



BScN Program Handbook 2020-2021

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McMaster University, 1280 Main Street West, HSC 2J36, Hamilton, ON L8S 4K1
(905) 525-9140 x22699

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USING THE PROGRAM HANDBOOK

This handbook contains essential information pertaining to BScN Undergraduate Nursing Students in the McMaster, Mohawk, and Conestoga Collaborative Program. In addition to describing our BScN Kaleidoscope Curriculum, the Handbook includes important information related to policies, procedures, and regulations.

It is the responsibility of all Undergraduate Nursing students to be familiar with the information in this handbook, including content in links to external sites and documents.

The BScN Program Office reserves the right to change or revise information contained in the Handbook.

The version of the Handbook posted in Avenue to Learn in your current courses each year is considered the most up to date and applies to all students.

IMPORTANT NOTE:

The information contained in the [McMaster Undergraduate Calendar](#) will take precedence over other written documents.

THE BScN PROGRAM

Vision & Mission Statements

Our Vision

Advancing health and well-being through excellence in nursing.

Our Mission

Transforming lives through nurturing relationships and evidence informed innovations in nursing research, education, and practice.

Philosophy

We believe that nursing is a scientific and humanistic activity of professional caring.

The goal of nursing is the promotion and restoration of health. The following concepts are central to our philosophy: **PERSON/CLIENT, HEALTH, HEALTH PROMOTION, HEALING, CONTEXT, PROFESSIONAL CARING, LEARNING and KNOWING.**

We believe that all PERSONS are self-interpreting, integrated beings who have biological, psychological, sociological and spiritual needs. These inherent needs and life experiences significantly influence perception of self, as well as relationships with others. The **CLIENT** may be an individual, family, group, population or community. When a nurse engages in professional caring, a nurse-client relationship is established within which the nurse and client become partners working towards creating an enabling context in which the client can meet health-related needs.

We believe it is the goal of all persons to find meaning in their lives. The **CONTEXT** in which the client exists influences their health and personal meaning. This context is internal (biophysical, emotional, psychological, relational and spiritual) and external (physical, cultural, social, political, economic and ecological). Personal meaning is acquired through the interaction of: rational (thinking); behavioural (embodied physical responses and actions); relational (interactions with others); and emotive elements (psychological and spiritual responses) within the client's internal and external context. Both nurses and clients engage in creating personal meaning within their lives.

We believe that HEALTH is the extent to which people are able to achieve aspirations, satisfy needs and cope with or change their context. Health is a dynamic life experience that can be threatened physically, mentally, emotionally, socially or spiritually at any given time. The fundamental conditions and resources for health are peace, shelter, education, food, income, a stable eco-system, sustainable and equal access to resources, and social justice. We support the definition of **HEALTH PROMOTION** as proposed by the Ottawa Charter that states: "Health promotion is the process of enabling people to increase control over, and improve their health". We believe that **HEALING** is a process of integration and balance of the self, leading towards the maintenance and enhancement of health and personal growth. Healing occurs within the client and while it can be facilitated within the nurse-client relationship, it is not something that can be imposed.

We believe that the nurse engages in PROFESSIONAL CARING by supporting the client in the processes of identifying, determining and acting upon experiences relevant to health and healing. We distinguish professional caring from the generic human capacity to care. Nursing as a profession is guided by professional standards, adheres to professional values, and uses learned behaviours, validated knowledge, theories, techniques and processes that characterize

professional caring.

We believe professional caring has both scientific and humanistic components. It is both a science and an art and is situated within the ways of knowing in nursing: scientific (empiric), ethical, personal, aesthetic, and emancipatory (Chinn & Kramer, 2011). The scientific component of professional caring encompasses the beliefs that the nurse must possess knowledge of the client's needs and capacities, knowledge and skill to be able to meet these needs, and the ability to choose actions based on tested or verified knowledge. The scientific component also involves contributing to the development and dissemination of new knowledge to guide nursing practice. Inherent in the humanistic component of professional caring is the acknowledgment of the client's rights to be treated as an individual entitled to dignity and respect. We believe that before nurses can engage in a professional caring relationship with a client, they must learn to value and care for themselves. Self-awareness and self-knowledge are foundational to the creation of a therapeutic relationship. Thus, learning focuses not only on external concepts and knowledge but also on an understanding of self.

We believe that LEARNING is a process of inquiry. Learning is a collaborative process, in which a learner and facilitator work together towards a common goal/outcome. The process is learner centred and occurs through dialogue within a context of respectful relationship(s). We believe effective collaboration implies mutual respect and trust, shared accountability and responsibility, and the recognition and utilization of the strengths of each partner within the collaborative relationship. Learning requires each of the participants to engage in critical reflection and self-evaluation leading to personal and professional growth. Knowledge and **KNOWING** are the outcomes of learning. Knowing involves knowledge of self and others, an understanding of the meaning of situations from objective and subjective perspectives, and the significance of these situations to self and others. Knowledge is the form of knowing that can be communicated with others. Knowing and knowledge enable judgements to be made regarding actions.

McMaster Model of Nursing

The pictorial image of the McMaster Model of Nursing (Fig. 1) represents what occurs during a health-related episode when a nurse and client (individual, family, group, population, and community) come together in a nurse-client relationship. Either the nurse or the client may initiate this relationship.

Each nurse-client interaction occurs in a present context (involving both internal and external factors), but is influenced by past contexts for both the nurse and the client as a result of their lived experiences. The present context may be highly dynamic and may therefore be constantly changing as the nurse-client relationship develops.

Within this relationship, the nurse and the client engage in **DIALOGUE**, which is a mutual exchange of messages. These messages may be verbal, non-verbal, emotional, spiritual or physical. The purpose of dialogue is to explore the meanings the current health-related situation has, for both client and nurse. The client and nurse enter into an authentic relationship and use communication, self-awareness, knowledge, skills and life experiences to understand the meaning of the client situation. The nurse must understand this meaning from the client's point of view and validate this interpretation with the client. This is **MUTUALITY**.

If, through dialogue, the nurse and client are unable to reach mutuality, the nurse then engages in critical self-reflection. She/he identifies resources, knowledge and other strategies for reassessing her/his own professional and personal understanding of the nurse-client relationship, the client situation and the meaning that situation holds for the client. Once the nurse and client have established a mutual understanding of the client's context, capacities, needs and goals, the nurse client partnership is directed towards supporting the client.

