

Knowledge for your Journey

GRADUATE NURSING STUDENT HANDBOOK

2021-2022

Table of Contents

| Non Discrimination Statement | 6 |
|--|---|
| Notice of Non-Discrimination | 6 |
| Welcome to Anderson University School of Nursing | 7 |
| History | |
| Mission Statements | |
| Anderson University | |
| School of Nursing | |
| Vision Statement | 9 |
| School of Nursing | 9 |
| Goals | 9 |
| MSN Program Outcomes | |
| MSN Student Outcomes | |
| PMHNP Post Master's Certificate Program Outcomes | |
| PMHNP Post Master's Certificate Student Outcomes | |
| DNP Program Outcomes | |
| DNP Student Outcomes | |
| Approval | |
| Accreditation | |
| Organizational Chart | |
| Administration, Faculty, and Staff | |
| Conceptual Framework | |
| American Nurses Association Nursing Code of Ethics | |
| Graduate Student Nurse Resources | |
| AACN | |
| Academic Policies | |
| Program Information, Policies, and Procedures | |
| Student Disability Services | |
| Americans with Disabilities Act ("ADA") Guidelines | |
| Transfer of Credits from Other Graduate Level Programs | |
| Progression and Dismissal | |
| Readmission/Admission after Voluntary Withdrawal or Transfer | |
| Readmission after Dismissal/Appeal | |
| Withdrawal Procedures | |
| | |

| Grades | |
|---|--|
| Incomplete Coursework | |
| Late Assignments | |
| Academic Integrity | |
| Academic Dishonesty Additions for the Graduate Nursing Program | |
| Student Grievance, Complaint, and Right of Appeal Guidelines | |
| Course/Clinical Grievance (SON) | |
| Formal Complaint (SON) | |
| Right of Appeal (AU) | |
| Grade Appeals/Changes | |
| Student Representation | |
| Cohort Representative | |
| Faculty Liaison | |
| Graduation and Licensure Information | |
| Application for Graduation | |
| Licensure and National Certification | |
| Honors and Awards | |
| Internet postings and Social Media Policy | |
| Assistance with SON Technology | |
| Advising | |
| Email | |
| Paper Writing | |
| Simulation Learning Environment Policies | |
| Clinical Evaluations and Completion of Clinical Hours | |
| Regulations for Student/Faculty Data Entry and Deletion of Practice Materials | |
| Occupational Health and Blood-borne Pathogens | |
| Student Occurrence | |
| Extended Illness | |
| Program Requirements | |
| Nursing License | |
| Background Check | |
| Confidentiality, Security, and HIPAA | |
| HIPAA for Student Records | |
| Drug Screening | |
| Procedure for Drug Screening | |

| Refusal to Test | |
|---|--|
| Positive results | |
| Reasonable Suspicion of Drug/Alcohol Use | |
| Cardiopulmonary Resuscitation (CPR) Certification | |
| Professional Liability Insurance | |
| Health Insurance | |
| Health Screening | |
| Verification of Masters Clinical Hours | |
| Unsafe/Unethical Student Practice | |
| Transportation | |
| Emergency Contact Policy | |
| Student Records | |
| Dress Code | |
| Facilities and Services | |
| Health Assessment Laboratory | |
| Nursing Skills Laboratory | |
| Simulation Learning Environment | |
| Human Cadaver Dissection Laboratory | |
| Student Lounge | |
| Graduate Program Facilities | |
| Library | |
| Bookstore | |
| Financial Aid | |
| Human Subjects Committee (HSC) | |
| DNP Scholarly Project | |
| DNP Scholarly Projects/Capstone Projects Sample Titles | |
| Anderson University School of Nursing Doctor of Nursing Program | |
| Curriculum Plans | |
| Course Descriptions | |
| Appendices | |
| Fitness for Duty – Return to Classroom and Clinical Courses | |
| Exposure Incident Report | |
| Nursing Student Acknowledgement of Policies and Expectations | |
| Immunization Form | |
| Job Title: Graduate Cohort Representative Department: Nursing, Graduate | |

| Job Title: Graduate Faculty Liaison Department: Nursing, Graduate | |
|---|--|
| References | |

Non Discrimination Statement

Notice of Non-Discrimination

Anderson University does not illegally discriminate on the basis of race, color, national or ethnic origin, sex, disability, age, religion, genetic information, veteran or military status, or any other basis on which the University is prohibited from discrimination under local, state, or federal law, in its employment or in the provision of its services, including but not limited to its programs and activities, admissions, educational policies, scholarship and loan programs, and athletic and other University-administered programs. In order to fulfill its purpose, the University may legally discriminate on the basis of religion in employment. The University is exempt from the application of certain regulations promulgated under Title IX of the Education Amendments of 1972 which conflict with the University's religious tenets.

