice collaboratively as a member of the interprofessional health care team to support the unique contributions of the LPN to a robust nursing workforce.				
Apply the Nursing Code of Ethics, Standards of Practice, and policies and procedures of the clinical agency and Herzing University.				
Explain that both individuals and systems are responsible for patient safety.				
Make use of competencies with emerging clinical technologies.				
<i>Personal/Professional Development</i>				
Program Outcomes 2,3,4; Course Learning Objectives 2				
Explain personal beliefs, values, and biases in regard to respect for human dignity, equality, and justice.				
Use self-reflection to assess personal level of competence, adequacy of knowledge base, and areas needing improvement to grow professionally.				
Show responsibility for own learning and accept constructive guidance.				
Develop a persistent sense of curiosity to think creatively.				
Interact with team members, faculty, and fellow students in a positive, professional manner.				
Attend clinical on time, dressed professionally, prepared, and ready to work.				
Demonstrate respectful appropriate behavior.				
Additional experiences not expected but available: (eg. IV)				

Midterm Comments (Strengths and Weaknesses)

Instructor:

Student:

Remediation strategy for any unsatisfactory areas:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Final Comments:

Instructor:

Student:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Grading Scale Explanation

Scale Label	Quality Of Performance	Assistance
Independent 5	Safe at all times Proficient Coordinated Confident Competent Occasional expenditure of excess energy within realistic time frame Consistently demonstrates synthesis of theory	Functions with occasional rare supporting cues
Supervised 4	Safe at all times Efficient Coordinated Confident Competent Functions with some expenditure of excess energy within a reasonable time period Relates theory to practice with occasional direction	Functions with occasional supportive cues
Assisted 3	Safe with occasional guidance required Sometimes inefficiency Sometimes uncoordinated Occasionally confident Skillful in most behaviors but does expend excessive energy Functions within delayed time period Recognizes theory to practice with frequent direction	Occasional physical and supportive ones
Marginal 2	Requires constant supervision for safe performance Unskilled Inefficient Lacks confidence Expend considerable expenditure of excessive energy Functions only in prolonged time period Occasionally recognizes the relationship of theory to practice with constant direction	Continuous verbal and physical cues required
Dependent 1	Unsafe even with close supervision Unskilled Inefficient Lacks confidence, coordination Constantly expends excessive energy Unable to function within a prolonged time period Unable to relate theory to practice	Continuous verbal and physical cues

Universal Expected Behaviors

1.	<ul style="list-style-type: none"> ○ Implements patient care within a timely manner. ○ Organizes time, resources, and self in the delivery of care. ○ Maintains safe client environment. ○ Is cost conscious while delivering care. ○ Uses nursing and other appropriate theories. ○ Apply comprehensive knowledge of health problems and cultural diversity in performing nursing interventions.
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	<ul style="list-style-type: none"> ○ Uses nursing judgment and decision-making skills to solve problems. ○ Engages in self-reflection and collegial dialogue with instructors and others about practice. ○ Conforms with Patient's Bill of Rights ○ Follows the Code of Conduct.
2.	<ul style="list-style-type: none"> ○ Collects comprehensive data appropriate to the patient (individual, family, group, or population). ○ Conducts thorough data collection techniques in a organized and timely manner. ○ Analyzes all data collected to contribute to the plan of care. ○ Prioritizes nursing diagnoses. ○ Incorporates nursing knowledge and standards of care in the collection of data. ○ Uses principles, established protocols, and practice standards to implement nursing care.
3.	<ul style="list-style-type: none"> ○ Implements interventions based on data collection and nursing diagnoses from the plan of care. ○ Understands outcome criteria that are measurable. ○ Discusses the plan of care with the RN. ○ Communicates care, consideration, and privacy to the client at all times. ○ Uses language expected of a practical nurse when communicating with other professionals. ○ Uses therapeutic communication strategies when communicating with patients.
4.	<ul style="list-style-type: none"> ○ Prepares for clinical experience by acquiring the knowledge, skills, and equipment needed for patient care. ○ Uses medical equipment according to policy and procedures. ○ Respects equipment. ○ Cleans equipment appropriately. ○ Maintains proper storage of equipment. ○ Understands the relationship of the data collected from technological equipment in relation to the patient's condition. ○ Uses technology to obtain and share data.
5.	<ul style="list-style-type: none"> ○ Maintains confidentiality. ○ Adheres to HIPAA standards. ○ Allows for patient privacy. ○ Treats patients in a dignified and respectful manner. ○ Maintains professional boundaries. ○ Practices standard safety precautions. ○ Communicates appropriate and critical information to faculty and staff in a timely manner. ○ Documents data collected, interventions, and response to interventions in a thorough and accurate manner.
6.	<ul style="list-style-type: none"> ○ Assumes the functions of a patient advocate. ○ Is honest and demonstrates personal integrity. ○ Behaves and dresses professionally. ○ Arrives in the clinical area on time and prepared for the day's assignment. ○ Demonstrates self-motivation for learning.
7.	<ul style="list-style-type: none"> ○ Considers developmental, physical, psychological, sociocultural and spiritual needs of the patient in nursing care. ○ Provides relevant and sensitive health education. ○ Integrating traditional and complementary health care practices per the plan of care. ○ Communication shows sensitivity to sociocultural needs of client.

	o Elicits and clarifies patient preferences and values.
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HERZING[®]

— UNIVERSITY —

COURSE SYLLABUS

FACULTY CONTACT INFORMATION	
INSTRUCTOR	Click here to enter text.
PHONE NUMBER	Click here to enter text.
HERZING E-MAIL	Click here to enter text.

DAY	OFFICE HOURS (CENTRAL TIME)
	00:00 am – 00:00 am

Instructional Delivery Method	On Campus		
Class Location			
Semester			
Course Code	NP 235		
Course Title:	Medical-Surgical Nursing II for LPNs		
Course Description	This course explores the care of adults using a body systems approach. Focus is placed on nursing interventions and developing knowledge required to provide quality nursing care in a safe manner. Content areas include cardiovascular, hematologic, endocrine, and lymphatic systems. Furthermore acid base balance, cancer, bioterrorism, disaster, and trauma are integrated throughout the course. The clinical component of this course allows the student a hands-on experience in providing relationship-centered care for patients with different disease processes in the health care system.		
Credit Hours Contact Hours	5 Semester Credit Hours		
	Lecture Hours	Laboratory Hours	Clinical Hours
	45	0	90
Study Time	Lecture, Lab, or Internship/Externship/Clinical/Practicum hours as indicated on the syllabus represent scheduled hours spent engaged in learning activities. Students should expect to spend a minimum of two additional hours engaged in learning activities outside of class for each one hour identified as lecture; students should expect to spend one hour engaged in learning activities outside of class for each two hours of scheduled laboratory time. Learning activities outside of class support the achievement of one or more course learning objectives and may be spent reading textbook material, completing homework assignments, preparing for lab assignments, engaged in drill and practice exercises, working on case studies, completing workbook activities, or conducting library research. Additional study time outside of scheduled Internship/Externship/Clinical hours is typically not expected.		
	The total amount of time that students spend engaged in learning activities is consistent, regardless of instructional delivery method. For example, students enrolled a three credit lecture course should expect to spend 45 hours in scheduled class time and an additional 90 hours engaged in learning activities outside of the classroom. Online or blended students should expect to spend the equivalent total of 135 hours engaged in learning activities if they are enrolled in the same course.		
Determination of the amount of time that a student should expect to spend engaged in learning activities is based upon faculty judgment regarding the average student. The amount of time spent engaged in learning activities is expected to vary among students, based upon previous knowledge of the content, learning style, learning ability, difficulty of the course, and student motivation.			

	<i>The timeframes provided below are estimates based upon the average student.</i>	
Guide to Student Engagement in Learning Activities	Lower level reading (10-20 pages)	1 hour
	Higher level reading (10-20 pages)	2 hours
	Construction of 1 page paper (250 words)	2 hours
	Development of 10 minute speech	2 hours
	Watch video lecture	1 hour
	Read, research and respond to discussion board posting	1 hour
	Preparation for unit examination	2 hours
Course Length	8 Weeks	
Prerequisites	NP125: Medical Surgical Nursing I for LPNs	
Co-requisites	N/A	
Course Learning Objectives	<p>Upon successful completion of this course, students should be able to:</p> <ol style="list-style-type: none"> 1) Utilize safe, quality, relationship-centered care along with interprofessional collaboration to care for patients with medical disorders. 2) Apply professional knowledge to interventions as appropriate with cultural considerations. 3) Demonstrate basic knowledge of chemistry and physics and its applicability to nursing practice. 4) Verify pharmacologic therapy for clients based on an understanding of expected pharmacologic actions, safe administration methods, and data collection for patients. 	
Program Learning Outcomes Supported	Program Learning Outcome	Course Learning Objective Supported
	<ol style="list-style-type: none"> 1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. 2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. 3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. 4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. 	<p>1,3,4</p> <p>2</p> <p>2</p> <p>2</p>
Required Textbook(s)	<p>All books utilized throughout the program</p> <p>Ackley, B., Ladwig, G. & Makic, M. (2017). Nursing diagnosis handbook: An evidence- based guide to planning care (11 ed.). St. Louis, MO: Elsevier.</p> <p>deWit, S., Stromberg, H., & Dallred, C. (2017). Medical-surgical nursing: Concepts and practice (3rd ed.). St. Louis, MO: Elsevier.</p> <p>Pagana, K., & Pagana, T. (2018). Mosby's manual of diagnostic and laboratory tests (6th ed.). St Louis, MO: Elsevier</p>	
Optional Textbook(s)	NONE	

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
		<p>common gynecologic diagnostic tests, diagnostic tests for male reproductive system.</p> <p>Reading: Pagana Textbook/E-Book: Diagnostic Tests: Chapter 8 p. 721-727, 727-731, 750-753, 770-775, 762-768, 753-757, 731-733, 652-661. Chapter 10 p. 815-817, 817-819, 820-824, 843-845. Chapter 9 p. 790-792, 797-798, 800-804. Chapter 4 p. 526-531, 518-523, 531-535, 647-652. Chapter 3 p. 511-514, 481-485, 485-490. Chapter 10 p. 820-824.</p> <p>Miscellaneous Diagnostic Tests: Chapter 13 p. 1053-1061. Chapter 12 p. 962-978. Chapter 5 p. 588-596, 598-602, 616-622. Chapter 7 p. 642-644. Chapter 1 p. 5-6. Chapter 2 p. 13-17, Table 2.1 p. 15, 20-21.</p> <p>Reading: deWit 209-210, 257-260, 333-335, 378-381, 480-484, 576-578, 630-635, 723-724, 771-774, 828-831, 898-899; 926</p> <p>Assessment(s): Quiz #1</p> <p>Assessment(s): Exam #1</p> <p>Simulation: Head Injury</p>	<p>1</p> <p>20</p> <p>1</p> <p>80</p>	
Unit 3	[class date]	<p>Topic(s): Acid-Base Balance, and Intravenous Therapy: Acid-base system, acid-base imbalances, arterial blood gas analysis, metabolic acidosis, metabolic alkalosis, intravenous fluid therapy, community care, clinical cues, older adult care points, safety alert, legal & ethical considerations, patient teaching.</p> <p>Topic(s): The Immune and Lymphatic System: Age related changes to the immune and lymphatic systems, protective mechanisms of the immune and lymphatic systems, inflammatory response, immune response, immune and lymphatic system disorders, prevention of immune and lymphatic disorders, nursing management, common problems related to the immune and lymphatic systems, fever, immunosuppression, diagnostic tests for disorders of the immune and lymphatic systems, health promotion, older adult care points, clinical cues, legal and ethical considerations.</p> <p>Care of Patients with Immune and Lymphatic Disorders: Immune function and dysfunction, immune deficiency disorders, therapeutic immunosuppression, human immunodeficiency virus and acquired immunodeficiency syndrome, human immunodeficiency virus risk in patients older than 50, community education and care, autoimmune disorders and body systems affected, SLE, disorders of the lymphatic system, lymphoma, lymphedema, fibromyalgia, disorders of inappropriate immune response, allergy and hypersensitivity, anaphylactic reaction and shock, older adult care points, patient teaching, health promotion, nutritional consideration, legal & ethical considerations, safety alert, clinical cues, cultural considerations.</p> <p>Topic(s): Care of Patients with Cancer: The impact of cancer, physiology of cancer, classifications of tumors, metastasis, causative factors, contributing factors, measures to prevent cancer, detection of cancer, nursing management, common therapies, problems, and nursing</p>	<p>1,2</p>	

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
		Assessment(s): Exam #3	1	80	
Unit 5	[class date]	<p>Topic(s): The Hematologic System: Blood components, function of plasma proteins/red blood cells/white blood cells/platelets, interaction of the lymphatic system with the vascular system, changes of the hematologic system with aging, causes of hematologic disorders, prevention of hematologic disorders, diagnostic tests and procedures, focused assessment, common problems related to disorders of the hematologic system, excessive bleeding, excessive clotting, fatigue, anorexia, pain, infection, bone marrow failure, cultural considerations, clinical cues, older adult care points, health promotion.</p> <p>Care of Patients with Hematologic Disorders: Anemia, drugs for anemias, aplastic anemia, sickle cell disease, leukemia, thrombocytopenia, multiple myeloma, hemophilia, DIC, transfusions, transfusion reactions, LPN role, bone marrow transplant, oxygen therapy, iron therapy, vitamin B12 therapy, splenectomy, community care, clinical cues, older adult care points, safety alert, health promotion, legal & ethical considerations, cultural considerations, nutrition considerations.</p> <p>Reading: deWit Chapters 15, 16 Textbook/E-Book: deWit p. 327-340, 343-351, 352-354, 356-362, 363-364</p> <p>Assessment(s): Quiz #4 Assessment(s): Exam #4</p>	1,2,4 1 1	 20 80	
Unit 6	[class date]	<p>Topic(s)The Endocrine System: Principal endocrine glands and hormones, effects of the thyroid hormones, functions of the parathyroid glands, functions of the adrenal glands, hormone function on the pancreas, effects of aging on the endocrine system, the endocrine system, endocrine system disorders, diagnostic tests & procedures of the endocrine system, diagnostic tests for detecting and monitoring for DM, community care, health promotion, clinical cues, safety alert.</p> <p>Care of Patients with Pituitary, Thyroid, Parathyroid, and Adrenal Disorders: Pituitary disorders, pituitary tumors, hyperfunction of pituitary gland, hypofunction of pituitary gland, diabetes insipidus, SIADH, thyroid disorders, goiter, hyperthyroidism, thyroidectomy, hypothyroidism, myxedema coma, thyroiditis, thyroid cancer, disorders of the parathyroid gland, hypoparathyroidism, & hyperparathyroidism; adrenal disorders, Addison's disease, adrenal crisis, Cushing syndrome, community care, safety alert, older adult care points, patient teaching, nutrition considerations, clinical cues.</p> <p>Care of Patients with Diabetes and Hypoglycemia: Diabetes mellitus and hypoglycemia, types, etiology, signs/symptoms/diagnosis, management of diabetes, pt. teaching hypoglycemia, oral hypoglycemic agents, insulin, clinical cues, insulin pump, complications, diabetic ketoacidosis, hyperglycemic hyperosmolar state, hypoglycemia, long term problems, patient education,</p>	1,2,4		

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
		<p>hypoglycemia, nutrition considerations, cultural considerations, clinical cues, older adult care points, safety alerts, health promotion, patient teaching.</p> <p>Reading: deWit Chapters 35, 36, 37 Textbook/E-Book:deWit p. 822-832, 834, 836-850, 851, 854-857, 859-874, 876-879</p> <p>Assignment: Assignment Due</p> <p>Assessment(s): Quiz #5</p> <p>Assessment(s): Exam #5</p>	<p>1</p> <p>1</p> <p>1</p>	<p>90</p> <p>20</p> <p>80</p>	
Unit 7	[class date]	<p>Topic(s): Care of Patients During Disasters, Bioterrorism Attacks, and Pandemic Infections: Disaster preparedness and response, hospital preparedness, triage, community preparedness, psychological responses to disaster, preparing for chemical, nuclear, or biologic disasters, & active shooter, health promotion, safety alert, patient teaching.</p> <p>Care of Patients with Emergencies, Trauma and Shock: Prevention of accidents, first aid and good Samaritan laws, psychological and social emergencies, emergency care, metabolic emergencies, injuries caused by extreme heat and cold, poisoning, bites and stings, choking emergencies, CPR, shock, & nursing management, safety alert, clinical cues, older adult care points, health promotion.</p> <p>Additional Topics: Informed consent, code status, delegation, prioritizing, continuity of care, quality/performance improvement, referral process, discharge education, supervision, emergency response plan, accident/error/injury prevention, incident reports, chemical dependency in nurses, advanced directives, crises interventions, medical emergencies, evidenced based practice, advocate, negligence, malpractice, client rights, client care assignments, community resources, resource management, concepts of management and supervision.</p> <p>Reading: deWit Chapters 43, 44 Textbook/E-Book:deWit p. 1002-1022, 1025-1047, 68, 3, 517, 23-25, 5-6, 93-96, 1003.</p> <p>Assessment(s): Quiz #6</p> <p>Assessment(s): Exam #6</p>	<p>1</p> <p>1</p>	<p>20</p> <p>80</p>	
Unit 8	[class date]	<p>Assignment(s): HESI remediation due</p> <p>Assessment(s): Final Exam</p>	<p>1</p> <p>1,2</p>	<p>20</p> <p>200</p>	

Grade Summary	Points
Assignment	90
Chemistry for Nurses Assignment	5
Physics for Nurses Assignment	5
HESI Exam	80
HESI Remediation	20
Exam 3 X 200 points	600
Final Exam	200
Clinical	P/F
Totals	1000

Grade Scale		Quality Points
A	90.00% - 100.00%	4.0
B	80.00% - 89.99%	3.0
C	76.00% - 79.99%	2.0
F	0.00% - 75.99%	0.0
I	Incomplete	

POLICIES

UNIVERSITY POLICIES, SUCH AS ATTENDANCE PHILOSOPHY, NOTIFICATION OF ABSENCES, EXTENUATING CIRCUMSTANCES, ACCOMMODATION REQUESTS, ACADEMIC DISHONESTY, GRADING AND GRADING SYMBOLS, AND STUDENT CONDUCT ARE INCLUDED IN THE UNIVERSITY CATALOG. STUDENTS SHOULD REFERENCE THE CATALOG FOR THE COMPLETE LISTING OF POLICIES.

NOTE: IN SOME CASES, PROGRAM AND/OR COURSE SPECIFIC INFORMATION MAY BE APPENDED TO THE SYLLABUS. IN THESE INSTANCES, STUDENTS MUST CONSIDER THE SYLLABUS TO BE INCLUSIVE OF ANY APPENDED INFORMATION, AND AS SUCH, STUDENTS MUST ADHERE TO ALL COURSE REQUIREMENTS AS DESCRIBED IN THE DOCUMENT IN ITS ENTIRETY.



HERZING UNIVERSITY

LPN PROGRAM

Clinical Performance Evaluation Tool NP 235 Medical Surgical Nursing II for LPNs

Grading Scale:
 5 = Independent (pass)
 4 = Supervised (pass)
 3 = Assisted (pass)
 2 = Marginal (fail)
 1 = Dependent (fail)
 X = Unable to Evaluate

See detailed explanation
of grading scale at the end.

Student Name _____ Instructor Name _____

Term _____ Cohort _____

Clinical Objectives: There are specific clinical learning objectives that must be met to successfully pass this course. These are part of the broader expected universal expected behaviors listed on the last pages, which must be met to signify the student has mastered the program outcomes. A passing grade must be received in all objectives and outcomes by final evaluation in order to pass the course.

This clinical evaluation tool is designed based upon program outcomes, NLN Core Competencies, and six Integrating Concepts. Program Outcomes 1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. 2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. 3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. 4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. NLN PN Core Competencies: Spirit of Inquiry, Professional Identity, Nursing Judgement, Human Flourishing NLN PN Integrating Concepts: Safety, Quality, Teamwork/Collaboration, Relationship-Centered Care, Systems-Based Care, Personal/Professional Development Course Description: This course explores the care of adults using a body systems approach. Focus is placed on nursing interventions and developing knowledge required to provide quality nursing care in a safe manner. Content areas include cardiovascular, hematologic, endocrine, and lymphatic systems. Furthermore acid base balance, cancer, bioterrorism, disaster, and trauma are integrated throughout the course. The clinical component of this course allows the student a hands-on experience in providing relationship-centered care for patients with different disease processes in the health care system. Upon completion of this course, the PN student will be able to: Safety Program Outcomes 1,2,3; Course Learning Objectives 1,2,3,4 Integrate safe medication administration.	Midterm		Final	
	S	F	S	F

Take part in principles of safety, including safe use of equipment, safe environment, recognizing patient safety needs, and reducing safety risks.				
Utilize information management as it pertains to health records, nursing science, and evidence-based practice.				
Integrate clinical skills and procedures correctly.				
Demonstrate coordination of care.				
Communicate using SBAR with the interdisciplinary team.				
Apply the scope of practice that govern LPN practice.				
Utilize microbiology concepts related to infection control.				
Quality				
Program Outcomes 1,2,3; Course Learning Objectives 1,2				
Demonstrate concepts of teaching and learning to improve quality of health care.				
Identify relevant health care data that needs collected and organized.				
Identify health needs and problems.				
Take part in basic nursing care concepts while maintaining integrity in addressing the physiological, psychological, cultural and spiritual needs of patients.				
Paraphrase the importance of communication with patients, families and significant individuals.				
Perform documentation of nursing care within health information system.				
Identify health promotion and maintenance behaviors.				
Apply personal capabilities and knowledge base when making decisions about safe and holistic care delivery.				
Practice a nursing judgement decision.				
Distinguish the importance of patient/family satisfaction as a key determinant of quality in practice.				
Prevent complications through the selection of evidenced-based care.				
Teamwork/Collaboration				
Program Outcomes 1,2; Course Learning Objectives 1				
Choose appropriate team members to notify of changes in patient status.				
Collaborate with patients, families, other members of the health care team, and other individuals significant to the patient.				
Utilize clinical experts when situations are beyond expertise and scope of practice.				
Justify data collection and care planning to collaborate with the health care team.				
Utilize members of the health care team in meeting the needs of patients and their families.				
Select health care team members for expert knowledge about patient care needs.				
Relationship-Centered Care				
Program Outcomes 1,2,4; Course Learning Objectives 1				
Apply verbal and non-verbal communication principles to improve relationship-centered interactions.				
Implement and contribute to the plan of care for a patient with multiple medical conditions.				
Implement pharmacological interventions related to patient diagnosis and condition.				
Perform healing, health maintenance, health promotion, disease prevention, and rehabilitation to clients across the lifespan and the continuum of health care environments.				
Utilize the LPN role in encouraging patient self-advocacy.				
Provide caring, compassionate, culturally competent, and evidence-based care while using the nursing process in the health care setting.				
Systems-Based Care				
Program Outcomes 1,2,3; Course Learning Objectives 1,2				
Implement the patient's right to minimal exposure to risk through systems thinking.				
Contribute to the interdisciplinary health care team in addressing patient physiological, psychological, cultural, and spiritual needs.				
Report data to assist in the formulation of health care goals/outcomes, in collaboration with patients, their families, and health care team members.				
Practice collaboratively as a member of the interprofessional health care team to support the unique contributions of the LPN to a robust nursing workforce.				

Apply the Nursing Code of Ethics, Standards of Practice, and policies and procedures of the clinical agency and Herzing University.				
Utilize that both individuals and systems are responsible for patient safety.				
Examine competencies with emerging clinical technologies.				
<i>Personal/Professional Development</i>				
Program Outcomes 2,3,4; Course Learning Objectives 2				
Outline personal beliefs, values, and biases in regard to respect for human dignity, equality, and justice.				
Use self-reflection to assess personal level of competence, adequacy of knowledge base, and areas needing improvement to grow professionally.				
Demonstrate responsibility for own learning and accept constructive guidance.				
Develop a persistent sense of curiosity to think creatively.				
Interact with team members, faculty, and fellow students in a positive, professional manner.				
Attend clinical on time, dressed professionally, prepared, and ready to work.				
Demonstrate respectful appropriate behavior.				
Additional experiences not expected but available: (eg. IV)				

Midterm Comments (Strengths and Weaknesses)

Instructor:

Student:

Remediation strategy for any unsatisfactory areas:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Final Comments:

Instructor:

Student:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Grading Scale Explanation

Scale Label	Quality Of Performance	Assistance
Independent 5	Safe at all times Proficient Coordinated Confident Competent Occasional expenditure of excess energy within realistic time frame Consistently demonstrates synthesis of theory	Functions with occasional rare supporting cues
Supervised 4	Safe at all times Efficient Coordinated Confident Competent Functions with some expenditure of excess energy within a reasonable time period Relates theory to practice with occasional direction	Functions with occasional supportive cues
Assisted 3	Safe with occasional guidance required Sometimes inefficiency Sometimes uncoordinated Occasionally confident Skillful in most behaviors but does expend excessive energy Functions within delayed time period Recognizes theory to practice with frequent direction	Occasional physical and supportive ones
Marginal 2	Requires constant supervision for safe performance Unskilled Inefficient Lacks confidence Expend considerable expenditure of excessive energy Functions only in prolonged time period Occasionally recognizes the relationship of theory to practice with constant direction	Continuous verbal and physical cues required
Dependent 1	Unsafe even with close supervision Unskilled Inefficient Lacks confidence, coordination Constantly expends excessive energy Unable to function within a prolonged time period Unable to relate theory to practice	Continuous verbal and physical cues

Universal Expected Behaviors

1.	<ul style="list-style-type: none"> ○ Implements patient care within a timely manner. ○ Organizes time, resources, and self in the delivery of care. ○ Maintains safe client environment. ○ Is cost conscious while delivering care. ○ Uses nursing and other appropriate theories.
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	<ul style="list-style-type: none"> ○ Apply comprehensive knowledge of health problems and cultural diversity in performing nursing interventions. ○ Uses nursing judgment and decision-making skills to solve problems. ○ Engages in self-reflection and collegial dialogue with instructors and others about practice. ○ Conforms with Patient's Bill of Rights ○ Follows the Code of Conduct.
2.	<ul style="list-style-type: none"> ○ Collects comprehensive data appropriate to the patient (individual, family, group, or population). ○ Conducts thorough data collection techniques in a organized and timely manner. ○ Analyzes all data collected to contribute to the plan of care. ○ Prioritizes nursing diagnoses. ○ Incorporates nursing knowledge and standards of care in the collection of data. ○ Uses principles, established protocols, and practice standards to implement nursing care.
3.	<ul style="list-style-type: none"> ○ Implements interventions based on data collection and nursing diagnoses from the plan of care. ○ Understands outcome criteria that are measurable. ○ Discusses the plan of care with the RN. ○ Communicates care, consideration, and privacy to the client at all times. ○ Uses language expected of a practical nurse when communicating with other professionals. ○ Uses therapeutic communication strategies when communicating with patients.
4.	<ul style="list-style-type: none"> ○ Prepares for clinical experience by acquiring the knowledge, skills, and equipment needed for patient care. ○ Uses medical equipment according to policy and procedures. ○ Respects equipment. ○ Cleans equipment appropriately. ○ Maintains proper storage of equipment. ○ Understands the relationship of the data collected from technological equipment in relation to the patient's condition. ○ Uses technology to obtain and share data.
5.	<ul style="list-style-type: none"> ○ Maintains confidentiality. ○ Adheres to HIPAA standards. ○ Allows for patient privacy. ○ Treats patients in a dignified and respectful manner. ○ Maintains professional boundaries. ○ Practices standard safety precautions. ○ Communicates appropriate and critical information to faculty and staff in a timely manner. ○ Documents data collected, interventions, and response to interventions in a thorough and accurate manner.
6.	<ul style="list-style-type: none"> ○ Assumes the functions of a patient advocate. ○ Is honest and demonstrates personal integrity. ○ Behaves and dresses professionally. ○ Arrives in the clinical area on time and prepared for the day's assignment. ○ Demonstrates self-motivation for learning.
7.	<ul style="list-style-type: none"> ○ Considers developmental, physical, psychological, sociocultural and spiritual needs of the patient in nursing care. ○ Provides relevant and sensitive health education.

	<ul style="list-style-type: none">○ Integrating traditional and complementary health care practices per the plan of care.○ Communication shows sensitivity to sociocultural needs of client.○ Elicits and clarifies patient preferences and values.
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HERZING[®]

— UNIVERSITY —

COURSE SYLLABUS

FACULTY CONTACT INFORMATION	
INSTRUCTOR	Click here to enter text.
PHONE NUMBER	Click here to enter text.
HERZING E-MAIL	Click here to enter text.

DAY	OFFICE HOURS (CENTRAL TIME)
	00:00 am – 00:00 am

Instructional Delivery Method	On Campus			
Class Location				
Semester				
Course Code	NP 230			
Course Title:	Nursing Specialties			
Course Description	This course prepares the practical nursing student with entry level knowledge and skills needed to care for obstetric, neonatal, pediatric, and mental health patient. Learning experiences focus on the normal growth and development of the specialty patients and commonly encountered disorders. Coordination of care, documentation, medication administration, and legal and ethical issues, historical perspectives and emerging trends within the specialties will be emphasized.			
Credit Hours Contact Hours	4 Semester Credit Hours			
	Lecture Hours	Laboratory Hours	Clinical Hours	Total Contact Hours
	45	0	45	90
Study Time	<p>Lecture, Lab, or Internship/Externship/Clinical/Practicum hours as indicated on the syllabus represent scheduled hours spent engaged in learning activities. Students should expect to spend a minimum of two additional hours engaged in learning activities outside of class for each one hour identified as lecture; students should expect to spend one hour engaged in learning activities outside of class for each two hours of scheduled laboratory time. Learning activities outside of class support the achievement of one or more course learning objectives and may be spent reading textbook material, completing homework assignments, preparing for lab assignments, engaged in drill and practice exercises, working on case studies, completing workbook activities, or conducting library research. Additional study time outside of scheduled Internship/Externship/Clinical hours is typically not expected.</p> <p>The total amount of time that students spend engaged in learning activities is consistent, regardless of instructional delivery method. For example, students enrolled a three credit lecture course should expect to spend 45 hours in scheduled class time and an additional 90 hours engaged in learning activities outside of the classroom. Online or blended students should expect to spend the equivalent total of 135 hours engaged in learning activities if they are enrolled in the same course.</p> <p>Determination of the amount of time that a student should expect to spend engaged in learning activities is based upon faculty judgment regarding the average student. The amount of time spent engaged in learning activities is expected to vary among students, based upon previous knowledge of the content, learning style, learning ability, difficulty of the course, and student motivation.</p>			

	<i>The timeframes provided below are estimates based upon the average student.</i>	
Guide to Student Engagement in Learning Activities	Lower level reading (10-20 pages) 1 hour Higher level reading (10-20 pages) 2 hours Construction of 1 page paper (250 words) 2 hours Development of 10 minute speech 2 hours Watch video lecture 1 hour Read, research and respond to discussion board posting 1 hour Preparation for unit examination 2 hours	
Course Length	8 Weeks	
Prerequisites	NP 125: Medical Surgical Nursing I for LPN's	
Co-requisites	N/A	
Course Learning Objectives	Upon successful completion of this course, students should be able to: <ol style="list-style-type: none"> 1) Provide safe, quality, atraumatic, relationship-centered nursing care of the specialty patients and families. 2) Integrate nursing interventions as appropriate for the practical nurse in the care of the specialty patients and families. 3) Implement written, verbal and nonverbal communication strategies to communicate effectively with the specialty patients, their families, and other healthcare professionals. 4) Compare the legal and ethical factors associated with care for the specialty patients and their families. 	
Program Learning Outcomes Supported	Program Learning Outcome	Course Learning Objective Supported
	<ol style="list-style-type: none"> 1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. 2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. 3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. 4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. 	<ol style="list-style-type: none"> 1,4 3 4 2
Required Textbook(s)	Leifer, G. (2015). Introduction to maternity and pediatric nursing (7th ed.). St. Louis, MO: Elsevier Saunders ISBN: 978-1-4557-7015-1 Morrison-Valfre, M. (2017). Foundations of mental health care (6th ed.). St. Louis, MO: Elsevier ISBN: 978-0-323-35492-9	
Optional Textbook(s)	NONE	
Additional Learning Material(s)	Evolve: https://evolve.elsevier.com Resources for your e-book can be found here. Simulation will be included as permitted by the respective Board of Nursing.	

E-book page numbers subject to change based upon publisher updates. Please check with instructor for updated page numbers as needed.

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
Unit 1	[class date]	<p>Topic(s): Mental health care, influence of war introduction of psychotherapeutic drugs, care settings, care team, values and morals, rights, ethics, care providers responsibilities, cognitive theories, psychotherapies, brain stimulation therapy, classification of psychotherapeutic drugs, client care guidelines principles of care, skills for mental health care, DSM5, nursing process, assessment, mental status assessment, characteristics of communication, levels of communication, cultural communication, therapeutic skills, ethical & legal aspects of care</p> <p>Reading: Morrison-Valfre Chapters: 1,2,3,5,7,8,9,10,11,12 Textbook/E-Book: p. 2, 5, 6, 11-18, 20-28, 47-49, 52-53, 66-77, 79-90, 92-99, 103-113, 116-120, 128-134</p>	1,2,3,4		
Unit 2	[class date]	<p>Topic(s): Common childhood issues, environmental problems, homelessness, abuse and neglect, emotional problems, behavioral problems, problems with eating and elimination, developmental problems, therapeutic actions, psychosocial development, common problems of adolescence, mental health problems, therapeutic interventions, common problems, mental health problems, overview of aging, common problems, mental health problems, therapeutic interventions, clients with delirium, Alzheimer's disease, support systems, therapeutic interventions, caregiver support, types of anxiety, types of anxiety responses, anxiety through the life cycle, anxiety disorders, therapeutic interventions, hospitalization experience, therapeutic interventions, the nature of loss, loss behaviors, grief and mourning, therapeutic interventions, mood disorders, therapeutic intervention, common psychophysical problems, somatic symptom disorders, key interventions for clients with psychophysical problems, eating disorders, sleep-wake disorders, dissociative disorders, therapeutic intervention, ethical & legal aspects of care</p> <p>Reading: Morrison-Valfre Chapters: 13,14,15,16,17,18,19,20,21,22,23,24 Textbook/E-Book: Morrison-Valfre p. 140-151, 155-167, 171-176, 178-189, 193-201 203-206, 208-215, 220-224, 226-230, 232-235, 240-249, 253-259, 263-274, and 278-284</p> <p>Assignment: Mental Status Assessment Project on clinical patient</p> <p>Assessment(s): Quiz #1</p> <p>Assessment(s): Exam #1</p> <p>Simulation: Therapeutic interventions with the mental health client</p>	<p>1,2,3,4</p> <p>1,2,3</p> <p>1,2,3</p> <p>1,2,3</p>	<p>100</p> <p>20</p> <p>80</p>	

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
Unit 3	[class date]	<p>Topic(s): The cycle of assault, anger control disorders, interventions, abuse neglect and exploitation within the family, abuse neglect and exploitation within the community, mental health disorders relating to violence, therapeutic interventions, impact of suicide on society, dynamics of suicide, suicide through the life cycle, therapeutic interventions, sexual disorders, transgender, therapeutic intervention, personality disorders: cluster a, b, & c, schizophrenia, therapeutic intervention, drug use and abuse, ethical & legal aspects of care</p> <p>Reading: Morrison-Valfre Chapters: 25,26,27,29,30,31,33 Textbook/E-Book: Morrison-Valfre p. 290-296, 300-311, 315-323, 347, 350, 356-359, 368, 392</p> <p>Assessment(s): Quiz #2 Assessment(s): Exam #2</p>	<p>1,2,3,4</p> <p>1,2,3 1,2,3</p>	<p>20 80</p>	
Unit 4	[class date]	<p>Topic(s): Maternity nursing, past history, present history, maternal newborn nursing & women's health, human reproductive A & P, reproductive systems-female, fetal development, fertilization, inheritance, development of the fetus, accessory structures of pregnancy, fetal circulation, prenatal care & adaptations to pregnancy, prenatal visits, determining the EDD, TPAL, diagnosis of pregnancy, physiological changes in pregnancy, nutrition for lactation and pregnancy, travel, common discomforts, psychosocial adaptation, prenatal education, nursing care during pregnancy, nursing care of women with complications during pregnancy, danger signs in pregnancy, fetal diagnostic test, pregnancy related complications: hyperemesis gravidarum, bleeding disorders, HTN in pregnancy, & RH and ABO incompatibility, pregnancy complicated by comorbidities: diabetes mellitus, anemia, infections, & substance abuse, trauma in pregnancy, effects of high risk pregnancy on the family, nursing care of mother & infant during labor & birth, cultural considerations, 4 ps of labor: powers, passage, passengers, & psyche, normal childbirth, admission, position of fetus, true labor vs false labor, fetal monitoring, maternal monitoring, stages of labor, nursing responsibilities during a birth, nursing care after birth, nursing care of neonate after birth, nursing management of pain during labor & birth: non-pharmacologic techniques & pharmacologic pain management, ethical & legal aspects of care</p> <p>Reading: Leifer Chapters 1,2,3,4,5,6,7,8 Textbook/E-Book: Leifer p. 2-4, 6-10, 22-28, 33-40, 45-62, 64-75, 79-112, 116-128, 130-153, &162-172</p> <p>Assessment(s): Quiz #3 Assessment(s): Exam #3</p>	<p>1,2,4</p> <p>1,2 1,2</p>	<p>20 80</p>	
Unit 5	[class date]	<p>Topic(s): Nursing care of women with complications during labor & birth, obstetric procedures: amnioinfusion, induction or augmentation of labor,</p>	<p>1,2,4</p>		

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
		<p>episiotomy and lacerations, forceps and vacuum extraction, cesarean birth, problems with powers of labor, problems with fetus, problems with pelvis/soft tissue, problems with psyche, abnormal duration of labor, pre-term labor, post term pregnancy, emergencies in labor, the family after birth: cultural impact, postpartum assessment, cardiovascular changes, urinary changes, musculoskeletal changes, RHO (d) immune globulin, adaptations after C-section, emotional considerations for mom, dad, grandparents, siblings, care of the newborn, breastfeeding , bottle feeding, self-care and discharge education, nursing care of women with complications after birth: hemorrhage, blood clots, infection, & mood disorders, the nurses role in women's health care: STIs & family planning, Term newborn: adjustment to extra uterine life, assessment of term newborn, preventing infection, discharge planning-teaching. Preterm & post-term newborns and discharge of preterm, the newborn with a perinatal injury or congenital malformation: birth defects, malformations present at birth, perinatal injuries –ABO incompatibility, neonatal abstinence, infant of diabetic mother, ethical & legal aspects of care</p> <p>Reading: Leifer Chapters 8,9,10,11,12,13,14 Textbook/E-Book: Leifer p. 174-183, 185-196, 200, 205, 206-214, 215-234, 237-248, 256-269, 281-305, 308-322, 324-344, 346-347</p> <p>Assignment(s): Perinatal Unfolding Case Studies: Unfolding case study:labor</p> <p>Perinatal Unfolding Case Studies: Unfolding case study:postpartum complications</p> <p>Assessment(s): Quiz #4</p> <p>Assessment(s): Exam #4</p>		
			1,2	25
			1,2	25
			1,2	20
			1,2	80
Unit 6	[class date]	<p>Topic(s): Adapting care to the pediatric patient: child's experience, pain, nurse's role, confidentiality, & discharge planning, the child's experience of hospitalization by age, health care adaptations for the child & family: informed consent, & safety, Pediatric: assessment, procedures/treatments, medication administration, Pediatric sensory or neurological condition: ears & eyes, Reye's syndrome, infections, seizures, cerebral palsy, cognitive impairment, & head injuries, Pediatric musculoskeletal condition: trauma, osteomyelitis, muscular dystrophy, SCFE, leg-calve perthes, sarcomas, scoliosis, & child abuse, Pediatric respiratory disorder: infections, asthma, cystic fibrosis, bpd, & SIDS; the child with a cardiovascular disorder: congenital heart defects & acquired heart disease Pediatric condition of the blood, blood-forming organs, or lymphatic system: blood, anemias, sickle cell, hemophilia, & leukemia; Pediatric gastrointestinal condition: esophageal</p>	1,2,4	

TOPICS AND LEARNING ACTIVITIES		Course Learning Objective Supported	Points Possible	DUE DATE
		atresia, pyloric stenosis, Hirschsprung's disease, gastroenteritis, GER, diarrhea/constipation, fluid and electrolyte imbalance, appendicitis, thrush, & poisoning, ethical & legal aspects of care Reading: Leifer Chapters 21,22,23,24,25,26,27,28 Textbook/E-Book: Leifer p. 470-479,479-483, 483-484, 486-520, 524-552, 558-575, 578-603, 605-615, 617-618, 620-633, 643-657, 660-667 Assessment(s): Quiz #5 Assessment(s): Exam #5	1,2 1,2	20 80
Unit 7	[class date]	Topic(s): Pediatric: chronic illness & death and dying; the child with a genitourinary condition: hypospadias, UTI, nephrotic syndrome, glomerulonephritis; Pediatric skin condition: dermatitis, impetigo, fungal infections, lice/scabies, & burns; Pediatric with a metabolic condition diabetes, Pediatric Communicable diseases, infection/immunity, immunizations, bioterrorism, STIs; the child with an emotional or behavioral condition: autism, ADHD, anorexia/bulimia, depression/suicide, ethical & legal aspects of care Reading: Leifer Chapters 27,29,30,31,32,33 Textbook/E-Book: Leifer p. 636-638, 672-675, 677-678, 687, 689-696, 700-701, 705-719, 722-731, 737-743, 748-754 Assessment(s): Pediatric Case Study Assignment Assessment(s): Quiz #6 Assessment(s): Exam #6	1,2,4 1,2 1,2 1,2	50 20 80
Unit 8	[class date]	Assessment(s): Comprehensive Final Exam		200

Grade Summary	Points
Mental Health Status Assessment	100
Perinatal Unfolding Case Studies (X2)	50
Pediatric Case Study Assignment	50
6 Quizzes (20 pointsX6)	120
6 Exams (80 points eachX6)	480
Final Exam	200
Clinical	P/F
Totals	1000

Grade Scale		Quality Points
A	90.00% - 100.00%	4.0
B	80.00% - 89.99%	3.0
C	76.00% - 79.99%	2.0
F	0.00% - 75.99%	0.0
I	Incomplete	

POLICIES

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ARE INCLUDED IN THE UNIVERSITY CATALOG. STUDENTS SHOULD REFERENCE THE CATALOG FOR THE COMPLETE LISTING OF POLICIES.