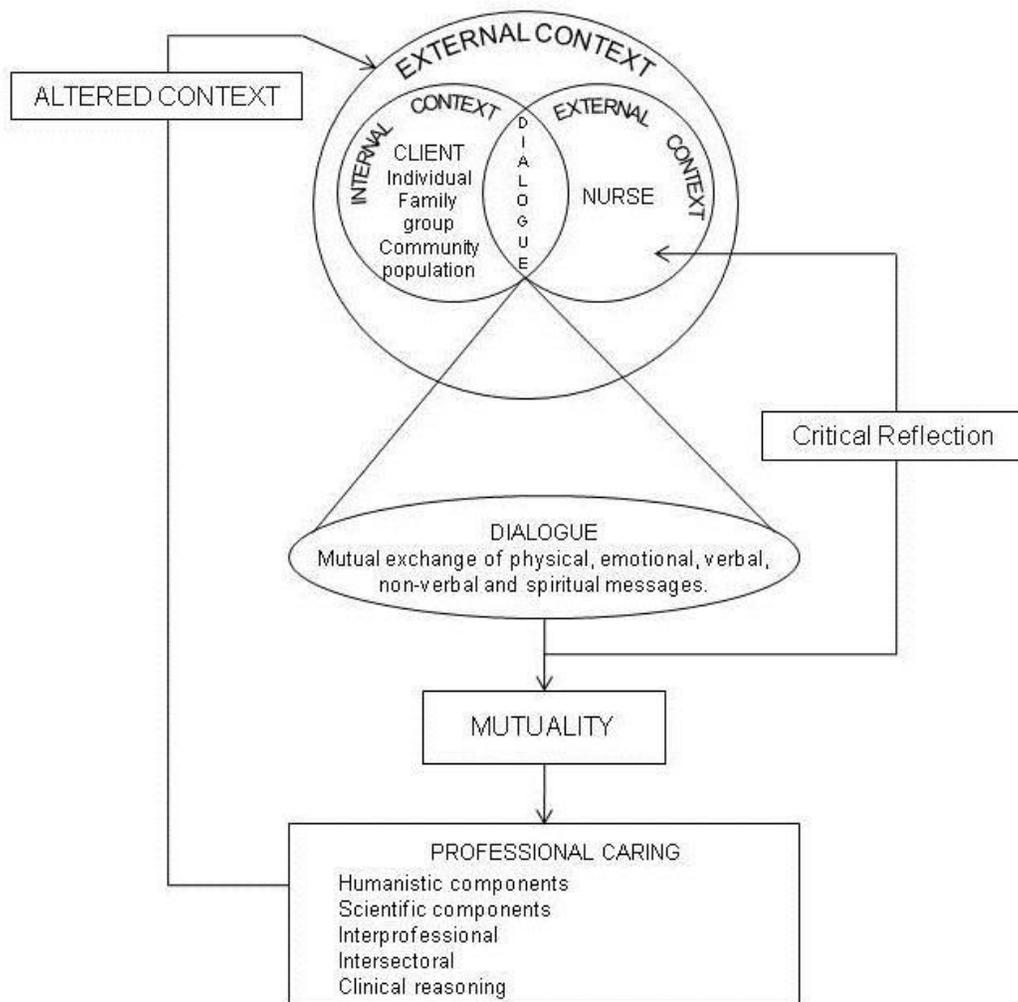


Figure 1: Model of Nursing

Nursing interventions are actions of professional caring that enable the client to achieve or maintain their fullest health potential. Nursing intervention results in an alteration in the internal and external client context. Professional caring may include working with other members of the interprofessional health care team. It may also be directed outside of the health care context to other sectors relevant to the clients' health-related situation (e.g. education, social services).

Once the client context is altered, the nurse and the client re-engage in dialogue to explore the meaning of the client's current health-related situation and to plan for further intervention. This may include a mutual decision to terminate the nurse-client relationship.

McMaster Model of Nursing Education

The McMaster Model of Nursing Education (Fig. 2) defines the learner and facilitator as persons made up of body, mind and spirit, influenced by life meaning, values and beliefs. Each exists within a context that is influenced by physical, cultural, social, economic, ecological, and political elements. Dialogue must occur between the learner and facilitator to achieve mutuality in order to direct learning activities. Mutuality gives rise to the selection and utilization of educational experiences that will facilitate and enhance learning and knowing.

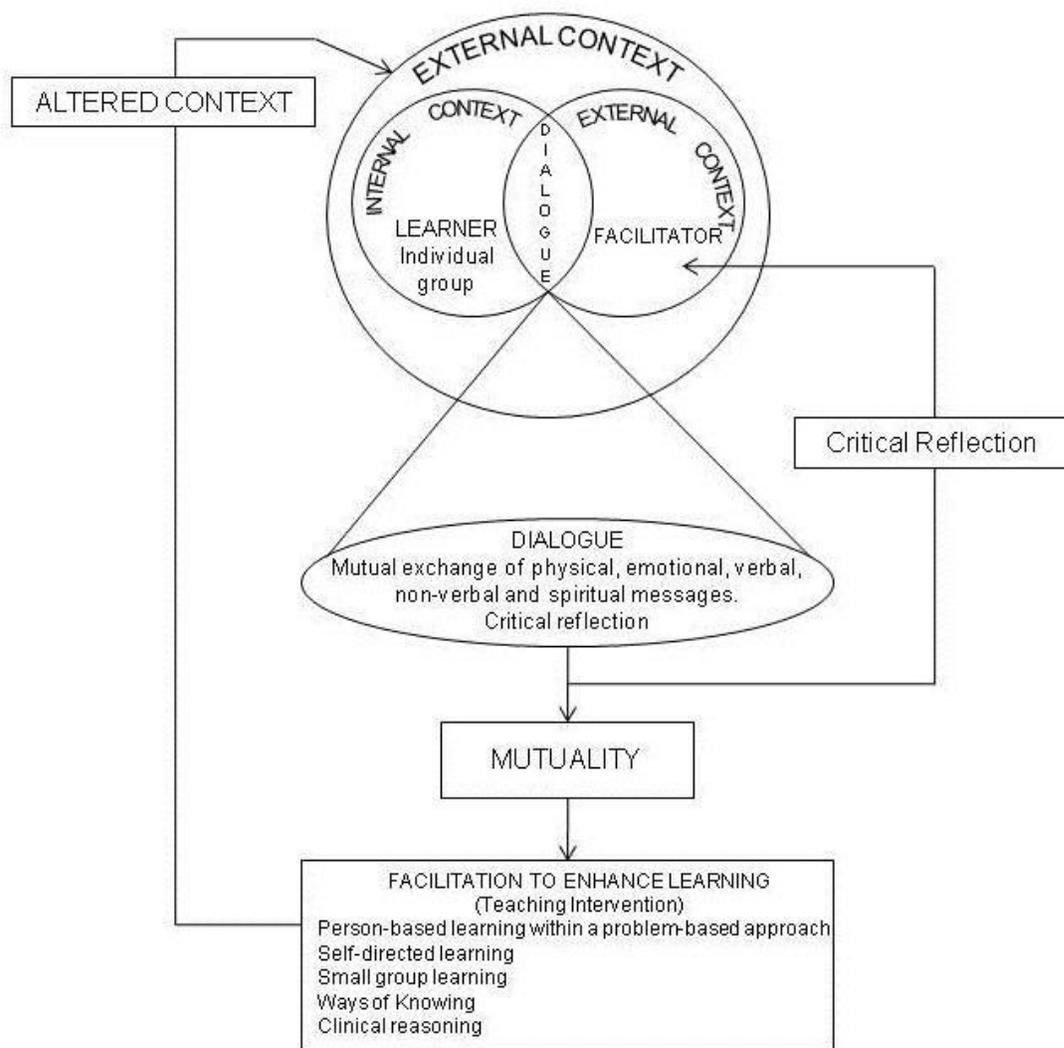


Figure 2: Model of Nursing Education

Undergraduate nursing education in this model is based on an andragogic educational philosophy that is learner centred and within which *the processes of self-directed and person-based learning within a problem-based learning approach are central*. The processes focus on helping the learner critically explore health-related issues for the purpose of directing professional caring. Learning skills, such as defining personal outcomes, understanding behaviour change, information acquisition/ assimilation, and self-evaluation are required.

Learner centred education supports learners in the process of developing clinical reasoning through critical self-reflection in which they identify learning needs and goals, develop and implement strategies to meet these goals and evaluate progress toward goal attainment. The program goals, level and course objectives provide the framework within which the learners' learning needs and goals are identified. Learning is promoted within the 5 ways of knowing in nursing as proposed by Carper (1978) and modified by Chinn and Kramer (2011): empiric (or scientific), ethical, personal, aesthetic, and emancipatory.

In this model, person-based learning within a problem-based learning approach, the learner is presented with a person's narrative or a story as a starting point. Problem-based learning is initiated once the person has been encountered and has defined learning needs, including the acquisition of knowledge related to a variety of health situations.