The following person has been designated to handle inquiries or complaints regarding the nondiscrimination policy, compliance with Title IX of the Education Amendments of 1972 and inquiries or complaints regarding the disability non-discrimination policy, including compliance with Section 504 of the Rehabilitation Act of 1973:

Dr. L. Dianne King Associate Vice President for Student Development/Dean of Student Success/ Title IX Coordinator Thrift Library Office 203 316 Boulevard, Anderson, SC 29621 (864) 231-2026/ (864) 231-2075 Idking@andersonuniversity.edu

A report may also be made to the U.S. Department of Education, Office of Civil Rights:

U.S. Department of Education Office of Civil Rights 400 Maryland Ave., SW Washington, D.C. 20202-1328 1-800-421-3481 Email Address: <u>ocr@ed.gov</u> Web: http://www.ed.gov/ocr

Welcome to Anderson University School of Nursing

Welcome,

It is with great pleasure that I welcome you to Anderson University and to our School of Nursing Graduate degree program. I am honored to serve as your dean of the College of Health Professions. It is my pleasure to work with students, faculty, and staff to assist you in realizing your dreams.

By now you know that graduate nursing education at Anderson University provides the opportunity for you to experience academic preparation and a skillset to meet your needs for development as an advance practice nurse. It is our mission to provide you excellence in education in your professional graduate degree discipline of nursing with a co-curricular focus that develops character, servant leadership, and cultural engagement. Our graduate nursing faculty are dedicated, caring professional nursing educators who have a steadfast commitment to preparing nursing leaders who will address the many opportunities facing nursing and health care today and for tomorrow. In your time at Anderson University, I hope that you will find AU to be a very special place where we focus our students to be persons who are devoted to be collaborative and scholarly practitioners.

You have been selected from a competitive pool of applicants to enter our academic program in the School of Nursing. You will find our education to be rigorous....otherwise, you would not want to be here. I know that you will meet your needs at Anderson University and look forward to having a part in your education.

Again, welcome. All of us, your faculty, staff, and Administration are proud of your choice of university and pledge to serve you as our student. I look forward to seeing you when you are on campus for your Intensive experiences.

Sincerely,

Donald M. Peace, Ph.D., FACHE Dean, College of Health Professions

History

Anderson University was one of the first institutions for higher learning for women in the United States. The Johnson Female Seminary opened in Anderson in 1848. The founder was the Reverend William B. Johnson, a Baptist minister who was the first president of the South Baptist Convention. The school was forced to close during the Civil War and did not reopen. A group of Anderson residents, wanting an institution of higher learning in Anderson, offered 32 acres of land and \$100,000 to the South Carolina Baptist Convention at their meeting in 1910. The convention nominated a group of trustees, and Anderson College was granted a charter in 1911 by the South Carolina General Assembly. In 1912, the College opened its doors and operated as a four-year college for women until 1930. In 1929, the South Carolina Baptist Convention approved the institution's transition to a junior college, the first in the state. The College became a coeducational institution in 1930.

In December 1989, the Board of Trust voted to return the College to its status as a four-year institution, beginning with the fall semester of 1991. This decision was subsequently affirmed by a unanimous vote of the General Board of the South Carolina Baptist Convention. The first four-year class since 1930 graduated in May 1993.

In the spring of 2005, Anderson's Board of Trust voted to change the College to University status to reflect the addition of graduate programs and a reorganization of the academic divisions into colleges. On January 1, 2006, Anderson College became Anderson University.

The community of Anderson has nurtured and supported the institution throughout the University's history. In turn, the University has provided intellectual, cultural, and recreational opportunities for the citizens of the Anderson area and has made a significant contribution to the community's economy.

The first class of students to the nursing program in fall 2012 marks a return of nurses to Anderson University since 1959. In the 1950s, Anderson College partnered with Anderson Memorial Hospital to provide classes to Freshmen Nursing Students.

In 2014, a graduate task force committee was assembled to research and plan Master of Science programs in Nursing Education, Executive Leadership, Family Nurse Practitioner, and Psychiatric Mental Health Nurse Practitioner Tracks. In the fall 2017 semester, our first cohort of graduate students began with students in both the MSN and DNP programs in Family Nurse Practitioner, Psychiatric Mental Health Nurse Practitioner, and Executive Leadership tracks.

Mission Statements

Anderson University

Anderson University is an academic community affiliated with the South Carolina Baptist Convention, providing a challenging education grounded in the liberal arts, enhanced by professional and graduate programs, and a co-curricular focus on the development of character, servant leadership, and cultural engagement. This is a diverse community that is Christ-centered, people-focused, student-oriented, quality-driven, and future-directed.

School of Nursing

The mission of the School of Nursing is to be Christ-centered, people-focused, student-oriented, quality-

driven, and future-directed in preparing qualified persons to provide holistic therapeutic interventions with care, competence, and safety for a culturally diverse population.

Vision Statement

School of Nursing

The vision of the School of Nursing is to be a leading university where learners combine the foundational knowledge of science and the historical art of nursing, while examining and synthesizing current evidence shaping professional practice in a distinctively Christian community dedicated to Christ's call to service.