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HERZING UNIVERSITY

LPN PROGRAM

Clinical Performance Evaluation Tool NP 230 Nursing Specialty

Grading Scale:
 5 = Independent (pass)
 4 = Supervised (pass)
 3 = Assisted (pass)
 2 = Marginal (fail)
 1 = Dependent (fail)
 X = Unable to Evaluate

See detailed explanation
of grading scale at the end.

Student Name _____ Instructor Name _____

Term _____ Cohort _____

Clinical Objectives: There are specific clinical learning objectives that must be met to successfully pass this course. These are part of the broader expected universal expected behaviors listed on the last pages, which must be met to signify the student has mastered the program outcomes. A passing grade must be received in all objectives and outcomes by final evaluation in order to pass the course.

This clinical evaluation tool is designed based upon program outcomes, NLN Core Competencies, and six Integrating Concepts. Program Outcomes	Midterm		Final	
	S	F	S	F
1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice. 2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families. 3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse. 4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth. NLN PN Core Competencies: Spirit of Inquiry, Professional Identity, Nursing Judgement, Human Flourishing NLN PN Integrating Concepts: Safety, Quality, Teamwork/Collaboration, Relationship-Centered Care, Systems-Based Care, Personal/Professional Development				
This course prepares the practical nursing student with entry level knowledge and skills needed to care for obstetric, neonatal, pediatric, and mental health patient. Learning experiences focus on the normal growth and development of the specialty patients and commonly encountered disorders. Coordination of care, documentation, medication administration, and legal and ethical issues, historical perspectives and emerging trends within the specialties will be emphasized. Upon completion of this course, the PN student will be able to:	S	F	S	F
Safety				
Program Outcomes 1,2,3; Course Learning Objectives 1,2,3,4				
Integrate safe medication administration.				
Implementing principles of safety, including safe use of equipment, safe environment, recognizing patient safety needs, and reducing safety risks.				

Utilize information management as it pertains to health records, nursing science, and evidence-based practice.				
Perform clinical skills and procedures correctly.				
Demonstrate coordination of care.				
Communicate using SBAR with the interdisciplinary team.				
Explain the scope of practice that govern LPN practice.				
Interpret microbiology concepts related to infection control.				
Quality				
Program Outcomes 1,2,3; Course Learning Objectives 1,3				
Explain concepts of teaching and learning to improve quality of health care.				
Predict relevant health care data that needs collected and organized.				
Discuss health needs and problems.				
Apply basic nursing care concepts while maintaining integrity in addressing the physiological, psychological, cultural and spiritual needs of patients.				
Paraphrase the importance of communication with patients, families and significant individuals.				
Perform documentation of nursing care within health information system.				
Interpret health promotion and maintenance behaviors.				
Match personal capabilities and knowledge base when making decisions about safe and holistic care delivery.				
Clarify a nursing judgement decision.				
Make use of the importance of patient/family satisfaction as a key determinant of quality in practice.				
Prevent complications through the selection of evidenced-based care.				
Teamwork/Collaboration				
Program Outcomes 1,2; Course Learning Objectives 3				
Summarize appropriate team members to notify of changes in patient status.				
Collaborate with patients, families, other members of the health care team, and other individuals significant to the patient.				
Utilize clinical experts when situations are beyond expertise and scope of practice.				
Take part in data collection and care planning to collaborate with the health care team.				
Compare members of the health care team in meeting the needs of patients and their families.				
Select health care team members for expert knowledge about patient care needs.				
Relationship-Centered Care				
Program Outcomes 1,2,4; Course Learning Objectives 1,2,3				
Summarize verbal and non-verbal communication principles to improve relationship-centered interactions.				
Implement and contribute to the plan of care for a patient with multiple medical conditions.				
Compare pharmacological interventions related to patient diagnosis and condition.				
Explain healing, health maintenance, health promotion, disease prevention, and rehabilitation to clients across the lifespan and the continuum of health care environments.				
Demonstrate the LPN role in encouraging patient self-advocacy.				
Provide caring, compassionate, culturally competent, and evidence-based care while using the nursing process in the health care setting.				
Systems-Based Care				
Program Outcomes 1,2,3; Course Learning Objectives 1,3				
Explain the patient's right to minimal exposure to risk through systems thinking.				
Contribute to the interdisciplinary health care team in addressing patient physiological, psychological, cultural, and spiritual needs.				
Report data to assist in the formulation of health care goals/outcomes, in collaboration with patients, their families, and health care team members.				
Practice collaboratively as a member of the interprofessional health care team to support the unique contributions of the LPN to a robust nursing workforce.				
Apply the Nursing Code of Ethics, Standards of Practice, and policies and procedures of the clinical agency and Herzing University.				

Explain that both individuals and systems are responsible for patient safety.				
Make use of competencies with emerging clinical technologies.				
<i>Personal/Professional Development</i>				
Program Outcomes 2,3,4; Course Learning Objectives 1				
Explain personal beliefs, values, and biases in regard to respect for human dignity, equality, and justice.				
Use self-reflection to assess personal level of competence, adequacy of knowledge base, and areas needing improvement to grow professionally.				
Show responsibility for own learning and accept constructive guidance.				
Develop a persistent sense of curiosity to think creatively.				
Interact with team members, faculty, and fellow students in a positive, professional manner.				
Attend clinical on time, dressed professionally, prepared, and ready to work.				
Demonstrate respectful appropriate behavior.				
Additional experiences not expected but available: (eg. IV)				

Midterm Comments (Strengths and Weaknesses)

Instructor:

Student:

Remediation strategy for any unsatisfactory areas:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Final Comments:

Instructor:

Student:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Grading Scale Explanation

Scale Label	Quality Of Performance	Assistance
Independent 5	Safe at all times Proficient Coordinated Confident Competent Occasional expenditure of excess energy within realistic time frame Consistently demonstrates synthesis of theory	Functions with occasional rare supporting cues
Supervised 4	Safe at all times Efficient Coordinated Confident Competent Functions with some expenditure of excess energy within a reasonable time period Relates theory to practice with occasional direction	Functions with occasional supportive cues
Assisted 3	Safe with occasional guidance required Sometimes inefficiency Sometimes uncoordinated Occasionally confident Skillful in most behaviors but does expend excessive energy Functions within delayed time period Recognizes theory to practice with frequent direction	Occasional physical and supportive ones
Marginal 2	Requires constant supervision for safe performance Unskilled Inefficient Lacks confidence Expend considerable expenditure of excessive energy Functions only in prolonged time period Occasionally recognizes the relationship of theory to practice with constant direction	Continuous verbal and physical cues required
Dependent 1	Unsafe even with close supervision Unskilled Inefficient Lacks confidence, coordination Constantly expends excessive energy Unable to function within a prolonged time period Unable to relate theory to practice	Continuous verbal and physical cues

Universal Expected Behaviors

1.	<ul style="list-style-type: none"> ○ Implements patient care within a timely manner. ○ Organizes time, resources, and self in the delivery of care. ○ Maintains safe client environment. ○ Is cost conscious while delivering care. ○ Uses nursing and other appropriate theories.
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	<ul style="list-style-type: none"> ○ Apply comprehensive knowledge of health problems and cultural diversity in performing nursing interventions. ○ Uses nursing judgment and decision-making skills to solve problems. ○ Engages in self-reflection and collegial dialogue with instructors and others about practice. ○ Conforms with Patient's Bill of Rights ○ Follows the Code of Conduct.
2.	<ul style="list-style-type: none"> ○ Collects comprehensive data appropriate to the patient (individual, family, group, or population). ○ Conducts thorough data collection techniques in a organized and timely manner. ○ Analyzes all data collected to contribute to the plan of care. ○ Prioritizes nursing diagnoses. ○ Incorporates nursing knowledge and standards of care in the collection of data. ○ Uses principles, established protocols, and practice standards to implement nursing care.
3.	<ul style="list-style-type: none"> ○ Implements interventions based on data collection and nursing diagnoses from the plan of care. ○ Understands outcome criteria that are measurable. ○ Discusses the plan of care with the RN. ○ Communicates care, consideration, and privacy to the client at all times. ○ Uses language expected of a practical nurse when communicating with other professionals. ○ Uses therapeutic communication strategies when communicating with patients.
4.	<ul style="list-style-type: none"> ○ Prepares for clinical experience by acquiring the knowledge, skills, and equipment needed for patient care. ○ Uses medical equipment according to policy and procedures. ○ Respects equipment. ○ Cleans equipment appropriately. ○ Maintains proper storage of equipment. ○ Understands the relationship of the data collected from technological equipment in relation to the patient's condition. ○ Uses technology to obtain and share data.
5.	<ul style="list-style-type: none"> ○ Maintains confidentiality. ○ Adheres to HIPAA standards. ○ Allows for patient privacy. ○ Treats patients in a dignified and respectful manner. ○ Maintains professional boundaries. ○ Practices standard safety precautions. ○ Communicates appropriate and critical information to faculty and staff in a timely manner. ○ Documents data collected, interventions, and response to interventions in a thorough and accurate manner.
6.	<ul style="list-style-type: none"> ○ Assumes the functions of a patient advocate. ○ Is honest and demonstrates personal integrity. ○ Behaves and dresses professionally. ○ Arrives in the clinical area on time and prepared for the day's assignment. ○ Demonstrates self-motivation for learning.
7.	<ul style="list-style-type: none"> ○ Considers developmental, physical, psychological, sociocultural and spiritual needs of the patient in nursing care. ○ Provides relevant and sensitive health education.

	<ul style="list-style-type: none">○ Integrating traditional and complementary health care practices per the plan of care.○ Communication shows sensitivity to sociocultural needs of client.○ Elicits and clarifies patient preferences and values.
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HERZING[®]

— UNIVERSITY —

COURSE SYLLABUS

FACULTY CONTACT INFORMATION	
INSTRUCTOR	Click here to enter text.
PHONE NUMBER	Click here to enter text.
HERZING E-MAIL	Click here to enter text.

DAY	OFFICE HOURS (CENTRAL TIME)
	00:00 am – 00:00 am

Instructional Delivery Method	On Campus			
Class Location				
Semester				
Course Code	NP 275			
Course Title:	LPN Practical Experience			
Course Description	This is the final clinical course, where the student will utilize nursing skills and nursing judgement to perform safe, moral, quality, and prudent patient care in the health care system. The role of the practical nurse is stressed in physiology, pathophysiology, and psychosocial context as it relates to the care of patients. The course will assist in the personal and professional development needed to transition from student to practical nurse.			
Credit Hours Contact Hours	3 Semester Credit Hours			
	Lecture Hours	Laboratory Hours	Clinical Hours	Total Contact Hours
	0	0	135	135
Study Time	<p>Lecture, Lab, or Internship/Externship/Clinical/Practicum hours as indicated on the syllabus represent scheduled hours spent engaged in learning activities. Students should expect to spend a minimum of two additional hours engaged in learning activities outside of class for each one hour identified as lecture; students should expect to spend one hour engaged in learning activities outside of class for each two hours of scheduled laboratory time. Learning activities outside of class support the achievement of one or more course learning objectives and may be spent reading textbook material, completing homework assignments, preparing for lab assignments, engaged in drill and practice exercises, working on case studies, completing workbook activities, or conducting library research. Additional study time outside of scheduled Internship/Externship/Clinical hours is typically not expected.</p> <p>The total amount of time that students spend engaged in learning activities is consistent, regardless of instructional delivery method. For example, students enrolled a three credit lecture course should expect to spend 45 hours in scheduled class time and an additional 90 hours engaged in learning activities outside of the classroom. Online or blended students should expect to spend the equivalent total of 135 hours engaged in learning activities if they are enrolled in the same course.</p> <p>Determination of the amount of time that a student should expect to spend engaged in learning activities is based upon faculty judgment regarding the average student. The amount of time spent engaged in learning activities is expected to vary among students, based upon previous knowledge of the content, learning style, learning ability, difficulty of the course, and student motivation.</p>			

	<i>The timeframes provided below are estimates based upon the average student.</i>	
Guide to Student Engagement in Learning Activities	Lower level reading (10-20 pages)	1 hour
	Higher level reading (10-20 pages)	2 hours
	Construction of 1 page paper (250 words)	2 hours
	Development of 10 minute speech	2 hours
	Watch video lecture	1 hour
	Read, research and respond to discussion board posting	1 hour
	Preparation for unit examination	2 hours
Course Length	8 Weeks	
Prerequisites	All PN program courses	
Co-requisites	NP280: Preparation for NCLEX-PN	
Course Learning Objectives	<p>Upon successful completion of this course, students should be able to:</p> <ol style="list-style-type: none"> 1. Explain the characteristics of a safe and effective care environment. 2. Apply knowledge to a client's situational changes, including legal, ethical, and moral considerations. 3. Collaborate with other health care professionals in providing nursing care that supports patients and families growth. 4. Prioritize patient care based on the NCLEX-PN client need categories. 5. Demonstrate professional nursing behaviors, nursing judgement, and personal/professional growth in the healthcare setting. 	
Program Learning Outcomes Supported	Program Learning Outcome	Course Learning Objective Supported
	1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice.	1,3,4
	2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families.	3,5
	3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse.	2,5
	4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth.	3,5
Required Textbook(s)	<p>All books utilized throughout the program</p> <p>Leifer, G. & Fleck, E. (2013). Growth and development across the lifespan: A health promotion focus (2nd ed.). St. Louis, MO: Elsevier</p> <p>Morris, D. (2018). Calculate with confidence (7th ed.). St. Louis, MO: Elsevier</p> <p>Workman, M & LaCharity, L. (2016). Understanding pharmacology: Essentials for medication safety (2nd ed.). St. Louis, MO: Elsevier</p> <p>Skidmore, L. (2017). Mosby's drug guide for nursing students (12th ed.). St. Louis, MO: Elsevier</p> <p>Williams, P. (2018). DeWit's fundamental concepts and skills for nursing (5th ed.). St. Louis, MO: Elsevier</p> <p>Ackley, B., Ladwig, G. & Makic, M. (2017). Nursing diagnosis handbook: An evidence-based guide to planning care (11 ed.). St. Louis, MO: Elsevier</p>	

	<p>deWit, S., Stromberg, H., & Dallred, C. (2017). Medical-surgical nursing: Concepts and practice (3rd ed.). St. Louis, MO: Elsevier</p> <p>Pagana, K., & Pagana, T. (2018). Mosby's manual of diagnostic and laboratory tests (6th ed.). St. Louis, MO: Elsevier</p> <p>Leifer, G. (2015). Introduction to maternity and pediatric nursing (7th ed.). St. Louis, MO: Elsevier</p> <p>Morrison-Valfre, M. (2017). Foundations of mental health care (6th ed.). St. Louis, MO: Elsevier</p>
Additional Learning Material(s)	<p>Evolve: https://evolve.elsevier.com Resources for your e-book can be found here.</p> <p>Simulation will be included as <i>permitted</i> by the respective Board of Nursing.</p>

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
Unit 1	[class date]	<p>Topic(s): MUST COMPLETE A TOTAL OF AT LEAST 135 HOURS OF PRECEPTING IN A HEALTH CARE FACILITY TO SUCCESSFULLY COMPLETE THE COURSE. OVERALL, UNSATISFACTORY PERFORMANCE REPORTED BY A PRECEPTOR WILL BE EVALUATED BY THE INSTRUCTOR, AND MAY RESULT IN A COURSE FAILURE.</p> <p>Assessment(s): Students will attend clinical experiences in their nursing uniform and will be prepared to function as a nurse on their respective clinical units. Minimally, a pen, badge, personal stethoscope, and note pad are required.</p>	1, 2, 3, 4, 5	P/F	
Unit 2	[class date]	<p>Assessment(s): Practicum hours</p> <p>Simulation: Caring for multiple patients</p>	1, 2, 3, 4, 5	P/F	
Unit 3	[class date]	<p>Assignment(s): <i>Discussion Board/Reflective Journaling:</i> Nursing process <i>Discussion Board Case Study:</i> Annual Exam Visit</p> <p>Assessment(s): Practicum hours</p>	2 1 1, 2, 3, 4, 5	100 100 P/F	
Unit 4	[class date]	<p>Assignment(s): <i>Discussion Board/Reflective Journaling:</i> Nursing care concepts <i>Discussion Board Case Study:</i> Eating and Coughing Assessment</p> <p>Assessment(s): Practicum hours</p>	1 1 1, 2, 3, 4, 5	100 100 P/F	
Unit 5	[class date]	<p>Assignment(s): <i>Discussion Board/Reflective Journaling:</i> Safe and effective care environment and coordinated care <i>Discussion Board Case Study:</i> Coordinated Care</p> <p>Assessment(s): Practicum hours</p>	1 1,3 1, 2, 3, 4, 5	100 100 P/F	
Unit 6	[class date]	<p>Assignment(s): <i>Discussion Board/Reflective Journaling:</i> Legal, ethical, historical, and emerging issues <i>Discussion Board Case Study:</i> Seizure Care</p> <p>Assessment(s): Practicum hours</p>	1, 2 1 1, 2, 3, 4, 5	100 100 P/F	
Unit 7	[class date]	<p>Assignment(s): <i>Discussion Board/Reflective Journaling:</i> Religious, spiritual, cultural, gender identity, sexuality, and/or growth and development <i>Discussion Board Case Study:</i> Diabetic Care</p> <p>Assessment(s): Practicum Hours Log signed by Preceptor Student Evaluation by Preceptor/Faculty Herzing Satisfaction Survey by Preceptor Student Evaluation of Preceptor Clinical Site Evaluation by Student</p>	1 1	100 100 P/F P/F P/F P/F P/F	
Unit 8	[class date]	<p>Assessment(s): All practicum hours must be completed prior to Monday of finals week.</p>			

Grade Summary	Points
Discussion Board Case Studies 100 points X 5 weeks	500
Discussion Board/Reflective Journaling 100 points X 5 weeks	500
Student Evaluation by Preceptor/Faculty	P/F
Practicum Hours Log	P/F
Herzing Satisfaction Survey by Preceptor	P/F
Student Evaluation of Preceptor	P/F
Clinical Site Evaluation by Student	P/F
Totals	1,000

Grade Scale		Quality Points
A	90.00% - 100.00%	4.0
B	80.00% - 89.99%	3.0
C	76.00% - 79.99%	2.0
F	0.00% - 75.99%	0.0
I	Incomplete	

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HERZING UNIVERSITY

LPN PROGRAM

Clinical Performance Evaluation Tool NP 275 LPN Practical Experience

Grading Scale:
5 = Independent (pass)
4 = Supervised (pass)
3 = Assisted (pass)
2 = Marginal (fail)
1 = Dependent (fail)
X = Unable to Evaluate

See detailed explanation
of grading scale at the end.

Student Name _____ Instructor Name _____

Term _____ Cohort _____

Clinical Objectives: There are specific clinical learning objectives that must be met to successfully pass this course. These are part of the broader expected universal expected behaviors listed on the last pages, which must be met to signify the student has mastered the program outcomes. A passing grade must be received in all objectives and outcomes by final evaluation in order to pass the course.

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	S	F	S	F
Course Description: This is the final clinical course, where the student will utilize nursing skills and nursing judgement to perform safe, moral, quality, and prudent patient care in the health care system. The role of the practical nurse is stressed in physiology, pathophysiology, and psychosocial context as it relates to the care of patients. The course will assist in the personal and professional development needed to transition from student to practical nurse. Upon completion of this course, the PN student will be able to:				
Safety Program Outcomes 1,2,3; Course Learning Objectives 1,2,4				
Integrate safe medication administration.				
Take part in principles of safety, including safe use of equipment, safe environment, recognizing patient safety needs, and reducing safety risks.				

Utilize information management as it pertains to health records, nursing science, and evidence-based practice.				
Integrate clinical skills and procedures correctly.				
Demonstrate coordination of care.				
Communicate using SBAR with the interdisciplinary team.				
Apply the scope of practice that govern LPN practice.				
Utilize microbiology concepts related to infection control.				
Quality				
Program Outcomes 1,2,3; Course Learning Objectives 1,2,5				
Demonstrate concepts of teaching and learning to improve quality of health care.				
Identify relevant health care data that needs collected and organized.				
Identify health needs and problems.				
Take part in basic nursing care concepts while maintaining integrity in addressing the physiological, psychological, cultural and spiritual needs of patients.				
Demonstrate the importance of communication with patients, families and significant individuals.				
Perform documentation of nursing care within health information system.				
Identify health promotion and maintenance behaviors.				
Apply personal capabilities and knowledge base when making decisions about safe and holistic care delivery.				
Outline a nursing judgement decision.				
Distinguish the importance of patient/family satisfaction as a key determinant of quality in practice.				
Prevent complications through the selection of evidenced-based care.				
Teamwork/Collaboration				
Program Outcomes 1,2; Course Learning Objectives 1,3				
Choose appropriate team members to notify of changes in patient status.				
Collaborate with patients, families, other members of the health care team, and other individuals significant to the patient.				
Utilize clinical experts when situations are beyond expertise and scope of practice.				
Justify data collection and care planning to collaborate with the health care team.				
Utilize members of the health care team in meeting the needs of patients and their families.				
Select health care team members for expert knowledge about patient care needs.				
Relationship-Centered Care				
Program Outcomes 1,2,4; Course Learning Objectives 1,2				
Apply verbal and non-verbal communication principles to improve relationship-centered interactions.				
Implement and contribute to the plan of care for a patient with multiple medical conditions.				
Implement pharmacological interventions related to patient diagnosis and condition.				
Perform healing, health maintenance, health promotion, disease prevention, and rehabilitation to clients across the lifespan and the continuum of health care environments.				
Utilize the LPN role in encouraging patient self-advocacy.				
Provide caring, compassionate, culturally competent, and evidence-based care while using the nursing process in the health care setting.				
Systems-Based Care				
Program Outcomes 1,2,3; Course Learning Objectives 1,2				
Implement the patient's right to minimal exposure to risk through systems thinking.				
Contribute to the interdisciplinary health care team in addressing patient physiological, psychological, cultural, and spiritual needs.				
Report data to assist in the formulation of health care goals/outcomes, in collaboration with patients, their families, and health care team members.				
Practice collaboratively as a member of the interprofessional health care team to support the unique contributions of the LPN to a robust nursing workforce.				
Apply the Nursing Code of Ethics, Standards of Practice, and policies and procedures of the clinical agency and Herzing University.				

Utilize that both individuals and systems are responsible for patient safety.				
Examine competencies with emerging clinical technologies.				
Personal/Professional Development				
Program Outcomes 2,3,4; Course Learning Objectives 1,5				
Outline personal beliefs, values, and biases in regard to respect for human dignity, equality, and justice.				
Use self-reflection to assess personal level of competence, adequacy of knowledge base, and areas needing improvement to grow professionally.				
Demonstrate responsibility for own learning and accept constructive guidance.				
Develop a persistent sense of curiosity to think creatively.				
Interact with team members, faculty, and fellow students in a positive, professional manner.				
Attend clinical on time, dressed professionally, prepared, and ready to work.				
Demonstrate respectful appropriate behavior.				
Additional experiences not expected but available: (eg. IV)				

Midterm Comments (Strengths and Weaknesses)

Instructor:

Student:

Remediation strategy for any unsatisfactory areas:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Final Comments:

Instructor:

Student:

Student Signature _____ Date _____
Instructor Signature _____ Date _____

Grading Scale Explanation

Scale Label	Quality Of Performance	Assistance
Independent 5	Safe at all times Proficient Coordinated Confident Competent Occasional expenditure of excess energy within realistic time frame Consistently demonstrates synthesis of theory	Functions with occasional rare supporting cues
Supervised 4	Safe at all times Efficient Coordinated Confident Competent Functions with some expenditure of excess energy within a reasonable time period Relates theory to practice with occasional direction	Functions with occasional supportive cues
Assisted 3	Safe with occasional guidance required Sometimes inefficiency Sometimes uncoordinated Occasionally confident Skillful in most behaviors but does expend excessive energy Functions within delayed time period Recognizes theory to practice with frequent direction	Occasional physical and supportive ones
Marginal 2	Requires constant supervision for safe performance Unskilled Inefficient Lacks confidence Expend considerable expenditure of excessive energy Functions only in prolonged time period Occasionally recognizes the relationship of theory to practice with constant direction	Continuous verbal and physical cues required
Dependent 1	Unsafe even with close supervision Unskilled Inefficient Lacks confidence, coordination Constantly expends excessive energy Unable to function within a prolonged time period Unable to relate theory to practice	Continuous verbal and physical cues

Universal Expected Behaviors

1.	<ul style="list-style-type: none"> ○ Implements patient care within a timely manner. ○ Organizes time, resources, and self in the delivery of care. ○ Maintains safe client environment. ○ Is cost conscious while delivering care. ○ Uses nursing and other appropriate theories.
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	<ul style="list-style-type: none"> ○ Apply comprehensive knowledge of health problems and cultural diversity in performing nursing interventions. ○ Uses nursing judgment and decision-making skills to solve problems. ○ Engages in self-reflection and collegial dialogue with instructors and others about practice. ○ Conforms with Patient's Bill of Rights ○ Follows the Code of Conduct.
2.	<ul style="list-style-type: none"> ○ Collects comprehensive data appropriate to the patient (individual, family, group, or population). ○ Conducts thorough data collection techniques in a organized and timely manner. ○ Analyzes all data collected to contribute to the plan of care. ○ Prioritizes nursing diagnoses. ○ Incorporates nursing knowledge and standards of care in the collection of data. ○ Uses principles, established protocols, and practice standards to implement nursing care.
3.	<ul style="list-style-type: none"> ○ Implements interventions based on data collection and nursing diagnoses from the plan of care. ○ Understands outcome criteria that are measurable. ○ Discusses the plan of care with the RN. ○ Communicates care, consideration, and privacy to the client at all times. ○ Uses language expected of a practical nurse when communicating with other professionals. ○ Uses therapeutic communication strategies when communicating with patients.
4.	<ul style="list-style-type: none"> ○ Prepares for clinical experience by acquiring the knowledge, skills, and equipment needed for patient care. ○ Uses medical equipment according to policy and procedures. ○ Respects equipment. ○ Cleans equipment appropriately. ○ Maintains proper storage of equipment. ○ Understands the relationship of the data collected from technological equipment in relation to the patient's condition. ○ Uses technology to obtain and share data.
5.	<ul style="list-style-type: none"> ○ Maintains confidentiality. ○ Adheres to HIPAA standards. ○ Allows for patient privacy. ○ Treats patients in a dignified and respectful manner. ○ Maintains professional boundaries. ○ Practices standard safety precautions. ○ Communicates appropriate and critical information to faculty and staff in a timely manner. ○ Documents data collected, interventions, and response to interventions in a thorough and accurate manner.
6.	<ul style="list-style-type: none"> ○ Assumes the functions of a patient advocate. ○ Is honest and demonstrates personal integrity. ○ Behaves and dresses professionally. ○ Arrives in the clinical area on time and prepared for the day's assignment. ○ Demonstrates self-motivation for learning.
7.	<ul style="list-style-type: none"> ○ Considers developmental, physical, psychological, sociocultural and spiritual needs of the patient in nursing care. ○ Provides relevant and sensitive health education.

	<ul style="list-style-type: none">○ Integrating traditional and complementary health care practices per the plan of care.○ Communication shows sensitivity to sociocultural needs of client.○ Elicits and clarifies patient preferences and values.
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HERZING[®]

— UNIVERSITY —

COURSE SYLLABUS

FACULTY CONTACT INFORMATION	
INSTRUCTOR	Click here to enter text.
PHONE NUMBER	Click here to enter text.
HERZING E-MAIL	Click here to enter text.

DAY	OFFICE HOURS (CENTRAL TIME)
	00:00 am – 00:00 am

Instructional Delivery Method	On Campus			
Class Location				
Semester				
Course Code	NP 280			
Course Title:	Preparation for NCLEX-PN			
Course Description	This course is designed to assist the student to prepare for the practical nursing licensure exam (NCLEX-PN) and entry into practice. Students will have the opportunity to develop and improve their test-taking skills through computer simulations and practice tests. The NCLEX PN test plan assessment of knowledge deficits and development of individual study plans based on results of weekly assessments will be utilized. In addition, a NCLEX review course will be provided.			
Credit Hours Contact Hours	3 Semester Credit Hours			
	Lecture Hours	Laboratory Hours	Clinical Hours	Total Contact Hours
	45	0	0	45
Study Time	<p>Lecture, Lab, or Internship/Externship/Clinical/Practicum hours as indicated on the syllabus represent scheduled hours spent engaged in learning activities. Students should expect to spend a minimum of two additional hours engaged in learning activities outside of class for each one hour identified as lecture; students should expect to spend one hour engaged in learning activities outside of class for each two hours of scheduled laboratory time. Learning activities outside of class support the achievement of one or more course learning objectives and may be spent reading textbook material, completing homework assignments, preparing for lab assignments, engaged in drill and practice exercises, working on case studies, completing workbook activities, or conducting library research. Additional study time outside of scheduled Internship/Externship/Clinical hours is typically not expected.</p> <p>The total amount of time that students spend engaged in learning activities is consistent, regardless of instructional delivery method. For example, students enrolled a three credit lecture course should expect to spend 45 hours in scheduled class time and an additional 90 hours engaged in learning activities outside of the classroom. Online or blended students should expect to spend the equivalent total of 135 hours engaged in learning activities if they are enrolled in the same course.</p> <p>Determination of the amount of time that a student should expect to spend engaged in learning activities is based upon faculty judgment regarding the average student. The amount of time spent engaged in learning</p>			

	activities is expected to vary among students, based upon previous knowledge of the content, learning style, learning ability, difficulty of the course, and student motivation.	
Guide to Student Engagement in Learning Activities	<i>The timeframes provided below are estimates based upon the average student.</i>	
	Lower level reading (10-20 pages)	1 hour
	Higher level reading (10-20 pages)	2 hours
	Construction of 1 page paper (250 words)	2 hours
	Development of 10 minute speech	2 hours
	Watch video lecture	1 hour
	Read, research and respond to discussion board posting	1 hour
Preparation for unit examination	2 hours	
Course Length	8 Weeks	
Prerequisites	All PN program courses	
Co-requisites	NP275: LPN Practical Experience	
Course Learning Objectives	<p>Upon successful completion of this course, students should be able to:</p> <ol style="list-style-type: none"> 1) Identify knowledge deficits in relation to NCLEX PN content areas. 2) Perform NCLEX-PN style questions effectively. 3) Determine individual strategies in preparation for the NCLEX-PN. 	
Program Learning Outcomes Supported	Program Learning Outcome	Course Learning Objective Supported
	1. Practice quality, safe, and relationship-centered care as guided by practical nurse scope of practice.	1,2,3
	2. Using a systems approach, ensure nursing judgement and collaboration in caring for diverse patients and families.	2,3
	3. Employ a spirit of inquiry and integrity in providing care consistent with legal and professional standards of the practical nurse.	3
	4. As a coordinator of care, generate system and professional resources for health and wellness which facilitate patient, family, personal, and professional growth.	2
Required Textbook(s)	Silvestri, L. & Silvestri, A. (2018). Saunders 2018-2019 strategies for test success (5 th ed.). St. Louis, MO: Elsevier ISBN: 9780323479578 from Funds Course Evolve Adaptive Quizzing	
Optional Textbook(s)	None	
Additional Learning Material(s)	<p>Evolve: https://evolve.elsevier.com Resources for your e-book can be found here.</p> <p>Simulation will be included as permitted by the respective Board of Nursing. E-book page numbers subject to change based upon publisher updates. Please check with instructor for updated page numbers as needed.</p>	

TOPICS AND LEARNING ACTIVITIES			Course Learning Objective Supported	Points Possible	DUE DATE
		tips for the nursing student. Pediatric Questions: Rationale, test taking strategies & tips for the nursing student. Reading: Silvestri Chapters 7, 8, 16, 17 Textbook/E-Book: Silvestri p. 54-72, 79-87, 167-179, 180-189 Assignment(s): Evolve Adaptive Quizzing Maternity and Women's Health Mastery Level Assessment(s): <i>Practice HESI</i> with remediation due before the final Assessment(s): Quiz #3 Assessment(s): Exam #3	1,2 1,2,3 1,2 1,2	15 30 20 80	
Unit 5	[class date]	Topic(s): Leading and Managing, Delegating, and Assignment-Making Questions: Delegation and assignment making, time management. Communication Questions: Communication concepts in questions, guidelines to answer communication questions, communication techniques, cultural considerations, sample communication questions. Delegating and Prioritization Questions: Rationale, test taking strategies & tips for the nursing student. Leadership/Management Questions: Rationale, test taking strategies & tips for the nursing student. Reading: Silvestri Chapters 9, 10, 19, 20 Textbook/E-Book: Silvestri p. 79-87, 89-96, 204-230 Assignment(s): Evolve Adaptive Quizzing Pediatric Nursing Mastery Level Assessment(s): Quiz #4 Assessment(s): Exam #4	1,2,3 1,2 1,2 1,2	15 20 80	
Unit 6	[class date]	Topic(s): LIVE REVIEW Assignment(s): Evolve Adaptive Quizzing Psychiatric/Mental Health Nursing Mastery Level Assessment(s): Quiz #5 Assessment(s): Exam #5	1,2,3 1,2 1,2 1,2	P/F 15 20 80	
Unit 7	[class date]	Topic(s): Pharmacology, Medication, and Intravenous Calculation Questions: Pharmacological general guidelines, pharm assessment & data collection guidelines, medication effects, names, & classifications, commonalities in medication names, strategies for answering medication calculation questions Additional Pyramid Strategies: Eliminating options, ensuring all parts of an option are correct, umbrella options, strategies that will help answer questions, visualizing the information in the case. Pharmacology Questions: Rationale, test taking strategies & tips for the nursing student. Reading: Silvestri Chapters 11, 18 Textbook/E-Book: Silvestri p. 98-106, 109-120, 204-216 Assessment(s): Quiz #6 Assessment(s): Exam #6	1,2,3 1,2 1,2	20 80	
Unit 8	[class date]	Assessment(s): Comprehensive Final Assessment(s): HESI after the final Assignment(s): Practice HESI remediation due	1,2,3	200 80	

Grade Summary	Points
Live Review	P/F
Evolve Adaptive Quizzing	90
Practice HESI with remediation due by final HESI Exam	30
HESI Exam	80
6 Quizzes (20 pointsX6)	120
6 Exams (80 points eachX6)	480
Final Exam	200
Totals	1000

Grade Scale		Quality Points
A	90.00% - 100.00%	4.0
B	80.00% - 89.99%	3.0
C	76.00% - 79.99%	2.0
F	0.00% - 75.99%	0.0
I	Incomplete	

POLICIES

UNIVERSITY POLICIES, SUCH AS ATTENDANCE PHILOSOPHY, NOTIFICATION OF ABSENCES, EXTENUATING CIRCUMSTANCES, ACCOMMODATION REQUESTS, ACADEMIC DISHONESTY, GRADING AND GRADING SYMBOLS, AND STUDENT CONDUCT ARE INCLUDED IN THE UNIVERSITY CATALOG. STUDENTS SHOULD REFERENCE THE CATALOG FOR THE COMPLETE LISTING OF POLICIES.