Program Streams

The [BScN Program offerings](#) can be found in the School of Nursing section of the McMaster Undergraduate Calendar (2020-21). The BScN Program has three distinct yet related streams. The three streams include:

- **Basic (A) Stream** is a four-year integrated program of study designed for students who have not completed any other Nursing education
- **Post Diploma RPN (E) Stream** is a three-calendar-year integrated program of study for students who have earned a Registered Practical Nurses (RPN) diploma
- **Accelerated (F) Stream** consists of five consecutive terms of study and is designed for students coming from a university science program of study

The Basic (A) Stream is offered at the McMaster, Mohawk and Conestoga sites. The Post Diploma RPN (E) Stream is offered at the Mohawk and Conestoga sites. The Accelerated (F) Stream is offered at only the McMaster site.

Academic Program Plans for each stream can be found on the Academic Advising webpage: <https://nursing.mcmaster.ca/current/advising/program-map>

Four types of courses are taken within the curriculum:

(1) nursing (NURSING) courses (professional practice and problem-based nursing concept courses); (2) required health sciences (HTHSCI) courses (e.g. anatomy, physiology, biochemistry); (3) elective courses (i.e. course taken from subjects of a student's choosing). Additionally, students in the Basic (A) Stream are required to complete psychology (PSYCH) courses as part of their program.

BScN Kaleidoscope Curriculum

Nursing courses in the Kaleidoscope Curriculum are organized and sequenced around priority nursing **themes** and **concepts** (see table below).

Personhood & Caring (humanistic aspects)	Context, Health & Healing (influences on health)	Learning & Knowing (discovery and knowledge)
Colonization *	Reconciliation *	Critical Inquiry
Communication	Change	Technology
Nursing as a Profession	Interprofessional Teamwork	Research
Leadership	Professional Nursing Care	
Advocacy	Diversity	

* in development

Themes

There are three themes that encompass the concepts in the BScN Kaleidoscope Curriculum: 1) Personhood and Caring, 2) Context, Health and Healing, and 3) Learning and Knowing. It is acknowledged that a great deal of overlap exists across themes and underlying concepts.

A concept-based approach needs to be conceptual not only in structure, but also in process. Conceptual learning is a process by which students learn how to organize information in logical mental structures, thus challenging students to become increasingly skilled at thinking. Conceptual teaching and learning complement the constructivist paradigm in fostering critical inquiry and deep understanding through the connection's students make to past learning, their application of concepts in multiple contexts, and their development of an understanding of interrelated concepts. Without a conceptual foundation, a learning experience may be an

isolated event for learners and limits students' ability to consider interrelated concepts within and between courses (Dean and Asselin, 2015).

Concepts

Concepts are the fundamental building blocks of any profession and are defined by Meleis (2012) as labels used to describe a phenomenon or a group of phenomena. Concepts represent nursing by painting a rich mental image that addresses the question of nursing's domains, and provide a clear picture of the depth and breadth of what nursing is (Cutcliffe & McKenna, 2005).

Concepts are learned sequentially and progressively across the curriculum. Concepts are presented across the lifespan and across professional practice settings in person-based, didactic and professional practice courses. Concepts are targeted for repetition based on importance and difficulty.

Although a large body of content exists for all concepts, exemplar content that best represents the concept is used to help students understand the concept (Cutcliffe & McKenna, 2005). This exemplar content was used to develop care scenarios representing individuals across the lifespan and in various settings. These scenarios are the narratives that will be used, so that students encounter "persons", with all of their strengths, assets, and challenges.

BScN Program Goals

The themes and concepts inform the BScN Program goals. Graduates will be prepared to provide competent professional practice in a variety of health care contexts and with diverse clients across the lifespan (individual, family, group, communities, populations) who have stable and unstable outcomes and multi-factorial influences (internal and external) on their health.

Graduates will:

1. Provide competent care with a holistic awareness of the impact of the internal and external context on health and healing.
2. Integrate an understanding of the client's unique perspective on his/her health, and how this perspective influences participation in one's health care.
3. Identify the need for appropriate change in health care. Create a climate for adopting change. Contribute to effecting and evaluating change.
4. Build relationships in a team environment and be actively engaged in team decision making around client care.
5. Contribute to the body of nursing knowledge through demonstrating an inquiring approach to practice.
6. Provide technologically appropriate care in a variety of contexts.
7. Contribute to the future of the nursing profession through a commitment to lifelong learning and professional growth. Integrate critical inquiry into professional practice.
8. Assume leadership roles in partnership with clients and the health care team.
9. Assume advocacy roles in partnership with clients and the health care team. Challenge inequities that impact the health of clients.
10. Practice within the professional standards, guidelines, legislation and values of the nursing profession.
11. Establish therapeutic partnerships with clients to enhance health and healing. Communicate effectively in a variety of media.

Program Level Goals

Concept	Level 1	Level 2	Level 3	Level 4
Communication	Demonstrate professional communication skills with peers, tutors, clients, and others.	Demonstrate professional communication skills (written and verbal) and therapeutic use of self in interactions with clients and families and members of the health care team.	Effectively communicate and collaborate with clients in increasingly diverse and complex situations. Develop scholarly writing / presentation skills.	Establish therapeutic partnerships with clients to enhance health and healing. Communicate effectively in a variety of media.
Nursing as a Profession	Gain a deeper understanding of self as person and nurse. Understand the scope of nursing practice.	Demonstrate personal and professional characteristics associated with nursing in the classroom and professional practice setting. Apply professional standards, guidelines, legislation and values of nursing to the care of clients and families.	Embrace the personal and professional characteristics associated with the nursing profession.	Practice within the professional standards, guidelines, legislation and values of the nursing profession.
Leadership	Actively participate in the functions of a group and demonstrate a variety of group roles.	Identify and interact as a member of a nursing care team.	Identify the skills and competencies required by a nurse to provide the leadership and coordination necessary to manage the delivery of client care by the interprofessional team.	Assume leadership roles in partnership with clients and the health care team.
Advocacy	Advocates appropriately for self and peers.	Recognize the need for advocacy in client care.	Participate in developing and implementing strategies for advocacy (political and social) with, and on behalf of, clients and the nursing profession.	Assume advocacy roles in partnership with clients and the health care team. Challenge inequities that impact the health of clients.
Change	Understand change theory and apply it to self, peers, and healthy clients.	Apply change theory in both the class and professional practice setting with a diverse group of clients.	Apply change theory in the class, professional practice and community setting.	Identify the need for appropriate change in health care. Create a climate for adopting change. Contribute to effecting and evaluating change.
Inter-professional Teamwork	Develop an understanding of the role of the nurse (see <i>Nursing as a Profession</i>).	Effectively communicate and interact with the interprofessional health care team.	Collaborate with other health care professionals to make decisions/solve problems together.	Build relationships in a team environment and be actively engaged in team decision making around client care.

			Adapt a plan of care in response to changes in client status in partnership with the interprofessional team.	
Professional Nursing Care	Demonstrate scientific and safe professional nursing care for healthy, stable clients.	Develop and implement a beginning plan of care for clients incorporating multiple sources of data. Recognize the impact of internal and external context on the individual and family.	Adapt a plan of care in response to changes in client status in partnership with the interprofessional team. Analyze the impact of the internal and external context on the individual, family and the community.	Provide competent care with a holistic awareness of the impact of the internal and external context on health and healing.
Diversity	Recognize individual differences and diversity, and how these differences influence health and health behaviours.	Demonstrate an understanding of the client's unique perspective on his/her health, and how this perspective influences participation in one's health care.	Demonstrate sensitivity to client diversity and recognize the influence diversity has on health, health-seeking behaviours and health practice.	Integrate an understanding of the client's perspective on his/her health, and how this perspective influences participation in one's health care.
Critical Inquiry	Develop self-directed, person-based, critical thinking, and reflection skills to facilitate learning throughout the BScN program.	Develop critical thinking and inquiry skills, incorporating evidence-based resources, theoretical perspectives and reflection.	Apply ways of knowing (empirical, ethical, aesthetic, and personal) to guide and inform nursing practice. Use critical inquiry, evidence-based practice and theory in client care.	Contribute to the future of the nursing profession through a commitment to lifelong learning and professional growth. Integrate critical inquiry into professional practice.
Research	Identify appropriate questions and sources of information within the principles of evidence-based practice.	Develop critical appraisal skills in order to critique the research literature.	Build on critical appraisal skills and support practice with relevant evidence, knowledge and theory.	Contribute to the body of nursing knowledge through demonstrating an inquiring approach to practice.
Technology	Use technology effectively in classroom settings or with healthy clients.	Use technology effectively in a variety of settings according to professional standards.	Use increasingly complex technology effectively.	Provide technologically appropriate care in a variety of contexts.

Person-based Learning (PBL) within a Problem-based Approach

A concept-based approach coupled with a PBL (person-based learning within a problem-based approach), self-directed and group format can prepare nursing graduates who are skilled at conceptual thinking and learning; such skills are necessary to respond to a rapidly changing profession and health care environment (Cutcliffe & McKenna, 2005).

PBL, as enacted in the BScN program involves the student in active, participatory inquiry in the classroom (see Rideout and Carpio, 2001 for a more thorough discussion of the model, its theoretical underpinnings, and educational research on PBL). Based on this, it would not be possible to alter PBL courses that have been designed for active inquiry and group discussion in the classroom.

The steps of the PBL process are:

1. The problem is presented to the group, terms are reviewed, and hypotheses generated.
2. Learning issues and information sources are identified by group members.
3. Information gathering; independent and interdependent study occurs.
4. The knowledge acquired during study is discussed and debated critically.
5. Knowledge is applied to the problem in a practical way and the initial hypotheses are confirmed or refuted.
6. Reflection on the content and process of learning occurs (Rideout & Carpio, 2001)

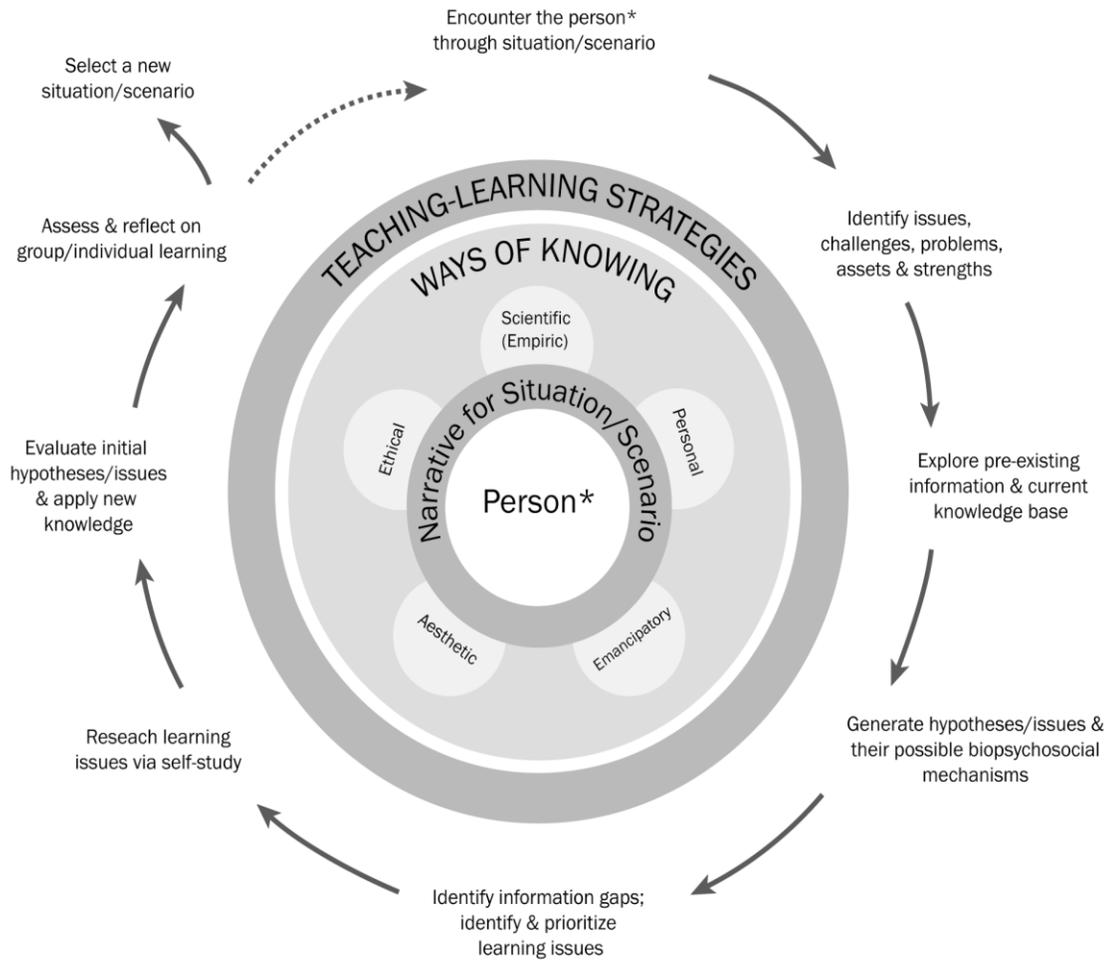
The McMaster Model of Nursing emphasizes **humanistic professional caring**. The Kaleidoscope Curriculum has also explored the language of PBL from this caring perspective. Person-based learning within a problem-based approach closely aligns with the philosophical underpinnings of the McMaster Model of Nursing Education. The first step of the traditional PBL process is to **consider the person first**, with strengths and assets as well as a health challenge. The person is put into the centre of the problem-based learning process with a narrative bringing the person's story to life.

Learning and discussion in PBL is also influenced by a variety of **Ways of Knowing**. This includes Ways of Knowing by Chinn and Kramer (2011): personal, scientific, aesthetic, ethical and emancipatory, and also Indigenous Ways of Knowing, currently being conceptualized by the Nursing Indigenous Health Curriculum workgroup (McMaster School of Nursing, 2020). This recent work will facilitate the development of culturally safe nursing care for Indigenous patients. Ways of knowing contribute to understanding professional care and the nursing profession.

By combining a student-centred approach of problem-based learning with the use of narrative, the person-based learning within a problem-based approach aims to bring a focus and energy to learning for the student and potentially to the healing of the person (Charon, 2006). Within the McMaster Model of Nursing Education, the person at the centre may be a patient or client, a family, or a community. The person may also be a healthcare provider or another individual or group that will both engender the learning process and provide opportunities to explore the concepts that have been identified as core to this curriculum. Consistent with the McMaster Model of Nursing Education and narrative pedagogy (Andrews, et al, 2001), students and faculty engage in active dialogue and reflection on the learning process in order to enhance learning outcomes, and promote a sense of a community of learning.

Person-Based Learning (PBL) within a Small Group

Problem-Based Learning (PBL) Framework



*Individual, family, group, community, or population

Landeem, J., McGraw, M.J., & Mohide, E.A. (2009). With adaptation from Walsh, A. (2005). The tutor in problem based learning: A novice's guide. Hamilton, ON: Program for Faculty Development, Faculty of Health Sciences, McMaster University.
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BScN PROGRAM POLICIES AND GUIDELINES

The University has defined expectations of students in both the academic and non-academic life of the University community and has developed policies and procedures to ensure that all members of the community receive equitable treatment. Policies that govern academic and student life at McMaster can be found online at <http://www.mcmaster.ca/policy/Students-AcademicStudies/>

The following are some of the policies and guidelines relevant to the BScN Program. Additional policies are found in the link above or in the academic regulation section of the Undergraduate Calendar. It is the student's responsibility to review these regulations and ensure familiarity.