NOTE: IN SOME CASES, PROGRAM AND/OR COURSE SPECIFIC INFORMATION MAY BE APPENDED TO THE SYLLABUS. IN THESE INSTANCES, STUDENTS MUST CONSIDER THE SYLLABUS TO BE INCLUSIVE OF ANY APPENDED INFORMATION, AND AS SUCH, STUDENTS MUST ADHERE TO ALL COURSE REQUIREMENTS AS DESCRIBED IN THE DOCUMENT IN ITS ENTIRETY.

Appendix 4-B

Program Evaluation Plan

LPN Program

Standard 6: Program Evaluation

Program evaluation demonstrates that students have achieved each end-of-program student learning outcomes and each program outcome. The nursing program has a current SEP.

- a. Specific, measurable expected levels of achievement for each end-of-program student learning outcome and each program outcome.**
- b. Appropriate assessment method(s) for each end-of-program student learning outcome and program outcome.**
- c. Regular intervals for the assessment of each end-of-program student learning outcome and program outcome.**
- d. Sufficient data to inform program decision-making for the maintenance and improvement for each end-of-program student learning outcome and program outcome.**
- e. Analysis of assessment data to inform program decision-making for the maintenance and improvement for each end-of-program student learning outcome and program outcome.**
- f. Documentation demonstrating the use of assessment data in program decision-making for the maintenance and improvement of for each end-of-program student learning outcome and program outcome.**

Component	Plan			Implementation	
	ELA	Frequency of Assessment	Assessment Method(s)	Results of Data Collection & Analysis	Actions
<p>6.1 The program demonstrates evidence of students' achievement of each end-of-program student learning outcomes.</p> <p>There is ongoing assessment of the extent to which students attain each end-of-program student learning outcome.</p> <p>There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' attainment of each end-of-program student learning outcome.</p>	<p>50% on all NCLEX categories</p> <p>80% of graduates will rate program between 3.</p> <p>Students will be rated at least 3.0 on all student program learning outcomes by instructor evaluation.</p> <p>Student will self evaluate at least 3.0 on all program student learning outcomes.</p>	<p>Every 6 months and annually</p> <p>3 weeks before graduation and at specified intervals until response from graduate.</p> <p>2 weeks before completing capstone course.</p> <p>2 weeks before completing capstone course.</p>	<p>Mountain Measurement scores for NCLEX exam.</p> <p>GSR survey performed by Career Services.</p> <p>Student Evaluation Tool on Program Student Learning Outcomes.</p> <p>Student Self-Evaluation Tool</p>		

Plan				Implementation	
Component	ELA	Frequency of Assessment	Assessment Method(s)	Results of Data Collection & Analysis	Actions
6.2: The program demonstrates evidence of graduates' achievement on the licensure examination.	80% of first time takers will pass the NCLEX-PN exam.	Quarterly or Yearly as Bon report	Program pass rate reports from BON.		If pass rate falls below 80%, a detailed Pass rate and Program Improvement Plan will be developed and implemented.

Plan				Implementation	
Component	ELA	Frequency of Assessment	Assessment Method(s)	Results of Data Collection & Analysis	Actions
6.3: The program demonstrates evidence of graduates' achievement on completing the nursing program.	70% of the students admitted the LPN program will complete the program	Within 150% of time from starting program	Campus Vue reporting date of admission to graduation.		

Plan				Implementation	
Component	ELA	Frequency of Assessment	Assessment Method(s)	Results of Data Collection & Analysis	Actions
6.4: The program demonstrates evidence of graduates' achievement in job placement.	70% of graduates' will obtain employment within 1 year or sooner from graduation.	Monthly from graduation date for 1 year past graduation.	<p>Campus Vue reporting date of graduation from program.</p> <p>Documentation of student job placement via social media, email, text, or any communication that can be verified.</p>		

Appendix 4-C

Course Content

Herzing University PN Courses and Major Topics

Course Code	Course Title	Topics
NP 100	Growth and Development	Healthy People 2020 Government Influences on Health Care Cultural Considerations Across the Lifespan & in Health & Illness The Influence of Family on Developing a Lifestyle Theories of Development Prenatal Influences of Health Development The infant, early childhood, childhood immunizations Middle childhood, adolescence, adolescence immunizations Young adulthood, middle adulthood, later adulthood, adult immunizations Advance Old Age & Geriatrics, Planning for the End of Life, Loss Grief & Bereavement
NP110	Pharmacology for Nurses with lab	Drug Regulation, Actions, and Responses Safely Preparing and Giving Drugs. Anti-Inflammatory Drugs Drugs for Pain Control Anti-Infectives: Antibacterial Drugs Anti-Infectives: Antiviral Drugs Anti-Infectives: Antitubercular Drugs Drugs that Effect the Immune System Drug Therapy for Diabetes: Drug Therapy for Thyroid & Adrenal Gland Problems Drug Therapy for Asthma & Other Respiratory Problems Drug Therapy for Osteoporosis, Arthritis, & Skeletal Muscle Relaxation Drugs that affect Urine Output Drug Therapy for Hypertension Drug Therapy for Heart Failure Drug Therapy for Dysrhythmias Drug Therapy for High Blood Lipids Drugs That Affect Blood Clotting Drug Therapy for Gastrointestinal Problems Drug Therapy for Gastric Ulcers and Reflux Drug Therapy with Nutritional Supplements Drug Therapy for Seizure Drug Therapy for Alzheimer's and Parkinson's Diseases Drug Therapy for Psychiatric Problems Drug Therapy for Insomnia Therapy for Eye Problems

		<p>Drug Therapy for Male Reproductive Problems</p> <p>Drug Therapy for Female Reproductive Issues</p>
NP120	Fundamentals of Nursing with Lab	<p>Infection Prevention & Control</p> <p>Safely Lifting, Moving, & Positioning Patients</p> <p>Assisting with Hygiene</p> <p>Patient Environment & Safety</p> <p>Measuring Vital Signs</p> <p>Assessing Health Status</p> <p>Promoting Urinary and Bowel Elimination</p> <p>Diagnostic Tests & Specimen Collection</p> <p>Concepts of Basic Nutrition & Cultural Considerations</p> <p>Nutritional Therapy & Assisted Feeding</p> <p>Providing Wound Care & Treating Pressure Injuries</p> <p>Promoting Musculoskeletal Function</p> <p>Assisting with Respiration & Oxygen Delivery</p> <p>Complementary & Alternative Therapies</p> <p>Interventions therapy, LPN/LVN role in IV therapy</p>
NP 125	Medical-Surgical Nursing I for LPNs	<p>The Musculoskeletal System</p> <p>Care of patients with Musculoskeletal & Connective Tissue Disorders</p> <p>Care of Preoperative & Intraoperative</p> <p>Care of Postoperative Surgical Patients</p> <p>Care of Patients with Pain</p> <p>Chronic Illness/Rehabilitation</p> <p>Care of Patients with Disorders of the Urinary System</p> <p>Care of Patients with Disorders of the Upper Respiratory System</p> <p>Care of Patients with Disorders of the Lower Respiratory System</p> <p>Care of Patients with Disorders of the Eyes and Ears</p> <p>Laboratory Values and Diagnostic Tests</p>
NP225	Medical-Surgical Nursing II for LPNs	<p>Care of Patients with Disorders of the Upper Gastrointestinal System</p> <p>State Nurse Practice Act</p> <p>Care of Patients with Disorders of the Lower Gastrointestinal System</p> <p>Care of Patients with Disorders of the Gallbladder, Liver, and Pancreas</p> <p>Fluids, Electrolytes, Acid-Base Balance, and Intravenous Therapy</p> <p>Care of Patients with Hypertension and Peripheral Vascular Disease</p> <p>Care of Patients with Cardiac Disorders</p> <p>Care of Patients with Coronary Artery Disease & Cardiac Surgery</p> <p>Patients with Hematologic Disorders</p> <p>Care of Patients with Pituitary, Thyroid, Parathyroid, and Adrenal Disorders</p> <p>Care of Patients with Diabetes and Hypoglycemia</p>

		<p>Care of Men with Reproductive Disorders Care of Patients with Sexually Transmitted Infections</p>
NP 230	Nursing Specialties for LPNs	<p>Mental health patient care</p> <ul style="list-style-type: none"> • cognitive theories, psychotherapies, brain stimulation • therapy classification of psychotherapeutic drugs • characteristics of communication • childhood disorders • environmental problems, homelessness, abuse and neglect • emotional problems, behavioral problems • cycle of assault, anger control disorders, violence • abuse, neglect and exploitation within the family and community • suicide through the life cycle <p>Maternity nursing</p> <ul style="list-style-type: none"> • maternal newborn nursing & women's health • human reproductive A & P • fetal development • prenatal care & adaptations to pregnancy • physiological changes in pregnancy • nutrition for lactation and pregnancy • care of women with complications during pregnancy • fetal diagnostic tests • pregnancy related complications, effects of high risk pregnancy on the family • nursing care of mother & infant during labor & birth • fetal monitoring, maternal monitoring • stages of labor, cultural considerations • nursing responsibilities during a birth, nursing care after birth • care of women with complications during labor & birth • the family after birth • term newborn adjustment to extra uterine life • the newborn with a perinatal injury or congenital malformation <p>Pediatric nursing</p> <ul style="list-style-type: none"> • the child's experience of hospitalization by age • health care adaptations for the child & family • pediatric assessment, procedures/treatments, medication administration • pediatric sensory or neurological conditions • pediatric musculoskeletal conditions

		<ul style="list-style-type: none"> • child abuse • pediatric respiratory disorder • pediatric condition of the blood, blood-forming organs, or lymphatic system • pediatric gastrointestinal conditions • chronic illness & death and dying • the child with a genitourinary condition • metabolic conditions and diabetes • pediatric communicable diseases
NP 235	Medical-Surgical Nursing III for LPNs	<p>Care of Patients with Head and Spinal Cord Injuries</p> <p>Care of Patients with Brain Disorders</p> <p>Care of Patients with Peripheral and Degenerative Neurologic Disorders</p> <p>Care of Patients with Cognitive Disorders</p> <p>Care of Patients with Integumentary Disorders and Burns</p> <p>Care of Patients with Immune and Lymphatic Disorders</p> <p>Care of Patients with Cancer</p> <p>Care of Patients During Disasters, Bioterrorism Attacks, and Pandemic Infections</p> <p>Care of Patients with Emergencies, Trauma and Shock</p> <p>End of Life</p>
NP 275	LPN Clinical Capstone	<p>Management of multiple patients</p> <p>Nursing process</p> <p>Nursing care concepts</p> <p>Safe and effective care environment and coordinated care</p> <p>Legal, ethical, historical, and emerging issues</p> <p>Religious, spiritual, cultural, gender identity, sexuality, and/or growth and development</p> <p>Safe and effective care environment</p> <p>Collaboration with other health care professionals</p> <p>Prioritize patient care based on the NCLEX-PN client need categories.</p> <p>Professional nursing behaviors and practice in acute and long-term healthcare settings</p>
NP 280	Preparation for NCLEX-PN	<p>Preparing for Nursing Exams</p> <p>Developing Good Study Skills</p> <p>Reducing Test Anxiety</p> <p>NCLEX-PN Preparation</p> <p>Alternate Item Format</p> <p>How to Avoid Reading into the Question</p> <p>Positive & Negative Event Queries</p>

		<p>Questions Requiring Prioritization</p> <p>Content-based question preparation:</p> <ul style="list-style-type: none">• Fundamentals of Care• Adult Health• Mental Health• Maternity• Pediatrics• Communication• Delegating and Prioritization• Leadership/Management• Pharmacology• Medication and Intravenous Calculation
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Appendix 7

Form 1004 and Clinical Contracts

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366

FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53708-8366

E-Mail: dsp@wisconsin.gov
Website: dsp.wisconsin.gov

BOARD OF NURSING

CLINICAL FACILITY SELECTION AND SIMULATED SETTING EXPERIENCES

Completion of this form is required for each clinical facility or simulated setting experience as part of the application for authorization to admit students. In addition, this form shall be completed, kept on file in the school of nursing office, and made available to the Board upon request for all clinical facilities and all simulated setting experiences utilized by the nursing school.

I. IDENTIFYING DATA

- A. Name of facility: Rogers Memorial Hospital
Address: 4600 W. Schroder Drive
Brown Deer, WI 53223
Telephone: 414-865-2500
- B. Type of facility: Hospital Nursing Home Community Health Agency
 Other: _____
- C. Number of beds at facility: 56
- D. Types of patients: Psychiatry, children through adult
- E. Administrator of facility: Jim Kubicek
- F. Director of nursing service: Karen Molnar-Smith
- G. School(s) of nursing utilizing the facility: Herzing Univesity, BSN; Bryant & Stratton; Cardinal Stricth

II. EXHIBITS (*attach to this form*)

- A. Copy of formal agreement signed by:
1. Administrator of facility
2. Educational administrator of nursing school
- B. Copy of the position description for:
1. Registered Nurses
2. Licensed Practical Nurses
- C. Listing of simulation activities provided and a listing of types of simulation equipment utilized

Wisconsin Department of Safety and Professional Services

III. PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

A. Have the nursing school objectives been shared with the facility? Yes No

Comments: _____

B. Does the facility agree to cooperate in promoting the nursing school objectives? Yes No

Comments: _____

C. Are there experiences in the facility available to students to meet clinical objectives? Yes No

Comments: _____

D. Is the practice of registered nursing in the facility within the legal scope of practice for registered nurses as defined in Chapter 441.11(4), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

E. Is the practice of licensed practical nursing in the facility within the legal scope of practice for licensed practical nurses as defined in Chapter 441.11(3), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

F. If simulated settings are utilized, list the activities, responsibilities and equipment which are included in the learning experience:

Herzing University
 Nursing School

Dr. Deborah Ziebarth
 Educational Administrator

Dr. Deborah Ziebarth
 Signature

2626491710
 Telephone Number

Herzing University
 Nursing Program(s) Utilizing Facility/Simulated Setting

Department Chair Nursing
 Title

12/22/2017
 Date

dziebarth@herzing.edu
 Email Address

**MEMORANDUM OF UNDERSTANDING BETWEEN HERZING UNIVERSITY-
BROOKFIELD AND Rogers Behavioral Health System**

1. **PARTIES.** This Memorandum of Understanding (hereinafter referred to as a MOU) is made and entered into by and between Herzing University-Brookfield, located at 555 South Executive Drive, Brookfield, WI and Rogers Memorial Hospital located at 34700 Valley Rd. Oconomowoc, WI 53066
2. **PURPOSE.** The purpose of this MOU is to establish non-compensated nursing clinical experiences for students in the Practical Nurse program at Herzing University-Brookfield and Rogers Behavioral Health System
3. **TERM OF MOU.** This MOU is effective upon the date executed below by duly authorized representatives of the parties to this MOU and will remain in force unless otherwise terminated by the parties. This MOU may be terminated, without cause, by either party upon written notification, which may be sent by electronic or other means to the parties at the addresses listed above.
4. **REPSONSIBILITIES.** The parties agree that prior to the creation of non-compensated clinical nursing experiences for the Practical Nurse students at Herzing University-Brookfield the parties, upon mutual agreement, will execute an Affiliation Agreement which will detail the rights, obligations and responsibilities of the parties to this MOU.
5. **AMENDMENTS.** Either party may request changes to this MOU. Any changes modifications or revisions or amendments to this MOU which are agreed upon by and between the parties shall be incorporated, in writing, to this MOU and become effective when executed and signed by the parties to this MOU.
6. **APPLICABLE LAW.** The construction, interpretation and enforcement of this MOU shall be governed by the laws of the State of Wisconsin, unless otherwise mutually agreed to by the parties as outlined in paragraph five (5).
7. **ENTIRETY OF AGREEMENT.** This MOU, consisting of one (1) page represents the entire agreement between the parties.
8. **SIGNATURES.** In witness whereof, the parties to this MOU, through their duly authorized representatives have executed this MOU on the date(s) below.

Herzing University-Brookfield



Louis Racine, Campus President

Partner Organization



Name and Title

Rogers Memorial Hospital Job Description

Job Title:	LICENSED PRACTICAL NURSE	FLSA:	Non-exempt
Supervisor:	Clinical Services Manager	Supervises:	None
Date:	8/31/98	Revision Date:	4/22/17
Department:	Nursing	Division:	Patient Care Services

Summary:

The licensed practical nurse performs basic nursing activities in the care of patients so they may achieve or regain, and then maintain, the maximum possible physical, emotional and social function. Role functions are limited and governed by the Wisconsin Nurse Practice Act, the Wisconsin Administrative Code, Wisconsin Board of Nursing, Standards for Nursing Practice, and the corresponding policies and procedures of *Rogers Memorial Hospital*.

Job Duties & Responsibilities:

1. Implement patient care in an assigned patient load.
 - A. Observe, document and monitor each patient's psychiatric and physical changes and responses to treatment under the direction of the registered nurse (RN). This may include the following duties:
 - a. Admission data collection;
 - b. Discharge transcribing of information in preparation for discharge;
 - c. Medication reconciliation on admission and discharge;
 - d. Medication administration (See, 'E' below).
 - B. Identify potential patient care problems, abrupt changes or impending instability in the patient's condition, and exercise appropriate intervention leadership to prevent adverse patient outcomes.
 - a. Use appropriate de-escalation techniques: quiet room, locked seclusion or restraints.
 - b. Re-evaluate safety level.
 - c. Identify alcohol withdrawal syndrome.
 - d. Identify significant cardiac and/or respiratory symptoms requiring immediate medical intervention.
 - C. Implement patient care based on established care plans, Hospital policies and procedures, and unit standards of care, incorporating the patient's age-specific and cultural needs as appropriate.
 - D. Provide care in complex patient situations (as defined by the hospital) under the standards of the State that they provide care in; under the general supervision of the R.N., physician or other State approved medical professional. Duties to include:
 - E. a. Participate in the patient nursing assessment process
 - F. b. Obtaining and processing physician orders
 - G. c. Completing medication reconciliation orders and
 - H. d. Creating treatment plan.
 - E. Maintain integrity of tube feedings by preparing tube feeding dosages according to physician orders
 - F. Administer bolus for tube feeding patients
 - G. Demonstrate safe and correct medication administration by:
 - a. Accuracy in medication administration: right patient, right medication, right dose, right time, and right route.
 - b. Maintaining current knowledge of the medication's purpose and effects for each patient, as demonstrated by correct documentation of medication, as well as observations about responses to medication.
 - c. Accurately transcribing and implementing physician medication orders, after RN approval of the order.
 - d. Maintaining a continual awareness of monitoring the expected and unexpected medication efforts including adverse drug reactions, drug/drug or drug/food interactions, or other unexpected consequences of the medication.
 - e. Regularly conducting and documenting patient education about medications and obtaining medication consent.
 - f. Maintaining current knowledge about new pharmacologic products, including new medications or medications with new uses/therapeutic action.
 - H. Know the various program schedules and assist patients in maintaining these schedules.
 - I. Care for patients' hygienic and physical environment needs and for patients' personal belongings.
 - J. Employ established systems to monitor the location of all patients in assigned areas.

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- K. Accompany patients to meals, monitor their behavior, and record their food intake, as directed.

- 2. Act as an advocate for patients/residents.
 - A. Explain patient's rights so that they can understand, and obtain appropriate signatures.
 - B. Provide the patient with information, and obtain their signature on necessary consents.
 - C. Use knowledge of patient rights to assist patients in resolution of complaints / grievances.
 - D. Act as a patient advocate, use knowledge of patient rights and responsibilities, and protect patient's privacy and confidentiality.

- 3. Assist in the patient orientation process.
 - A. Know and employ Hospital policies and procedures regarding unit safety, the necessity of gown/contraband search on admission, and carry out the process in a respectful manner.
 - B. Remain sensitive to the individual patient/family stressors upon admission, while providing pertinent unit information.

- 4. Adhere to the nursing department and Hospital's Standards of Nursing Practice and Standards of Patient Care.
 - A. Protect patients, visitors and staff from environmental hazards by adhering to the safety and infection control standards.
 - B. Participate in continuing education and inservice programs to increase clinical competence and to meet professional needs and goals.
 - a. Report information obtained from continuing education programs to unit staff.
 - C. Attend 100% of required inservices, as scheduled.

- 5. Participate in projects, tasks and continuing education opportunities to improve professional skills and unit/department systems:
 - A. Develop goals and objectives for professional growth and discuss ways to achieve them with the Clinical Services manager.
 - B. Take the initiative to develop professional skills through continuing education.
 - C. Discuss, on a regular basis, progress toward work improvement goals with the Clinical Services manager.
 - D. Seek out projects and/or extra tasks to complete, based upon the needs of the unit or the immediate shift.

- 6. Promote department goals and the mission of the Hospital.
 - A. Communicate goals to fellow staff members.
 - B. Demonstrate measurable goal achievement.
 - C. Maintain department policies and procedures.
 - D. Include requirements and guidelines from external agencies (i.e., *Joint Commission* and *State of Wisconsin*).
 - E. Maintain and/or communicate the function backlog to the appropriate party at a set timeframe.
 - F. Educate new staff regarding regulations or requirements of those functions that relate to their areas or departments, as directed.
 - G. Demonstrate acceptance and training of student interns in the department, as directed.

- 7. Demonstrate understanding of *Joint Commission* and other regulatory agency compliance regulations.
 - A. Involve self in the learning and the application of standards relevant to the Nursing department.
 - B. Participate in inservices/seminars and other meetings, to increase involvement and awareness of regulations.
 - C. Involve self in the education of other disciplines regarding Nursing department regulations.

- 8. Participate in Hospital committees, performance improvement team meetings and team projects, as directed.
 - A. Demonstrate punctuality and preparedness.
 - B. Demonstrate effective communication and organizational skills, if applicable.
 - C. Contribute in a positive, solution-focused manner.
 - D. Education and involve self to the Hospital and Nursing department's performance improvement plans.

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- 9. Conduct self in a professional manner.
 - A. Demonstrate organizational skills that promote timely response to all inquiries and to task completion.
 - B. Communicate with all individuals in a positive and professional manner.
 - C. Attempt to resolve individual issues with peers in a positive, calm manner, with a focus on solution.
 - D. Communicate concerns and provide solutions for same.
 - E. Attend outside seminars to promote professional growth.
 - F. Demonstrate a positive and professional attitude toward parties outside the Hospital (patient families, visitors, vendors, etc.).
 - G. Comply with the Hospital's policies and procedures, including Human Resources, Infection Control and Employee Health policies and programs.
 - H. Project a professional image by wearing appropriate, professional attire.

Physical/Mental Demands:

- 1. The majority of time is spent inside the building; walking, pulling, pushing, bending, twisting, sitting and grasping are routine activities. Will be required to lift work equipment, patient care equipment, supplies and patients, within reason. Personal judgment dictates weight-lifting limits, but must be able to lift a minimum of fifty (50) pounds.
- 2. Verbal and hearing ability required to interact with patients and employees. Numerical ability required to maintain records and operate a computer.
- 3. Able to plan, control and direct all aspects of employee relations. Tact required to deal effectively with employees and professional staff. Logical thinking and discretion required to make decisions in initiating and implementing policies and procedures and standards.
- 4. Must be able to read and communicate through written, verbal and auditory skills and abilities.
- 5. Physically/Mentally able to perform job duties as verified by a physical exam by a licensed physician, per post-employment physical.

Education/Training Requirements:

- 1. Licensed Practical Nurse licensed by *Wisconsin State Board of Nursing* or the State of the Rogers clinical facility. License must be in 'good standing' with the *Wisconsin State Board of Nursing* or the State they practice.
- 2. *American Heart Association* Healthcare Provider CPR certification or *American Red Cross* Professional Rescue is required within thirty (30) days of date-of-hire. Annual re-certification is required.
- 3. Formal training in management of the aggressive patient within sixty (60) days of date-of-hire. Annual re-certification is required.
- 4. Previous psychiatric experience with children, adolescents and adults is preferred.

In accordance with the Americans with Disabilities Act, the above is intended to summarize the essential functions of and requirements for the performance of this job. It is not meant to be an exhaustive list of miscellaneous duties and responsibilities that may be requested in the performance of this job.

SIGNATURES:

DocuSigned by:

Brian Kramer

ISI

5/18/2017

BRIAN KRAMER, VICE-PRESIDENT HUMAN RESOURCES

Date

DocuSigned by:

Paul Mueller

ISI

5/18/2017

PAUL MUELLER, CEO Rogers Memorial Hospital

Date

**SCHOOL AFFILIATION AGREEMENT
BETWEEN ROGERS MEMORIAL HOSPITAL INC.
AND
HERZING UNIVERSITY, LTD.**

This SCHOOL AFFILIATION AGREEMENT (the "Agreement") between Herzing University, LTD. ("School") and Rogers Memorial Hospital Inc. ("Rogers Memorial"), effective as of the date of last execution will be effective for a period of one (1) year. This Agreement shall be automatically renewed for successive periods of one year as of the effective termination date, unless either party terminates this Agreement in the manner provided herein.

RECITALS

WHEREAS, the School administers educational curricula for various health-related occupations and seeks to provide supervised experiences to enrolled students ("Students") through field training in various health-related occupations ("Clinical Education Programs");

WHEREAS, Rogers Memorial operates facilities that serve behavioral health patients and seeks to train future behavioral health care practitioners and leaders by providing students with supervised experiences as part of a Clinical Education Program at Rogers Memorial facilities, consistent with the educational objectives of the School and its Students;

NOW, THEREFORE, the School and Rogers Memorial have determined that each may best accomplish its objectives by mutual assistance, and seek to describe their affiliation in this Agreement, the School and Rogers Memorial agree as follows:

AGREEMENT

1. THE SCHOOL'S RIGHTS AND RESPONSIBILITIES.

In addition to its rights and responsibilities described elsewhere in this Agreement, the School shall have the following rights and responsibilities:

A. Clinical Education Program Memorandum. On an annual basis, the School shall provide Rogers Memorial, in advance, with a Clinical Education Program Memorandum ("Program Memorandum") detailing the proposed Clinical Education Program at a Rogers Memorial facility ("Clinical Site"). A sample Program Memorandum is attached hereto as Exhibit A (there may be refinements to such Program Memorandum as the effective date draws close in time). Any modifications to the Program Memorandum are subject to the prior review and written approval of Rogers Memorial. Once approved, the Program Memorandum as revised will be incorporated herein; provided that in the event of a conflict between any Program Memorandum and this Agreement, the terms of this Agreement shall control.

The Program Memorandum will set forth: (i) the name of each Student selected to participate in a Clinical Education Program through Rogers Memorial; (ii) the Student's Clinical Site assignment; (iii) the schedule of placement times; (iv) the name and contact information for the Educational Coordinator

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assigned to each Clinical Site; and (v) details concerning the goals, objectives, and expectations for the Clinical Education Program. The School shall be responsible to update such listings promptly following any changes therein.

B. Student Assignments. After Rogers Memorial notifies the School regarding the number of Clinical Site placements available, the School shall select Students for placement at each Clinical Site.

C. Preparation of Students for Placement. The School shall assure that each Student assigned to a Clinical Education Program at a Clinical Site is adequately prepared to benefit from such assignment. A Student's preparedness shall be measured by: (1) academic performance indicating an ability to understand what Student will observe and/or perform during the placement; and (2) appreciation of the nature and seriousness of the work Student will observe and/or perform.

D. Educational Coordinator. The School shall appoint a faculty member to serve as Educational Coordinator, and shall communicate his or her name, title, and telephone number to the Clinical Site. The Educational Coordinator shall be responsible for overall management of the Students' educational experience, and may be assigned as Educational Coordinator for one or more Clinical Education Programs through Rogers Memorial.

E. Professional Liability Insurance - Student. The School shall provide or shall require each Student assigned to a Clinical Site be covered by, at no cost to the Clinical Site, professional liability insurance with limits of at least One Million Dollars (\$1,000,000) per occurrence and at least Three Million Dollars (\$3,000,000) in the aggregate, to cover professional liabilities of Students arising out of their participation in the Clinical Education Program. If the School requires a Student to purchase his or her own professional liability insurance, the School shall provide to the Clinical Site evidence of insurance in the form of a certificate of insurance prior to the placement of such Student at the Clinical Site.

F. General and Professional Liability Insurance - School. The School shall maintain general and professional liability insurance coverage for its officers, employees, and agents while in the course of employment and/or when they are acting on behalf of the School.

G. Automobile Insurance. The School represents that each Student is covered by an automobile insurance policy for any vehicle the Student will operate at any Clinical Site, in accordance with state limits. The failure to maintain such insurance shall be considered a breach of this Agreement. The School and the Rogers Memorial agree that Students are prohibited from driving vehicles owned or leased by Rogers Memorial.

H. Breach. Failure to maintain any of the insurances required in sections E-G shall be considered breach of this Agreement. The failure of Rogers Memorial to request or the failure of School to provide certificates of insurance shall not invalidate the requirements listed in sections E-G. These provisions may only be waived in writing by the parties.

I. Background Investigation and Disclosure. All students who are assigned to a Clinical Site shall have a background check performed under the direction of the School. The background check shall include information relating to criminal records in Wisconsin and from out-of-state agencies if the individual has lived outside of Wisconsin within the past three years. If the Student has a criminal record, the School will evaluate whether the individual is barred from performing duties at the Clinical Site. Prior to placement of the Student, the School will notify the Clinical Site in writing of any crime of which

student has been convicted so the Clinical Site may make a determination as to how substantially related the conviction(s) is to the duties the Student would be performing. The Clinical Site may refuse placement of any Student the Clinical Site believes could put its patients, employees, and/or visitors at risk. The School hereby agrees to notify the Clinical Site when the School becomes aware that any participating Student is charged with or convicted of any crime or is or was the subject of investigation by a governmental agency.

J. Compliance with Laws, Regulations, Policies, Standards. The School shall require students and faculty to: (1) abide by all relevant policies, procedures, standards, and directives issued or adopted by the Clinical Site and made known to the School, Students and faculty. The School hereby acknowledges that it has received information from Rogers Memorial regarding the mission, vision, and values of Rogers Memorial and agrees that in the performance of all of its obligations under the terms of this Agreement, it shall at all times conduct itself, and shall take reasonable actions to ensure that its Students, faculty, employees and agents conduct themselves in a manner that is consistent with said mission, vision, and values.

K. Other Requirements for Students and School Personnel or Employees. All Students accepted under the terms of this Agreement for placement at a Clinical Site, and any School personnel or employees who will be placed at a Clinical Site, must:

- i). be certified in writing for participation by the School;
- ii). have successfully completed an orientation program of the Clinical Site;
- iii). agree to comply with any applicable rules, regulations, policies and procedures concerning Student conduct as may be adopted by Rogers Memorial or any Clinical Site;
- iv). have satisfied and passed any health screening or other health requirements imposed from time to time by Rogers Memorial or any Clinical Site;
- v). have completed for him or her a criminal background check, the results of which have been presented to and approved by Rogers Memorial, as noted above;
- vi). agree to complete incident reports pursuant to any Rogers Memorial policy and agree to report any observed or known incident to the applicable Clinical Site's department manager promptly; and
- vii). for School personnel placed as supervisors and/or instructors at any Rogers Memorial facility, be certified by the School that they are appropriately qualified and licensed.

L. No Billing. The School agrees not to render any bill to any patient or third party for any service provided hereunder. To the extent any billable service is provided hereunder, the School and its School personnel assign to Rogers Memorial fully all rights to bill any patient or third party payor (governmental or otherwise) for such service.

M. Placement Changes. If it becomes necessary to cancel a reserved space or change a Student's assignment, the School shall make every effort to notify the Clinical Site as far in advance of the scheduled beginning of the Clinical Education Program as possible. If a medical or personal emergency or a Student not completing prerequisites necessitates a last-minute cancellation of a space, the School will promptly notify the Clinical Site.

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M. Grades/Credits. The School, through the Educational Coordinator shall be responsible for assigning grades and course credit to the Students upon successful completion of the Clinical Education Program.

N. Accreditation and Licensure. The School shall maintain, at all times during the term of this Agreement: (1) accreditation as an educational institution; (2) all licensures and approvals from the state in which it is located as necessary to administer its educational curricula; and (3) full and unrestricted accreditation of its educational curricula from an accrediting organization. The School shall promptly notify Rogers Memorial of any change in its accreditation or licensure status and shall provide Rogers Memorial with evidence of accreditation or licensure status upon request.

2. THE CLINICAL SITE'S RIGHTS AND RESPONSIBILITIES.

In addition to its rights and responsibilities described elsewhere in this Agreement, Rogers Memorial shall have the following rights and responsibilities:

A. Placements. The Clinical Site shall have the sole discretion to determine its capacity to accept Students for placement, whether such capacity is described in terms of the number of Students at a Clinical Site at any one time, the number of hours of supervision that the Clinical Site can provide over a period of time, or other such description of capacity. The Clinical Site shall communicate such capacity to the School before Students may be assigned to the Clinical Site.

B. Site Coordinator. The Clinical Site shall appoint an employee to serve as a coordinator ("Site Coordinator") at the Clinical Site and shall communicate his or her name, title and telephone number to the School. The Site Coordinator shall be responsible for overall management of the Students' experience at the Clinical Site, and may be assigned with respect to one or more Clinical Education Programs. The Site Coordinator shall ensure that Students obtain access to training experiences through Clinical Site practitioners that demonstrate interest and ability in teaching, and possesses adequate experience, qualifications, certification, and/or licensure in the Student's area of interest.

C. Orientation. The Clinical Site shall provide the School with orientation materials via the Rogers Memorial website. The Clinical Site shall also provide the School faculty with orientation materials about the Clinical Site, including work duties, equipment, and applicable policies and procedures, that can be presented to participating Students.

D. Student Access to the Clinical Site and Patients. The Clinical Site shall permit access by Students to any and all areas of the Clinical Site as reasonably required to support Students' development and as permitted under applicable law. These areas shall include, without limitation, patient care units, laboratories, ancillary departments, health science libraries, cafeteria and parking facilities. The Clinical Site reserves the right to refuse access to any Student who does not meet, in the Clinical Site's reasonable determination, its standards for safety, health, or proper conduct or appearance.

E. Licensure, Approvals and Eligibility. The Clinical Site shall maintain, at all times during the term of this Agreement: (i) necessary licensures and approvals from the requisite state and/or federal authorities; and (ii) if applicable, eligibility for participation in the Medicare and Medicaid

programs. The Clinical Site shall immediately notify the School of any change in the Clinical Site's licensure or eligibility status.

F. Insurance. Rogers Memorial agrees to maintain, during the term of this Agreement, Comprehensive General Liability Insurance that covers each Clinical Site for property damage or bodily injury that may occur at a Clinical Site. Rogers Memorial shall also maintain Professional Liability Insurance covering its employees.

G. Final Authority. The Clinical Site retains final authority for all aspects of operations at and management of the Clinical Site, and retains the right to terminate a Student's placement for cause at the sole discretion of the Clinical Site.

H. Remuneration. Students may not receive remuneration for services relating to the Clinical Education Program and performed for or on behalf of the Clinical Site.

3. FACULTY AND STUDENT RIGHTS AND RESPONSIBILITIES.

The School and the Clinical Site shall instruct the Students regarding Students' rights and responsibilities while they participate in a Clinical Education Program at a Clinical Site.

A. Conduct. Student shall, at all times while on the Clinical Site premises, conduct himself or herself in a professional manner and shall refrain from loud, boisterous, offensive or otherwise inappropriate conduct. Students shall refrain from the improper and illegal use of alcohol or other drugs, and shall not carry any firearms or other weapons except as permitted under applicable law.

B. Policies, Rules, and Regulations. Student shall abide by all policies, rules and regulations established by the Clinical Site and the School. If a Student or faculty member fails to so abide, the Clinical Site shall have the right to notify the School that such Student(s) or faculty member shall not return to the premises unless authorized to do so by Rogers Memorial.

C. Timeliness. Students shall report to the Clinical Site at the assigned place and time. Student shall immediately inform the Site Coordinator of the Student's inability to report to the Clinical Site as assigned.

D. Uniform and Identification. The Student shall wear appropriate uniform attire or other clothing as directed by the School or Clinical Site. The Student shall display proper identification as directed by the Clinical Site. The Student's appearance shall be, at all times, neat, clean, and professional.

E. Personal Expenses. While at the Clinical Site, the Student shall be responsible for the Student's personal expenses such as meals, travel, medical care and incidentals.

F. Evaluation of Experience. The Student shall, upon request of the School, Rogers Memorial, or the Clinical Site, provide a candid, written evaluation of the experience at the Clinical Site including, without limitation, preparation for the on-site experience, orientation to the Clinical Site and experience and supervision and the Clinical Site.

G. Orientation. Faculty and Students shall review and complete the orientation materials provided by Rogers Memorial or the Clinical Site prior to the first clinical day, including information about site/unit policies, procedures, equipment, and documentation.

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4. FURTHER AGREEMENTS OF THE PARTIES.

A. The School shall in no event place any Student or other School personnel at any Clinical Site or permit any Student or School personnel to provide services for Rogers Memorial or any Clinical Site who has been suspended or excluded from participation in any state or federally funded health care program, including without limitation, Medicare or Medicaid.

B. The parties acknowledge their respective obligations governing the privacy and security of health information pursuant to the Health Insurance Portability and Accountability Act of 1996, as amended ("HIPAA") and its implementing regulations ("the Privacy Rule"). The School agrees that Students and School personnel who participate in the program hereunder will not use or disclose Protected Health Information ("PHI"), as that term is defined in 45 C.F.R. § 160.103, obtained in the course of the program for purposes other than those related to the program. Further, the School shall require participating Students and School personnel to agree not to use or disclose PHI obtained in the clinical setting for any non-clinical purposes, including teaching or educational purposes, unless the participant has written approval from Rogers Memorial. If written approval is given, the participant must either (1) obtain an authorization, compliant with the Privacy Rule, from each patient whose PHI is sought to be used; (2) de-identify the PHI in accordance with the Privacy Rule; or (3) use a "limited data set" as defined in the Privacy Rule, and sign a Data Use Agreement with Rogers Memorial. The parties agree that if future modifications or clarifications are made to the Privacy Rule that necessitate amendments to this Agreement, the parties will make such amendments. For purposes of HIPAA only, Students are, with respect to their interactions with patients/clients and their educational activities at Rogers Memorial, under the direct control of Rogers Memorial and are thus considered to be members of Rogers Memorial's "workforce," as that term is defined in 45 C.F.R. § 160.103.