Professional Behaviour and Codes of Conduct

Professional Behaviour in the BScN Program

BScN nursing students from all sites shall demonstrate their commitment to professional behaviours that are outlined in the McMaster University Faculty of Health Sciences [Professional Behaviour Code of Conduct for Undergraduate Learners](#).

Additionally, all students in the BScN Program are expected to be aware of the new [College of Nurses of Ontario \(CNO, 2020\) Entry to Practice Competencies for Registered Nurses](#).

The BScN Kaleidoscope curriculum has been developed to assist learners in achieving these competencies. The competencies are organized into nine roles: *Clinician, Professional, Communicator, Collaborator, Coordinator, Leader, Advocate, Educator, and Scholar*

Code of Student Rights and Responsibilities

BScN nursing students from all sites are required to adhere to site specific policies that regulate student conduct. It is the expectation of each student to follow this information.

- McMaster University Code of Student Rights and Responsibilities: <https://secretariat.mcmaster.ca/app/uploads/Code-of-Student-Rights-and-Responsibilities.pdf>
- Mohawk Student Code of Conduct: <https://www.mohawkcollege.ca/about-mohawk/leadership-and-administration/policies-and-procedures/corporate-policies-and/student>
- Conestoga Student Code of Conduct: <https://www.conestogac.on.ca/policies/students.jsp>

In addition, all students are expected to be aware of and follow the College of Nurses Code of Conduct (2020). The Code is an overarching practice standard that describes the behavior and conduct that all Registered Nurses are professionally accountable for.

Discrimination and Harassment

All members of the University community contribute to and assist in maintaining an environment that is free of discrimination and harassment, including sexual or gender-based harassment. All students must be aware of McMaster University's [Discrimination and Harassment: Prevention & Response policy](#) and the [Sexual Violence Response Protocol](#).

Academic Integrity Policy

Breaches of academic integrity including academic dishonesty, cheating, and plagiarism are defined in the [McMaster University Academic Integrity Policy](#). As with non-academic offences, procedures for handling allegations, complaints or charges are set out in this document. This policy applies to all BScN nursing learners.

BScN Communication Policy

Email Communication

All students **must use their McMaster email account** for all communication with faculty, staff, and University offices. Correspondence from the School of Nursing will only be sent to students via McMaster email addresses.

As per the communication guidelines, students are responsible for regular review and response to email communication from BScN faculty and staff. This includes, Monday to Saturday, which is the defined academic week for the University.

Communication by other means (e.g. text) is not an acceptable form of communication with regard to teaching and learning. **Faculty and staff will not be using text to communicate regarding academic matters.**

The Electronic Communication Policy refers to all electronic communication related to BScN Program-related activities and acts in tandem with the following policies:

- [McMaster University's Information Security Policy](#)
- McMaster University Netiquette Policy: <https://sscm.mcmaster.ca/the-code/netiquette/>
- [Mohawk College's Electronic Communications Policy](#)
- [Conestoga College's Acceptable Use of Technology Policy](#)

Student Communication Responsibility

- Maintain current contact information with the University, including address, phone numbers, and emergency contact information.
- Regularly check the official University communications channels. Official University communications are considered received if sent by postal mail, by fax, or by email to the student's designated primary email account via their @mcmaster.ca email account.
- Accept that forwarded emails may be lost and that email is considered received if sent via the student's @mcmaster.ca email account.

Professionalism in Communication

As per the [Professional Behaviour Code of Conduct for Undergraduate Learners – Faculty of Health Sciences](#), BScN learners must be accountable for professional behaviour. This includes respectful language; recognition of professional boundaries; and sensitivity to the values, attitudes and assumptions of other cultures and how these affect practice.

All BScN learners must be aware of personal privacy and the importance of confidentiality. It is not appropriate to forward messages without the permission of the originator of the message, particularly if the originator has noted the content is not for distribution. Communications from faculty and staff typically contain privileged and confidential information intended only for the

individual or entity named in the message. Be cautious about when it is appropriate to “reply all” in electronic communication rather than to the sender alone.

Finally, as a BScN learner, you represent the program in all online forums (e.g. social media). Any breaches related to unprofessional communication will be managed by applicable policies and procedures.

Avenue to Learn: Course-Related Communication

The BScN Program will post important course information on Avenue to Learn. Important announcements may be found in the BScN Communication Hub or in individual course announcements. Students should be reviewing messages regularly, Monday to Saturday, which is the defined academic week for the University.

Students should be aware that when they access the electronic components of a course, private information such as first and last names, user names for McMaster email accounts, and program affiliation may become apparent to all other students in the same course. Continued enrollment in the course will be deemed consent to this disclosure.

The use of IT equipment and electronic communication in educational, research and professional practice settings is for professional purposes only.

Online group participation for which there is not a defined online component:

Unless stipulated in the course outline, participation within small group discussion boards in Avenue to Learn is not an extension of classroom time. Small group discussion boards are simply a tool to ask questions, seek clarification and discuss preparation for class.

When discussion boards are not a part of the course requirement, they will not be used to evaluate student performance. The outcome of student study activities (e.g. for PBL) will be apparent during in-class discussions which can be evaluated by faculty.

Online participation and evaluation for which there is a defined online component:

It is recognized that many courses may have an online component. If so, students will be expected to complete the online component of the course and the activities may be graded and contribute to their final grade in the course.

Online communication of patient assignment in Professional Practice courses:

Patient assignments for clinical courses are shared in group discussion boards. Since A2L is the learning platform for the School, there is no other form of approved communication for this work (e.g. Facebook groups). Client confidentiality must be maintained at all times. Students must not provide information that could identify a client (person, family, community, etc.) in any way (e.g. room number, initials, other personal identifiers). Also, when choosing patient assignments at the agency, there should be no taking of photos of charts, Kardex, medication administration record etc. while gathering data for preparation.

Please be aware that a student may be removed from an online group or course for breach of the BScN Program Electronic Communication Policy and, the Professional Behaviour Code of Conduct for FHS Undergraduate Learners.

Mandatory Clinical Attendance

Clinical practice is essential to learning in the BScN program. All clinical hours are mandatory, and as such, completed hours of attendance in clinical courses are tracked each semester. Missing clinical time may jeopardize a student's ability to be successful in meeting course goals.

The BScN program will conduct a review of completed clinical hours each year. As such, a student may be required to complete missed hours in subsequent clinical courses.

Process to report clinical absences:

Students who will be absent from professional practice are to notify their instructor, preceptor (level 4) and the agency (unit) where they are practicing in a timely fashion.

Missed Academic Work Policies and Procedures

Students in the BScN program are expected to attend all scheduled course hours. Missed course hours may jeopardize a student's ability to be successful in meeting course objectives.

If an evaluation component (e.g. test, assignment, in-class participation) of a course is missed, it is each student's responsibility to notify their instructor and Academic Advising Services. How a student must report an absence depends on the nature of the absence.

Policy information pertaining to [Missed Academic Work, Policies, and Procedures](#) can be found on the School of Nursing website.

McMaster Student Absence Form (MSAF):

The MSAF is a self-reporting tool designed to allow students to request relief from missed academic work worth no more than 24% of the final grade and lasting no more than 3 consecutive calendar days. An MSAF applies to all work due within the period for which the MSAF applies. The MSAF can be used only once per term.

An MSAF **cannot be used** to report an absence due to religious/indigenous/spiritual observances (see below), to report an absence from a final exam (see below), or to request relief from academic work that has already been submitted.