C. All records of any service provided hereunder shall belong to Rogers Memorial or the applicable Clinical Site.

D. The School, its Students and School personnel shall not disclose to any third party or use (other than in fulfilling their duties under the program) any confidential or proprietary information of Rogers Memorial or its affiliates.

F. Rogers Memorial has the right to immediately refuse, suspend, or remove a Student or any School personnel, including coordinators, supervisors or instructors, from a Clinical Education Program for any reason Rogers Memorial deems appropriate provided that Rogers Memorial shall subsequently notify the School in writing of the reasons that the refusal, suspension, or removal occurred.

E. It is acknowledged and agreed by the parties that the School, any School personnel, and Students are "independent contractors" with respect to Rogers Memorial and the Clinical Site and that nothing in this Agreement is intended to nor shall be construed to create any employer/employee relationship or any relationship other than that of independent contractors. Rogers Memorial and Rogers Memorial facilities shall in no event have any obligations to the School, any School personnel, or Students, including payment of any compensation, any withholding, social security, or any other employee-related obligations. The School shall be solely responsible for the actions and omissions of its Students or any School personnel and for any resulting damages.

5. INDEMNIFICATION AND OTHER PROVISIONS.

A. School. The School shall indemnify and hold harmless Rogers Memorial and/or the Clinical Site, its governing board, directors, trustees, officers, and employees from and against any and all claims and liabilities (including reasonable attorney's fees and expenses incurred in the defense thereof) relating to personal injury or property damage to the extent arising out of misconduct or by negligent acts or omissions of the School's Students, faculty, employees or agents in connection with their duties under the Clinical Education Program.

B. Clinical Site. The Clinical Site and/or Rogers Memorial shall indemnify and hold harmless the School and its trustees, officers, employees and Student from and against any and all claims and liabilities (including reasonable attorney's fees and expenses incurred in the defense thereof) relating to personal injury or property damage, to the extent arising out of the conditions existing at the Clinical Site or arising out of intentional misconduct by or negligent acts or omissions of the Clinical Site's employees or agents in connection with their duties under the Clinical Education Program.

C. Notice of Claims. Each party agrees that it shall give the other party prompt notice of any claim, threatened or made, or suit instituted against it which could result in a claim for indemnification above.

D. Policies. The Students, while engaged in the Clinical Education Program, shall be under the supervision and control of the Clinical Site and shall be governed by the Clinical Site's policies relating to health care delivery and the Student's role in it.

E. Discrimination. It is mutually agreed that at no time shall the matter of race, color, religion, sex, sexual orientation, national origin, age, veteran status and/or disability be employed for the purpose of discrimination.

F. Amendments. The parties may modify this Agreement by written amendment signed by duly authorized representatives of each.

G. Relationships. It is understood and agreed that this Agreement is not intended and shall not be construed to create the relationship of agency, partnership, joint venture or associate between the Rogers Memorial and the School, or to create an employment relationship between the Rogers Memorial and the Students in the Clinical Education Program. The School and the Students shall be treated for all purposes as independent contractors pursuant to Section 5.E of this Agreement.

H. Privacy and Nondisclosure. In the event that the School discloses to the Clinical Site information from the educational record of any Student at the School, the Clinical Site agrees to comply with the Family Educational Rights and Privacy Act with respect to such information. The Clinical Site also agrees that its personnel will use such information only in the furtherance of the educational experience provided to each Student, and that such information will not be disclosed to any other party without such Student's prior written consent.

I. Termination. This Agreement may be terminated by either party's giving thirty (30) days' notice in writing to the other party by certified or registered mail at the addresses hereafter set forth:

If to Rogers Memorial:

Rogers Behavioral Health
34700 Valley Road
Oconomowoc, WI 53066
Attn: Paul Mueller, CEO

And cc to:

Rogers Behavioral Health
34700 Valley Road
Oconomowoc, WI 53066
Attn: Marybeth Herbst-Flagstad, General Counsel

If to University or College:

Herzing University, LTD.
Attn: Clinical Contracts
W140 N8917 Lilly Road
Menomonee Falls, WI 53051

J. Authority. The persons executing and attesting to the provisions of this Agreement on behalf of Rogers Memorial and the School, respectively, represent and warrant that they have full power, authority, and right to execute this Agreement and that the execution of this Agreement by each such person is sufficient and legally binding on the respective party without the joinder or approval of any other person or party.

K. Transfer of Rights. Neither party may subcontract or assign its rights or obligations under this Agreement without the express written consent of the other. Any attempt to do without consent shall be void and the other party may immediately terminate this Agreement.

L. Waivers. A failure of either party to insist upon or enforce any term or provision or to exercise any right, option, or remedy of this Agreement, or to require at any time, performance of any provision hereof shall not be construed as a waiver of any such term or provision. No waiver by either party of any provision hereof shall be binding unless made in writing and signed by such party, nor shall any single or partial exercise of any right or power under this Agreement preclude further exercise of any other right or power.

M. Severability. Should any of the terms or provisions of this Agreement be determined to be invalid, illegal, or unenforceable, such provision shall be deemed to be rescinded, and all remaining terms which reasonably can be given effect in the absence of the remaining terms shall remain in force unless it is clearly unreasonable to do so, or such amendment or modification would substantially

change the terms of this Agreement to impose new and/or different obligations, economic or legal relationships between the parties or rights of the parties.

N. Governing Law. This Agreement shall be construed in accordance with the laws of Wisconsin without regard to its conflicts rules.

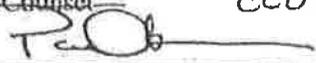
O. Execution. The parties may sign this Agreement in one or more counterparts, each of which constitutes an original and all of which together constitute the Agreement. Facsimile signatures constitute original signatures for all purposes.

P. Integration. This Agreement and all attachments embody the entire understanding of the parties with respect to the subject matter and supersede all previous or contemporaneous communications, either verbal or written, between the parties.

THIS AGREEMENT SHALL BE EFFECTIVE AS OF THE DATE OF LAST EXECUTION BY BOTH PARTIES.

ACKNOWLEDGEMENTS

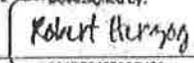
Rogers Memorial Hospital, Inc.

CB ~~Marybeth Herbst-Flagstad~~ PAUL MUELLER
CB ~~General Counsel~~ CEO, HOSPITAL DIVISION
Signed: 
Date: 8/28/17

Herzing University, LTD.

Printed Name: Robert Herzog

Title: CFO/CCO

Signed: 

Date: 8/24/2017

Exhibit A
Clinical Education Program Memorandum

Student Name	Clinical Education Program Objectives, Goals & Expectations	Placement Dates	Clinical Site	Educational Coordinator

Last revised 6.1.17

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366

FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53708-8366
E-Mail: dsp@wisconsin.gov
Website: dsp.wisconsin.gov

BOARD OF NURSING

CLINICAL FACILITY SELECTION AND SIMULATED SETTING EXPERIENCES

Completion of this form is required for each clinical facility or simulated setting experience as part of the application for authorization to admit students. In addition, this form shall be completed, kept on file in the school of nursing office, and made available to the Board upon request for all clinical facilities and all simulated setting experiences utilized by the nursing school.

I. IDENTIFYING DATA

- A. Name of facility: Rogers Memorial Hospital
Address: 11101 W. Lincoln Ave
West Allis, WI 53227
Telephone: 414-327-3000
- B. Type of facility: Hospital Nursing Home Community Health Agency
 Other: _____
- C. Number of beds at facility: 75
- D. Types of patients: Psychiatry, children through adult
- E. Administrator of facility: Elizabeth Gilbert
- F. Director of nursing service: Augie Crawford
- G. School(s) of nursing utilizing the facility: Herzing Univesity, BSN; Bryant & Stratton; Waukesha County Technical College, Gateway Technical College

II. EXHIBITS (*attach to this form*)

- A. Copy of formal agreement signed by:
1. Administrator of facility
 2. Educational administrator of nursing school
- B. Copy of the position description for:
1. Registered Nurses
 2. Licensed Practical Nurses
- C. Listing of simulation activities provided and a listing of types of simulation equipment utilized

Wisconsin Department of Safety and Professional Services

III. PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

A. Have the nursing school objectives been shared with the facility? Yes No

Comments: _____

B. Does the facility agree to cooperate in promoting the nursing school objectives? Yes No

Comments: _____

C. Are there experiences in the facility available to students to meet clinical objectives? Yes No

Comments: _____

D. Is the practice of registered nursing in the facility within the legal scope of practice for registered nurses as defined in Chapter 441.11(4), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

E. Is the practice of licensed practical nursing in the facility within the legal scope of practice for licensed practical nurses as defined in Chapter 441.11(3), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

F. If simulated settings are utilized, list the activities, responsibilities and equipment which are included in the learning experience:

Herzing University
Nursing School

Dr. Deborah Ziebarth
Educational Administrator

Dr. Deborah Ziebarth
Signature

2626491710
Telephone Number

Herzing University
Nursing Program(s) Utilizing Facility/Simulated Setting

Department Chair Nursing
Title

12/22/2017
Date

dziebarth@herzing.edu
Email Address

**SCHOOL AFFILIATION AGREEMENT
BETWEEN ROGERS MEMORIAL HOSPITAL INC.
AND
HERZING UNIVERSITY, LTD.**

This **SCHOOL AFFILIATION AGREEMENT** (the "Agreement") between Herzing University, LTD. ("School") and Rogers Memorial Hospital Inc. ("Rogers Memorial"), effective as of the date of last execution will be effective for a period of one (1) year. This Agreement shall be automatically renewed for successive periods of one year as of the effective termination date, unless either party terminates this Agreement in the manner provided herein.

RECITALS

WHEREAS, the School administers educational curricula for various health-related occupations and seeks to provide supervised experiences to enrolled students ("Students") through field training in various health-related occupations ("Clinical Education Programs");

WHEREAS, Rogers Memorial operates facilities that serve behavioral health patients and seeks to train future behavioral health care practitioners and leaders by providing students with supervised experiences as part of a Clinical Education Program at Rogers Memorial facilities, consistent with the educational objectives of the School and its Students;

NOW, THEREFORE, the School and Rogers Memorial have determined that each may best accomplish its objectives by mutual assistance, and seek to describe their affiliation in this Agreement, the School and Rogers Memorial agree as follows:

AGREEMENT

1. THE SCHOOL'S RIGHTS AND RESPONSIBILITIES.

In addition to its rights and responsibilities described elsewhere in this Agreement, the School shall have the following rights and responsibilities:

A. Clinical Education Program Memorandum. On an annual basis, the School shall provide Rogers Memorial, in advance, with a Clinical Education Program Memorandum ("Program Memorandum") detailing the proposed Clinical Education Program at a Rogers Memorial facility ("Clinical Site"). A sample Program Memorandum is attached hereto as Exhibit A (there may be refinements to such Program Memorandum as the effective date draws close in time). Any modifications to the Program Memorandum are subject to the prior review and written approval of Rogers Memorial. Once approved, the Program Memorandum as revised will be incorporated herein; provided that in the event of a conflict between any Program Memorandum and this Agreement, the terms of this Agreement shall control.

The Program Memorandum will set forth: (i) the name of each Student selected to participate in a Clinical Education Program through Rogers Memorial; (ii) the Student's Clinical Site assignment; (iii) the schedule of placement times; (iv) the name and contact information for the Educational Coordinator

assigned to each Clinical Site; and (v) details concerning the goals, objectives, and expectations for the Clinical Education Program. The School shall be responsible to update such listings promptly following any changes therein.

B. Student Assignments. After Rogers Memorial notifies the School regarding the number of Clinical Site placements available, the School shall select Students for placement at each Clinical Site.

C. Preparation of Students for Placement. The School shall assure that each Student assigned to a Clinical Education Program at a Clinical Site is adequately prepared to benefit from such assignment. A Student's preparedness shall be measured by: (1) academic performance indicating an ability to understand what Student will observe and/or perform during the placement; and (2) appreciation of the nature and seriousness of the work Student will observe and/or perform.

D. Educational Coordinator. The School shall appoint a faculty member to serve as Educational Coordinator, and shall communicate his or her name, title, and telephone number to the Clinical Site. The Educational Coordinator shall be responsible for overall management of the Students' educational experience, and may be assigned as Educational Coordinator for one or more Clinical Education Programs through Rogers Memorial.

E. Professional Liability Insurance - Student. The School shall provide or shall require each Student assigned to a Clinical Site be covered by, at no cost to the Clinical Site, professional liability insurance with limits of at least One Million Dollars (\$1,000,000) per occurrence and at least Three Million Dollars (\$3,000,000) in the aggregate, to cover professional liabilities of Students arising out of their participation in the Clinical Education Program. If the School requires a Student to purchase his or her own professional liability insurance, the School shall provide to the Clinical Site evidence of insurance in the form of a certificate of insurance prior to the placement of such Student at the Clinical Site

F. General and Professional Liability Insurance - School. The School shall maintain general and professional liability insurance coverage for its officers, employees, and agents while in the course of employment and/or when they are acting on behalf of the School.

G. Automobile Insurance. The School represents that each Student is covered by an automobile insurance policy for any vehicle the Student will operate at any Clinical Site, in accordance with state limits. The failure to maintain such insurance shall be considered a breach of this Agreement. The School and the Rogers Memorial agree that Students are prohibited from driving vehicles owned or leased by Rogers Memorial.

H. Breach. Failure to maintain any of the insurances required in sections E-G shall be considered breach of this Agreement. The failure of Rogers Memorial to request or the failure of School to provide certificates of insurance shall not invalidate the requirements listed in sections E-G. These provisions may only be waived in writing by the parties.

I. Background Investigation and Disclosure. All students who are assigned to a Clinical Site shall have a background check performed under the direction of the School. The background check shall include information relating to criminal records in Wisconsin and from out-of-state agencies if the individual has lived outside of Wisconsin within the past three years. If the Student has a criminal record, the School will evaluate whether the individual is barred from performing duties at the Clinical Site. Prior to placement of the Student, the School will notify the Clinical Site in writing of any crime of which

student has been convicted so the Clinical Site may make a determination as to how substantially related the conviction(s) is to the duties the Student would be performing. The Clinical Site may refuse placement of any Student the Clinical Site believes could put its patients, employees, and/or visitors at risk. The School hereby agrees to notify the Clinical Site when the School becomes aware that any participating Student is charged with or convicted of any crime or is or was the subject of investigation by a governmental agency.

J. Compliance with Laws, Regulations, Policies, Standards. The School shall require students and faculty to: (1) abide by all relevant policies, procedures, standards, and directives issued or adopted by the Clinical Site and made known to the School, Students and faculty. The School hereby acknowledges that it has received information from Rogers Memorial regarding the mission, vision, and values of Rogers Memorial and agrees that in the performance of all of its obligations under the terms of this Agreement, it shall at all times conduct itself, and shall take reasonable actions to ensure that its Students, faculty, employees and agents conduct themselves in a manner that is consistent with said mission, vision, and values.

K. Other Requirements for Students and School Personnel or Employees. All Students accepted under the terms of this Agreement for placement at a Clinical Site, and any School personnel or employees who will be placed at a Clinical Site, must:

- i). be certified in writing for participation by the School;
- ii). have successfully completed an orientation program of the Clinical Site;
- iii). agree to comply with any applicable rules, regulations, policies and procedures concerning Student conduct as may be adopted by Rogers Memorial or any Clinical Site;
- iv). have satisfied and passed any health screening or other health requirements imposed from time to time by Rogers Memorial or any Clinical Site;
- v). have completed for him or her a criminal background check, the results of which have been presented to and approved by Rogers Memorial, as noted above;
- vi). agree to complete incident reports pursuant to any Rogers Memorial policy and agree to report any observed or known incident to the applicable Clinical Site's department manager promptly; and
- vii). for School personnel placed as supervisors and/or instructors at any Rogers Memorial facility, be certified by the School that they are appropriately qualified and licensed.

L. No Billing. The School agrees not to render any bill to any patient or third party for any service provided hereunder. To the extent any billable service is provided hereunder, the School and its School personnel assign to Rogers Memorial fully all rights to bill any patient or third party payor (governmental or otherwise) for such service.

M. Placement Changes. If it becomes necessary to cancel a reserved space or change a Student's assignment, the School shall make every effort to notify the Clinical Site as far in advance of the scheduled beginning of the Clinical Education Program as possible. If a medical or personal emergency or a Student not completing prerequisites necessitates a last-minute cancellation of a space, the School will promptly notify the Clinical Site.

M. Grades/Credits. The School, through the Educational Coordinator shall be responsible for assigning grades and course credit to the Students upon successful completion of the Clinical Education Program.

N. Accreditation and Licensure. The School shall maintain, at all times during the term of this Agreement; (1) accreditation as an educational institution; (2) all licensures and approvals from the state in which it is located as necessary to administer its educational curricula; and (3) full and unrestricted accreditation of its educational curricula from an accrediting organization. The School shall promptly notify Rogers Memorial of any change in its accreditation or licensure status and shall provide Rogers Memorial with evidence of accreditation or licensure status upon request.

2. THE CLINICAL SITE'S RIGHTS AND RESPONSIBILITIES.

In addition to its rights and responsibilities described elsewhere in this Agreement, Rogers Memorial shall have the following rights and responsibilities:

A. Placements. The Clinical Site shall have the sole discretion to determine its capacity to accept Students for placement, whether such capacity is described in terms of the number of Students at a Clinical Site at any one time, the number of hours of supervision that the Clinical Site can provide over a period of time, or other such description of capacity. The Clinical Site shall communicate such capacity to the School before Students may be assigned to the Clinical Site.

B. Site Coordinator. The Clinical Site shall appoint an employee to serve as a coordinator ("Site Coordinator") at the Clinical Site and shall communicate his or her name, title and telephone number to the School. The Site Coordinator shall be responsible for overall management of the Students' experience at the Clinical Site, and may be assigned with respect to one or more Clinical Education Programs. The Site Coordinator shall ensure that Students obtain access to training experiences through Clinical Site practitioners that demonstrate interest and ability in teaching, and possesses adequate experience, qualifications, certification, and/or licensure in the Student's area of interest.

C. Orientation. The Clinical Site shall provide the School with orientation materials via the Rogers Memorial website. The Clinical Site shall also provide the School faculty with orientation materials about the Clinical Site, including work duties, equipment, and applicable policies and procedures, that can be presented to participating Students.

D. Student Access to the Clinical Site and Patients. The Clinical Site shall permit access by Students to any and all areas of the Clinical Site as reasonably required to support Students' development and as permitted under applicable law. These areas shall include, without limitation, patient care units, laboratories, ancillary departments, health science libraries, cafeteria and parking facilities. The Clinical Site reserves the right to refuse access to any Student who does not meet, in the Clinical Site's reasonable determination, its standards for safety, health, or proper conduct or appearance.

E. Licensure, Approvals and Eligibility. The Clinical Site shall maintain, at all times during the term of this Agreement: (i) necessary licensures and approvals from the requisite state and/or federal authorities; and (ii) if applicable, eligibility for participation in the Medicare and Medicaid

programs. The Clinical Site shall immediately notify the School of any change in the Clinical Site's licensure or eligibility status.

F. Insurance. Rogers Memorial agrees to maintain, during the term of this Agreement, Comprehensive General Liability Insurance that covers each Clinical Site for property damage or bodily injury that may occur at a Clinical Site. Rogers Memorial shall also maintain Professional Liability Insurance covering its employees.

G. Final Authority. The Clinical Site retains final authority for all aspects of operations at and management of the Clinical Site, and retains the right to terminate a Student's placement for cause at the sole discretion of the Clinical Site.

H. Remuneration. Students may not receive remuneration for services relating to the Clinical Education Program and performed for or on behalf of the Clinical Site.

3. FACULTY AND STUDENT RIGHTS AND RESPONSIBILITIES.

The School and the Clinical Site shall instruct the Students regarding Students' rights and responsibilities while they participate in a Clinical Education Program at a Clinical Site.

A. Conduct. Student shall, at all times while on the Clinical Site premises, conduct himself or herself in a professional manner and shall refrain from loud, boisterous, offensive or otherwise inappropriate conduct. Students shall refrain from the improper and illegal use of alcohol or other drugs, and shall not carry any firearms or other weapons except as permitted under applicable law.

B. Policies, Rules, and Regulations. Student shall abide by all policies, rules and regulations established by the Clinical Site and the School. If a Student or faculty member fails to so abide, the Clinical Site shall have the right to notify the School that such Student(s) or faculty member shall not return to the premises unless authorized to do so by Rogers Memorial.

C. Timeliness. Students shall report to the Clinical Site at the assigned place and time. Student shall immediately inform the Site Coordinator of the Student's inability to report to the Clinical Site as assigned.

D. Uniform and Identification. The Student shall wear appropriate uniform attire or other clothing as directed by the School or Clinical Site. The Student shall display proper identification as directed by the Clinical Site. The Student's appearance shall be, at all times, neat, clean, and professional.

E. Personal Expenses. While at the Clinical Site, the Student shall be responsible for the Student's personal expenses such as meals, travel, medical care and incidentals.

F. Evaluation of Experience. The Student shall, upon request of the School, Rogers Memorial, or the Clinical Site, provide a candid, written evaluation of the experience at the Clinical Site including, without limitation, preparation for the on-site experience, orientation to the Clinical Site and experience and supervision and the Clinical Site.

G. Orientation. Faculty and Students shall review and complete the orientation materials provided by Rogers Memorial or the Clinical Site prior to the first clinical day, including information about site/unit policies, procedures, equipment, and documentation.

4. FURTHER AGREEMENTS OF THE PARTIES.

A. The School shall in no event place any Student or other School personnel at any Clinical Site or permit any Student or School personnel to provide services for Rogers Memorial or any Clinical Site who has been suspended or excluded from participation in any state or federally funded health care program, including without limitation, Medicare or Medicaid.

B. The parties acknowledge their respective obligations governing the privacy and security of health information pursuant to the Health Insurance Portability and Accountability Act of 1996, as amended ("HIPAA") and its implementing regulations ("the Privacy Rule"). The School agrees that Students and School personnel who participate in the program hereunder will not use or disclose Protected Health Information ("PHI"), as that term is defined in 45 C.F.R. § 160.103, obtained in the course of the program for purposes other than those related to the program. Further, the School shall require participating Students and School personnel to agree not to use or disclose PHI obtained in the clinical setting for any non-clinical purposes, including teaching or educational purposes, unless the participant has written approval from Rogers Memorial. If written approval is given, the participant must either (1) obtain an authorization, compliant with the Privacy Rule, from each patient whose PHI is sought to be used; (2) de-identify the PHI in accordance with the Privacy Rule; or (3) use a "limited data set" as defined in the Privacy Rule, and sign a Data Use Agreement with Rogers Memorial. The parties agree that if future modifications or clarifications are made to the Privacy Rule that necessitate amendments to this Agreement, the parties will make such amendments. For purposes of HIPAA only, Students are, with respect to their interactions with patients/clients and their educational activities at Rogers Memorial, under the direct control of Rogers Memorial and are thus considered to be members of Rogers Memorial's "workforce," as that term is defined in 45 C.F.R. § 160.103.

C. All records of any service provided hereunder shall belong to Rogers Memorial or the applicable Clinical Site.

D. The School, its Students and School personnel shall not disclose to any third party or use (other than in fulfilling their duties under the program) any confidential or proprietary information of Rogers Memorial or its affiliates.

F. Rogers Memorial has the right to immediately refuse, suspend, or remove a Student or any School personnel, including coordinators, supervisors or instructors, from a Clinical Education Program for any reason Rogers Memorial deems appropriate provided that Rogers Memorial shall subsequently notify the School in writing of the reasons that the refusal, suspension, or removal occurred.

E. It is acknowledged and agreed by the parties that the School, any School personnel, and Students are "independent contractors" with respect to Rogers Memorial and the Clinical Site and that nothing in this Agreement is intended to nor shall be construed to create any employer/employee relationship or any relationship other than that of independent contractors. Rogers Memorial and Rogers Memorial facilities shall in no event have any obligations to the School, any School personnel, or Students, including payment of any compensation, any withholding, social security, or any other employee-related obligations. The School shall be solely responsible for the actions and omissions of its Students or any School personnel and for any resulting damages.

5. INDEMNIFICATION AND OTHER PROVISIONS.

A. School. The School shall indemnify and hold harmless Rogers Memorial and/or (the Clinical Site, its governing board, directors, trustees, officers, and employees from and against any and all claims and liabilities (including reasonable attorney's fees and expenses incurred in the defense thereof) relating to personal injury or property damage to the extent arising out of misconduct or by negligent acts or omissions of the School's Students, faculty, employees or agents in connection with their duties under the Clinical Education Program.

B. Clinical Site. The Clinical Site and/or Rogers Memorial shall indemnify and hold harmless the School and its trustees, officers, employees and Student from and against any and all claims and liabilities (including reasonable attorney's fees and expenses incurred in the defense thereof) relating to personal injury or property damage, to the extent arising out of the conditions existing at the Clinical Site or arising out of intentional misconduct by or negligent acts or omissions of the Clinical Site's employees or agents in connection with their duties under the Clinical Education Program.

C. Notice of Claims. Each party agrees that it shall give the other party prompt notice of any claim, threatened or made, or suit instituted against it which could result in a claim for indemnification above.

D. Policies. The Students, while engaged in the Clinical Education Program, shall be under the supervision and control of the Clinical Site and shall be governed by the Clinical Site's policies relating to health care delivery and the Student's role in it.

E. Discrimination. It is mutually agreed that at no time shall the matter of race, color, religion, sex, sexual orientation, national origin, age, veteran status and/or disability be employed for the purpose of discrimination.

F. Amendments. The parties may modify this Agreement by written amendment signed by duly authorized representatives of each.

G. Relationships. It is understood and agreed that this Agreement is not intended and shall not be construed to create the relationship of agency, partnership, joint venture or associate between the Rogers Memorial and the School, or to create an employment relationship between the Rogers Memorial and the Students in the Clinical Education Program. The School and the Students shall be treated for all purposes as independent contractors pursuant to Section 5.E of this Agreement.

H. Privacy and Nondisclosure. In the event that the School discloses to the Clinical Site information from the educational record of any Student at the School, the Clinical Site agrees to comply with the Family Educational Rights and Privacy Act with respect to such information. The Clinical Site also agrees that its personnel will use such information only in the furtherance of the educational experience provided to each Student, and that such information will not be disclosed to any other party without such Student's prior written consent.

I. Termination. This Agreement may be terminated by either party's giving thirty (30) days' notice in writing to the other party by certified or registered mail at the addresses hereafter set forth:

If to Rogers Memorial:

Rogers Behavioral Health
34700 Valley Road
Oconomowoc, WI 53066
Attn: Paul Mueller, CEO

And cc to:

Rogers Behavioral Health
34700 Valley Road
Oconomowoc, WI 53066
Attn: Marybeth Herbst-Flagstad, General Counsel

If to University or College:

Herzing University, LTD.
Attn: Clinical Contracts
W140 N8917 Lilly Road
Menomonee Falls, WI 53051

J. Authority. The persons executing and attesting to the provisions of his Agreement on behalf of Rogers Memorial and the School, respectively, represent and warrant that they have full power, authority, and right to execute this Agreement and that the execution of this Agreement by each such person is sufficient and legally binding on the respective party without the joinder or approval of any other person or party.

K. Transfer of Rights. Neither party may subcontract or assign its rights or obligations under this Agreement without the express written consent of the other. Any attempt to do without consent shall be void and the other party may immediately terminate this Agreement.

L. Waivers. A failure of either party to insist upon or enforce any term or provision or to exercise any right, option, or remedy of this Agreement, or to require at any time, performance of any provision hereof shall not be construed as a waiver of any such term or provision. No waiver by either party of any provision hereof shall be binding unless made in writing and signed by such party, nor shall any single or partial exercise of any right or power under this Agreement preclude further exercise of any other right or power.

M. Severability. Should any of the terms or provisions of this Agreement be determined to be invalid, illegal, or unenforceable, such provision shall be deemed to be rescinded, and all remaining terms which reasonably can be given effect in the absence of the remaining terms shall remain in force unless it is clearly unreasonable to do so, or such amendment or modification would substantially

change the terms of this Agreement to impose new and/or different obligations, economic or legal relationships between the parties or rights of the parties.

N. Governing Law. This Agreement shall be construed in accordance with the laws of Wisconsin without regard to its conflicts rules.

O. Execution. The parties may sign this Agreement in one or more counterparts, each of which constitutes an original and all of which together constitute the Agreement. Facsimile signatures constitute original signatures for all purposes.

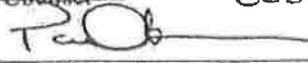
P. Integration. This Agreement and all attachments embody the entire understanding of the parties with respect to the subject matter and supersede all previous or contemporaneous communications, either verbal or written, between the parties.

THIS AGREEMENT SHALL BE EFFECTIVE AS OF THE DATE OF LAST EXECUTION BY BOTH PARTIES.

ACKNOWLEDGEMENTS

Rogers Memorial Hospital, Inc.

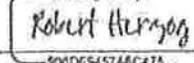
CB ~~Marybeth Herbst-Flagstad~~ PAUL MUELLER
CB ~~General Counsel~~ CEO, HOSPITAL DIVISION

Signed: 
Date: 8/28/17

Herzing University, LTD.

Printed Name: Robert Herzog

Title: CFO/CCO

Signed: 

Date: 8/24/2017

Exhibit A
Clinical Education Program Memorandum

Student Name	Clinical Education Program Objectives, Goals & Expectations	Placement Dates	Clinical Site	Educational Coordinator

Rogers Memorial Hospital Job Description

Job Title:	LICENSED PRACTICAL NURSE	FLSA:	Non-exempt
Supervisor:	Clinical Services Manager	Supervises:	None
Date:	8/31/98	Revision Date:	4/22/17
Department:	Nursing	Division:	Patient Care Services

Summary:

The licensed practical nurse performs basic nursing activities in the care of patients so they may achieve or regain, and then maintain, the maximum possible physical, emotional and social function. Role functions are limited and governed by the Wisconsin Nurse Practice Act, the Wisconsin Administrative Code, Wisconsin Board of Nursing, Standards for Nursing Practice, and the corresponding policies and procedures of *Rogers Memorial Hospital*.

Job Duties & Responsibilities:

1. Implement patient care in an assigned patient load.
 - A. Observe, document and monitor each patient's psychiatric and physical changes and responses to treatment under the direction of the registered nurse (RN). This may include the following duties:
 - a. Admission data collection;
 - b. Discharge transcribing of information in preparation for discharge;
 - c. Medication reconciliation on admission and discharge;
 - d. Medication administration (See, 'E' below).
 - B. Identify potential patient care problems, abrupt changes or impending instability in the patient's condition, and exercise appropriate intervention leadership to prevent adverse patient outcomes.
 - a. Use appropriate de-escalation techniques: quiet room, locked seclusion or restraints.
 - b. Re-evaluate safety level.
 - c. Identify alcohol withdrawal syndrome.
 - d. Identify significant cardiac and/or respiratory symptoms requiring immediate medical intervention.
 - C. Implement patient care based on established care plans, Hospital policies and procedures, and unit standards of care, incorporating the patient's age-specific and cultural needs as appropriate.
 - D. Provide care in complex patient situations (as defined by the hospital) under the standards of the State that they provide care in; under the general supervision of the R.N., physician or other State approved medical professional. Duties to include:
 - E. a. Participate in the patient nursing assessment process
 - F. b. Obtaining and processing physician orders
 - G. c. Completing medication reconciliation orders and
 - H. d. Creating treatment plan.
 - E. Maintain integrity of tube feedings by preparing tube feeding dosages according to physician orders
 - F. Administer bolus for tube feeding patients
 - G. Demonstrate safe and correct medication administration by:
 - a. Accuracy in medication administration: right patient, right medication, right dose, right time, and right route.
 - b. Maintaining current knowledge of the medication's purpose and effects for each patient, as demonstrated by correct documentation of medication, as well as observations about responses to medication.
 - c. Accurately transcribing and implementing physician medication orders, after RN approval of the order.
 - d. Maintaining a continual awareness of monitoring the expected and unexpected medication efforts including adverse drug reactions, drug/drug or drug/food interactions, or other unexpected consequences of the medication.
 - e. Regularly conducting and documenting patient education about medications and obtaining medication consent.
 - f. Maintaining current knowledge about new pharmacologic products, including new medications or medications with new uses/therapeutic action.
 - H. Know the various program schedules and assist patients in maintaining these schedules.
 - I. Care for patients' hygienic and physical environment needs and for patients' personal belongings.
 - J. Employ established systems to monitor the location of all patients in assigned areas.

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JOB DESCRIPTION – Licensed Practical Nurse 4.22.17

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- K. Accompany patients to meals, monitor their behavior, and record their food intake, as directed.
- 2. Act as an advocate for patients/residents.
 - A. Explain patient's rights so that they can understand, and obtain appropriate signatures.
 - B. Provide the patient with information, and obtain their signature on necessary consents.
 - C. Use knowledge of patient rights to assist patients in resolution of complaints / grievances.
 - D. Act as a patient advocate, use knowledge of patient rights and responsibilities, and protect patient's privacy and confidentiality.
- 3. Assist in the patient orientation process.
 - A. Know and employ Hospital policies and procedures regarding unit safety, the necessity of gown/contraband search on admission, and carry out the process in a respectful manner.
 - B. Remain sensitive to the individual patient/family stressors upon admission, while providing pertinent unit information.
- 4. Adhere to the nursing department and Hospital's Standards of Nursing Practice and Standards of Patient Care.
 - A. Protect patients, visitors and staff from environmental hazards by adhering to the safety and infection control standards.
 - B. Participate in continuing education and inservice programs to increase clinical competence and to meet professional needs and goals.
 - a. Report information obtained from continuing education programs to unit staff.
 - C. Attend 100% of required inservices, as scheduled.
- 5. Participate in projects, tasks and continuing education opportunities to improve professional skills and unit/department systems.
 - A. Develop goals and objectives for professional growth and discuss ways to achieve them with the Clinical Services manager.
 - B. Take the initiative to develop professional skills through continuing education.
 - C. Discuss, on a regular basis, progress toward work improvement goals with the Clinical Services manager.
 - D. Seek out projects and/or extra tasks to complete, based upon the needs of the unit or the immediate shift.
- 6. Promote department goals and the mission of the Hospital.
 - A. Communicate goals to fellow staff members.
 - B. Demonstrate measurable goal achievement.
 - C. Maintain department policies and procedures.
 - D. Include requirements and guidelines from external agencies (i.e., *Joint Commission* and *State of Wisconsin*).
 - E. Maintain and/or communicate the function backlog to the appropriate party at a set timeframe.
 - F. Educate new staff regarding regulations or requirements of those functions that relate to their areas or departments, as directed.
 - G. Demonstrate acceptance and training of student interns in the department, as directed.
- 7. Demonstrate understanding of *Joint Commission* and other regulatory agency compliance regulations.
 - A. Involve self in the learning and the application of standards relevant to the Nursing department.
 - B. Participate in inservices/seminars and other meetings, to increase involvement and awareness of regulations.
 - C. Involve self in the education of other disciplines regarding Nursing department regulations.
- 8. Participate in Hospital committees, performance improvement team meetings and team projects, as directed.
 - A. Demonstrate punctuality and preparedness.
 - B. Demonstrate effective communication and organizational skills, if applicable.
 - C. Contribute in a positive, solution-focused manner.
 - D. Educate and involve self to the Hospital and Nursing department's performance improvement plans.

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- 9. Conduct self in a professional manner.
 - A. Demonstrate organizational skills that promote timely response to all inquiries and to task completion.
 - B. Communicate with all individuals in a positive and professional manner.
 - C. Attempt to resolve individual issues with peers in a positive, calm manner, with a focus on solution.
 - D. Communicate concerns and provide solutions for same.
 - E. Attend outside seminars to promote professional growth.
 - F. Demonstrate a positive and professional attitude toward parties outside the Hospital (patient families, visitors, vendors, etc.).
 - G. Comply with the Hospital's policies and procedures, including Human Resources, Infection Control and Employee Health policies and programs.
 - H. Project a professional image by wearing appropriate, professional attire.

Physical/Mental Demands:

- 1. The majority of time is spent inside the building; walking, pulling, pushing, bending, twisting, sitting and grasping are routine activities. Will be required to lift work equipment, patient care equipment, supplies and patients, within reason. Personal judgment dictates weight-lifting limits, but must be able to lift a minimum of fifty (50) pounds.
- 2. Verbal and hearing ability required to interact with patients and employees. Numerical ability required to maintain records and operate a computer.
- 3. Able to plan, control and direct all aspects of employee relations. Tact required to deal effectively with employees and professional staff. Logical thinking and discretion required to make decisions in initiating and implementing policies and procedures and standards.
- 4. Must be able to read and communicate through written, verbal and auditory skills and abilities.
- 5. Physically/Mentally able to perform job duties as verified by a physical exam by a licensed physician, per post-employment physical.

Education/Training Requirements:

- 1. Licensed Practical Nurse licensed by *Wisconsin State Board of Nursing* or the State of the Rogers clinical facility. License must be in 'good standing' with the *Wisconsin State Board of Nursing* or the State they practice.
- 2. *American Heart Association* Healthcare Provider CPR certification or *American Red Cross* Professional Rescue is required within thirty (30) days of date-of-hire. Annual re-certification is required.
- 3. Formal training in management of the aggressive patient within sixty (60) days of date-of-hire. Annual re-certification is required.
- 4. Previous psychiatric experience with children, adolescents and adults is preferred.

In accordance with the Americans with Disabilities Act, the above is intended to summarize the essential functions of and requirements for the performance of this job. It is not meant to be an exhaustive list of miscellaneous duties and responsibilities that may be requested in the performance of this job.

SIGNATURES:

DocuSigned by:

Brian Kramer

/s/

5/18/2017

BRIAN KRAMER, VICE-PRESIDENT HUMAN RESOURCES

Date

DocuSigned by:

Paul Mueller

/s/

5/18/2017

PAUL MUELLER, CEO Rogers Memorial Hospital

Date

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366

FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53708-8366

E-Mail: dsp@wisconsin.gov
Website: dsp.wisconsin.gov

BOARD OF NURSING

CLINICAL FACILITY SELECTION AND SIMULATED SETTING EXPERIENCES

Completion of this form is required for each clinical facility or simulated setting experience as part of the application for authorization to admit students. In addition, this form shall be completed, kept on file in the school of nursing office, and made available to the Board upon request for all clinical facilities and all simulated setting experiences utilized by the nursing school.

I. IDENTIFYING DATA

A. Name of facility: Rogers Memorial Hospital

Address: 34700 Valley Road

Oconomowoc, WI 53066

Telephone: 262-646-4411

B. Type of facility: Hospital Nursing Home Community Health Agency

Other: _____

C. Number of beds at facility: 100+

D. Types of patients: Psychiatry, children through adult

E. Administrator of facility: Kim Effertz

F. Director of nursing service: Terri Cohn

G. School(s) of nursing utilizing the facility: Herzing Univesity, BSN; Bryant & Stratton; Waukesha County
Technical College, George Williams College

II. EXHIBITS (*attach to this form*)

A. Copy of formal agreement signed by:

1. Administrator of facility
2. Educational administrator of nursing school

B. Copy of the position description for:

1. Registered Nurses
2. Licensed Practical Nurses

C. Listing of simulation activities provided and a listing of types of simulation equipment utilized

Wisconsin Department of Safety and Professional Services

III. PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

A. Have the nursing school objectives been shared with the facility? Yes No

Comments: _____

B. Does the facility agree to cooperate in promoting the nursing school objectives? Yes No

Comments: _____

C. Are there experiences in the facility available to students to meet clinical objectives? Yes No

Comments: _____

D. Is the practice of registered nursing in the facility within the legal scope of practice for registered nurses as defined in Chapter 441.11(4), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

E. Is the practice of licensed practical nursing in the facility within the legal scope of practice for licensed practical nurses as defined in Chapter 441.11(3), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

F. If simulated settings are utilized, list the activities, responsibilities and equipment which are included in the learning experience:

Herzing University
Nursing School

Dr. Deborah Ziebarth
Educational Administrator

Dr. Deborah Ziebarth
Signature

2626491710
Telephone Number

Herzing University
Nursing Program(s) Utilizing Facility/Simulated Setting

Department Chair Nursing
Title

12/22/2017
Date

dziebarth@herzing.edu
Email Address

**SCHOOL AFFILIATION AGREEMENT
BETWEEN ROGERS MEMORIAL HOSPITAL INC.
AND
HERZING UNIVERSITY, LTD.**

This SCHOOL AFFILIATION AGREEMENT (the "Agreement") between Herzing University, LTD. ("School") and Rogers Memorial Hospital Inc. ("Rogers Memorial"), effective as of the date of last execution will be effective for a period of one (1) year. This Agreement shall be automatically renewed for successive periods of one year as of the effective termination date, unless either party terminates this Agreement in the manner provided herein.

RECITALS

WHEREAS, the School administers educational curricula for various health-related occupations and seeks to provide supervised experiences to enrolled students ("Students") through field training in various health-related occupations ("Clinical Education Programs");

WHEREAS, Rogers Memorial operates facilities that serve behavioral health patients and seeks to train future behavioral health care practitioners and leaders by providing students with supervised experiences as part of a Clinical Education Program at Rogers Memorial facilities, consistent with the educational objectives of the School and its Students;

NOW, THEREFORE, the School and Rogers Memorial have determined that each may best accomplish its objectives by mutual assistance, and seek to describe their affiliation in this Agreement, the School and Rogers Memorial agree as follows:

AGREEMENT

1. THE SCHOOL'S RIGHTS AND RESPONSIBILITIES.

In addition to its rights and responsibilities described elsewhere in this Agreement, the School shall have the following rights and responsibilities:

A. Clinical Education Program Memorandum. On an annual basis, the School shall provide Rogers Memorial, in advance, with a Clinical Education Program Memorandum ("Program Memorandum") detailing the proposed Clinical Education Program at a Rogers Memorial facility ("Clinical Site"). A sample Program Memorandum is attached hereto as Exhibit A (there may be refinements to such Program Memorandum as the effective date draws close in time). Any modifications to the Program Memorandum are subject to the prior review and written approval of Rogers Memorial. Once approved, the Program Memorandum as revised will be incorporated herein; provided that in the event of a conflict between any Program Memorandum and this Agreement, the terms of this Agreement shall control.

The Program Memorandum will set forth: (i) the name of each Student selected to participate in a Clinical Education Program through Rogers Memorial; (ii) the Student's Clinical Site assignment; (iii) the schedule of placement times; (iv) the name and contact information for the Educational Coordinator

assigned to each Clinical Site; and (v) details concerning the goals, objectives, and expectations for the Clinical Education Program. The School shall be responsible to update such listings promptly following any changes therein.

B. Student Assignments. After Rogers Memorial notifies the School regarding the number of Clinical Site placements available, the School shall select Students for placement at each Clinical Site.

C. Preparation of Students for Placement. The School shall assure that each Student assigned to a Clinical Education Program at a Clinical Site is adequately prepared to benefit from such assignment. A Student's preparedness shall be measured by: (1) academic performance indicating an ability to understand what Student will observe and/or perform during the placement; and (2) appreciation of the nature and seriousness of the work Student will observe and/or perform.

D. Educational Coordinator. The School shall appoint a faculty member to serve as Educational Coordinator, and shall communicate his or her name, title, and telephone number to the Clinical Site. The Educational Coordinator shall be responsible for overall management of the Students' educational experience, and may be assigned as Educational Coordinator for one or more Clinical Education Programs through Rogers Memorial.

E. Professional Liability Insurance - Student. The School shall provide or shall require each Student assigned to a Clinical Site be covered by, at no cost to the Clinical Site, professional liability insurance with limits of at least One Million Dollars (\$1,000,000) per occurrence and at least Three Million Dollars (\$3,000,000) in the aggregate, to cover professional liabilities of Students arising out of their participation in the Clinical Education Program. If the School requires a Student to purchase his or her own professional liability insurance, the School shall provide to the Clinical Site evidence of insurance in the form of a certificate of insurance prior to the placement of such Student at the Clinical Site

F. General and Professional Liability Insurance - School. The School shall maintain general and professional liability insurance coverage for its officers, employees, and agents while in the course of employment and/or when they are acting on behalf of the School.

G. Automobile Insurance. The School represents that each Student is covered by an automobile insurance policy for any vehicle the Student will operate at any Clinical Site, in accordance with state limits. The failure to maintain such insurance shall be considered a breach of this Agreement. The School and the Rogers Memorial agree that Students are prohibited from driving vehicles owned or leased by Rogers Memorial.

H. Breach. Failure to maintain any of the insurances required in sections E-G shall be considered breach of this Agreement. The failure of Rogers Memorial to request or the failure of School to provide certificates of insurance shall not invalidate the requirements listed in sections E-G. These provisions may only be waived in writing by the parties.

I. Background Investigation and Disclosure. All students who are assigned to a Clinical Site shall have a background check performed under the direction of the School. The background check shall include information relating to criminal records in Wisconsin and from out-of-state agencies if the individual has lived outside of Wisconsin within the past three years. If the Student has a criminal record, the School will evaluate whether the individual is barred from performing duties at the Clinical Site. Prior to placement of the Student, the School will notify the Clinical Site in writing of any crime of which

student has been convicted so the Clinical Site may make a determination as to how substantially related the conviction(s) is to the duties the Student would be performing. The Clinical Site may refuse placement of any Student the Clinical Site believes could put its patients, employees, and/or visitors at risk. The School hereby agrees to notify the Clinical Site when the School becomes aware that any participating Student is charged with or convicted of any crime or is or was the subject of investigation by a governmental agency.

I. Compliance with Laws, Regulations, Policies, Standards. The School shall require students and faculty to: (1) abide by all relevant policies, procedures, standards, and directives issued or adopted by the Clinical Site and made known to the School, Students and faculty. The School hereby acknowledges that it has received information from Rogers Memorial regarding the mission, vision, and values of Rogers Memorial and agrees that in the performance of all of its obligations under the terms of this Agreement, it shall at all times conduct itself, and shall take reasonable actions to ensure that its Students, faculty, employees and agents conduct themselves in a manner that is consistent with said mission, vision, and values.

K. Other Requirements for Students and School Personnel or Employees. All Students accepted under the terms of this Agreement for placement at a Clinical Site, and any School personnel or employees who will be placed at a Clinical Site, must:

- i). be certified in writing for participation by the School;
- ii). have successfully completed an orientation program of the Clinical Site;
- iii). agree to comply with any applicable rules, regulations, policies and procedures concerning Student conduct as may be adopted by Rogers Memorial or any Clinical Site;
- iv). have satisfied and passed any health screening or other health requirements imposed from time to time by Rogers Memorial or any Clinical Site;
- v). have completed for him or her a criminal background check, the results of which have been presented to and approved by Rogers Memorial, as noted above;
- vi). agree to complete incident reports pursuant to any Rogers Memorial policy and agree to report any observed or known incident to the applicable Clinical Site's department manager promptly; and
- vii). for School personnel placed as supervisors and/or instructors at any Rogers Memorial facility, be certified by the School that they are appropriately qualified and licensed.

L. No Billing. The School agrees not to render any bill to any patient or third party for any service provided hereunder. To the extent any billable service is provided hereunder, the School and its School personnel assign to Rogers Memorial fully all rights to bill any patient or third party payor (governmental or otherwise) for such service.

M. Placement Changes. If it becomes necessary to cancel a reserved space or change a Student's assignment, the School shall make every effort to notify the Clinical Site as far in advance of the scheduled beginning of the Clinical Education Program as possible. If a medical or personal emergency or a Student not completing prerequisites necessitates a last-minute cancellation of a space, the School will promptly notify the Clinical Site.

M. Grades/Credits. The School, through the Educational Coordinator shall be responsible for assigning grades and course credit to the Students upon successful completion of the Clinical Education Program.

N. Accreditation and Licensure. The School shall maintain, at all times during the term of this Agreement: (1) accreditation as an educational institution; (2) all licensures and approvals from the state in which it is located as necessary to administer its educational curricula; and (3) full and unrestricted accreditation of its educational curricula from an accrediting organization. The School shall promptly notify Rogers Memorial of any change in its accreditation or licensure status and shall provide Rogers Memorial with evidence of accreditation or licensure status upon request.

2. THE CLINICAL SITE'S RIGHTS AND RESPONSIBILITIES.

In addition to its rights and responsibilities described elsewhere in this Agreement, Rogers Memorial shall have the following rights and responsibilities:

A. Placements. The Clinical Site shall have the sole discretion to determine its capacity to accept Students for placement, whether such capacity is described in terms of the number of Students at a Clinical Site at any one time, the number of hours of supervision that the Clinical Site can provide over a period of time, or other such description of capacity. The Clinical Site shall communicate such capacity to the School before Students may be assigned to the Clinical Site.

B. Site Coordinator. The Clinical Site shall appoint an employee to serve as a coordinator ("Site Coordinator") at the Clinical Site and shall communicate his or her name, title and telephone number to the School. The Site Coordinator shall be responsible for overall management of the Students' experience at the Clinical Site, and may be assigned with respect to one or more Clinical Education Programs. The Site Coordinator shall ensure that Students obtain access to training experiences through Clinical Site practitioners that demonstrate interest and ability in teaching, and possesses adequate experience, qualifications, certification, and/or licensure in the Student's area of interest.

C. Orientation. The Clinical Site shall provide the School with orientation materials via the Rogers Memorial website. The Clinical Site shall also provide the School faculty with orientation materials about the Clinical Site, including work duties, equipment, and applicable policies and procedures, that can be presented to participating Students.

D. Student Access to the Clinical Site and Patients. The Clinical Site shall permit access by Students to any and all areas of the Clinical Site as reasonably required to support Students' development and as permitted under applicable law. These areas shall include, without limitation, patient care units, laboratories, ancillary departments, health science libraries, cafeteria and parking facilities. The Clinical Site reserves the right to refuse access to any Student who does not meet, in the Clinical Site's reasonable determination, its standards for safety, health, or proper conduct or appearance.

E. Licensure, Approvals and Eligibility. The Clinical Site shall maintain, at all times during the term of this Agreement: (i) necessary licensures and approvals from the requisite state and/or federal authorities; and (ii) if applicable, eligibility for participation in the Medicare and Medicaid

programs. The Clinical Site shall immediately notify the School of any change in the Clinical Site's licensure or eligibility status.

F. Insurance. Rogers Memorial agrees to maintain, during the term of this Agreement, Comprehensive General Liability Insurance that covers each Clinical Site for property damage or bodily injury that may occur at a Clinical Site. Rogers Memorial shall also maintain Professional Liability Insurance covering its employees.

G. Final Authority. The Clinical Site retains final authority for all aspects of operations at and management of the Clinical Site, and retains the right to terminate a Student's placement for cause at the sole discretion of the Clinical Site.

H. Remuneration. Students may not receive remuneration for services relating to the Clinical Education Program and performed for or on behalf of the Clinical Site.

3. FACULTY AND STUDENT RIGHTS AND RESPONSIBILITIES.

The School and the Clinical Site shall instruct the Students regarding Students' rights and responsibilities while they participate in a Clinical Education Program at a Clinical Site.

A. Conduct. Student shall, at all times while on the Clinical Site premises, conduct himself or herself in a professional manner and shall refrain from loud, boisterous, offensive or otherwise inappropriate conduct. Students shall refrain from the improper and illegal use of alcohol or other drugs, and shall not carry any firearms or other weapons except as permitted under applicable law.

B. Policies, Rules, and Regulations. Student shall abide by all policies, rules and regulations established by the Clinical Site and the School. If a Student or faculty member fails to so abide, the Clinical Site shall have the right to notify the School that such Student(s) or faculty member shall not return to the premises unless authorized to do so by Rogers Memorial.

C. Timeliness. Students shall report to the Clinical Site at the assigned place and time. Student shall immediately inform the Site Coordinator of the Student's inability to report to the Clinical Site as assigned.

D. Uniform and Identification. The Student shall wear appropriate uniform attire or other clothing as directed by the School or Clinical Site. The Student shall display proper identification as directed by the Clinical Site. The Student's appearance shall be, at all times, neat, clean, and professional.

E. Personal Expenses. While at the Clinical Site, the Student shall be responsible for the Student's personal expenses such as meals, travel, medical care and incidentals.

F. Evaluation of Experience. The Student shall, upon request of the School, Rogers Memorial, or the Clinical Site, provide a candid, written evaluation of the experience at the Clinical Site including, without limitation, preparation for the on-site experience, orientation to the Clinical Site and experience and supervision and the Clinical Site.

G. Orientation. Faculty and Students shall review and complete the orientation materials provided by Rogers Memorial or the Clinical Site prior to the first clinical day, including information about site/unit policies, procedures, equipment, and documentation.

4. FURTHER AGREEMENTS OF THE PARTIES.

A. The School shall in no event place any Student or other School personnel at any Clinical Site or permit any Student or School personnel to provide services for Rogers Memorial or any Clinical Site who has been suspended or excluded from participation in any state or federally funded health care program, including without limitation, Medicare or Medicaid.

B. The parties acknowledge their respective obligations governing the privacy and security of health information pursuant to the Health Insurance Portability and Accountability Act of 1996, as amended ("HIPAA") and its implementing regulations ("the Privacy Rule"). The School agrees that Students and School personnel who participate in the program hereunder will not use or disclose Protected Health Information ("PHI"), as that term is defined in 45 C.F.R. § 160.103, obtained in the course of the program for purposes other than those related to the program. Further, the School shall require participating Students and School personnel to agree not to use or disclose PHI obtained in the clinical setting for any non-clinical purposes, including teaching or educational purposes, unless the participant has written approval from Rogers Memorial. If written approval is given, the participant must either (1) obtain an authorization, compliant with the Privacy Rule, from each patient whose PHI is sought to be used; (2) de-identify the PHI in accordance with the Privacy Rule; or (3) use a "limited data set" as defined in the Privacy Rule, and sign a Data Use Agreement with Rogers Memorial. The parties agree that if future modifications or clarifications are made to the Privacy Rule that necessitate amendments to this Agreement, the parties will make such amendments. For purposes of HIPAA only, Students are, with respect to their interactions with patients/clients and their educational activities at Rogers Memorial, under the direct control of Rogers Memorial and are thus considered to be members of Rogers Memorial's "workforce," as that term is defined in 45 C.F.R. § 160.103.

C. All records of any service provided hereunder shall belong to Rogers Memorial or the applicable Clinical Site.

D. The School, its Students and School personnel shall not disclose to any third party or use (other than in fulfilling their duties under the program) any confidential or proprietary information of Rogers Memorial or its affiliates.

F. Rogers Memorial has the right to immediately refuse, suspend, or remove a Student or any School personnel, including coordinators, supervisors or instructors, from a Clinical Education Program for any reason Rogers Memorial deems appropriate provided that Rogers Memorial shall subsequently notify the School in writing of the reasons that the refusal, suspension, or removal occurred.

E. It is acknowledged and agreed by the parties that the School, any School personnel, and Students are "independent contractors" with respect to Rogers Memorial and the Clinical Site and that nothing in this Agreement is intended to nor shall be construed to create any employer/employee relationship or any relationship other than that of independent contractors. Rogers Memorial and Rogers Memorial facilities shall in no event have any obligations to the School, any School personnel, or Students, including payment of any compensation, any withholding, social security, or any other employee-related obligations. The School shall be solely responsible for the actions and omissions of its Students or any School personnel and for any resulting damages.

5. INDEMNIFICATION AND OTHER PROVISIONS.

A. School. The School shall indemnify and hold harmless Rogers Memorial and/or the Clinical Site, its governing board, directors, trustees, officers, and employees from and against any and all claims and liabilities (including reasonable attorney's fees and expenses incurred in the defense thereof) relating to personal injury or property damage to the extent arising out of misconduct or by negligent acts or omissions of the School's Students, faculty, employees or agents in connection with their duties under the Clinical Education Program.

B. Clinical Site. The Clinical Site and/or Rogers Memorial shall indemnify and hold harmless the School and its trustees, officers, employees and Student from and against any and all claims and liabilities (including reasonable attorney's fees and expenses incurred in the defense thereof) relating to personal injury or property damage, to the extent arising out of the conditions existing at the Clinical Site or arising out of intentional misconduct by or negligent acts or omissions of the Clinical Site's employees or agents in connection with their duties under the Clinical Education Program.

C. Notice of Claims. Each party agrees that it shall give the other party prompt notice of any claim, threatened or made, or suit instituted against it which could result in a claim for indemnification above.

D. Policies. The Students, while engaged in the Clinical Education Program, shall be under the supervision and control of the Clinical Site and shall be governed by the Clinical Site's policies relating to health care delivery and the Student's role in it.

E. Discrimination. It is mutually agreed that at no time shall the matter of race, color, religion, sex, sexual orientation, national origin, age, veteran status and/or disability be employed for the purpose of discrimination.

F. Amendments. The parties may modify this Agreement by written amendment signed by duly authorized representatives of each.

G. Relationships. It is understood and agreed that this Agreement is not intended and shall not be construed to create the relationship of agency, partnership, joint venture or associate between the Rogers Memorial and the School, or to create an employment relationship between the Rogers Memorial and the Students in the Clinical Education Program. The School and the Students shall be treated for all purposes as independent contractors pursuant to Section 5.E of this Agreement.

H. Privacy and Nondisclosure. In the event that the School discloses to the Clinical Site information from the educational record of any Student at the School, the Clinical Site agrees to comply with the Family Educational Rights and Privacy Act with respect to such information. The Clinical Site also agrees that its personnel will use such information only in the furtherance of the educational experience provided to each Student, and that such information will not be disclosed to any other party without such Student's prior written consent.

I. Termination. This Agreement may be terminated by either party's giving thirty (30) days' notice in writing to the other party by certified or registered mail at the addresses hereafter set forth:

If to Rogers Memorial:

Rogers Behavioral Health
34700 Valley Road
Oconomowoc, WI 53066
Attn: Paul Mueller, CEO

And cc to:

Rogers Behavioral Health
34700 Valley Road
Oconomowoc, WI 53066
Attn: Marybeth Herbst-Flagstad, General Counsel

If to University or College:

Herzing University, LTD.
Attn: Clinical Contracts
W140 N8917 Lilly Road
Menomonee Falls, WI 53051

J. Authority. The persons executing and attesting to the provisions of his Agreement on behalf of Rogers Memorial and the School, respectively, represent and warrant that they have full power, authority, and right to execute this Agreement and that the execution of this Agreement by each such person is sufficient and legally binding on the respective party without the joinder or approval of any other person or party.

K. Transfer of Rights. Neither party may subcontract or assign its rights or obligations under this Agreement without the express written consent of the other. Any attempt to do without consent shall be void and the other party may immediately terminate this Agreement.

L. Waivers. A failure of either party to insist upon or enforce any term or provision or to exercise any right, option, or remedy of this Agreement, or to require at any time, performance of any provision hereof shall not be construed as a waiver of any such term or provision. No waiver by either party of any provision hereof shall be binding unless made in writing and signed by such party, nor shall any single or partial exercise of any right or power under this Agreement preclude further exercise of any other right or power.

M. Severability. Should any of the terms or provisions of this Agreement be determined to be invalid, illegal, or unenforceable, such provision shall be deemed to be rescinded, and all remaining terms which reasonably can be given effect in the absence of the remaining terms shall remain in force unless it is clearly unreasonable to do so, or such amendment or modification would substantially

Last revised 6.1.17

change the terms of this Agreement to impose new and/or different obligations, economic or legal relationships between the parties or rights of the parties.

N. Governing Law. This Agreement shall be construed in accordance with the laws of Wisconsin without regard to its conflicts rules.

O. Execution. The parties may sign this Agreement in one or more counterparts, each of which constitutes an original and all of which together constitute the Agreement. Facsimile signatures constitute original signatures for all purposes.

P. Integration. This Agreement and all attachments embody the entire understanding of the parties with respect to the subject matter and supersede all previous or contemporaneous communications, either verbal or written, between the parties.

THIS AGREEMENT SHALL BE EFFECTIVE AS OF THE DATE OF LAST EXECUTION BY BOTH PARTIES.

ACKNOWLEDGEMENTS

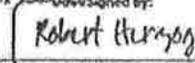
Rogers Memorial Hospital, Inc.

CB ~~Marybeth Herbst-Flagstad~~ — PAUL MUELLER
CB General Counsel — CEO, HOSPITAL DIVISION
Signed: 
Date: 8/28/17

Herzing University, LTD.

Printed Name: Robert Herzog

Title: CEO/COO

Signed: 

Date: 8/24/2017

Exhibit A
Clinical Education Program Memorandum

Student Name	Clinical Education Program Objectives, Goals & Expectations	Placement Dates	Clinical Site	Educational Coordinator

Last revised 6.1.17

Rogers Memorial Hospital Job Description

Job Title:	LICENSED PRACTICAL NURSE	FLSA:	Non-exempt
Supervisor:	Clinical Services Manager	Supervises:	None
Date:	8/31/98	Revision Date:	4/22/17
Department:	Nursing	Division:	Patient Care Services

Summary:

The licensed practical nurse performs basic nursing activities in the care of patients so they may achieve or regain, and then maintain, the maximum possible physical, emotional and social function. Role functions are limited and governed by the Wisconsin Nurse Practice Act, the Wisconsin Administrative Code, Wisconsin Board of Nursing Practice, and the corresponding policies and procedures of *Rogers Memorial Hospital*.

Job Duties & Responsibilities:

1. Implement patient care in an assigned patient load.
 - A. Observe, document and monitor each patient's psychiatric and physical changes and responses to treatment under the direction of the registered nurse (RN). This may include the following duties:
 - a. Admission data collection;
 - b. Discharge transcribing of information in preparation for discharge;
 - c. Medication reconciliation on admission and discharge;
 - d. Medication administration (See, 'E' below).
 - B. Identify potential patient care problems, abrupt changes or impending instability in the patient's condition, and exercise appropriate intervention leadership to prevent adverse patient outcomes.
 - a. Use appropriate de-escalation techniques: quiet room, locked seclusion or restraints.
 - b. Re-evaluate safety level.
 - c. Identify alcohol withdrawal syndrome.
 - d. Identify significant cardiac and/or respiratory symptoms requiring immediate medical intervention.
 - C. Implement patient care based on established care plans, Hospital policies and procedures, and unit standards of care, incorporating the patient's age-specific and cultural needs as appropriate.
 - D. Provide care in complex patient situations (as defined by the hospital) under the standards of the State that they provide care in; under the general supervision of the R.N., physician or other State approved medical professional. Duties to include:
 - E. a. Participate in the patient nursing assessment process
 - F. b. Obtaining and processing physician orders
 - G. c. Completing medication reconciliation orders and
 - H. d. Creating treatment plan.
 - E. Maintain integrity of tube feedings by preparing tube feeding dosages according to physician orders
 - F. Administer bolus for tube feeding patients
 - G. Demonstrate safe and correct medication administration by:
 - a. Accuracy in medication administration: right patient, right medication, right dose, right time, and right route.
 - b. Maintaining current knowledge of the medication's purpose and effects for each patient, as demonstrated by correct documentation of medication, as well as observations about responses to medication.
 - c. Accurately transcribing and implementing physician medication orders, after RN approval of the order.
 - d. Maintaining a continual awareness of monitoring the expected and unexpected medication efforts including adverse drug reactions, drug/drug or drug/food interactions, or other unexpected consequences of the medication.
 - e. Regularly conducting and documenting patient education about medications and obtaining medication consent.
 - f. Maintaining current knowledge about new pharmacologic products, including new medications or medications with new uses/therapeutic action.
 - H. Know the various program schedules and assist patients in maintaining these schedules.
 - I. Care for patients' hygienic and physical environment needs and for patients' personal belongings.
 - J. Employ established systems to monitor the location of all patients in assigned areas.

ROGERS MEMORIAL HOSPITAL
JOB DESCRIPTION - Licensed Practical Nurse 4.22.17

Page 2 of 4

- K. Accompany patients to meals, monitor their behavior, and record their food intake, as directed.
- 2. Act as an advocate for patients/residents.
 - A. Explain patient's rights so that they can understand, and obtain appropriate signatures.
 - B. Provide the patient with information, and obtain their signature on necessary consents.
 - C. Use knowledge of patient rights to assist patients in resolution of complaints / grievances.
 - D. Act as a patient advocate, use knowledge of patient rights and responsibilities, and protect patient's privacy and confidentiality.
- 3. Assist in the patient orientation process.
 - A. Know and employ Hospital policies and procedures regarding unit safety, the necessity of gown/contraband search on admission, and carry out the process in a respectful manner.
 - B. Remain sensitive to the individual patient/family stressors upon admission, while providing pertinent unit information.
- 4. Adhere to the nursing department and Hospital's Standards of Nursing Practice and Standards of Patient Care.
 - A. Protect patients, visitors and staff from environmental hazards by adhering to the safety and infection control standards.
 - B. Participate in continuing education and inservice programs to increase clinical competence and to meet professional needs and goals.
 - a. Report information obtained from continuing education programs to unit staff.
 - C. Attend 100% of required inservices, as scheduled.
- 5. Participate in projects, tasks and continuing education opportunities to improve professional skills and unit/department systems.
 - A. Develop goals and objectives for professional growth and discuss ways to achieve them with the Clinical Services manager.
 - B. Take the initiative to develop professional skills through continuing education.
 - C. Discuss, on a regular basis, progress toward work improvement goals with the Clinical Services manager.
 - D. Seek out projects and/or extra tasks to complete, based upon the needs of the unit or the immediate shift.
- 6. Promote department goals and the mission of the Hospital.
 - A. Communicate goals to fellow staff members.
 - B. Demonstrate measurable goal achievement.
 - C. Maintain department policies and procedures.
 - D. Include requirements and guidelines from external agencies (i.e., *Joint Commission* and *State of Wisconsin*).
 - E. Maintain and/or communicate the function backlog to the appropriate party at a set timeframe.
 - F. Educate new staff regarding regulations or requirements of those functions that relate to their areas or departments, as directed.
 - G. Demonstrate acceptance and training of student interns in the department, as directed.
- 7. Demonstrate understanding of *Joint Commission* and other regulatory agency compliance regulations.
 - A. Involve self in the learning and the application of standards relevant to the Nursing department.
 - B. Participate in inservices/seminars and other meetings, to increase involvement and awareness of regulations.
 - C. Involve self in the education of other disciplines regarding Nursing department regulations.
- 8. Participate in Hospital committees, performance improvement team meetings and team projects, as directed.
 - A. Demonstrate punctuality and preparedness.
 - B. Demonstrate effective communication and organizational skills, if applicable.
 - C. Contribute in a positive, solution-focused manner.
 - D. Education and involve self to the Hospital and Nursing department's performance improvement plans.

ROGERS MEMORIAL HOSPITAL
JOB DESCRIPTION - Licensed Practical Nurse 4.22.17

Page 3 of 4

- 9. Conduct self in a professional manner.
 - A. Demonstrate organizational skills that promote timely response to all inquiries and to task completion.
 - B. Communicate with all individuals in a positive and professional manner.
 - C. Attempt to resolve individual issues with peers in a positive, calm manner, with a focus on solution.
 - D. Communicate concerns and provide solutions for same.
 - E. Attend outside seminars to promote professional growth.
 - F. Demonstrate a positive and professional attitude toward parties outside the Hospital (patient families, visitors, vendors, etc.).
 - G. Comply with the Hospital's policies and procedures, including Human Resources, Infection Control and Employee Health policies and programs.
 - H. Project a professional image by wearing appropriate, professional attire.

Physical/Mental Demands:

- 1. The majority of time is spent inside the building; walking, pulling, pushing, bending, twisting, sitting and grasping are routine activities. Will be required to lift work equipment, patient care equipment, supplies and patients, within reason. Personal judgment dictates weight-lifting limits, but must be able to lift a minimum of fifty (50) pounds.
- 2. Verbal and hearing ability required to interact with patients and employees. Numerical ability required to maintain records and operate a computer.
- 3. Able to plan, control and direct all aspects of employee relations. Tact required to deal effectively with employees and professional staff. Logical thinking and discretion required to make decisions in initiating and implementing policies and procedures and standards.
- 4. Must be able to read and communicate through written, verbal and auditory skills and abilities.
- 5. Physically/Mentally able to perform job duties as verified by a physical exam by a licensed physician, per post-employment physical.

Education/Training Requirements:

- 1. Licensed Practical Nurse licensed by *Wisconsin State Board of Nursing* or the State of the Rogers clinical facility. License must be in 'good standing' with the *Wisconsin State Board of Nursing* or the State they practice.
- 2. *American Heart Association* Healthcare Provider CPR certification or *American Red Cross* Professional Rescue is required within thirty (30) days of date-of-hire. Annual re-certification is required.
- 3. Formal training in management of the aggressive patient within sixty (60) days of date-of-hire. Annual re-certification is required.
- 4. Previous psychiatric experience with children, adolescents and adults is preferred.

In accordance with the Americans with Disabilities Act, the above is intended to summarize the essential functions of and requirements for the performance of this job. It is not meant to be an exhaustive list of miscellaneous duties and responsibilities that may be requested in the performance of this job.

SIGNATURES:

DocuSigned by:

Brian Kramer

ISI

5/18/2017

BRIAN KRAMER, VICE-PRESIDENT HUMAN RESOURCES

Date

DocuSigned by:

Paul Mueller

ISI

5/18/2017

PAUL MUELLER, CEO Rogers Memorial Hospital

Date

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366

FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53708-8366
E-Mail: dsps@wisconsin.gov
Website: dsps.wisconsin.gov

BOARD OF NURSING

CLINICAL FACILITY SELECTION AND SIMULATED SETTING EXPERIENCES

Completion of this form is required for each clinical facility or simulated setting experience as part of the application for authorization to admit students. In addition, this form shall be completed, kept on file in the school of nursing office, and made available to the Board upon request for all clinical facilities and all simulated setting experiences utilized by the nursing school.

I. IDENTIFYING DATA

- A. Name of facility: Luther Manor
- Address: 4545 N. 92nd Street
Wauwatosa, WI 53225
- Telephone: 262-646-4411
- B. Type of facility: Hospital Nursing Home Community Health Agency
 Other: Geriatric: multiple levels of care
- C. Number of beds at facility: 97
- D. Types of patients: Independent, assisted living, skilled nursing and rehab
- E. Administrator of facility: Anne Becker
- F. Director of nursing service: _____
- G. School(s) of nursing utilizing the facility: Herzing Univesity, BSN; UW-Milwaukee; Marquette

II. EXHIBITS (*attach to this form*)

- A. Copy of formal agreement signed by:
1. Administrator of facility
 2. Educational administrator of nursing school
- B. Copy of the position description for:
1. Registered Nurses
 2. Licensed Practical Nurses
- C. Listing of simulation activities provided and a listing of types of simulation equipment utilized

Wisconsin Department of Safety and Professional Services

III. PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

A. Have the nursing school objectives been shared with the facility? Yes No

Comments: _____

B. Does the facility agree to cooperate in promoting the nursing school objectives? Yes No

Comments: _____

C. Are there experiences in the facility available to students to meet clinical objectives? Yes No

Comments: _____

D. Is the practice of registered nursing in the facility within the legal scope of practice for registered nurses as defined in Chapter 441.11(4), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

E. Is the practice of licensed practical nursing in the facility within the legal scope of practice for licensed practical nurses as defined in Chapter 441.11(3), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

F. If simulated settings are utilized, list the activities, responsibilities and equipment which are included in the learning experience:

Herzing University
Nursing School

Dr. Deborah Ziebarth
Educational Administrator

Dr. Deborah Ziebarth
Signature

2626491710
Telephone Number

Herzing University
Nursing Program(s) Utilizing Facility/Simulated Setting

Department Chair Nursing
Title

12/22/2017
Date

dziebarth@herzing.edu
Email Address



LUTHER MANOR
A Life Plan Community

Job Description

Effective Date 11/2016

New Revised X

Subject: Licensed Practical Nurse - HCC

SUMMARY:

Plan, direct and administer nursing services as a part of the interdisciplinary team, while under the supervision of the RN team leader, Nurse Manager or RN Shift Supervisor.

ESSENTIAL JOB FUNCTIONS:

1. Performs duties within the Licensed Practical Nurse scope of practice as determined by Wisconsin Board of Nursing.
2. Observes, plans, implements, and evaluates the nursing care given to residents, documenting findings per Luther Manor policy and procedure (i.e. Nurses Notes, Weekly Summaries, 24 Hour Change of Condition Report Sheet, etc.)
3. Promotes and protects the rights of residents by maintaining confidentiality, dignity and privacy.
4. Administers medications and provides ordered treatments to residents.
5. Monitors drug control and supplies (shift to shift count, expiration dates).
6. Makes frequent rounds on residents to observe, examine, and evaluate resident care, inspect environment, and evaluate staff interactions.
7. Observes, documents and monitors residents for changes in physical and emotional condition (subtle and acute); notifies RN team leader, Nurse Manager/RN Shift Supervisor, physician and responsible parties promptly.
8. Provides resident/family education as needed (i.e. medication teaching, diabetic teaching, etc.)
9. Fosters and promotes effective relationships with residents, families, and visitors.
10. Promptly reports actual or suspected abuse, neglect, misappropriation and injuries of unknown origin to the Nurse Manager or RN Shift Supervisor; reports any family or resident complaints, resident change of condition, injury or incident to Nurse Manager or RN shift supervisor. Completes documentation of same per Luther Manor policy and procedure.
11. Updates the Careplan and C.N.A. Care Assignment Sheets as needed.
12. Communicates with personnel in other departments/shifts to facilitate appropriate resident care expectations.
13. Assigns C.N.A.'s work via the Group Assignment Sheets on the unit.
14. Supervises and directs the care provided by C.N.A.s on the assigned unit.
15. Other duties as assigned.

REQUIREMENTS:

1. Current Wisconsin Licensed Practical Nurse license.
2. Work with the realization that errors may have serious consequences for residents and coworkers.
3. The ability to speak to and hear residents and staff; also to read and write English.
4. The ability to deal tactfully and effectively with residents and staff.
5. The mobility to spend an average of 70% of the work shift standing and/or moving about the work area.
6. The physical strength to move or assist residents as needed following their plan of care.
7. Must be able to push, pull or lift 50 pounds.
8. Maintains knowledge of current nursing practice and regulations through attendance at seminars, inservices, etc.

SUPERVISION:

1. Reports to the Nurse Manager or RN Shift Supervisor.

My signature acknowledges that the above information has been presented and I have read it.

Signature

Date

Print Name

Ziebarth, Deborah

From: Neave, Joan
Sent: Friday, March 23, 2018 2:19 PM
To: Ziebarth, Deborah
Subject: FW: MOU - Luther Manor & Herzing University
Attachments: Luther Manor MOU.pdf

Joan Neave MSN, PMH RN-BC
Nursing Clinical Coordinator and Associate Professor of Nursing
Herzing University, Brookfield Campus
555 South Executive Drive, Suite 100
Brookfield, WI 53005
www.herzing.edu
jneave@herzing.edu
O: (262)-671-0675 Ext. 60466

HERZING
— UNIVERSITY —

From: Neave, Joan
Sent: Thursday, February 08, 2018 3:24 PM
To: Veronica Jasper <vjasper@luthermanor.org>
Subject: RE: MOU - Luther Manor & Herzing University

All signed!
Thanks again,
Joan

From: Veronica Jasper [<mailto:vjasper@luthermanor.org>]
Sent: Thursday, February 08, 2018 2:51 PM
To: Neave, Joan <jneave@herzing.edu>
Cc: VERONICA JASPER <vjasper@luthermanor.org>; Anne Becker <abecker@luthermanor.org>
Subject: MOU - Luther Manor & Herzing University

Hi Joan -

Attached is the MOU between Luther Manor & Herzing w/Julie's signature.

Veronica Jasper
Administrative Services Specialist
Luther Manor a Life Plan Community
4545 N. 92nd Street
Wauwatosa, WI 53225

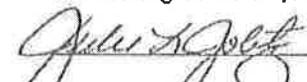
**MEMORANDUM OF UNDERSTANDING BETWEEN HERZING UNIVERSITY-
BROOKFIELD AND Luther Manor**

1. **PARTIES.** This Memorandum of Understanding (hereinafter referred to as a MOU) is made and entered into by and between Herzing University-Brookfield, located at 555 South Executive Drive, Brookfield, WI and Luther Manor located at 4545 N. 92nd St. Wauwatosa, WI 53225
2. **PURPOSE.** The purpose of this MOU is to establish non-compensated nursing clinical experiences for students in the Practical Nurse program at Herzing University-Brookfield and Luther Manor
3. **TERM OF MOU.** This MOU is effective upon the date executed below by duly authorized representatives of the parties to this MOU and will remain in force unless otherwise terminated by the parties. This MOU may be terminated, without cause, by either party upon written notification, which may be sent by electronic or other means to the parties at the addresses listed above.
4. **RESPONSIBILITIES.** The parties agree that prior to the creation of non-compensated clinical nursing experiences for the Practical Nurse students at Herzing University-Brookfield the parties, upon mutual agreement, will execute an Affiliation Agreement which will detail the rights, obligations and responsibilities of the parties to this MOU.
5. **AMENDMENTS.** Either party may request changes to this MOU. Any changes modifications or revisions or amendments to this MOU which are agreed upon by and between the parties shall be incorporated, in writing, to this MOU and become effective when executed and signed by the parties to this MOU.
6. **APPLICABLE LAW.** The construction, interpretation and enforcement of this MOU shall be governed by the laws of the State of Wisconsin, unless otherwise mutually agreed to by the parties as outlined in paragraph five (5).
7. **ENTIRETY OF AGREEMENT.** This MOU, consisting of one (1) page represents the entire agreement between the parties.
8. **SIGNATURES.** In witness whereof, the parties to this MOU, through their duly authorized representatives have executed this MOU on the date(s) below.