Students **cannot submit** an MSAF to report absences in the following professional practice/clinical courses: *NURSING 1K02 A/B, 2L03, 2K02 A/B, 2P03, 2J04, 3QQ3, 3ZA3, 3ZB3, 3X03, 3Y04, 4J07, 4K10*.

Once submitted, an automated email will be sent to the student and course instructor(s). **It is the prerogative of the course instructor to determine the appropriate relief for missed term work.** It is the student's responsibility to immediately follow up with the instructor(s) to discuss the nature of the relief; failure to do so in a timely fashion may negate the opportunity for relief.

Additional details may be found at <http://mcmaster.ca/msaf/>

Request for Relief for Missed Academic Work:

For medical or personal situations lasting more than 3 calendar days, and/or for missed academic work worth 25% or more of a final grade, and/or if the MSAF has already been used that term, students can submit a Request for Relief from Missed Academic Work form. A [Request for Relief from Missed Academic Work form](#) in accordance with the policy must be submitted within 5 business days of the missed worked.

It is the prerogative of the course instructor to determine the appropriate relief for missed term work in their course. It is the student's responsibility to immediately follow up with their instructor(s) to discuss the nature of the relief; failure to do so in a timely fashion may negate the opportunity for relief.

Students cannot submit a Request for Relief from Missed Academic Work to report absences in the following professional practice/clinical courses: *NURSING 1K02 A/B, 2L03, 2K02 A/B, 2P03, 2J04, 3QQ3, 3ZA3, 3ZB3, 3X03, 3Y04, 4J07, 4K10.*

Additional details may be found at <https://nursing.mcmaster.ca/current/advising/student-resources-forms>

Request for Academic Accommodation for Religious, Indigenous, and Spiritual Observances (RISO):

Students can submit a [RISO request form](#) to address scheduling conflicts between academic obligations and religious, indigenous, or spiritual observances.

RISO forms must be submitted to Academic Advising Services within 10 business days from the start of the term in which the accommodation is necessary. Once a request has been approved, the student must contact their instructor at least 5 working days before the date of the conflict. If the conflict occurs during the final examination period, the student must submit the RISO form at least 10 business days before the start of the exam period.

Policies and resources related to RISO requests can be found at <https://secretariat.mcmaster.ca/app/uploads/2019/02/Academic-Accommodation-for-Religious-Indigenous-and-Spiritual-Observances-Policy-on.pdf>

Request for Deferred Final Examination:

Students can request a deferral of an exam scheduled during the final exam period based on extenuating medical or personal reasons. A request must be submitted to Academic Advising Services within 5 business days of the missed exam and must be accompanied by supporting documentation.

The supporting documentation must outline the extenuating medical or personal reasons for the missed exam. If the reason for a request for relief is medical, the student must submit a [McMaster University Student Health Certificate](#) covering the relevant dates. The student must be seen by a doctor at the earliest possible date, normally on or before the date of the missed exam and the doctor must verify the duration of the illness. If the reason is non-medical, appropriate documentation with verifiable origin covering the relevant dates must be submitted. Students cannot request to defer an exam which they have already attempted in full or in part.

If the request is granted, Academic Advising Services will notify the student and instructor(s) via email and the exam will be rescheduled in accordance with the [Sessional Dates outlined in the Undergraduate Calendar](#). A final examination may only be deferred once. Deferred examinations must be written during the deferred exam period.

Requests for Relief due to Formal Accommodations for Students with Disabilities:

If a student is registered with the McMaster Student Accessibility Services, the Mohawk Accessible Learning Services, or the Conestoga Accessibility Services, it is their responsibility to discuss any accommodations and/or arrangements for academic work missed due to accommodations with their instructors at the outset of the term. The student and the instructor will agree upon guidelines for absences/missed academic work.

Accommodations for Students with Disability

The School of Nursing is committed to equality of opportunity, values the perspectives brought by individuals with different life experiences, and encourages qualified applicants from a wide cross-section of society, including persons with a disability. For more information, please consult the University's policy on [Academic Accommodation of Students with Disabilities](#).

Admission to the Program is based on the applicant's ability to meet the BScN admission requirements (see [McMaster Undergraduate Calendar](#)) and the applicant's self-determination of their ability to meet the [Essential Requirements for Study in BScN Programs in Ontario \(2019\)](#).

Students who require academic accommodation must contact the accessibility services office at their site to make arrangements.

Each site has its own accessibility office. Please contact your site-specific office:

McMaster: Student Accessibility Services (SAS) https://sas.mcmaster.ca/	Mohawk: Accessible Learning Services http://www.mohawkcollege.ca/student-services/AccessibleLearningService.s.html	Conestoga: Accessibility Services for Students with Disabilities http://www.conestogac.on.ca/accessibility-services/
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Students are encouraged to meet with their instructor and faculty lead/coordinator within the first few weeks of each term to discuss the accommodation. The student should also provide/send a copy of their accommodation letter/statement.

Graduation from the Nursing Program does **not** guarantee registration with the College of Nurses. Requirements to practice vary from province to province and country to country. It is important for students to investigate the implications of their disability for their future practice. In Ontario, the [Requisite Skills and Abilities for nursing practice in Ontario](#) (CNO, 2012) is an important document for review.

Leave of Absence (LOA)

The School of Nursing recognizes that students may need to suspend their studies from the program due to extenuating personal or medical reasons. Students can request one leave of absence (LOA) from the program for a period of up to 1 year. [Requests for an LOA are made by submitting a Petition for Special consideration \(Form A\) \(see Petitions for Special Consideration and Appeals Section\)](#). During a LOA, a student may enroll in elective courses; however, they will not be permitted to enroll in mandatory nursing courses during this time.

It is the student's responsibility to notify Academic Advising Services of their intention to return to their studies **at least 4 months prior to their return**. Students who were on a LOA due to medical circumstances may be required to submit medical documentation from their physician indicating their ability to return to professional practice duties. All students returning from a LOA will be required to complete a Reintegration Plan in the term preceding their return.

Guidelines for Dropping and Adding Courses

Please refer to the [Sessional Dates](#) outlined in the Undergraduate Calendar for specific deadlines for enrollment and changes, and for withdrawing from courses without failure by default.

Students are able to add and drop courses without academic or financial penalty until the last day for enrollment changes. These dates are specific to each term and are different for single-term and multi-term courses.

Students who wish to add or withdraw from required nursing (NURSING) or health science (HTHSCI) courses after the last day for enrollment are strongly encouraged to contact Academic Advising Services to discuss the impact on their progression through the Program.

Attendance at Conferences

Students in levels 3 and 4 who wish to attend a conference (e.g. RNAO Annual Meeting, CNSA Regional conference) that will result in an absence in mandatory nursing courses must discuss this with their instructor and/or faculty lead/coordinator. Typically, only one academic/clinical day is supported. The student will need to provide individualized learning objectives/outcomes for their learning at the conference.

Non-Academic Requirements (NARs)

In order to ensure the safety of all students and patients, the School of Nursing requires that all students complete Non-Academic Requirements on an annual basis:

- Police Clearance (Vulnerable Sector Check)
- Immunization Screening
- Influenza Immunization (as per placement site)
- Basic Cardiac Life Support for Healthcare Providers (CPR - HCP with AED & BVM)
- Online Health and Safety modules available through Avenue to Learn
- Mask Fit Testing & Training (quiz)

The process for notification, submission and verification of NARs varies by site. As such, there may be slight variations by site.

Please see site-specific guidelines (<https://nursing.mcmaster.ca/current-students/non-academic-requirements>) and ensure you have met all requirements by the deadline. It is the student's professional responsibility to ensure this deadline is met. This is in accordance with the FHS Professionalism Policy which stipulates student accountability in a health professions' program.