Herzing University-Brookfield


Jarvis Racine, Campus President

Partner Organization *Luther Manor*


Name and Title

MEMORANDUM OF UNDERSTANDING FOR
HEALTH CARE CLINICAL EXPERIENCE

**HERZING
UNIVERSITY**

This Agreement for Herzing University, Ltd. Experience (the "Agreement") is entered into by and between Herzing University, Ltd. (hereafter "University"), and Luther Manor 4545 N. 92nd St. Milwaukee, WI 53225 (hereafter "Facility").

RECITALS

The University wishes to provide clinical experiences for students enrolled in Herzing University BSN Nursing programs (hereafter "Students"). The Facility operates a healthcare facility and has the capability, through its medical records, clinical, or medical administration departments, to provide settings for clinical experiences required by such Students and desires to provide a setting for such clinical experiences in cooperation with the University in order to support quality education for health professionals in the community and the delivery of appropriate health services to the community.

NOW, THEREFORE, the parties agree as follows:

1. Responsibilities of the Facility. The Facility agrees to serve as a cooperating health care facility and provide clinical experiences for Students at the Facility in University's program. This will be accomplished by allowing Student participation in patient care as set forth in this Agreement. The University, in consultation with the Facility, shall schedule and arrange for the number and timing of such experiences. The Facility hereby agrees as follows:
 - a. To observe the non discrimination policy of the University: that Students are accepted, without discrimination as to race, color, creed, or sex, subject to the Facility's right to terminate clinical experiences as set forth in subparagraph 3-d.
 - b. To provide clinical practice and/or observational opportunities in the appropriate service departments of the Facility.
 - c. To allow Students, at their own expense, to use the dining and other facilities.
 - d. To make available to Students emergency care and treatment in the event of illness or injury occurring in clinical areas during clinical instruction. All charges for treatment shall be the responsibility of the Students, or in the case of a minor, his or her parents.
 - e. To provide information pertinent to evaluation of Students and the clinical experience in general to the University at the University's request.
 - f. To provide the University and Students with access to copies of the Facility's policies, procedures and regulations that are pertinent to the clinical experience.

2. Responsibilities of University. The University agrees:
 - a. In cooperation with the Facility, orientation to and enforcement of requirements that all Students abide by the policies, procedures, rules, and regulations of the Facility, including standards for dress, grooming, and personal hygiene.

- b. Provision of general liability insurance coverage of \$1,000,000 per occurrence and \$2,000,000 in the aggregate and professional liability insurance coverage of \$2,000,000 per claim and \$6,000,000 in the aggregate covering acts/or omissions by Students during practicum experiences hosted by the Facility. The University shall immediately notify the Facility of any changes, limitations, or termination of insurance coverage and provide evidence of such insurance upon request by the Facility.
 - c. Require Students to comply with the Facility's policies and procedures governing mandatory reporting of child and dependent adult abuse, infection control, and hazardous materials management. Upon the Facility's request, any Student that the Facility believes to be in violation of its policies and procedures shall be removed by the University.
 - d. Compliance with all Facility requirements for verification of each Student's health and immunization status. All required verification will be maintained at the University and made available to the Facility upon request. Facility must notify University in writing of any required verifications prior to student's clinical experience.
 - e. Provide orientation and education of all Students in confidentiality rules, in cooperation with the Facility, enforcement of a requirement that all Students follow the Facility's policy with regard to confidential information, including obtaining signed confidentiality agreements and compliance with all policies and procedures adopted by the Facility to comply with the privacy or security final regulations promulgated under the Health Insurance Portability and Accountability Act. Upon the Facility's request, any Student that the Facility believes to be in violation of its policies and procedures shall be removed by the University.
3. Conditions. This Agreement shall be continuously subject to the following conditions accepted by each of the parties:
- a. The University shall provide the Facility with estimates of the number of Students desiring to be placed in clinical departments. The Facility may close units to Students' clinical experiences at any time, without notice. At least two (2) weeks' prior to the beginning of new Students' placements, the University shall notify the Facility's contact person of the names of each of the Students to be included in the next placement.
 - b. The Facility, University and Students are independent contractors in their relationships to one another. It is understood that Students are not employees of the Facility, do not receive compensation or benefits in connection with their activities at the Facility, are not provided workers' compensation insurance, and shall not act as agents or employees of the Facility.
 - c. Each party agrees to accept and is responsible for its own acts and/or omissions in providing services under this Agreement as well as those acts or omissions of its employees and agents or Students, as the case may be, and nothing in this Agreement shall be construed as placing any responsibility of such acts or omissions onto the other party.
 - d. The Facility has the right to terminate a Student's clinical experience whenever, in the judgment of the responsible Facility personnel, such action is necessary to preserve smooth operations and the quality of patient care. The Facility must notify the University immediately of any termination action.

e. The Facility and University shall indemnify and hold each other harmless, their agents, students, and employees, from any and all liability, damage, expense, cause of action, suits, claims of judgments arising from injury to person or personal property or otherwise which arises out of the act, failure to act or negligence of the Facility or University, its agents and employees, in connection with or arising out of the activity which is the subject of this Agreement.

4. Term and Termination. This Agreement shall be effective when fully executed by both parties, and shall remain in effect for one (1) year. This Agreement shall renew automatically for additional one (1) year periods, until either party notifies the other party hereto in writing of its intent not to renew. Either party may terminate this Agreement at any time upon thirty (30) days notice to the other party. In the event of a termination of the Agreement, any Student(s) currently completing a clinical experience at Facility will be allowed to complete their clinical experience as previously agreed to by both parties.

5. a. Contact Persons and Notices. The designated individuals for contact and notice purposes shall be, in the case of the University:

Name: _____
 Title: _____
 Organization: _____
 Address: _____
 Phone: _____
 Email: _____

And, in the case of the Facility:

Name: Amy J. Lloyd
 Title: Director of Nursing
 Organization: Luther Manor
 Address: 4545 N. 92nd St.
 Phone: 414-964-3880 X 45030
 Email: ALloyd@Luthermanor.org

b. Official Signatory. The designated individual to approve and sign documents for the University shall be:

Representative: Associate VP of Educational Funding & Compliance and/or Designee
 Organization: Herzing University
 Address: W140 N8917 Lilly Road, Menomonee Falls, WI 53051

6. Miscellaneous. The following additional conditions apply to this Agreement:

a. Severability. In the event one or more of the provisions contained in this Agreement are declared invalid, illegal, or unenforceable in any respect, the validity, legality, and

enforceability of the remaining provisions shall not in any way be impaired thereby unless the effect of such Invalidity is to substantially impair or undermine either party's rights and benefits hereunder.

- b. Assignment. This Agreement is personal to the parties and may not be assigned or transferred without written consent of the other party.
- c. Waiver. The failure of either party to insist in any one or more instances upon performance of any terms or conditions of this Agreement shall not be construed as a waiver of future performance of any such term, covenant, or condition; but the obligations of such party with respect thereto shall continue in full force and effect.
- d. Recitals. The recitals are intended to describe the intent of the parties and the circumstances under which this Agreement is executed and shall be considered in the interpretation of this Agreement.
- e. Amendment. This Agreement may be amended only by written agreement of the parties.
- f. Applicable Law. This Agreement shall be interpreted according to the law of the state of Wisconsin.
- g. Entire Agreement. This Agreement constitutes the entire agreement between the parties pertaining to the subject matter hereof and subsumes and incorporates all prior written and oral statements and understandings.

IN WITNESS WHEREOF, the parties have executed this Agreement in duplicate on the dates set opposite their respective names.

University: Herzing University, Ltd. and Facility: Luther Manor

Signature: [Handwritten Signature]
 Printed Name: Kevin McShane
 Title: Associate VP of Educational Funding & Compliance and/or Designee
 Phone Number: 414-271-5619
 Email Address: kmcshane@herzing.edu
 Date: 2/2/16

Signature: [Handwritten Signature]
 Printed Name: David J. Beulich
 Title: Administrator
 Phone Number: 414-464-3880
 Email Address: DBeulich@luthermanor.org
 Date: 2-22-2016

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366
FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53708-8366
E-Mail: dsps@wisconsin.gov
Website: dsps.wisconsin.gov

BOARD OF NURSING

CLINICAL FACILITY SELECTION AND SIMULATED SETTING EXPERIENCES

Completion of this form is required for each clinical facility or simulated setting experience as part of the application for authorization to admit students. In addition, this form shall be completed, kept on file in the school of nursing office, and made available to the Board upon request for all clinical facilities and all simulated setting experiences utilized by the nursing school.

I. IDENTIFYING DATA

- A. Name of facility: Brookfield Rehabilitation & Speciality Care
Address: 18740 Bluemound Road
Brookfield, WI 53045
Telephone: 262-782-0230
- B. Type of facility: Hospital Nursing Home Community Health Agency
 Other: Rehab
- C. Number of beds at facility: 224
- D. Types of patients: Older Adults
- E. Administrator of facility: D.J.Swant
- F. Director of nursing service: NA
- G. School(s) of nursing utilizing the facility: Herzing, BSN
- _____
- _____

II. EXHIBITS (*attach to this form*)

- A. Copy of formal agreement signed by:
1. Administrator of facility
 2. Educational administrator of nursing school
- B. Copy of the position description for:
1. Registered Nurses
 2. Licensed Practical Nurses
- C. Listing of simulation activities provided and a listing of types of simulation equipment utilized

Wisconsin Department of Safety and Professional Services

III. PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

A. Have the nursing school objectives been shared with the facility? Yes No

Comments: _____

B. Does the facility agree to cooperate in promoting the nursing school objectives? Yes No

Comments: _____

C. Are there experiences in the facility available to students to meet clinical objectives? Yes No

Comments: _____

D. Is the practice of registered nursing in the facility within the legal scope of practice for registered nurses as defined in Chapter 441.11(4), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

E. Is the practice of licensed practical nursing in the facility within the legal scope of practice for licensed practical nurses as defined in Chapter 441.11(3), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

F. If simulated settings are utilized, list the activities, responsibilities and equipment which are included in the learning experience:

Herzing University
Nursing School

Dr. Deborah Ziebarth
Educational Administrator

Dr. Deborah Ziebarth
Signature

2626491710
Telephone Number

Herzing University
Nursing Program(s) Utilizing Facility/Simulated Setting

Department Chair Nursing
Title

12/22/2017
Date

dziebarth@herzing.edu
Email Address

Neave, Joan

From: Atkinson, Trisha <TATKINSON@5SSL.COM>
Sent: Friday, November 10, 2017 11:23 AM
To: Neave, Joan
Subject: RE: Herzing LPN program

Absolutley! We would LOVE to have them!! ☺

Thank you,
Trisha Atkinson

From: Neave, Joan [mailto:jneave@herzing.edu]
Sent: Thursday, November 09, 2017 1:49 PM
To: Atkinson, Trisha
Subject: [EXTERNAL] Herzing LPN program

Hello Ms. Atkinson,
am writing to let you know Herzing University Brookfield is launching an LPN program in 2018, anticipated to start in May.
We are reaching out to our clinical partners to inquire about the possibility of placement of LPN students in clinical at Brookfield Rehab, AM or PM shifts.
We have enjoyed our partnership very much.
The rehab unit would be an excellent fit for these students clinical learning needs.
Can you please let me know if LPN student placement can be considered?
Thank you so much,
Joan Neave

Joan Neave MSN, PMH RN-BC
Nursing Clinical Coordinator and Associate Professor of Nursing
Herzing University, Brookfield Campus
555 South Executive Drive, Suite 100
Brookfield, WI 53005
www.herzing.edu
jneave@herzing.edu
O: (262)-671-0675 Ext. 60466

HERZING
— UNIVERSITY —

Department: NursingReports to: Charge Nurse or Unit Manager

FUNCTION: Provides nursing care, nursing services and health education to nursing home residents.

QUALIFICATIONS: The requirements listed below are representative of the knowledge, skill and/or ability required.

Minimum Qualifications:

- Freedom from illegal use of drugs.
- Freedom from use of and effects of use of drugs and alcohol in the workplace.
- Anyone found guilty by a court of law of abusing, neglecting or mistreating individuals in a health care related setting are ineligible for employment in the position.

Education and/or Experience: Licensed L.P.N., preferably with experience in long-term care of geriatric nursing.

Certificates, Licenses, Registrations: Current state license to practice as a nurse. Current CPR certification and additional certification in nursing specialty desired.

LANGUAGE SKILLS: Ability to read, analyze and interpret general business periodicals, professional journals, technical procedures or governmental regulations. Ability to write reports, business correspondence, nursing/Resident progress notes and nursing procedures. Ability to effectively present information and respond to questions from department heads, customers (Residents, family members, physicians, etc.) and the general public.

MATHEMATICAL SKILLS: Ability to add, subtract, multiply and divide in all units of measure, using whole numbers, common fractions and decimals. Ability to compute rate, ratio and percent and to draw and interpret bar graphs.

REASONING ABILITY: Ability to solve practical problems and deal with a variety of concrete variables. Ability to interpret a variety of instructions furnished in written oral, diagram or schedule form.

ESSENTIAL FUNCTIONS AND RESPONSIBILITIES: To perform this job successfully, an individual must be able to perform each key function satisfactorily. Reasonable accommodations may be made to enable individuals with disabilities to perform the key functions.

- Reviews medication and treatment records for completeness, accuracy in transcription of physician orders and adherence to stop order policies.
- Administers and documents administration of medications, enteral nutrition and treatments per the physician's order and accurately records all care provided.
- Orders and documents receipt of medications.
- Supervises the serving and documentation of prescribed diets and fluid intake.
- Counts all narcotics, signs for count and exchanges keys to medication carts and medication room.
- Checks emergency equipment (oxygen and suction) and emergency medication kit (if application)
- Follows procedures related to the use of nursing equipment and supplies.
- Performs other duties as assigned by the DON.

Maintenance Of Supplies/Equipment:

- All equipment is operated in a safe manner and the only equipment utilized is that which previous training of use has occurred.
- Defective equipment is reported to the Manager.
- The nurses station is maintained:
 - a. Supplies are maintained at par levels and are arranged in an organized manner.
 - b. Nurses station is neat and orderly.
 - Assure cleaning and maintenance occurs according to schedule.
 - a. IV or tube feeding pump poles, tube feeding infusion pumps, and suction machines are wiped down weekly.
 - b. Utility room is checked routinely for supplies that need to be returned to the appropriate department, meal trays requiring return to dietary, and linen that requires removal to the laundry.
 - c. Safety hazards are removed from unit floors (liquid spills, food, paper, equipment cords, etc.).
 - Assure the resident's environment is safe and clean.
 - Individual patient/resident supplies are restocked as indicated.
 - Procedures are performed according to established method in the procedure manual.
 - Body substance precautions and other appropriate infection control practices are utilized with all activities.
 - Safety guidelines established by the facility (i.e. proper restraint and side-rail use) are followed.

Staff Development:

- Participate as requested by the Medical Director or Director of Nursing Services in the planning and conducting of in-service training classes concerning dermatologic nursing skills and procedures used within the facility
- Participate in educational programs for residents and their family members relative to skin care when a resident is being discharged to home.
- Attend and participate in annual in-service programs for hazard communication, TB management, bloodborne pathogens standard, and other related programs.
- Attend and participate in advance directive in-service programs for the staff and community.

Safety and Equipment:

- Assist in monitoring the inventory of medications, medical supplies, and equipment to ensure an adequate supply of skin care products are on hand to meet the needs of residents.
- Be familiar with and use as appropriate all items of personal protective equipment offered by the facility, including, but not limited to, masks, gowns, gloves, and back brace to be worn when lifting.
- Wear and/or use safety equipment and supplies (e.g., back brace, mechanical lifts, etc.) when moving or lifting residents.

Resident Rights:

- Maintain the confidentiality of all resident care information.
- Monitor all care and activities of residents to ensure that residents are treated fairly, and with kindness, dignity and respect.
- Ensure that all nursing care is provided in privacy and that nursing service personnel knock before entering the resident's room.
- Report any complaints or grievances made by residents regarding nursing or medical care to the Director of Nursing Services. Maintain a written record of any resident's complaints or grievances communicated to you with a notation of actions taken.
- Report and investigate all allegations of resident abuse and/or misappropriation or resident property.
- Ensure that nursing staff personnel honor the resident's refusal of treatment request. Ensure that such requests are in accordance with the facility's policies governing advance directives.

Resident Rights: Promotes and protects resident's rights, assists Residents to make informed decisions, treats Residents with dignity and respect, protects Residents' personal belongings, reports suspected abuse or neglect, avoids the need for physical restraints in accordance with current professional standards and, supports independent expression, choice and decision-making consistent with applicable law and regulation.

WORK ENVIRONMENT: The work environment characteristics described are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is occasionally exposed to blood or other body fluids, fumes r airborne particles and toxic or caustic chemicals. The noise level in the work environment is usually moderate.

COMMUNICATION:

JOB DESCRIPTION REVIEW: I understand the job description, its requirements and that I am expected to complete all duties as assigned. I understand the job duties may be altered from time to time. I have noted below any accommodations that are required to enable me to perform these duties. I have also noted below any job duties that I am unable to perform, with or without accommodation.

Employee's Signature

Date

Supervisor's Signature

Date

cc: Personnel File
Employee

ESSENTIAL FUNCTIONS	RATING	COMMENTS
1. Institutes appropriate nursing intervention which might be required to stabilize a resident's condition and/or prevent complication.		
2. Makes daily resident rounds to interview physical and emotional status and to implement any required nursing interventions.		
3. Responds to resident and family concerns and ensures that each concern is documented and a resolution is initiated or communicated to appropriate staff.		
4. Coordinates admission, discharge and transfer of residents.		
5. Obtains report from nurse he or she is relieving, provides report to nurse coming on duty and keeps the charge nurse or others (as appropriate) informed about the status of residents and related matters.		
6. Prepares, administer and documents medications following accepted practices.		
7. Consults with licensed or registered nurse, physician or licensed independent practitioner.		
8. Clarifies any order or treatment regimen believed to be inaccurate, ineffective or contraindicated by consulting with the appropriate licensed practitioner.		
9. Notifies the supervising nurse when medication or treatment issues arise. Assists in discussion making process regarding non-delivery of same.		
10. Knows the rationale for the effect of medications and treatments and correctly administers same.		
11. Accurately reports and documents the resident's symptoms, responses and status.		
12. Monitors residents who self-administer medication and reports deviation from the plan of care to the licensed or registered nurse.		
13. Administers medications within 60 minutes of schedule time.		
14. Identifies residents before administering medications.		
15. Secures medication cart.		

ESSENTIAL FUNCTIONS	RATING	COMMENTS
32. Defective equipment is reported to the Manager.		
33. The nurses station is maintained: c. Supplies are maintained at par levels and are arranged in an organized manner. d. Nurses station is neat and orderly.		
34. Assure cleaning and maintenance occurs according to schedule. d. IV or tube feeding pump poles, tube feeding infusion pumps, and suction machines are wiped down weekly. e. Utility room is checked routinely for supplies that need to be returned to the appropriate department, meal trays requiring return to dietary, and linen that requires removal to the laundry. f. Safety hazards are removed from unit floors (liquid spills, food, paper, equipment cords, etc.).		
35. Assure the resident's environment is safe and clean.		
36. Individual patient/resident supplies are restocked as indicated.		
37. Procedures are performed according to established method in the procedure manual.		
38. Body substance precautions and other appropriate infection control practices are utilized with all activities.		
39. Safety guidelines established by the facility (i.e. proper restraint and side-rail use) are followed.		
40. All accidents or incidents observed are reported on the shift that they occur.		
41. Intake and output is accurately recorded on the appropriate form.		
42. Patient/resident weights are recorded on the appropriate form.		
43. Nursing care flowsheet (if applicable) is maintained.		
44. Only Five Star approved abbreviations are used when recording information.		

ESSENTIAL FUNCTIONS	RATING	COMMENTS
60. Time is spent with residents rather than other personnel.		
61. Co-workers are readily assisted as needed.		
Staff Development		
62. Participate as requested by the Medical Director or Director of Nursing Services in the planning and conducting of in-service training classes concerning dermatologic nursing skills and procedures used within the facility		
63. Participate in educational programs for residents and their family members relative to skin care when a resident is being discharged to home.		
64. Attend and participate in annual in-service programs for hazard communication, TB management, bloodborne pathogens standard, and other related programs.		
65. Attend and participate in advance directive in-service programs for the staff and community.		
Safety and Equipment		
66. Assist in monitoring the inventory of medications, medical supplies, and equipment to ensure an adequate supply of skin care products are on hand to meet the needs of residents.		
67. Be familiar with and use as appropriate all items of personal protective equipment offered by the facility, including, but not limited to, masks, gowns, gloves, and back brace to be worn when lifting.		
68. Wear and/or use safety equipment and supplies (e.g., back brace, mechanical lifts, etc.) when moving or lifting residents.		
Resident Rights		
69. Maintain the confidentiality of all resident care information.		
70. Monitor all care and activities of residents to ensure that residents are treated fairly, and with kindness, dignity and respect.		
71. Ensure that all nursing care is provided in privacy and that nursing service personnel knock before entering the resident's room.		



Employee Name:	Date:
----------------	-------

Job Specific Performance Rating

Using the three-level rating scale, how would you rate this employee's overall job performance?

Each specific responsibility should be scored with 1, 2 or 3 based on level of achievement with Needs Improvement equaling 1, Meets Expectation equaling 2 and Exceeds Expectation equaling 3. Add the total number of points and divide by 3 to determine average rating.

_____ *Total Points Achieved (Add points from all line items)*

÷

_____ *Total Possible Points (# of line items x 3)*

=

_____ X 100 = *Performance Rating* _____ %

86% to 100%	<i>Exceeds Expectation</i>
50% to 85%	<i>Meets Expectation</i>
0 to 49%	<i>Needs Improvement - No Increase at this time. (A Performance Improvement Plan needs to be created and the employee should be re-evaluated after an additional 90 Days)</i>

DEVELOPMENT PLANS: Include plans to develop or improve the employee's performance or potential, including type of plan(s) and tentative timetable for implementation.

Subject and Type of Plan(s)

Tentative Timetable

SUBJECT		TYPE OF PLAN	
1. Knowledge	4. Leadership Skills	1. Directed Self-Development (Reading, Self Study)	4. Counseling, Coaching
2. Organization	5. Communications	2. Formal Training	5. On-the-Job Training
3. Decision Making Skills	6. Personal Qualities	3. Outside Education	6. No Plan at Present

EMPLOYEE COMMENTS

SIGNATURES

Employee

Date

Supervisor

Date

Review Date:

Student Affiliation Agreement

Between

HERZING UNIVERSITY

And

BROOKFIELD REHAB

This Agreement is made as of the 5th of December, 2011 between Brookfield Rehab d/b/a Brookfield Rehab ("Facility") and Herzing University ("Educational Agency").

Term: The initial term of this Agreement shall be for a period of one (1) year commencing on 1/9/2012 and shall automatically renew for additional terms of one (1) year each unless the contract is otherwise terminated as provided herein.

Termination: Either party may terminate this agreement upon thirty (30) days notice in writing to the other party. If Facility terminates this Agreement less than thirty (30) days prior to commencement of a course, students enrolled in the course may continue under this agreement until the course is completed; provided that Facility may terminate this agreement immediately, regardless of the timing of commencement or completion of coursework, if failure to do would be inconsistent with resident care.

It is agreed and understood that the students participating in the educational program at Facility are doing so solely for training and educational purposes. In consideration of the promises and the mutual covenants contained herein, the parties to this Agreement agree as follows:

FACILITY'S RESPONSIBILITIES

Facility shall:

1. Have sole authority and control over all aspects of resident services, including those activities where students may be exposed to or interrelate with residents.
2. Make Facility available to students enrolled in the educational program at the discretion of Facility. Resident assignments, days and hours will be mutually agreed upon by Facility and the Educational Agency.
3. Agrees to provide general orientation for students to Facilities applicable policies/procedures to include but not limited to safety, confidentiality, MSDS, blood borne pathogens, Hepatitis B, and HIPAA.

4. Have the right in its sole discretion to refuse or limit access under this agreement, to any student and/or instructor who Facility deems has not adhered to the terms of this agreement, who constitutes a threat to resident health or safety, or to the successful operation of the educational program or Facility. Facility will provide the Educational Agency with written notice as soon as it is reasonably possible when it invokes its rights under this section.
5. Contribute in the evaluation of students as may be requested by the Educational Agency.
6. Facility will select a person reasonably acceptable to Educational Agency to supervise students who participate in the educational program (the "Supervisor"). Students will function under the direct supervision of the Supervisor or his or her designee. Educational Agency will communicate to the Supervisor what level of assignments is appropriate given each student's level of competence.

THE EDUCATIONAL AGENCY'S RESPONSIBILITIES

The Educational Agency shall:

1. Assume and maintain primary responsibility for the planning and execution of the educational program including: programming, administration, curriculum content, faculty appointments, faculty administration and the requirements for grades, matriculation, promotion and graduation.
2. Ensure that all students have completed all applicable prerequisite courses and any other requirements necessary prior to the student placement.
3. In consultation with Facility and subject to approval by Facility, maintain responsibility, control and supervision of the educational program at Facility.
4. Arrange, in conjunction with Facility, for appropriate orientation for the students/faculty at clinical site.
5. Provide Facility with written objectives and guidelines for the clinical rotation if requested.
6. Determine that each student has: (a) proof of a recent physical examination, (b) a negative TB test or NTB screen based on state regulations and (c) either proof of vaccination for Hepatitis B or a signed declination form prior to placement at Facility. Copies of all tests/declinations will be made available on request. In the event of occupational exposure, Education Agency will be responsible for maintaining the follow-up health records.
7. Acknowledge and abide by all terms of the HIPAA Business Associate Agreement attached hereto as Exhibit A.

8. Determine that each student, through performance of a criminal background check, is qualified to participate in a clinical site rotation. Results of background checks will be made available on request.
9. Inform students of student's responsibility to provide any transportation, meals and lodging related to clinical rotation.
10. Insure each student for claims or losses related to the student's activities at the Facility.
11. Require that each student and instructor maintain Professional Liability Insurance for coverage of expenses or losses incurred through activities, acts and omissions that may occur during the period of clinical placement at Facility. The Educational Agency will advise the student that proof of such insurance may be required prior to the student beginning the clinical rotation.
12. Maintain, in full force and effect for the duration of this Agreement, general and professional liability insurance covering Educational Agency and its employees in amounts not less than \$1,000,000 per occurrence and \$3,000,000 in the aggregate. Educational Agency shall notify Facility thirty (30) days prior to any material change in or termination of insurance.
13. Be responsible for the Educational Agency's instructors' and students' compliance with all rules, policies, standards, schedules, practices and regulations of Facility while participating in the educational program at Facility. It is understood that Facility retains the ultimate responsibility for resident care.
14. Assure that each student attends the general orientation program provided by Facility.

GENERAL TERMS AND CONDITIONS

Anti-Discrimination

The parties agree that in the performance of this agreement, there will be no discrimination against students, instructors, employees or other persons related to race, color, sex, religion, creed, age, national origin, sexual orientation or disability.

Indemnification

The Educational Agency will defend, indemnify and hold harmless Facility, its directors, officers, employees and agents against any and all claims, demands, causes of action, losses, costs and liabilities, including reasonable attorneys' fees, brought and arising out of or relating to any act or omission of the Educational Agency, and instructor or student participating in the educational program at Facility pursuant to this agreement.

Independent Parties

This Agreement is an independent contract between Facility and Educational Agency. Neither party, nor any employees of either party, shall be construed in any manner whatsoever to be an employee or agent of the other, nor shall this Agreement be construed as a contract of employment or agency. The Facility shall be under no obligation to provide Worker's Compensation, disability, health or other insurance, or to provide unemployment benefits for the Educational Agency or to withhold, deduct or pay income or social security taxes for the Educational Agency.

Controlling Law

This Agreement and all questions relating to its validity, interpretation, performance and enforcement, shall be governed by and construed in accordance with the laws of the state where the Facility is located, notwithstanding any conflict-of-law provisions to the contrary.

Compliance with Laws and Regulations

In the event that any local, state, or federal governmental agency promulgates regulations which may affect the validity or enforceability of the terms hereof, the provision so affected shall be immediately subject to renegotiations upon the initiative of either party, and the remaining provisions hereof shall continue in full force and effect.

Exhibits

If checked the following exhibits are attached and hereby made a part of this agreement:

- (x) Exhibit A: HIPPA Business Associates Agreement
- (x) Exhibit B: Student Worksheet

Exhibit A has an individual signature requirement, in addition to the contract.

IN WITNESS WHEREOF, the parties have executed this agreement on the date first above written intending to be legally bound hereby.

Educational Agency:

By: Jacquelyn J. Gaetz
 Name: Jacquelyn J. Gaetz
 Title: Director of Nursing
Assistant Education Administrator

Facility

By: D. J. Swart
 Name: D. J. Swart
 Title: Administrator

EXHIBIT A
Business Associates Agreement

BACKGROUND STATEMENTS

A. **Purpose.** The purpose of this Exhibit is to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and the associated regulations, 45 C.F.R. parts 160-164, as may be amended (the "Privacy Rule") and 45 C.F.R. §142.308(a)(2), as may be finalized and amended (the "Chain of Trust" requirement) Unless otherwise defined in this Exhibit, capitalized terms have the meanings given in the Privacy Rule. The Privacy Rule requires Provider to obtain written assurances from Business Associate that Business Associate will appropriately safeguard Protected Health Information ("PHI"). The Chain of Trust provision requires that a contract involving exchange of Protected Health Information protect the integrity and confidentiality of the Protected Health Information.

B. **Relationship.** Provider and Business Associate have entered into a relationship (the "Agreement") under which Business Associate may receive, use, obtain, access or create Protected Health Information ("PHI") from or on behalf of Provider in the course of providing services (the "Services") for Provider.

AGREEMENT

The Parties hereby agree as follows:

Section 1. Permitted Uses and Disclosures.

Business Associate may use and/or disclose PHI only as permitted or required by this Exhibit or as otherwise Required by Law. Business Associate may disclose PHI to, and permit the use of PHI by, its employees, contractors, agents, or other representatives only to the extent directly related to and necessary for the performance of the Services. Business Associate will request from Provider no more than the minimum PHI necessary to perform the Services. Business Associate will not use or disclose PHI in a manner (i) inconsistent with Provider's obligations under the Privacy Rule, or (ii) that would violate the Privacy Rule if disclosed or used in such a manner by Provider.

Section 2. Safeguards for the Protection of PHI.

Business Associate will implement and maintain commercially appropriate security safeguards to ensure that PHI obtained by or on behalf of Provider is not used or disclosed by Business Associate in violation of this Exhibit. Such safeguards shall be designed to protect the confidentiality and integrity of such PHI obtained, accessed or created from or on behalf of Provider. Security measures maintained by Business Associate shall include administrative safeguards, physical safeguards, technical security services and technical security mechanisms as necessary to protect such PHI. Upon

request by Provider, Business Associate shall provide a written description of such safeguards.

Section 3. Reporting and Mitigating the Effect of Unauthorized Uses and Disclosures.

If Business Associate has knowledge of any use or disclosure of PHI not provided for by this Exhibit, then Business Associate will immediately notify Provider in accordance with Paragraph 10.5. Business Associate will establish and implement procedures and other reasonable efforts for mitigating, to the greatest extent possible, any harmful effects arising from any improper use and/or disclosure of PHI.

Section 4. Use and Disclosure of PHI by Subcontractors, Agents, and Representatives.

Business Associate will require any subcontractor, agent, or other representative that is authorized to receive, use, or have access to PHI obtained or created under the Agreement, to agree, in writing, to adhere to the same restrictions, conditions and requirements regarding the use and/or disclosure of PHI and safeguarding of PHI that apply to Business Associate under this Exhibit. [Such agreement shall identify Provider as a third-party beneficiary with rights of enforcement in the event of any violations.]

Section 5. Individual Rights.

Business Associate will comply with the following Individual rights requirements as applicable to PHI used or maintained by Business Associate:

5.1 Right of Access. Business Associate agrees to provide access to PHI, at the request of Provider and in the time and manner designated by Provider, to Provider or, as directed, to an Individual in order to meet the requirements under 45 C.F.R. § 164.524.

5.2 Right of Amendment. Business Associate agrees to make any amendment(s) to PHI that Provider directs or agrees to pursuant to 45 C.F.R. § 164.526 at the request of Provider or an Individual, and in the time and manner designated by Provider.

5.3 Right to Accounting of Disclosures. Business Associate agrees to document such disclosures of PHI as would be required for Provider to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528. Business Associate agrees to provide to Provider or an Individual, in the time and manner designated by Provider, such information collected in order to permit Provider to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528.

Section 6. Use and Disclosure for Business Associate's Purposes.

6.1 Use. Except as otherwise limited in the Agreement or this Exhibit, Business Associate may use PHI for the proper management and administration of Business Associate or to carry out the legal responsibilities of Business Associate.

6.2 Disclosure. Except as otherwise limited in the Agreement or this Exhibit, Business Associate may disclose PHI for the proper management and administration of Business Associate, provided the disclosures are required by law, or Business Associate obtains reasonable assurance from the person to whom the PHI is disclosed that it will remain confidential and be used or further disclosed only as required by law or for the purpose for which it was disclosed to the person, and the person notifies Business Associate of any instances of which it is aware in which the confidentiality of the PHI has been breached.

Section 7. Audit, Inspection and Enforcement by Provider.

With reasonable notice, Provider may audit Business Associate to monitor compliance with this Exhibit. Business Associate will promptly correct any violation of this Exhibit found by Provider and will certify in writing that the correction has been made. Provider's failure to detect any unsatisfactory practice does not constitute acceptance of the practice or a waiver of Provider's enforcement rights under this Exhibit. Business Associate will make its internal practices, books, records, and policies and procedures relating to the use and disclosure of PHI received from, or created or received by Business Associate on behalf of Provider, available to the federal Department of Health and Human Services ("HHS"), the Office for Civil Rights ("OCR"), or their agents or to Provider for purposes of monitoring compliance with the Privacy Rule.

Section 8. Term and Termination.

8.1 Term and Termination. This Exhibit is effective as of the Effective Date of the Agreement. Unless terminated sooner pursuant to this Paragraph, this Exhibit shall remain in effect for the duration of the Agreement and for so long as Business Associate shall remain in possession of any PHI received from, or created or received by Business Associate on behalf of Provider, unless Provider has agreed in accordance with Paragraph 8.2 that it is infeasible to return or destroy all PHI. Provider may immediately terminate the Agreement if Provider determines that Business Associate has breached a material term of this Exhibit. Provider may also report the material breach to the Secretary of HHS or OCR.

8.2 Effect of Termination. Upon termination of the Agreement, Business Associate will recover any PHI relating to the Agreement in the possession of its subcontractors, agents, or representatives. Business Associate will return to Provider or destroy all such PHI plus all other PHI relating to the Agreement in its possession, and will retain no copies. If Business Associate believes that it is not feasible to return or destroy the PHI as described above, Business Associate shall notify Provider in writing. The notification shall include: (i) a statement that Business Associate has determined that it is infeasible to return or destroy the PHI in its possession, and (ii) the specific reasons for such determination. If Provider agrees in its sole discretion that Business Associate cannot feasibly return or destroy the PHI, Business Associate will ensure that any and all protections, requirements and restrictions contained in this Exhibit will be extended to any PHI retained after the termination of the Agreement, and that any further uses and/or disclosures will be limited to the purposes that make the return or destruction of the PHI infeasible.

Section 9. Insurance and Indemnification.

9.1 Insurance. Business Associate shall maintain insurance with respect to Business Associate's obligations under this Exhibit reasonably satisfactory to Provider and provide from time to time as requested by Provider proof of such insurance.

9.2 Indemnification. Business Associate will indemnify, defend and hold harmless Provider and its respective employees, directors, officers, subcontractors, agents and affiliates from and against all claims, actions, damages, losses, liabilities, fines, penalties, costs or expenses (including without limitation reasonable attorneys' fees) suffered by Provider arising from or in connection with any breach of this Exhibit, or any negligent or wrongful acts or omissions in connection with this Exhibit, by Business Associate or by its employees, directors, officers, subcontractors, or agents.

Section 10. Miscellaneous.

10.1 Survival. The respective rights and obligations of the Parties under Sections 7 (Audit and Inspection Rights), 8.2 (Effect of Termination), 9 (Insurance and Indemnification) and 10 (Miscellaneous) will survive termination of the Agreement indefinitely.

10.2 Amendments; Waiver. This Exhibit constitutes the entire agreement between the Parties with respect to its subject matter. It may not be modified, nor will any provision be waived or amended, except in a writing duly signed by authorized representatives of the Parties. A waiver with respect to one event will not be construed as continuing, or as a bar to or waiver of any right or remedy as to subsequent events.

10.3 Compliance with Privacy Rule. Any ambiguity in this Exhibit shall be resolved in favor of a meaning that permits Provider to comply with the Privacy Rule. The Parties agree to amend this Exhibit from time to time as necessary for Provider to comply with the requirements of the Privacy Rule and HIPAA.

10.4 No Third Party Beneficiaries. Except as provided in Section 4, nothing express or implied in this Exhibit is intended to confer, nor shall anything herein confer, upon any person other than the Parties and the respective successors and permitted assigns of the Parties, any rights, remedies, obligations, or liabilities whatsoever.

10.5 Notices. Any notice to be given under this Exhibit to a Party shall be made via U.S. Mail, commercial courier or hand delivery to such Party at its address given below, and/or via facsimile to the facsimile telephone number listed below, or to such other address or facsimile number as shall hereafter be specified by notice from the Party. Any such notice shall be deemed given when so delivered to or received at the proper address.



CNA Plaza
Chicago, IL 60685

**CERTIFICATE OF INSURANCE
OCCURRENCE**



Occurrence

Policy No.	018088	Group	B70	Product	HPS	Policy No.	D127280080	From:	12:01 AM Standard Time on:	08/11/10	
								To:	12:01 AM Standard Time on:	09/11/11	
Name of Insured (Individual)							Name of Admin/Insured Organization				
Marling University 626 N. 6 th Street Milwaukee, WI 53203-2710							Healthcare Provider Service organization 150 East County Line Road Holters, PA 19040 (800) 866-4627				
Name of Insured (Corporate)							Name of Provider				
							American Casualty Co. of Reading, PA 333 S. Wabash Avenue Chicago, IL 60604				
COVERAGE AND LIMITS							LIMIT OF LIABILITY				
A. PROFESSIONAL LIABILITY											
	Professional Liability (PL)		\$2,000,000		each claim		\$5,000,000		aggregate		
	Personal Injury Liability				included above						
B. Coverage Extensions:											
	Grievance Proceedings		\$1,000		per proceeding		\$10,000		aggregate		
	Defendant Expense Benefit						\$10,000		aggregate		
	Deposition Representation		\$1,000		per deposition		\$5,000		aggregate		
	Assault		\$1,000		per incident		\$25,000		aggregate		
	Medical Payments		\$2,000		per person		\$100,000		aggregate		
	First Aid		\$500		per incident		\$25,000		aggregate		
	Damage to Property of Others		\$250		per incident		\$10,000		Aggregate		

Keep this document in a safe place. It is evidence of your insurance coverage.

John H. H.
Chairman of the Board

John H. H.
Secretary

G-144B20-A (1/2003)

AMERICAN CASUALTY COMPANY OF READING, PA

SCHOOL POLICY FOR HEALTHCARE PROVIDER STUDENTS

ADDITIONAL LOCATION ENDORSEMENT

1. In consideration of the premium paid, it is agreed that the "Named Insured and Address" item of the SCHOOL POLICY FOR HEALTHCARE PROVIDER STUDENTS CERTIFICATE OF INSURANCE (G-144920-A) is amended by the addition of the following:

Named Insured (if applicable)	Location Address	Prior Acts Date
Herzing University 625 N. 6 th Street Milwaukee, WI 53205-2715	Akron Institute of Herzing University 1600 Arlington Blvd #100 Akron, OH 44308	
	Herzing University 2600 Williams Blvd Kenner, LA 70062	
	Herzing University 280 W. Valley Avenue Birmingham, AL 35209	
	Herzing University 5218 East Terrace Drive Madison, WI 53718	
	Herzing University 1696 South Semoran Blvd #1601 Winter Park, FL 32782	
	Herzing University 6700 West Broadway Crystal, MN 55428	
	Herzing University 6212 Hill Avenue Toledo, OH 43616	
	Omaha School of Massage & Healthcare 8748 Park Drive Omaha, NE 68127	
	Omaha School of Massage & Healthcare 5406 South 89 th Plaza Omaha, NE 68127	
	Herzing University 3393 Peachtree Rd NE # 1003	

<i>Must Be Completed</i>		<i>Complete Only When This Endorsement is Not Prepared with the Policy Or Is Not to be Effective with the Policy</i>	
ENDT. NO. 01	POLICY NO. 0127280000	ISSUED TO Herzing University	ENDORSEMENT EFFECTIVE DATE 09/11/2010

SCHOOL POLICY FOR HEALTHCARE PROVIDER STUDENTS

	Atlanta, GA 30326	
	Herzing University 4006 Washington RD Kenosha, WI 53144	
Effective 09/27/10	Herzing University 565 S. Executive Drive Brookfield, WI 53005	

2. The SCHOOL POLICY FOR HEALTHCARE PROVIDER STUDENTS is amended as follows:
- Named Insured as defined in Section IV. DEFINITIONS, also includes the School(s) operating at the address shown above. If a Prior Acts date is shown opposite a location, then the Prior Acts Date on the Certificate of Insurance is deleted with respect to such location and replaced by the Prior Acts Date shown opposite.

This endorsement is a part of your policy and takes effect on the effective date of your policy, unless another effective date is shown below. All other provisions of the policy remain unchanged.

Must Be Completed		<i>Complete Only When This Endorsement Is Not Prepared with the Policy Or Is Not to be Effective with the Policy</i>	
ENDT. NO. 01	POLICY NO. 0127280060	ISSUED TO Herzing University	ENDORSEMENT EFFECTIVE DATE 08/11/2010

G-145188-A (3/2003)
AMERICAN CASUALTY COMPANY OF READING, PA

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366

FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53708-8366
E-Mail: dsps@wisconsin.gov
Website: dsps.wisconsin.gov

BOARD OF NURSING

CLINICAL FACILITY SELECTION AND SIMULATED SETTING EXPERIENCES

Completion of this form is required for each clinical facility or simulated setting experience as part of the application for authorization to admit students. In addition, this form shall be completed, kept on file in the school of nursing office, and made available to the Board upon request for all clinical facilities and all simulated setting experiences utilized by the nursing school.

I. IDENTIFYING DATA

- A. Name of facility: Royal Family Kid's Camp
Address: 4970 S. Swift Ave
Cudahy, WI 53110
Telephone: 414-483-1313
- B. Type of facility: Hospital Nursing Home Community Health Agency
 Other: Community based youth camp
- C. Number of beds at facility: N/A
- D. Types of patients: Children, ages: 7-11
- E. Administrator of facility: Lisa Carey
- F. Director of nursing service: Joan Neave
- G. School(s) of nursing utilizing the facility: Herzing, BSN

II. EXHIBITS (*attach to this form*)

- A. Copy of formal agreement signed by:
1. Administrator of facility
2. Educational administrator of nursing school
- B. Copy of the position description for:
1. Registered Nurses
2. Licensed Practical Nurses
- C. Listing of simulation activities provided and a listing of types of simulation equipment utilized

Wisconsin Department of Safety and Professional Services

III. PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

A. Have the nursing school objectives been shared with the facility? Yes No

Comments: _____

B. Does the facility agree to cooperate in promoting the nursing school objectives? Yes No

Comments: _____

C. Are there experiences in the facility available to students to meet clinical objectives? Yes No

Comments: _____

D. Is the practice of registered nursing in the facility within the legal scope of practice for registered nurses as defined in Chapter 441.11(4), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

E. Is the practice of licensed practical nursing in the facility within the legal scope of practice for licensed practical nurses as defined in Chapter 441.11(3), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

F. If simulated settings are utilized, list the activities, responsibilities and equipment which are included in the learning experience:

Herzing University
Nursing School

Dr. Deborah Ziebarth
Educational Administrator

Dr. Deborah Ziebarth
Signature

2626491710
Telephone Number

Herzing University
Nursing Program(s) Utilizing Facility/Simulated Setting

Department Chair Nursing

Title

12/22/2017

Date

dziebarth@herzing.edu

Email Address

Royal Family Kids Camp (retrieved from <http://royalfamilykids.org/wp-content/uploads/2017/04/2017-1-DIR-MANUAL-INTRO-PLUS-SEC-1-7.pdf>)

Job Description: NURSE

Responsibilities Include:

- Being at camper registration to collect medication and to screen camper for illness
- Ensure a copy of each camper's Insurance I.D. card accompanies their application.
- Total health care program and record keeping for the camp
- Observing general health conditions of the Resident staff, and reporting daily any problems to Camp Director
- Screening incoming campers upon arrival in camp for ear infections, foreign objects in ears, reaction of pupils to light, swollen and infected tonsils, throat infections, head lice and any specific complaints of campers
- Keeping all medications secure in the infirmary
- Collecting health histories and reports of physical examinations from the campers and keeping them on file in the infirmary
- Maintaining the Nurse's Log Book of all medical treatments given. All records to be kept for statutory limit by the Director
- Observing everyone in camp for specific problems
- Determining how all disabilities and injuries are to be handled
- Maintaining first aid kits and ensuring that each group going away from main camp has a first aid kit with them
- Ensure each Counselor & Staff are equipped with an RFKC Fanny Pak containing: gauze wipes, antiseptic wipes, vinyl gloves, band aids (2-3).

**MEMORANDUM OF UNDERSTANDING BETWEEN HERZING UNIVERSITY-
BROOKFIELD AND Royal Family Kids Camp-Milwaukee, WI**

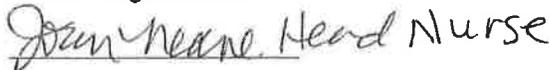
1. **PARTIES.** This Memorandum of Understanding (hereinafter referred to as a MOU) is made and entered into by and between Herzing University-Brookfield, located at 555 South Executive Drive, Brookfield, WI and Royal Family Kids Camp-Milwaukee located at 4970 S. Swift Ave, Cudahy, WI 53110.
2. **PURPOSE.** The purpose of this MOU is to establish non-compensated nursing clinical experiences for students in the Practical Nurse program at Herzing University-Brookfield and Royal Family Kids Camp- Milwaukee
3. **TERM OF MOU.** This MOU is effective upon the date executed below by duly authorized representatives of the parties to this MOU and will remain in force unless otherwise terminated by the parties. This MOU may be terminated, without cause, by either party upon written notification, which may be sent by electronic or other means to the parties at the addresses listed above.
4. **REPSONSIBILITIES.** The parties agree that prior to the creation of non-compensated clinical nursing experiences for the Practical Nurse students at Herzing University-Brookfield the parties, upon mutual agreement, will execute an Affiliation Agreement which will detail the rights, obligations and responsibilities of the parties to this MOU.
5. **AMENDMENTS.** Either party may request changes to this MOU. Any changes modifications or revisions or amendments to this MOU which are agreed upon by and between the parties shall be incorporated, in writing, to this MOU and become effective when executed and signed by the parties to this MOU.
6. **APPLICABLE LAW.** The construction, interpretation and enforcement of this MOU shall be governed by the laws of the State of Wisconsin, unless otherwise mutually agreed to by the parties as outlined in paragraph five (5).
7. **ENTIRETY OF AGREEMENT.** This MOU, consisting of one (1) page represents the entire agreement between the parties.
8. **SIGNATURES.** In witness whereof, the parties to this MOU, through their duly authorized representatives have executed this MOU on the date(s) below.

Herzing University-Brookfield



Jarvis Racine, Campus President

Partner Organization



Name and Title

Ziebarth, Deborah

From: Joan Neave <forcampers@gmail.com>
Sent: Friday, March 23, 2018 1:05 PM
To: Ziebarth, Deborah
Subject: Royal family Kids Camp LPN students

Dear Dr. Ziebarth,

This is to let you know that Royal Family Kids Camp, Milwaukee chapter, is able to accommodate practical nursing students under our head nurse RN direct supervision.

The camp is an immersion experience over 5 days each summer, and the role of the LPN nursing student would be first aid, medication administration, and checking vital signs for children and the adult volunteers at the camp.

We would be thrilled to have the LPN students as members of our nursing team at camp!

Please let me know if you need any additional information.

Joan Neave RN, MSN
Royal Family Kids Camp
forcampers@gmail.com

MEMORANDUM OF UNDERSTANDING FOR
HEALTH CARE CLINICAL EXPERIENCE

HERZING[®]
— UNIVERSITY —

This Agreement for Clinical Experience (the "Agreement") is entered into by and between Herzing University, Ltd. (hereafter "University"), and Royal Family Kids Camp (hereafter "Facility").

RECITALS

The University wishes to provide clinical experiences for students enrolled in Herzing University BSN Nursing programs (hereafter "Students"). The Facility operates a healthcare facility and has the capability, through its medical records, clinical, or medical administration departments, to provide settings for clinical experiences required by such Students and desires to provide a setting for such clinical experiences in cooperation with the University in order to support quality education for health professionals in the community and the delivery of appropriate health services to the community.

NOW, THEREFORE, the parties agree as follows:

1. Responsibilities of the Facility. The Facility agrees to serve as a cooperating health care facility and provide clinical experiences for Students at the Facility in University's program. This will be accomplished by allowing Student participation in patient care as set forth in this Agreement. The University, in consultation with the Facility, shall schedule and arrange for the number and timing of such experiences. The Facility hereby agrees as follows:
 - a. To observe the non discrimination policy of the University: that Students are accepted without discrimination as to race, color, creed, or sex, subject to the Facility's right to terminate clinical experiences as set forth in subparagraph 3-d.
 - b. To provide clinical practice and/or observational opportunities in the appropriate service departments of the Facility.
 - c. To allow Students, at their own expense, to use the dining and other facilities.
 - d. To make available to Students emergency care and treatment in the event of illness or injury occurring in clinical areas during clinical instruction. All charges for treatment shall be the responsibility of the Students, or in the case of a minor, his or her parents.
 - e. To provide information pertinent to evaluation of Students and the clinical experience in general to the University at the University's request.
 - f. To provide the University and Students with access to copies of the Facility's policies, procedures and regulations that are pertinent to the clinical experience.

2. Responsibilities of University. The University agrees:
 - a. In cooperation with the Facility, orientation to and enforcement of requirements that all Students abide by the policies, procedures, rules, and regulations of the Facility, including standards for dress, grooming, and personal hygiene.

- b. Provision of general liability insurance coverage of \$1,000,000 per occurrence and \$2,000,000 in the aggregate and professional liability insurance coverage of \$2,000,000 per claim and \$6,000,000 in the aggregate covering acts/or omissions by Students during practicum experiences hosted by the Facility. The University shall immediately notify the Facility of any changes, limitations, or termination of insurance coverage and provide evidence of such insurance upon request by the Facility.
 - c. Require Students to comply with the Facility's policies and procedures governing mandatory reporting of child and dependent adult abuse, infection control, and hazardous materials management. Upon the Facility's request, any Student that the Facility believes to be in violation of its policies and procedures shall be removed by the University.
 - d. Compliance with all Facility requirements for verification of each Student's health and immunization status. All required verification will be maintained at the University and made available to the Facility upon request. Facility must notify University in writing of any required verifications prior to student's clinical experience.
 - e. Provide orientation and education of all Students in confidentiality rules, in cooperation with the Facility, enforcement of a requirement that all Students follow the Facility's policy with regard to confidential information, including obtaining signed confidentiality agreements and compliance with all policies and procedures adopted by the Facility to comply with the privacy or security final regulations promulgated under the Health Insurance Portability and Accountability Act. Upon the Facility's request, any Student that the Facility believes to be in violation of its policies and procedures shall be removed by the University.
3. Conditions. This Agreement shall be continuously subject to the following conditions accepted by each of the parties:
- a. The University shall provide the Facility with estimates of the number of Students desiring to be placed in clinical departments. The Facility may close units to Students' clinical experiences at any time, without notice. At least two (2) weeks' prior to the beginning of new Students' placements, the University shall notify the Facility's contact person of the names of each of the Students to be included in the next placement.
 - b. The Facility, University and Students are independent contractors in their relationships to one another. It is understood that Students are not employees of the Facility, do not receive compensation or benefits in connection with their activities at the Facility, are not provided workers' compensation insurance, and shall not act as agents or employees of the Facility.
 - c. Each party agrees to accept and is responsible for its own acts and/or omissions in providing services under this Agreement as well as those acts or omissions of its employees and agents or Students, as the case may be, and nothing in this Agreement shall be construed as placing any responsibility of such acts or omissions onto the other party.
 - d. The Facility has the right to terminate a Student's clinical experience whenever, in the judgment of the responsible Facility personnel, such action is necessary to preserve smooth operations and the quality of patient care. The Facility must notify the University immediately of any termination action.

e. The Facility and University shall indemnify and hold each other harmless, their agents, students, and employees, from any and all liability, damage, expense, cause of action, suits, claims or judgments arising from injury to person or personal property or otherwise which arises out of the act, failure to act or negligence of the Facility or University, its agents and employees, in connection with or arising out of the activity which is the subject of this Agreement.

4. Term and Termination. This Agreement shall be effective when fully executed by both parties, and shall remain in effect for one (1) year. This Agreement shall renew automatically for additional one (1) year periods, until either party notifies the other party hereto in writing of its intent not to renew. Either party may terminate this Agreement at any time upon thirty (30) days notice to the other party. In the event of a termination of the Agreement, any Student(s) currently completing a clinical experience at Facility will be allowed to complete their clinical experience as previously agreed to by both parties.

5. a. Contact Persons and Notices. The designated individuals for contact and notice purposes shall be, in the case of the University:

Name: _____
Title: _____
Organization: _____
Address: _____
Phone: _____
Email: _____

And, in the case of the Facility:

Name: Joan Neave
Title: Head Nurse
Organization: Royal Family Kids Camp: #184
Address: Changing Lives Assembly of God
4970 S. Swift Ave. Cudahy, WI 53110
Phone: 414-483-1313
Email: milwaukee.royalfamilykids.org

b. Official Signatory. The designated individual to approve and sign documents for the University shall be:

Representative: Chief Compliance Officer and/or Designee
Organization: Herzing University
Address: W140 N8917 Lilly Road, Menomonee Falls, WI 53051

6. Miscellaneous. The following additional conditions apply to this Agreement:

a. Severability. In the event one or more of the provisions contained in this Agreement are declared invalid, illegal, or unenforceable in any respect, the validity, legality, and

enforceability of the remaining provisions shall not in any way be impaired thereby unless the effect of such invalidity is to substantially impair or undermine either party's rights and benefits hereunder.

- b. Assignment. This Agreement is personal to the parties and may not be assigned or transferred without written consent of the other party.
- c. Waiver. The failure of either party to insist in any one or more instances upon performance of any terms or conditions of this Agreement shall not be construed as a waiver of future performance of any such term, covenant, or condition; but the obligations of such party with respect thereto shall continue in full force and effect.
- d. Recitals. The recitals are intended to describe the intent of the parties and the circumstances under which this Agreement is executed and shall be considered in the interpretation of this Agreement.
- e. Amendment. This Agreement may be amended only by written agreement of the parties.
- f. Applicable Law. This Agreement shall be interpreted according to the law of the state of Wisconsin.
- g. Entire Agreement. This Agreement constitutes the entire agreement between the parties pertaining to the subject matter hereof and subsumes and incorporates all prior written and oral statements and understandings.

IN WITNESS WHEREOF, the parties have executed this Agreement in duplicate on the dates set opposite their respective names.

University: Herzing University, Ltd.

and Facility: Royal Family Kids Camp

Signature: 

Signature: 

Printed Name: Robert Herzog
Title: Chief Financial Office/Chief Compliance Officer

Printed Name: Joan Neave

Phone Number: (856) 508-0748, ext. 01702

Title: Head Nurse

Email Address: rhe(zog@herzing.edu)

Phone Number: 262-370-2947

Date: 7/21/16

Email Address: neavems@aol.com

Date: 6/1/2016

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366

FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53708-8366
E-Mail: dsps@wisconsin.gov
Website: dsps.wisconsin.gov

BOARD OF NURSING

CLINICAL FACILITY SELECTION AND SIMULATED SETTING EXPERIENCES

Completion of this form is required for each clinical facility or simulated setting experience as part of the application for authorization to admit students. In addition, this form shall be completed, kept on file in the school of nursing office, and made available to the Board upon request for all clinical facilities and all simulated setting experiences utilized by the nursing school.

I. IDENTIFYING DATA

- A. Name of facility: Madison Medical Affiliates
Address: 788 N. Jefferson St
Milwaukee, WI 53202
Telephone: 414-274-6279
- B. Type of facility: Hospital Nursing Home Community Health Agency
 Other: Clinics: Various
- C. Number of beds at facility: NA
- D. Types of patients: Outpatient
- E. Administrator of facility: Emily Todt: Manager
- F. Director of nursing service: NA
- G. School(s) of nursing utilizing the facility: Herzing, BSN
- _____
- _____

II. EXHIBITS (*attach to this form*)

- A. Copy of formal agreement signed by:
1. Administrator of facility
 2. Educational administrator of nursing school
- B. Copy of the position description for:
1. Registered Nurses
 2. Licensed Practical Nurses
- C. Listing of simulation activities provided and a listing of types of simulation equipment utilized

Wisconsin Department of Safety and Professional Services

III. PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

A. Have the nursing school objectives been shared with the facility? Yes No

Comments: _____

B. Does the facility agree to cooperate in promoting the nursing school objectives? Yes No

Comments: _____

C. Are there experiences in the facility available to students to meet clinical objectives? Yes No

Comments: _____

D. Is the practice of registered nursing in the facility within the legal scope of practice for registered nurses as defined in Chapter 441.11(4), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

E. Is the practice of licensed practical nursing in the facility within the legal scope of practice for licensed practical nurses as defined in Chapter 441.11(3), Wisconsin Statutes? (If no, facility may not be approved.)

Yes No

Comments: _____

F. If simulated settings are utilized, list the activities, responsibilities and equipment which are included in the learning experience:

Herzing University
Nursing School

Dr. Deborah Ziebarth
Educational Administrator

Dr. Deborah Ziebarth
Signature

2626491710
Telephone Number

Herzing University
Nursing Program(s) Utilizing Facility/Simulated Setting

Department Chair Nursing
Title

12/22/2017
Date

dziebarth@herzing.edu
Email Address



Job Description: Licensed Practical Nurse

A Licensed Practical Nurse delivers general nursing care and procedures in the clinic setting. Performs medical acts delegated by physicians or physician assistants. Supervises and directs delegated nursing acts to MA's. LPN will also perform clerical, laboratory and other duties as requested by the office manager, physician and physician assistant. This position reports to the Clinic Manager.

Responsibilities

- Assists with procedures and demonstrates current knowledge and skill in nursing practice to ensure safe and effective care for the patient population.
- Provides treatment and determines plan of care under provider supervision.
- Assesses patient over the phone to determine plan of care.
- Communicates effectively with patients, visitors, employees, physicians and the public to promote a professional health care environment.
- Stays current on electronic health records (EHR) changes and ensures appropriate and effective documentation in patient records.
- Authorizes refills safely, efficiently, accurately and in a timely manner according to approved protocols.
- Performs other duties as assigned.

Qualifications

- Graduate of a board-approved LPN program
- Current WI LPN license
- Current CPR certification required
- Excellent written and oral communication skills
- Ability to multi-task and be flexible in learning and handling a variety of duties

Ziebarth, Deborah

From: Neave, Joan
Sent: Friday, March 23, 2018 12:26 PM
To: Ziebarth, Deborah
Subject: FW: Herzing University LPN program Madison medical

Joan Neave MSN, PMH RN-BC
Nursing Clinical Coordinator and Associate Professor of Nursing
Herzing University, Brookfield Campus
555 South Executive Drive, Suite 100
Brookfield, WI 53005
www.herzing.edu
jneave@herzing.edu
O: (262)-671-0675 Ext. 60466

HERZING
— UNIVERSITY —

From: Eickhoff, Jane [<mailto:Jane.Eickhoff@ascension.org>]
Sent: Tuesday, November 28, 2017 3:27 PM
To: Neave, Joan <jneave@herzing.edu>
Subject: RE: Herzing University LPN program

Sounds prefect – you can touch base with me again, I'll confirm things with Julie and Wendy and check to see if anyone else has changed their minds, and then have you submit the requests.
Jane

From: Neave, Joan [<mailto:jneave@herzing.edu>]
Sent: Tuesday, November 28, 2017 3:06 PM
To: Eickhoff, Jane; Van Dyk, Alison
Subject: RE: Herzing University LPN program

*** Attention: This is an external email. Use caution responding, opening attachments or clicking on links. ***

Thanks so much for your help with this.
I will be sure to make requests as we approach next fall.
Joan

From: Eickhoff, Jane [<mailto:Jane.Eickhoff@ascension.org>]
Sent: Tuesday, November 28, 2017 1:22 PM
To: Van Dyk, Alison <Alison.VanDyk@ascension.org>; Neave, Joan <jneave@herzing.edu>
Subject: RE: Herzing University LPN program

Graet!

From: Van Dyk, Alison
Sent: Tuesday, November 28, 2017 1:21 PM
To: Eickhoff, Jane; Neave, Joan
Subject: RE: Herzing University LPN program

Joan works in our database for other requests- so she knows the process.
Thanks!

From: Eickhoff, Jane
Sent: Tuesday, November 28, 2017 1:18 PM
To: Van Dyk, Alison; Neave, Joan
Subject: RE: Herzing University LPN program

Alison,
Can you give Joan directions on where/how to place the request? Thanks for your help with this!

Joan,
We would probably have you do that a little closer to the actual date (when Julie as well as Wendy can for sure confirm the desire for a student)

Jane

From: Van Dyk, Alison
Sent: Tuesday, November 28, 2017 12:30 PM
To: Eickhoff, Jane; Neave, Joan
Subject: RE: Herzing University LPN program

Hello Jane,
Thank you for including me. I believe that we do have a master affiliation agreement in place, so there is nothing more for me to do until a request is placed.
Regards,
Alison

From: Eickhoff, Jane
Sent: Tuesday, November 28, 2017 7:33 AM
To: Neave, Joan
Cc: Van Dyk, Alison
Subject: RE: Herzing University LPN program

Joan,
I have included Alison on this email as she has been my contact in making sure everything is in place to have students at Madison Medical for clinicals.

Alison,
Can you make sure you get anything you need from Joan so that when we look at student placement, we are all set? Then, if we find a match, will have her formally request the given placement through your team as well.

Thanks!
Jane

From: Neave, Joan [<mailto:jneave@herzing.edu>]
Sent: Monday, November 27, 2017 2:50 PM
To: Eickhoff, Jane
Subject: RE: Herzing University LPN program

*** Attention: This is an external email. Use caution responding, opening attachments or clicking on links. ***

Hello Jane,

We would be very happy to have the LPN students placed in your clinic as you described below.

If we need a new affiliation agreement for these students, can you please advise as to where I can email the agreement. Thank you so much for your consideration for placement of our students.

We usually request student placements at least one semester in advance but can be flexible in the timing of these.

Joan

From: Eickhoff, Jane [<mailto:Jane.Eickhoff@ascension.org>]
Sent: Monday, November 27, 2017 7:40 AM
To: Todt, Emily <Emily.Todt@ascension.org>; Neave, Joan <jneave@herzing.edu>
Subject: RE: Herzing University LPN program

Joan,

I would be happy to touch base with our Managers to find out if any of them would be interested in having an LPN student complete a clinical in their area. Often, it may be closer to the time that the placement is needed that Managers may really be able to say whether or not they could support a student (based on staffing at that time). If we decided that there is a match, then there is someone who works at Columbia St. Mary's that I would connect you with to complete the "formal" request for a student placement.

I also wanted to make sure that what we would offer would meet your needs – often in the clinic, we would use an LPN in place of a Medical Assistant. I know this is different than how a LPN would function in the hospital (as I used to work for Columbia St. Mary's). Is that an experience that would still be beneficial to your students?

Thank you for thinking of Madison Medical!

Jane

Jane Eickhoff, PHR
Human Resources Generalist

Madison Medical Affiliates
788 N. Jefferson Street, Suite 400
Milwaukee, WI 53202
☎: 414-226-4033 | 📠: 414-274-6250
✉: jane.eickhoff@ascension.org

From: Todt, Emily
Sent: Friday, November 24, 2017 10:59 AM
To: 'Neave, Joan'

Cc: Eickhoff, Jane
Subject: RE: Herzing University LPN program

Joan,

Thanks so much for reaching out. I have cc'd our Recruitment Specialist, Jane Eickhoff, who assists with student shadowing opportunities as well on this email.

Jane, do you feel that there may be an opportunity here to collaborate with Herzing? Thanks in advance for your assistance.

Happy Holidays!
Emma

Emma Todt

Clinic Manager, Internal Medicine
Madison Medical Affiliates
788 N Jefferson St
Milwaukee, WI 53202

Direct: (414) 274-6279
Fax: (414) 272-0859
Email: Emily.Todt@Ascension.org



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From: Neave, Joan [<mailto:jneave@herzing.edu>]
Sent: Tuesday, November 21, 2017 3:49 PM
To: Todt, Emily <Emily.Todt@ascension.org>
Subject: Herzing University LPN program

*** Attention: This is an external email. Use caution responding, opening attachments or clicking on links. ***

Hello Emma,
Your mom talked with me today about your possible interest in placing our LPN students in your clinics. I am writing to ask if you would like to discuss this further.
Thank you so much for your willingness to consider this!

The LPN program is scheduled to launch in May of 2018, but students will not need clinical until fall of 2018. Please let me know if you would like additional information.

Best regards,
Joan Neave

Joan Neave MSN, PMH RN-BC
Nursing Clinical Coordinator and Associate Professor of Nursing
Herzing University, Brookfield Campus
555 South Executive Drive, Suite 100
Brookfield, WI 53005
www.herzing.edu
jneave@herzing.edu
O: (262)-671-0675 Ext. 60466



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Ziebarth, Deborah

From: Neave, Joan
Sent: Friday, March 23, 2018 3:07 PM
To: Ziebarth, Deborah
Subject: FW: Franciscan Villa SICCAD02120724.HU.HealthCareAffiliationAgreement
Attachments: Letter.pdf

Joan Neave MSN, PMH RN-BC
Nursing Clinical Coordinator and Associate Professor of Nursing
Herzing University, Brookfield Campus
555 South Executive Drive, Suite 100
Brookfield, WI 53005
www.herzing.edu
jneave@herzing.edu
O: (262)-671-0675 Ext. 60466



From: Tricia Plate [<mailto:TPlate@chilivingcomm.org>]
Sent: Wednesday, February 07, 2018 12:34 PM
To: Neave, Joan <jneave@herzing.edu>
Subject: RE: Franciscan Villa SICCAD02120724.HU.HealthCareAffiliationAgreement

Sorry about that ☺

From: Neave, Joan [<mailto:jneave@herzing.edu>]
Sent: Tuesday, February 06, 2018 7:38 PM
To: Tricia Plate <TPlate@chilivingcomm.org>
Subject: RE: Franciscan Villa SICCAD02120724.HU.HealthCareAffiliationAgreement

I am sorry Tricia, but I do not find a signature on this?

From: Tricia Plate [<mailto:TPlate@chilivingcomm.org>]
Sent: Tuesday, February 06, 2018 4:41 PM
To: Neave, Joan <jneave@herzing.edu>
Subject: FW: Franciscan Villa SICCAD02120724.HU.HealthCareAffiliationAgreement

Please see the attached signed MOU

Please send back a signed copy.

Thank you

Tricia Plate, LNHA
Administrator Franciscan Villa

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53708-8366

FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53708-8366

E-Mail: dsps@wisconsin.gov
Website: dsps.wisconsin.gov

BOARD OF NURSING

CLINICAL FACILITY SELECTION AND SIMULATED SETTING EXPERIENCES

Completion of this form is required for each clinical facility or simulated setting experience as part of the application for authorization to admit students. In addition, this form shall be completed, kept on file in the school of nursing office, and made available to the Board upon request for all clinical facilities and all simulated setting experiences utilized by the nursing school.

I. IDENTIFYING DATA

A. Name of facility: Franciscan Villa

Address: 3601 S. Chicago Ave

South Milwaukee, WI 53172

Telephone: 414-764-4100

B. Type of facility: Hospital Nursing Home Community Health Agency

Other: Multiple levels - Independent, assisted, skilled, long term

C. Number of beds at facility: 150

D. Types of patients: Older Adults

E. Administrator of facility: Tricia Plate

F. Director of nursing service: Stacy Warner

G. School(s) of nursing utilizing the facility: _____

MA TC
UW - Milwaukee

II. EXHIBITS (attach to this form)

A. Copy of formal agreement signed by:

1. Administrator of facility
2. Educational administrator of nursing school

B. Copy of the position description for:

1. Registered Nurses
2. Licensed Practical Nurses

C. Listing of simulation activities provided and a listing of types of simulation equipment utilized

Wisconsin Department of Safety and Professional Services

III. PLEASE RESPOND TO THE FOLLOWING QUESTIONS:

- A. Have the nursing school objectives been shared with the facility? Yes No
Comments: _____
- B. Does the facility agree to cooperate in promoting the nursing school objectives? Yes No
Comments: _____
- C. Are there experiences in the facility available to students to meet clinical objectives? Yes No
Comments: _____
- D. Is the practice of registered nursing in the facility within the legal scope of practice for registered nurses as defined in Chapter 441.11(4), Wisconsin Statutes? (If no, facility may not be approved.) Yes No
Comments: _____
- E. Is the practice of licensed practical nursing in the facility within the legal scope of practice for licensed practical nurses as defined in Chapter 441.11(3), Wisconsin Statutes? (If no, facility may not be approved.) Yes No
Comments: _____
- F. If simulated settings are utilized, list the activities, responsibilities and equipment which are included in the learning experience:

Herzing university
Nursing School

Dr. Deborah Ziebarth
Educational Administrator

DR Deborah Ziebarth
Signature

262-649-1710
Telephone Number

Herzing University
Nursing Program(s) Utilizing Facility/Simulated Setting,

Department Chair Nursing
Title

3/23/2018
Date

Dziebarth@herzing.edu
Email Address

**MEMORANDUM OF UNDERSTANDING BETWEEN HERZING UNIVERSITY-
BROOKFIELD AND Franciscan Villa**

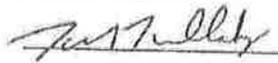
1. **PARTIES.** This Memorandum of Understanding (hereinafter referred to as a MOU) is made and entered into by and between Herzing University-Brookfield, located at 555 South Executive Drive, Brookfield, WI and Franciscan Villa, 3601 S. Chicago Ave. , South Milwaukee, WI 53172
2. **PURPOSE.** The purpose of this MOU is to establish non-compensated nursing clinical experiences for students in the Practical Nurse program at Herzing University-Brookfield and Franciscan Villa
3. **TERM OF MOU.** This MOU is effective upon the date executed below by duly authorized representatives of the parties to this MOU and will remain in force unless otherwise terminated by the parties. This MOU may be terminated, without cause, by either party upon written notification, which may be sent by electronic or other means to the parties at the addresses listed above.
4. **RESPONSIBILITIES.** The parties agree that prior to the creation of non-compensated clinical nursing experiences for the Practical Nurse students at Herzing University-Brookfield the parties, upon mutual agreement, will execute an Affiliation Agreement which will detail the rights, obligations and responsibilities of the parties to this MOU.
5. **AMENDMENTS.** Either party may request changes to this MOU. Any changes modifications or revisions or amendments to this MOU which are agreed upon by and between the parties shall be incorporated, in writing, to this MOU and become effective when executed and signed by the parties to this MOU.
6. **APPLICABLE LAW.** The construction, interpretation and enforcement of this MOU shall be governed by the laws of the State of Wisconsin, unless otherwise mutually agreed to by the parties as outlined in paragraph five (5).
7. **ENTIRETY OF AGREEMENT.** This MOU, consisting of one (1) page represents the entire agreement between the parties.
8. **SIGNATURES.** In witness whereof, the parties to this MOU, through their duly authorized representatives have executed this MOU on the date(s) below.

Herzing University-Brookfield



Jarvis Racine, Campus President

Partner Organization



Name and Title

Director of
Patient Education

3601 S Chicago Ave South Milwaukee, WI 53172
P 414-570-5400 | C 414-254-6051
tplate@chilivingcomm.org
homeishere.org



From: Neave, Joan [<mailto:jneave@herzing.edu>]
Sent: Monday, February 05, 2018 2:19 PM
To: Tricia Plate <TPlate@chilivingcomm.org>
Subject: RE: Franciscan Villa SICCAD02120724.HU.HealthCareAffiliationAgreement

Good afternoon Tricia,
Attached is an MOU concerning Herzing University- Brookfield new practical nursing program and Franciscan Villa. This is just a preliminary document stating Franciscan Villa's willingness to place practical nursing students in the future. The document is needed for Wisconsin State Board of Nursing approval to launch the program, and it is not binding.

Can you please assist with signature and return to me? If additional information is needed or there are questions, please let me know.
Thank you kindly!
Joan Neave

Joan Neave MSN, PMH RN-BC
Nursing Clinical Coordinator and Associate Professor of Nursing
Herzing University, Brookfield Campus
555 South Executive Drive, Suite 100
Brookfield, WI 53005
www.herzing.edu
jneave@herzing.edu
O: (262)-671-0675 Ext. 60466

HERZING
— UNIVERSITY —

From: Tricia Plate [<mailto:TPlate@chilivingcomm.org>]
Sent: Monday, January 29, 2018 11:22 AM
To: Neave, Joan <jneave@herzing.edu>
Subject: RE: Franciscan Villa SICCAD02120724.HU.HealthCareAffiliationAgreement

Hi Joan,

Yes, we are interest in affiliation with Herzing. I am working with our corporate office regarding the contract.

Thank you

Tricia Plate, LNHA
Administrator Franciscan Villa

3601 S Chicago Ave South Milwaukee, WI 53172
P 414-570-5400 | C 414-254-6051
tplate@chilivingcomm.org
homeishere.org



From: Neave, Joan [<mailto:jneave@herzing.edu>]
Sent: Friday, January 26, 2018 4:15 PM
To: Tricia Plate <TPlate@chilivingcomm.org>
Subject: RE: Franciscan Villa SICCAD02120724.HU.HealthCareAffiliationAgreement

Hello Tricia,
Just checking in to see if there is still interest in affiliation with Herzing, as I have not heard anything for a little while. Are there any concerns on the agreement form?
Thank you so much for your time,
Joan Neave

Joan Neave MSN, PMH RN-BC
Nursing Clinical Coordinator and Associate Professor of Nursing
Herzing University, Brookfield Campus
555 South Executive Drive, Suite 100
Brookfield, WI 53005
www.herzing.edu
jneave@herzing.edu
O: (262)-671-0675 Ext. 60466



From: Neave, Joan
Sent: Thursday, December 14, 2017 2:16 PM

To: 'tplate@chilivingcomm.org' <tplate@chilivingcomm.org>
Subject: Franciscan Villa SICCAD02120724.HU.HealthCareAffiliationAgreement

Good afternoon Tricia,
Thank you so very much for taking the time to meet with Lisa and I yesterday.
We are excited about partnering with Franciscan Villa and trust it will be mutually beneficial!
Please let me know if you need anything else or have any questions about the agreement, or would like to change anything.

Have a great day!

Joan Neave

Joan Neave MSN, PMH RN-BC
Nursing Clinical Coordinator and Associate Professor of Nursing
Herzing University, Brookfield Campus
555 South Executive Drive, Suite 100
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Licensed Practical Nurse *Job Description*

Employee Name: _____

Date: _____

Job Summary

The Licensed Practical Nurse (LPN) provides resident care in accordance with the Nurse Practice Act and is responsible for the delivery of safe and therapeutic resident care from admission through discharge in collaboration with the physician, family, and other members of the multi-disciplinary health care team. The LPN is responsible for utilizing principles of the nursing process in carrying out delegated aspects of care for both residents and families. The goal of resident care shall be toward restoring and maintaining each resident's identified capabilities at their maximum mental and physical level.