Students must provide proof that ALL requirements have been met before practicing in a lab or professional practice setting. Students who fail to provide this proof will:

1. Not be allowed to enter a lab or professional practice setting, or
2. Be removed from a lab or professional practice setting until requirements are met.
3. Be reviewed by the School of Nursing Professionalism Committee for failing to meet a requirement in a professional program

Liability for Illness or Injury in Professional Practice

As a mandatory portion of the BScN programs, nursing students must fulfill unpaid training or work experience requirements during clinical courses.

Before entering the professional practice setting, every student who participates in a mandatory unpaid placement must sign a WSIB Declaration form at the orientation for the professional practice course in which they have registered.

If illness or an accident resulting in personal injury (e.g. needlestick injury, fall, actual or near miss, violence in the workplace) occurs during the unpaid training/placement program, the student must immediately:

1. Seek first-aid or emergency services if needed. Follow agency/workplace procedures;
2. Notify the faculty instructor and professional practice placement preceptor (who then

- notifies the supervisor);
3. Notify the professional practice placement coordinator;
 4. Complete a [McMaster University Injury/Incident Report](#).

Professional Appearance Policy

Please note that each professional practice setting has its own uniform/professional appearance and/or footwear policies that are also to be followed. Students are expected to adhere to the professional appearance policy of both the School of Nursing and those outlined by their professional practice setting.

This policy outlines the professional image expectations for students in the clinical practice setting and is based on principles for professionalism, infection control, personal safety, and role identification.

If an agency has requirements not covered by this policy, students must conform to agency requirements. Consideration may be made for individual dress that is specific to cultural or religious beliefs.

Inappropriately dressed students may be asked to leave the clinical area. Any time away from professional practice will be considered an absence.

ID Badges

All badges must be visible in the professional practice environment.

- **McMaster students** are to use their School of Nursing Identification Badge
- **Mohawk students** are to use their McMaster and Mohawk Student cards in an ID badge holder bought at the Health Science Bookstore
- **Conestoga students** must wear a yellow School of Nursing name pin purchased from the Conestoga Bookstore in addition to the agency approved Student ID

Uniform

Presenting a professional image can enhance the development of respectful relationships with patients. Therefore, in clinical practice situations, students are required to ensure that abdomen, back, chest, shoulders, and upper thighs are fully covered through all range of movement while providing patient care.

- Students of all sites, streams and levels (except Level 4; see “Level 4 Nursing 4K10” below) are expected to wear Caribbean Blue scrubs with the “kaleidoscope” embroidered emblem indicated for the McMaster-Mohawk-Conestoga BScN Program.
- Uniforms can be purchased from the Health Science or Conestoga bookstore.
- All uniforms must be kept neat, clean and be laundered for each clinical shift.
- Students should change into and out of their uniform on site. If there are no change facilities, it is important that students discuss a solution with their tutor and unit educator.
- Plain, solid coloured, long sleeved shirts with tight sleeves may be worn under the scrub top, but sleeves must be able to be pushed up to the elbow for proper hand hygiene.
- Students shall refrain from wearing any sweaters, sweatshirts, or jackets over their scrub uniform.

Lanyards

- Lanyards holding ID badges must have a quick release mechanism to prevent risk of choking/injury

Personal Hygiene

- No perfumes or colognes should be used to promote a scent-free environment
- Personal hygiene is important, including use of deodorant or antiperspirant

Hair

- Hair should be neat, clean and off the face
- Long hair to be tied back and off the collar/shoulder
- Beards/mustaches must be kept neatly trimmed

Fingernails

- Fingernails must be clean and neatly trimmed
- Nail embellishments and polish are not permitted
- Artificial nails and gels are not to be worn

Shoes

- Students must wear a separate pair of shoes for professional practice, as regular street shoes are not permitted due to policies related to infection control
- Footwear must be in good condition, have an enclosed toe and heel, no mesh or holes, low to medium heel, and slip resistant soles as per Occupational Health and Safety requirements
- Shoes must be solid coloured with limited designs or logos

Jewellery and Tattoos

- Jewellery should be kept to a minimum
- Bracelets and rings with stones are not permitted
- A plain wedding band is permitted
- Small stud(s) only for any visible body piercing
- Tattoos that depict violence, pornography, gang or racial messages must be covered

Level 4 NURSING 4K10

- N4K10 students may wear agency approved scrubs as it may not be feasible to solely wear their BScN uniform because of the increased number of hours
- Level 4 students are subject to the same principles for professional appearance as students in all other years

Community and Mental Health Settings

For some clinical practice settings (community, mental health, and family clinics) professional street attire may be worn. Student are expected to adhere to the agency dress code and follow "business casual."

In these settings, students are reminded of the following:

- Skirts and dresses are of reasonable length, e.g. no shorter than knee length
- Dress pants and dress shirts should be pressed and wrinkle-free

Students must not wear:

- Overalls, low-rise pants, sweatpants, yoga pants or similar style casual pants
- Jeans and shorts are not typically acceptable
- Revealing clothing is not acceptable: This may include, anything backless, spaghetti straps and sundresses, transparent or excessively tight clothing, or clothing that exposes a bare midriff and chest or clothing with rips or tears

- Athletic fleece sweatshirts, tank tops
- Clothing with inappropriate or large logos, slogans or sayings
- Flip flops or croc style shoes

References:

http://www.ccohs.ca/oshanswers/prevention/ppe/footwear_assessment.html

<https://www.labour.gov.on.ca/english/hs/pubs/ohsa/index.php>

Travel within the Program

Students are responsible for arranging their own travel to and from learning settings external to the University (regardless of site) and for covering any cost incurred. Students who enroll in the BScN Program are expected to travel to learning settings in the Hamilton and surrounding area, including but not limited to Halton, Peel, Brant, Haldimand-Norfolk, Niagara and Wellington Regions (McMaster and Mohawk sites); and Kitchener-Waterloo and surrounding area, including but not limited to Wellington, Brant and Halton regions (Conestoga site).

Reintegration to Professional Practice

Any student who has either (a) failed a professional practice course, and/or (b) has experienced a gap between professional practice courses as a result of a leave of absence from the program, repeating mandatory nursing or health science course(s), or following a reduced course load, is required to complete a reintegration plan in consultation with a faculty member designated by the School of Nursing. The purpose of the reintegration plan is to re-familiarize the student with course concepts and refresh their professional practice skills to ensure the student's return to a professional practice setting is safe and successful for all stakeholders. The reintegration plan must be completed to the satisfaction of the faculty member over one term, immediately prior to returning to a professional practice course(s).

Students who are required to complete a reintegration plan will be contacted by the School of Nursing with further instructions and guidelines.

Assignment Submission

Students will be required to submit assignments to Avenue to Learn. This platform is linked to a web-based service called Turnitin.com to reveal plagiarism. Students are expected to submit their work electronically to Turnitin.com so that it can be checked for academic integrity. Students who do not wish to submit their work to Turnitin.com must still submit a copy to the Instructor, along with a signed academic integrity form. In these instances, no penalty will be assigned to a student who does not submit work to Turnitin.com.

Assignments that are due must be submitted at the beginning of class. All submitted work is subject to normal verification to ensure that standards of academic integrity have been upheld (e.g. online search, etc.). To see the Turnitin.com Policy, please go to www.mcmaster.ca/academicintegrity.

Policy on Late Assignments

Late assignments will drop a grade (e.g. A+ to A)/5% for each day late (1 hr to <24 hrs), if negotiation has not occurred. Assignments submitted more than two days late (48 hours or more) receive a grade of F/0% if prior negotiation has not occurred.