Department: Nursing

Reports to: Director of Nursing/Nurse Manager

Essential Job Specific Duties/Responsibilities

1. Maintains effective communication with residents, families, staff, and physicians.
 - a. Completes daily shift documentation, including head to toe review of skilled residents.
 - b. Functions in a calm and positive manner in an emergency or crisis situation.
 - c. Communicates consistently with the Nurse Manager, reporting pertinent concerns/issues.
 - d. Places necessary calls for families and physicians. Demonstrates appropriateness of faxing vs. phone calls to physicians.
 - e. Communicates appropriately with physicians; makes rounds with physicians in absence of Nurse Manager or as delegated by Nurse Manager. Utilizes physician file appropriately.
 - f. Reviews and teaches resident and family about pain management, including pain-rating scales and goal setting; importance of aggressive, preventive pain treatment; analgesic misconceptions; and plan for pain management.
 - g. Assists in developing, implementing, and evaluating teaching plan to meet learning needs of residents and families.
 - h. Participates in resident/family teaching and initiates discharge planning in a timely manner.

2. Documents in accordance with nursing policies and procedures.
 - a. Monitors and documents accurately all nursing actions implemented as well as effectiveness of implementation in Nursing Notes. Documents resident/family teaching in Nursing Notes and Resident Plan of Care.
 - b. Accurately records review of physiological and mental dimensions of residents, including pain review.
 - c. Ensures documentation is accurate, legible, and timely.
 - d. Completes resident assessments accurately and timely while ensuring they are updated monthly and as necessary.
 - e. Completes monthly summary accurately and timely utilizing Resident Plan of Care. Updates Plan of Care and Resident Care Card monthly and as necessary.
 - f. Completes skin integrity reviews accurately to reflect resident status.
 - g. Documents resident response to non-pharmacological strategies to promote pain relief and resident response to analgesics.
 - h. Documents, at time of service, all medications and treatments administered.
 - i. Documents in EMR accurately and timely.
3. Responds to resident needs with appropriate interventions with the licensure of an LPN.
 - a. Provides nursing interventions according to the written plan of care.
 - b. Gives and receives a thorough report to/from oncoming nurse.
 - c. Monitors work performance of nursing assistants. Makes frequent rounds throughout shift.
 - d. Suggests appropriate ways to solve problems and make improvements on the unit(s).
 - e. Provides hands-on direct care, including ADLs and treatments as necessary. Identifies aspects of resident care that require the judgment and skill of an LPN and those that can be performed by other staff. Delegates specific nursing tasks appropriately to STNAs, excluding anything that requires nursing judgments.
4. Performs activities related to medications and treatments in accordance with facility policies and procedures.
 - a. Safely administers medications and treatments ordered by the physician.
 - b. Maintains control of scheduled drugs and all drugs in medicine cart. Monitors for discrepancies and reports promptly to Nursing Manager.
 - c. Keeps medication cart key-locked when not within eye view of nurse.
 - d. Records and orders medications from the pharmacy.
 - e. Monitors for and reports Adverse Drug Reactions appropriately.
5. Satisfies all educational in-service requirements mandated by CHI Living Communities, the department, external accrediting, and regulatory agencies.
 - a. Attends all mandatory in-service programs.
 - b. Adheres to facility policies and procedures.
 - c. Completes yearly online education program by deadline.
 - d. Attends employee meetings on a regular basis.

In addition to the essential job specific duties listed above, the Licensed Practical Nurse shall be required to perform all duties (essential and non-essential) in a manner consistent with the mission statement and core values (reverence, integrity, compassion, excellence) of CHI Living Communities and will be evaluated on such basis. Furthermore, every employee must abide by all campus, departmental, and safety policies, rules, and regulations.

CHI Living Communities has the right to change the job specific duties and specifications required for the position of Licensed Practical Nurse from time to time without prior notice.

Job Requirements

Education: Licensed Practical Nurse currently licensed in the state of employment, NAPNES certified.

Experience: Long-term care experience preferred. Currently certified in CPR.

Attendance: Regular attendance is an essential part of this job.

Work Environment:

- Normal office environment
- Highly confidential information
- Tight time constraints
- Extended visual concentration

Environmental Factors:

- Gases and electrical energy
- Working with hands in water
- Working closely with others
- Protracted or irregular hours of work

<u>Physical Demands</u>	<u>Rarely</u>	<u>Occasionally</u>	<u>Frequently</u>	<u>Consistently</u>
Walking			X	
Sitting		X		
Pushing			X	
Pulling			X	
Climbing	X			
Stooping		X		
Kneeling		X		
Standing			X	
Reaching			X	
Lifting				
Under 50 lbs.		X		
Over 50 lbs.		X		
Other*				
Manual Dexterity				X
Hand Use				X
Hearing				X
Normal Conversation				X
Other Sounds				X
Talking				X
Vision				X
Acuity, Near				X
Acuity, Far				X
Color Vision				X

**Please specify amounts*

I have read this job description and fully understand the requirements set forth therein. I hereby accept the position and agree to perform the identified essential functions in a safe manner and in accordance with CHI Living Communities established procedures.

Employee Signature

Date

AFFILIATION AGREEMENT FOR EDUCATIONAL PROGRAMS

"Effective Date": 2/8/11

This Agreement is made and executed as of the date first written above at Milwaukee, Wisconsin, by and between **HERZING UNIVERSITY ONLINE**, a Wisconsin institution of higher education (the "Institution"), and **WHEATON FRANCISCAN HEALTHCARE – SOUTHEAST WISCONSIN, INC.**, an Illinois corporation ("Wheaton"), on its own behalf and on behalf of its subsidiaries, affiliates and those entities of which it is a Member.

WITNESSETH:

WHEREAS, the Institution administers educational curricula for various health occupations (each a "Program" and collectively the "Programs"), and seeks to provide, as part of the Program curricula, supervised experiences for the Institution students enrolled in the Programs ("Students"); and

WHEREAS, Wheaton serves patients in various health occupations through the provision of medical or other services consistent with the one or more Programs, and seeks to train future health care practitioners by providing Students with supervised experiences at its various hospitals, sub-acute care centers, outpatient facilities and other business units, subsidiaries, affiliates and entities of which Wheaton is a Member (each an "Education Setting"), consistent with the educational objectives of Students and the Institution; and

WHEREAS, the Institution and Wheaton have determined that each may best accomplish its objectives by mutual assistance, and seek to describe their affiliation in this Agreement.

NOW THEREFORE, the Institution and Wheaton agree as follows:

AGREEMENT

1. THE INSTITUTION'S RIGHTS AND RESPONSIBILITIES. In addition to its rights and responsibilities described elsewhere in this Agreement, the Institution shall have the following rights and responsibilities:

1.1 Preparation of Students for Placement. The Institution shall assure, through qualified faculty who meet all of the requirements for their respective faculty positions at Institution, that each Student assigned to the Education Setting is adequately prepared to benefit from such assignment. Upon request, Institution shall provide Wheaton with a written description of each faculty member's position and qualifications. A Student's preparedness shall be measured by: (i) academic performance indicating an ability to understand what Student will observe and/or perform during the placement; and (ii) appreciation of the nature and seriousness of the work Student will observe and/or perform.

1.2 Assigning Students to the Education Setting. After receiving from the Education Setting the number of placements available for Students, the Institution shall select Students to be assigned (with the approval of the Education Setting) to the Education Setting. The Institution shall notify the Education Setting of the Students assigned to the Education Setting, and each Student's availability for participation in experiences. Upon request, Institution shall also provide Education Setting with documentation demonstrating compliance with Section 5.2 herein for each Student, in a form agreed upon by Wheaton. Such documentation shall be maintained at the Institution. Following assignment of a Student to the Education Setting and during the term of each Student's experience, the Institution shall continue to supervise each Student completing an experience on-site at Education Setting in accordance with all standards applicable to the experience as required by the National League for Nursing Accrediting Commission ("NLNAC") and the Commission on Accreditation of Allied Health Education Programs ("CAAHEP") or other applicable accrediting body of the Institution.

1.3 Educational Coordinator. The Institution shall appoint a faculty member to serve as Educational Coordinator, and shall communicate his or her name, title and telephone number to the Education Setting. The Educational Coordinator shall be responsible for overall management of the Students' educational experience, and may be assigned as Educational Coordinator for one or more Programs.

1.4 Professional Liability Insurance. The Institution shall provide or shall require each Student assigned to the Education Setting to be covered by, at no cost to the Education Setting, professional liability insurance pursuant to Section 9.1 of this Agreement. If the Institution requires a Student to purchase his or her own professional liability insurance, the Institution shall provide to the Education Setting evidence of insurance in the form of a certificate of insurance prior to the placement of such Student at the Education Setting.

1.5 Accreditation and Licensure. The Institution shall maintain, at all times during the term of this Agreement: (i) accreditation as an educational institution; (ii) all licensures and approvals from the State of Wisconsin necessary to the Program; and (iii) full and unrestricted accreditation of the Programs from an accrediting organization. The Institution shall promptly notify the Education Setting of any change in its accreditation or licensure status and shall provide Wheaton with evidence of accreditation or licensure status upon request.

1.6 Background Investigation and Disclosure. All Students who are assigned to the Education Setting shall have had a background check performed under the direction of the Institution in accordance with the Wisconsin Caregiver Background Check Law ("BID"). The BID shall include obtaining information from the Department of Justice, the Department of License and Regulations, the Department of Health and Family Services and from out-of-state agencies if the individual has lived outside of Wisconsin within the past three years. If the Student has a criminal record, the record will be evaluated by the Institution to determine if the individual is barred from performing duties at the Education Setting. Prior to placement of the Student, the Institution will notify the Education Setting in writing of any crime of which Student has been convicted so that the Education Setting may make a determination as to how substantially related the conviction(s) is to the duties the Student would be performing. The Education Setting may refuse placement of any Student the Education Setting believes could put

its patients, employees and/or visitors at risk. The Institution hereby agrees to notify the Education Setting when the Institution becomes aware that any Student on site at the Education Setting is charged with or convicted of any crime or is investigated by and governmental agency.

1.7 Compliance.

A. Compliance with Laws, Regulations, Policies and Standards. Institution shall and shall require Students and faculty to: (i) abide by all relevant policies, procedures, standards and directives issued or adopted by the Education Setting and made known to Institution, Students and faculty, including, but not limited to, the Ethical and Religious Directives for Catholic Health Care Services promulgated from time to time by the National Conference of Catholic Bishops, as interpreted by the local bishop; (ii) abide by all relevant state and Federal laws; and (iii) comply with all applicable rules, regulations and standards promulgated by the Joint Commission on Accreditation of Healthcare Organizations ("JCAHO") and made known to Institution, Students and faculty.

B. Mission, Vision and Values. Institution hereby acknowledges that it has received information from Wheaton regarding the mission, vision, and values of the Wheaton Franciscan System and agrees that in the performance of all of its obligations under the terms of this Agreement, it shall at all times conduct itself, and shall take reasonable actions to ensure that its, Students, faculty, employees and agents conduct themselves, in a manner which is consistent with said mission, vision, and values.

2. EDUCATION SETTING RIGHTS AND RESPONSIBILITIES. In addition to its rights and responsibilities described elsewhere in this Agreement, Wheaton shall have the following rights and responsibilities:

2.1 Placements. The Education Setting shall have sole discretion to determine its capacity to accept Students for placement, whether such capacity is described in terms of the number of Students on-site at any one time, the number of hours of supervision that the Education Setting can provide over a period of time, or other such description of capacity. The Education Setting shall communicate such capacity to the Institution before Students may be assigned to the Education Setting.

2.2 Site Coordinator. The Education Setting shall appoint an employee to serve as a coordinator at the Education Setting site (for purposes of this Agreement, the "Site Coordinator"), and shall communicate his or her name, title and telephone number to the Institution. The Site Coordinator shall be responsible for overall management of the Students' experience at the Education Setting, and may be so assigned with respect to one or more Programs.

2.3 Orientation. The Education Setting shall provide the Institution with orientation materials via the Wheaton Franciscan Healthcare web site. The Education Setting

shall also provide the Institution faculty with orientation to the Education Setting, including work duties, equipment and all applicable policies and procedures of the Education Setting.

2.4 Qualified Supervision of Precepted Students. For precepted students, the Education Setting shall assure that a qualified practitioner supervises each precepted Student. A practitioner shall be qualified if he or she: (i) maintains licensure or certification as appropriate for the particular Program; (ii) possesses adequate experience; (iii) demonstrates competence in the area of practice; and (iv) demonstrates interest and ability in teaching.

2.5 Student Access to the Education Setting and Patients. The Education Setting shall permit access by Students to any and all areas of the Education Setting as reasonably required to support Students' development and as permitted under Wisconsin law. These areas shall include, without limitation, patient care units, laboratories, ancillary departments, health science libraries, cafeteria and parking facilities. The Education Setting reserves the right to refuse access to any Student who does not meet, in the Education Setting's reasonable determination, its standards for safety, health or proper conduct.

2.6 Accreditation, Licensure and Eligibility. The Education Setting shall maintain, at all times during the term of this Agreement: (i) full and unrestricted accreditation; (ii) all necessary licensures and approvals from the State of Wisconsin; and (iii) if applicable, eligibility for participation in the Medicare and Medicaid programs. The Education Setting shall immediately notify the Institution of any change in the Education Settings accreditation or eligibility status.

2.7 Final Authority. The Education Setting retains final authority for all aspects of operations at and management of the Education Setting.

2.8 Remuneration. Students may not receive remuneration for services relating to the Program and performed for or on behalf of the Education Setting.

3. JOINT RIGHTS AND RESPONSIBILITIES. In addition to their rights and responsibilities described elsewhere in this Agreement, the Institution and the Education Setting shall have the following rights and responsibilities.

3.1 Supervision and Evaluation of Students. The Institution and the Education Setting shall be jointly responsible for supervising and evaluating Students who are on-site at the Education Setting. The parties agree to, in good faith, work cooperatively to assure adequate supervision and evaluation of Students while Students are on-site at the Education Setting. Both parties shall reinforce with Students: (i) the seriousness of the service being performed at the Education Setting, including the Student's impact upon patients' wellbeing; (ii) the importance of abiding by the Education Setting rules and regulations; and (iii) the confidentiality of patient identities and medical records. The Institution shall, if the Education Setting so desires, assure prompt feedback to the Education Setting regarding Students' evaluation of their experience at the Education Setting. The Education Setting shall assure prompt feedback to the Institution regarding Students' performance at the Education Setting.

3.2 Review and Evaluation of Affiliation. The Institution and the Education Setting agree to meet at periodic intervals to review and evaluate any and all aspects of their affiliation, and to work cooperatively to establish and maintain experiences that meet their respective objectives. This Agreement or any Addendum may be amended or modified, pursuant to Section 7 below, to reflect changes in the parties' relationship.

4. FACULTY AND STUDENT RIGHTS AND RESPONSIBILITIES. The Institution and the Education Setting shall instruct Students regarding Students' rights and responsibilities while on-site at the Education Setting. These rights and responsibilities shall include the following:

4.1 Conduct. Student shall, at all times while on the Education Setting premises, conduct himself or herself in a professional manner and shall refrain from loud, boisterous, offensive or otherwise inappropriate conduct. Student shall refrain from the improper use of alcohol or other drugs, and shall not carry any firearms or other weapons.

4.2 Policies, Rules and Regulations. Student shall abide by all policies, rules and regulations established by the Education Setting and the Institution. If a Student or faculty member fails to so abide, Education Setting shall have the right to notify the Institution that such Student(s) or faculty member shall not return to the premises unless authorized to do so by Wheaton.

4.3 Timeliness. Faculty and Student(s) shall report to the Education Setting at the assigned place and time. Student shall immediately inform the Education Setting and the Institution of Student's inability to report to the Education Setting as assigned.

4.4 Uniform and Identification. Student shall wear the uniform or other clothing as directed by the Institution. Student shall display proper identification as directed by the Education Setting. Student's appearance shall be, at all times, neat and clean.

4.5 INTENTIONALLY OMITTED.

4.6 Personal Expenses. While at the Education Setting, Student shall be responsible for Student's personal expenses such as meals, travel, medical care and incidentals.

4.7 Evaluation of Experience. Student shall, upon request of the Institution or the Education Setting or Wheaton, provide a candid, written evaluation of the experience at the Education Setting including, without limitation, preparation for the on-site experience, orientation to the Education Setting and experience and supervision at the Education Setting.

4.8 Orientation. Faculty and Students shall review and complete the Wheaton Franciscan Healthcare web-site orientation materials required by the Education Setting. The Faculty member or preceptor will be responsible for orientation of his/her student or clinical group to Wheaton Franciscan Healthcare utilizing the materials included on the web site prior to the first clinical day. Faculty or preceptors are also responsible for student orientation to the department and all Wheaton Franciscan Healthcare and site/unit policies, procedures, equipment,

and documentation. Faculty or preceptor shall ensure that documentation demonstrating compliance with the requirements as describe in this Section 4.8 and as outlined per the policy of Education Setting is completed by all Faculty and Student(s) and submitted to Education Setting. Faculty and Student(s) will immediately inform the Education Setting and the Institution of Faculty and Student(s) inability to comply with requirements or acknowledgements as required on the Wheaton Web-site Orientation.

4.9 Qualified Supervision. Faculty shall be a qualified practitioner and ultimately be responsible for supervision of clinical groups of Students. Faculty shall be qualified if he or she: (i) maintains licensure or certification as appropriate for the particular Program; (ii) possesses adequate experience; (iii) demonstrates competence in the area of practice; and (iv) demonstrates interest and ability in teaching. The student to practitioner ratio shall not exceed a ratio determined to be unreasonable by the Institution or Wheaton, but in no event shall the student to practitioner ratio exceed one to eight, unless otherwise requested and approved by Education Setting.

5. FACULTY AND STUDENT HEALTH POLICIES

5.1 Emergency Medical Services. If a Student, the Educational Coordinator or a faculty member is injured or becomes ill while at the Education Setting, the Education Setting shall provide emergent or urgent medical care as appropriate, consistent with the Education Setting's capability and policies. Student, the Educational Coordinator or a faculty member shall bear financial responsibility for charges associated with said treatment.

5.2 Institution and Education Setting Policies. Each Student and faculty member shall be required to comply with reasonable health policies of the Education Setting including, but not limited to, certifying that he or she has received, prior to reporting to Education Setting, a physical examination, are free from communicable disease, including tuberculosis (as documented by a negative skin test or negative chest x-ray, dated after skin test conversion, and are free of signs and symptoms of tuberculosis); have documented immunity to rubella (positive titer) or shown evidence of immunization; demonstrated immunity to mumps (positive titer) or shown evidence of immunization for mumps which meets ACIP definition of immunity (MMWR, June 9, 2006 / 55(22); 629-630); have documented immunity to rubeola (positive titer) or shown evidence of immunization for rubeola which meets ACIP definition of immunity (MMWR, May 22, 1998, vol. 47, no RR-8); have documented immunity to varicella (positive titer), shown evidence of immunization or report a prior history of varicella; have been advised of the risks of hepatitis and have either signed a waiver or have begun the hepatitis B vaccination series, or, in the alternative, have completed the appropriate declination of immunization form, notice of which is provided to the Education Setting.

A. Rubeola immunity (MMWR, May 22, 1998, vol 47, no RR-8):

(1) Documented administration of 2 doses of live measles virus vaccine, the first dose given on or after the first birthday. The second dose administered no earlier than 1 month after the first dose.

- (2) Laboratory evidence of immunity.
- (3) Documentation of physician-diagnosed measles.

B. Rubella immunity:

- (1) Documented administration of 1 dose of live measles virus vaccine, the first dose given on or after the first birthday.
- (2) Laboratory evidence of immunity.
- (3) Documentation of physician-diagnosed rubella is NOT considered evidence of immunity.

C. Mumps immunity (MMWR, June 9, 2006 / 55(22); 629-630):

- (1) Documented administration of 2 dose of live mumps virus vaccine, the first dose given on or after the first birthday. The second dose administered no earlier than 1 month after the first dose.
- (2) Laboratory evidence of immunity.
- (3) Documentation of physician-diagnosed mumps.

5.3 OSHA Policies. The Institution shall instruct Students and faculty regarding General Infection Control (hand washing, etc.), information outlined in the OSHA Bloodborne Pathogens Standard (standard/universal precautions, hepatitis B vaccination etc.), and the CDC Tuberculosis guidelines (epidemiology, signs/symptoms, practices to prevent transmission, etc.). The Education Setting shall instruct Students and faculty regarding additional precautions, procedures and practices that it expects of Students or faculty while at the Education Setting.

6. TERM AND TERMINATION

6.1 Initial and Renewal Term. Subject to Section 6.2 below, this Agreement shall be effective as of the date set forth above ("Effective Date") and shall continue for an initial term of one academic or Program year. Thereafter, this Agreement shall automatically renew and continue in full force and effect for any and all periods during which any Student in a Program is placed, at and accepted by the Education Setting. Notwithstanding the foregoing, either party may choose not to renew this Agreement by providing the other with not less than sixty (60) days' written notice of its intent not to renew at the end of then-current Program. In the event that either party's non-renewal of this Agreement disrupts the experience of any Student(s) in a Program, the Agreement shall remain in full force and effect and the Student's experience shall continue until such time as this Agreement may expire without disruption of said Student(s)' experience. During any time period in which notice of non-renewal has been given and existing Students are completing the Program, no new Student may be admitted to the Program and placed at the Education Setting.

6.2 Termination. Notwithstanding Section 6.1 above, this Agreement may be terminated as follows:

A. By Mutual Agreement. The Institution and the Education Setting may terminate this Agreement at any time on any terms to which they agree in writing.

B. For Cause. In the event the Institution or the Education Setting fails in any substantial manner to perform as required herein, this Agreement may be terminated as described below:

(1) Either party may terminate this Agreement at any time, upon material breach of any of its provisions by the other party; provided, however, that not less than thirty (30) days prior to termination, written notice shall be given by the non-breaching party to the breaching party that states the intention of the non-breaching party to terminate this Agreement, the nature of the material breach giving rise to termination, and shall permit the breaching party reasonable opportunity to cure such material breach during said thirty (30) day period.

(2) If the material breach is not resolved to the satisfaction of the non-breaching party during the thirty (30) day period as provided in B.(1) above, the non-breaching party shall immediately give the breaching party written notice of termination of the Agreement.

(3) In the event that termination of the Agreement by the Education Setting pursuant to this Section 6.2 (B) disrupts the experience of any Student(s) in a Program the parties shall attempt, in good faith and using their best efforts, to continue Students' experiences and this Agreement in full force and effect until such time as this Agreement may expire without disruption of said Students' experience. During any time period in which notice of termination has been given and existing Students are completing the Program, no new Student may be admitted to the Program and placed at the Education Setting.

C. Immediate Termination. The Institution may immediately terminate this Agreement and any and all addenda or amendments if the Education Setting fails to maintain full and unrestricted accreditation, licensure and, if applicable, eligibility as required under Section 2.6 of this Agreement. The Education Setting may terminate this Agreement immediately upon written notice to the Institution if the Institution fails to maintain full and unrestricted accreditation and licensure as required under Section 1.5 of this Agreement. In addition, the Education Setting may also terminate student placements for any Program if the Institution fails to maintain full and unrestricted accreditation with respect to said Program as required. Additionally, Wheaton may terminate this

Agreement immediately upon written notice to Institution if it determines, in its reasonable discretion, that Institution is not administering the Program at a sufficiently high quality level such that Students' are not adequately prepared for the experience at Education Setting.

6.3 Effect of Termination. Upon termination of this Agreement, no party shall have any further obligation hereunder except for obligations accruing under the terms of this Agreement prior to the date of termination.

7. AMENDMENTS AND MODIFICATIONS: This Agreement may be changed at any time with the written approval of the parties. Such amendments or modifications will be typed separately, signed by the parties and made a part of this Agreement.

8. INDEMNIFICATION AND LIABILITY

8.1 The Institution. The Institution shall indemnify, defend and hold harmless the Education Setting, its governing board, officers, employees and agents from and against any and all liabilities, claims, losses, lawsuits, judgments, and/or expenses including attorney fees, arising, either directly or indirectly, from any act or failure to act by the Institution or any of its employees.

8.2 The Education Setting. The Education Setting shall indemnify, defend and hold harmless the Institution, its governing board, officers, faculty, employees and agents from and against any and all liabilities, claims, losses, lawsuits, judgments, and/or expenses including attorney fees, arising, either directly or indirectly, from any act or failure to act by the Education Setting or any of its employees, agents, medical residents or members of its medical staff that may occur during or that may arise out of this Agreement.

8.3 Costs. In the event each party is found to be at fault, then each shall bear its own costs and attorney fees and its proportionate share of any judgment or settlement based on its percentage of fault, as determined by a procedure established by the parties.

8.4 Survival. This Section 8 shall continue beyond the expiration or termination of this Agreement.

9. INSURANCE.

9.1 The Institution. The Institution shall maintain, at no cost to Wheaton, general and professional liability insurance covering the Institution as an entity and each of its employees, students and agents against general and professional liability claims, in the minimum amount of one million dollars (\$1,000,000) per occurrence and five million dollars (\$5,000,000) aggregate per year. Evidence of such insurance shall be provided to the Education Setting prior to the placement of a Student at the Education Setting.

9.2 The Education Setting. The Education Setting shall maintain, at no cost to the Institution, general and professional liability insurance covering the Education Setting as an

entity and each of its physician-employees, nonphysician-employees, medical residents and agents against professional liability claims, in the minimum amount of one million dollars (\$1,000,000) per occurrence and three million dollars (\$3,000,000) aggregate per year. Evidence of such insurance shall be provided to the Institution upon request.

10. DISPUTE RESOLUTION. Any dispute arising under or in any way related to this Agreement that is not resolved by agreement of the Institution and the Education Setting may be submitted by either party to binding arbitration pursuant to the Commercial Arbitration Rules of the American Arbitration Association. The parties agree that such arbitration shall result in a final and binding award in the State of Wisconsin, and may be judicially enforced. Each party shall bear its own arbitration costs and expenses, unless otherwise determined by the arbitrator.

11. NOTICES AND COMMUNICATION

11.1 Notices. All notices under this Agreement shall be given in writing and shall be deemed to have been properly given when delivered:

If to the Institution: HERZING UNIVERSITY ONLINE
W140 N8917 Lilly Road
Menomonee Falls, WI 53051
Attn: Director of Career Services

If to the Education Setting: WHEATON FRANCISCAN HEALTHCARE
400 West River Woods Parkway
Milwaukee, WI 53212
Attn: Brenda Bowers

or at other such addresses as a party from time to time may designate by written notice to the other party.

11.2 Other Communications. Communications, other than notices as described in Section 12.1 above, whether written or oral, shall be directed to the appropriate Institution Dean or the Education Setting Site Coordinator or to other such person as a party from time to time may have designated to the other party.

12. NON-EXCLUSIVE. The parties agree that the Institution shall be free to enter into similar agreements with other providers, and that the Education Setting shall be free to enter into similar agreements with other educational institutions.

13. GOVERNING LAW. The laws of the State of Wisconsin shall govern this Agreement.

14. INVALID PROVISION. The invalidity or unenforceability of any particular provision of this Agreement shall not affect the other provisions hereof, and this Agreement shall be construed in all respects as if such invalid or unenforceable provision were omitted.

15. ASSIGNMENT. No assignment by a party of this Agreement or its rights and responsibilities hereunder shall be valid without the specific written consent of the other party.

16. RELATIONSHIP OF PARTIES. The Institution, Wheaton and the Education Setting, including their respective agents and employees, shall be, at all times, independent contractors of the other. Nothing in this Agreement is intended or shall be construed to create a joint venture relationship, a partnership, a lease, or a landlord/tenant relationship. Should any governmental agency question or challenge the independent contractor status of the Institution, the Education Setting or their employees, both the Institution and the Education Setting, upon receipt by either of them of notice, shall promptly notify the other party and afford the other party the opportunity to participate in any government agency discussion or negotiations, irrespective of whom or by whom such discussions are initiated.

17. CONFIDENTIALITY OF RECORDS

17.1 Student Records. The Institution and the Education Setting acknowledge that many student educational records are protected by the Family Educational Rights and Privacy Act ("FERPA") and that, generally, student permission must be obtained before releasing specific student data to anyone other than the Institution. The Institution agrees to provide the Education Setting with guidance with respect to compliance with FERPA.

17.2 Patient Health Care Records. The Institution and the Education Setting acknowledge that patient health care records are protected under Sections 146.82 and 51.30, of the Wisconsin Statutes and by the Health Insurance Portability and Accountability Act ("HIPAA"), and that, generally, the informed consent of the patient (or person authorized by the patient) must be obtained before disclosing information from patient health care records. The Education Setting agrees to provide Students and the Institution with guidance with respect to compliance with these statutes and regulations.

17.3 Confidentiality of Terms. The parties agree that the terms and conditions of this Agreement are confidential and shall not be disclosed to third parties by either party without the express written consent of the other party. For purposes of this Agreement, the term "third party" includes any person or entity except (i) the parties to this Agreement; (ii) any employee or agent of a party to this Agreement who has a reasonable need to know of this Agreement's existence and/or its terms; or (iii) governmental entities or persons who have obtained a lawful subpoena or court order for purposes of a lawfully conducted audit by a governmental agency.

17.4 Confidential Information. Institution acknowledges that, it and its Students may gain knowledge and information about Education Setting's patient bases, referral sources, finances, financial status, fee schedules, business operation, business plans, contract and arrangements with individuals, employers, other providers, health plans and payers, and their

marketing and development plans and other proprietary information (collectively referred to as "Confidential Information"), the confidential nature of which is of great importance to Education Setting, and disclosure to or use of which by a competitor would result in serious damage to Education Setting. Accordingly, Institution shall not, and shall ensure that Students do not, divulge or disclose to any other person, firm, or organization, any Confidential Information acquired by Institution or any Students in the performance of services as an independent contractor of Education Setting unless such information is in the public domain or known by third parties to which Education Setting intends to make any otherwise prohibited disclosure or use.

18. NON-DISCRIMINATION. The Institution and the Education Setting shall not unlawfully discriminate against any individual on the basis of race, creed, color, sex, religion, age, disability or national origin, and shall comply with all anti-discriminatory laws and policies promulgated by the Institution and to which the Institution is subject.

19. WAIVER. The waiver by either party of the breach of any provision of this Agreement by the other party shall not operate or be construed as a waiver of any other or subsequent breach.

20. ENTIRE AGREEMENT. This Agreement, together with one or more addenda attached (or that later may be attached) hereto, constitutes the entire agreement between the parties and contains all the agreements between the parties with respect to the subject hereof. This Agreement supercedes any and all other agreements, in writing or oral, between the parties hereto with respect to the subject matter thereof.

21. AUTHORITY TO SIGN. Each party represents and warrants that the individual signing on its behalf is its legal representative and is authorized to enter into this Agreement.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the Effective Date.

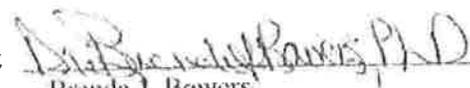
HERZING UNIVERSITY ONLINE

WHEATON FRANCISCAN
HEALTHCARE - SOUTHEAST
WISCONSIN, INC.

By:


Etanna Guertelle
VP of Online Education

By:


Brenda J. Bowers
SVP-Organizational Change/
Leadership Performance

Date:

4/7/2011

Date:

4-26-11

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Sharon Henes Administrative Rules Coordinator		2) Date When Request Submitted: 26 March 2018 Items will be considered late if submitted after 12:00 p.m. on the deadline date: ▪ 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 12 April 2018	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Legislation and Rule Matters – Discussion and Consideration 1. N 8 Relating to Collaboration with Dentists 2. Possible Scope amending N 8 to clarify Advanced Practice Nurse Prescribers may not supervise anesthesiologist assistants. 3. Update on Legislation and Pending and Possible Rulemaking Projects.	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:			
11) Authorization			
<p style="font-size: 1.2em; font-family: cursive;"><i>Sharon Henes</i></p>			
Signature of person making this request			Date
Supervisor (if required)			Date
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

STATE OF WISCONSIN
BOARD OF NURSING

IN THE MATTER OF RULE-MAKING : ORDER OF THE
PROCEEDINGS BEFORE THE : BOARD OF NURSING
BOARD OF NURSING : ADOPTING EMERGENCY RULES

The statement of scope for this rule, SS(# 016-18), was approved by the Governor on February 7, 2018, published in Register 746A3 on February 19, 2018, and approved by the Board of Nursing on (date). This emergency rule as approved by the Governor on (date)

ORDER

An order of the Board of Nursing to amend N 8.10 (2), (5) and (7) relating to advance practice nurse prescribers collaboration with dentists.

Analysis prepared by the Department of Safety and Professional Services.

FINDING OF EMERGENCY

The Board of Nursing finds that an emergency exists and that this rule is necessary for the immediate preservation of the public peace, health, safety, or welfare. A statement of facts constituting the emergency is:

Advanced practice nurse prescribers, who work in dental practice settings, are encountering barriers to working in those practices due to the requirement that advanced practice nurse prescribers are to work collaboratively with a physician. Most dental practices do not have physicians on staff. This rule is necessary for the preservation of the health and welfare of the public by increasing health care access by allowing advance practice nurse prescribers to collaborate with a dentist when working in a dental setting.

ANALYSIS

Statutes interpreted: s. 441.16, Stats.

Statutory authority: ss. 15.08 (5) (b) and 441.16 (3) (b), Stats.

Explanation of agency authority:

Each examining board shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession. [s. 15.08 (5) (b), Stats.]

The board shall promulgate rules necessary to administer this section, including rules for defining the scope of practice within which an advanced practice nurse may issue prescription orders. [s. 441.016 (3) (b), Stats.]

Related statute or rule: s. 441.16, Stats. and N 8, Wis. Admin. Code

Plain language analysis:

Advanced practice nurse prescribers are required to work in collaboration with other health care professions with at least one being a physician. As health care practice evolves, there are advanced practice nurse prescribers working in dental practice settings. These dental practice settings may not have a physician as part of the practice. This proposed rule amends the rule to require advanced practice nurse prescribers to work in a collaborative relationship with a physician or dentist.

Summary of, and comparison with, existing or proposed federal regulation: None

Comparison with rules in adjacent states:

Illinois: Illinois requires an advanced practical nurse to additionally hold a separate license for the prescribing of controlled substances. In order to obtain a mid-level practitioner controlled substances license, the advanced practice nurse is required to provide the license number and controlled substances license number of the delegating or collaborating physician or podiatrist and the written notice of delegation of prescriptive authority signed by the physician or podiatrist including the schedule of controlled substances that the mid-level practitioner may dispense or prescribe.

Iowa: Iowa licenses nurses at three levels: licensed practical nurse, registered nurse and advanced registered nurse practitioner. The advanced registered nurse prescriber has a scope of practice which includes prescriptive authority. There is no equivalent certification in Iowa to the Wisconsin advanced practice nurse prescriber certificate.

Michigan: Michigan licenses nurses at two levels: licensed practical nurse and registered nurse. Michigan has specialty certifications for a nurse anesthetist, nurse midwife and nurse practitioner. There is no equivalent certification in Michigan to the Wisconsin advanced practice nurse prescriber certificate.

Minnesota: Minnesota licenses nurses at three levels: licensed practical nurse, registered nurse and advanced practice registered nurse. The advanced practice registered nurse has a scope of practice which includes prescriptive authority. There is no equivalent certification in Minnesota to the Wisconsin advanced practice nurse prescriber certificate.

Summary of factual data and analytical methodologies:

Advance practice nurse prescribers, particularly nurse anesthetists, are working in dental offices that do not employ physicians. This proposed rule recognizes this evolving practice and allows for a collaborative relationship with a dentist.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

Fiscal Estimate:

Effect on small business:

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at Kirsten.Reader@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Sharon Henes, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-261-2377; email at DSPSAdminRules@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Sharon Henes, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy, 1400 East Washington Avenue, Room 151, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received at or before the public hearing to be held on * to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. N 8.10 (2), (5), and (7) are amended to read:

N 8.10 (2) Advanced practice nurse prescribers shall facilitate collaboration with other health care professionals, at least 1 of whom shall be a physician or dentist, through the use of modern communication techniques.

(5) The board shall promote communication and collaboration among advanced practice nurse prescribers, physicians, dentists and other health care professionals.

(7) Advanced practice nurse prescribers shall work in a collaborative relationship with a physician or dentist. The collaborative relationship is a process in which an advanced practice nurse prescriber is working with a physician or dentist in each other's presence when necessary, to deliver health care services within the scope of the practitioner's training, education, and experience. The advanced practice nurse prescriber shall document this relationship.

SECTION 2. EFFECTIVE DATE. This emergency rule shall take effect upon publication in the official state newspaper.

(END OF TEXT OF RULE)

Dated _____

Agency _____

Member of the Board
Board of Nursing

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Kate Stolarzyk, Bureau Assistant		2) Date When Request Submitted: 4/2/2018 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Board of Nursing			
4) Meeting Date: 4/12/2018	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Speaking Engagement Request for Sheryl Krause to Speak at the Wisconsin Nurses Association (WNA) 32 nd Annual APRN Pharmacology and Clinical Update Conference – April 26 & 27, 2018 – Madison, WI	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: See attached request from WNA. If the board chooses to designate a speaker, please see the adjusted motion language below. MOTION: to designate Board/Staff Member Name to speak on the Board's behalf at the WNA 32 nd Annual APRN Pharmacology and Clinical Update Conference on April 26 & 27, 2018 in Madison, WI and to authorize travel. Motion carried unanimously.			
11) Authorization			
<i>Kate Stolarzyk</i>		4/2/2018	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			



PUBLIC AGENDA REQUEST FORM

Instructions:

1. Fill out this form, and then save to your device.
2. Return to the "[Suggest an Agenda Item](#)" page and select the appropriate Board or Council from the Board/Council list.
3. Attach your completed "Public Agenda Request" form and send.

First Name: Gina

Last Name: Dennik-Champion

Association/Organization: Wisconsin Nurses Association

Address Line 1: 2820 Walton Commons

Address Line 2: Suite 136

City: Madison

State: WI

Zip: 53718

Phone Number: (608) 228-3300

Email: gina@wisconsinnurses.org

Subject: Request for Chairperson Krause, to provide Board of Nursing Update

Issue to Address: The Wisconsin Nurses Association 32nd Annual APRN Pharmacology and Clinical Update Conference is scheduled from Thursday April 26 – Saturday April 28, 2018 at the Monona Terrace in Madison, WI. We would like Chairperson Krause to provide a Board of Nursing Update at the Thursday April 26, 2018 session, *APRN Practice Update* which is scheduled at 9:45 am. We would also like to invite Chairperson Krause to be our luncheon guest and provide a welcome during the Friday April 27, 2018 lunch and APRN Update portion of the day at 12:15 pm.

I thank you in advance for your consideration.