In cases where extenuating medical or personal reasons prevent a student from submitting an assignment by the due date, the student should review the [Missed Academic Work Policies and Procedures section of this Handbook](#) to determine next steps. Students can also reach out to Academic Advising Services to inquire about the processes in the Missed Academic Work Policies and Procedures section. Extensions will not be granted beyond the last day of the term as per the [Sessional Dates](#) published in the Undergraduate Calendar.

Viewing Final Exams & Formal Exam Review Requests

Students should review McMaster University's [Undergraduate Examination Policy](#) prior to requesting an opportunity to review a final exam. It is not possible to request to review a final exam before a student's final grade for the course has been officially posted on Mosaic.

To request a review, students must submit a formal written request to the appropriate site (see below). A student's request to review a final exam must be submitted no later than June 30 for Fall/Winter courses, October 15 for Spring/Summer courses or, in the case of deferred exams, one month after the deferred exam period has ended.

Please note that requesting to view a final exam does not imply that it will be re-marked.

The written request must contain the following information:

- Student name, McMaster student number, site affiliation and stream, telephone number, email, and signature
- Course code (e.g. HTHSCI 2RR3), and year and term completed
- Name of the instructor and level lead/coordinator
- Reason(s) for review including any discrepancies of which you are aware

Upon receipt of the above information, you will be contacted to schedule an appointment with the course lead (allow 3-4 weeks).

Letters should be submitted to the Assistant Dean/Associate Dean/Chair of your site using the address below:

<p>McMaster University Dr. Joanna Pierazzo Assistant Dean Undergraduate Nursing Education McMaster University 1280 Main Street West, HSC-2J34F Hamilton, Ontario L8S 4K1 bscn@mcmaster.ca</p>	<p>Mohawk College Professor Beth Morris Associate Dean BScN Nursing Program Mohawk College 1400 Main Street West, IAHS-185 Hamilton, Ontario L8S 1C7</p>	<p>Conestoga College Professor Heather Cross Chair Nursing Programs Conestoga College 299 Doon Valley Drive, 4B Kitchener, Ontario N2G 4M4</p>
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Students are not authorized to bring in laptops or course material (e.g. textbooks, custom courseware, lecture notes etc.) during the viewing of their final exams. Where appropriate, model answers and/or the marking scheme may also be examined by the student, subject to the approval of the faculty member. Students are not authorized to keep the marking key. Students are not authorized to take notes or to submit notes during the viewing of their final exams.

Students who wish to have their final exam formally remarked must submit a request a formal Form A Appeal. Please refer to the [Petitions for Special Consideration and Appeals section of the Handbook](#).

Petitions for Special Consideration and Appeals

A [Petition for Special Consideration \(Form A\)](#) may be submitted by a student to the BScN Program Office in instances where a student acknowledges that the rules and regulations of the

University and/or School of Nursing have been applied fairly, but is requesting that an exception to the regulations be made because of special, extenuating medical or personal circumstances.

A [Petition for Special Consideration \(Form B\)](#) may be submitted by a student when a final examination has been/will be missed because of compelling medical or personal reasons.

A formal [Appeal](#) may be submitted by a student who has a concern about academic processes or course specific re-assessments. This should be submitted, along with payment no later than July 31 following the Fall/Winter term or November 15 following the Spring/Summer term. There are three types of Appeals available to students:

- [Form A – Re-Read/Re-Assessment of Academic Work](#)
Form A Appeals can be submitted to the Office of the Assistant Dean of Undergraduate Nursing, care of Nina Hindrichs (HSC 2J34)
- [Form B – Formal Inquiry](#)
Form B Appeals can be submitted to the Office of the Vice Dean, Health Professional Education, care of Judith McArthur-Dawson (HSC 2E19)
- [Form C – Appeal to the Senate Board for Student Appeals](#)
Form C Appeals can be submitted to the University Secretariat - Gilmour Hall 210

Continuation in the Program

At the conclusion of the Fall/Winter term and the Spring/Summer term, each student’s academic record and performance will be reviewed by the School of Nursing to determine if they have met the academic requirements as outlined in the McMaster University [Undergraduate Calendar](#) to continue their studies in the BScN Program.

IMPORTANT DATES

The following dates can be found under ‘Sessional Dates’ in the McMaster Undergraduate Calendar. <https://academiccalendars.romcmaster.ca/content.php?catoid=41&navoid=8636>

2020-21 Fall/Winter Term

	2020 FALL TERM	2021 WINTER TERM	2020-2021 MULTI-TERM COURSES
Classes begin	September 8	January 6	September 8
Last day for enrollment changes	September 16	January 14	September 16
Mid-term recess	October 12 – 18	February 15 – 21	October 12 – 18 & February 15 – 21
Last day to withdraw from courses	November 13	March 12	March 12
Classes end	December 9	April 9	April 9
Final Examinations	December 10 – 23	April 13 – 28	April 13 – 28
Deferred Examinations	February 16 – 19	June 21 – 24	June 21 – 24

2021 Spring/Summer Term

	2021 SPRING SESSION	2021 SUMMER SESSION	2021 SPRING/SUMMER FULL TERM
Classes begin	May 3	June 21	May 3
Last day for enrollment changes	May 10	June 28	May 10
Last day to withdraw from courses	June 2	July 21	July 21
Classes end	June 18 (includes exam period)	August 6 (includes exam period)	August 6 (includes exam period)
Final Examinations	As arranged by instructor in class time	As arranged by instructor in class time	As arranged by instructor in class time
Deferred Examinations	October 12 – 15, 2021		

BScN ACADEMIC ADVISING SERVICES

Academic Advising Services is your resource to help navigate through your BScN Program plan from the first term through to graduation. Academic Advisors are available to explain program options and will work with you during your program to help you achieve your goals. Students experiencing academic difficulty or personal issues that may impact academic performance are encouraged to contact Academic Advising Services as soon as possible.

Academic Advising Services can assist you with the following:

- Course requirements and changes
- Course selection
- Letters of permission
- Transfer credits and course exemptions
- Navigating absences and missed academic work via the MSAF, Request for Relief from Missed Academic Work, or RISO
- Requests for deferred final exams
- Requesting a leave of absence
- Requesting a transfer between sites
- Referral to services on campus and at the college sites

<p>McMaster University Lesley Thornton bscnadvising@mcmaster.ca 905-525-9140 x22140 Health Sciences Centre, 2J36 Drop-In & Pre-Booked Appointments: Mon & Fri 1-4; Tues, Wed, Thurs 9-12, 1-4</p>	<p>Mohawk College Alexis van Baalen bscnadvising@mcmaster.ca 905-525-9140 x22140 Health Sciences Centre, 2J36 Drop-In & Pre-Booked Appointments: Mon & Fri 1-4; Tues, Wed, Thurs 9-12, 1-4</p>	<p>Conestoga College Ada Harrison bscnadvising@conestogac.on.ca 519-748-5220 x3689 Doon Main Building, 4B-7 Drop-In & Pre-Booked Appointments: Mon & Fri 1-4; Tues, Wed, Thurs 10-12, 1-4</p>
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ADDITIONAL POLICY RESOURCES

The [McMaster Undergraduate Calendar](#) is the primary resource for policies and regulations pertaining to your BScN degree requirements and expectations. In the instance that conflicting information is found in this Handbook, the McMaster Undergraduate Calendar will take precedent over the BScN Handbook.

Additional policy information is available online:

- McMaster: University Policies, Procedures & Guidelines www.mcmaster.ca/policy/
School of Nursing <https://nursing.mcmaster.ca/programs/undergraduate>
- Mohawk: <https://www.mohawkcollege.ca/programs/health/nursing-bscn-731>
- Conestoga: <http://www.conestogac.on.ca/fulltime/nursing-bscn-mcmaster>