Goals

The goals listed reflect the program's primary educational mission to prepare nurse practitioners and nurse leaders who are experts, advocates for healthy living and physical wellness, and scholar-practitioners who advance the practice of nursing. This mission is accomplished by faculty who mentor and engage students in learning that are grounded in Christian principles, guided by professional values and ethics, focused on quality outcomes, and driven by innovative thinking. The goals also, specifically address the ongoing development and retention of the core faculty.

The first goal is specific to the master's and doctorate level nurse practitioner programs. The other goals relate to all the graduate-level programs.

Goal 1:

The Graduate Program of the School of Nursing (SON) will

• prepare competent entry-level nurse practitioners who are clinical experts in the diagnosis and treatment of chronic and acute illness.

Goal 2:

The Graduate Program of the SON will prepare all graduates to be

- advocates for healthy living and physical wellness; and
- scholar-practitioners who advance the practice of nurses.

Goal 3:

Students enrolled in the Graduate Program of the SON will exhibit

- the core values and ethics of the nursing profession; and
- advocacy for healthy living and physical wellness.

Goal 4:

The Graduate Program of the SON will promote and support the development of its core faculty members by:

- providing opportunities for clinical practice;
- facilitating the design, completion, and dissemination of scholarly projects;
- supporting continuing education to maintain licensure and enhance teaching and/or content expertise;
- encouraging involvement in professional service at the local, state, or national level; and

• providing opportunities to participate in shared governance and leadership within the university and/or school.

Goal 5:

The Graduate Program of the SON will systematically assess its processes and outcomes to ensure fulfillment of its mission and continuous quality improvement by:

- collecting and analyzing internal data from students, graduates, faculty, staff, and campus administrators on an annual basis;
- collecting and analyzing external data from preceptors and the program advisory group on an annual basis;
- holding an annual faculty summit to review analyzed data and recommend any needed action;
- reviewing and updating publicized program information, policies, and procedures on an annual basis or as needed; and
- maintaining compliance with standards established by the *Commission on Collegiate Nursing Education (CCNE), American Association of College of Nursing (AACN),* and the National Taskforce on Quality Nurse Practitioner Education (NTF).

MSN Program Outcomes

- 1. Deliver master's nursing education that builds on one's previous nursing foundation.
- 2. Prepare the graduate to integrate advanced knowledge from nursing and related disciplines into professional nursing practice in a variety of healthcare and community settings.
- 3. Prepare professional nurses academically for further graduate or doctoral studies in nursing.

MSN Student Outcomes

The graduate of the MSN program will be able to:

- 1. Integrate professional integrity through the perspective of the Christian Worldview to demonstrate servant leadership in guiding behaviors and decision-making in advanced nursing roles.
- 2. Employ scientific knowledge from nursing and other disciplines to integrate evidence-based findings into nursing practice to contribute to the improvement of healthcare and the advancement of culturally competent nursing practice within diverse settings.
- 3. Intervene within organizational systems to advocate for health policy change and collaborate interprofessionally to prevent disease and improve population outcomes across the lifespan.
- 4. Deliver safe, quality healthcare through the ethical management of data and informatics to enhance and coordinate care.
- 5. Utilize leadership principles in promoting quality improvement and safety in healthcare delivery for individuals, populations, and systems.

PMHNP Post Master's Certificate Program Outcomes

1. Deliver post-masters nursing education that builds on one's previous advanced practice nursing foundation.

- 2. Prepare the graduate to integrate advanced knowledge from nursing and related disciplines into professional advanced psychiatric and mental health nursing practice in a variety of healthcare and community settings.
- 3. Continue to prepare advanced practice nurses academically for further graduate or doctoral studies.

PMHNP Post Master's Certificate Student Outcomes

- 1. Integrate professional integrity through the perspective of the Christian Worldview to demonstrate servant leadership in guiding behaviors and decision making in the advanced practice of psychiatric mental health nursing.
- 2. Employ scientific knowledge from nursing and other disciplines to integrate evidence-based findings into nursing practice to contribute to the improvement of healthcare and the advancement of culturally competent psychiatric and mental health nursing practice within diverse settings.
- 3. Intervene within organizational systems to advocate for health policy change and collaborate inter-professionally to prevent disease and improve mental health population outcomes across the life span.
- 4. Deliver safe, quality healthcare through the ethical management of data and informatics to enhance and coordinate care.
- 5. Utilize leadership principles in promoting quality improvement and safety in psychiatric and mental healthcare delivery for individuals, populations, and systems.

DNP Program Outcomes

- 1. Deliver doctoral nursing education that builds on one's previous nursing practice and educational preparation.
- 2. Equip the graduate to assume leadership roles within advanced nursing and to integrate enhanced knowledge and skills in a variety of healthcare delivery systems.
- 3. Prepare the graduate to function in full partnership with other healthcare professionals at the highest scope of practice in redesigning and improving global healthcare.

DNP Student Outcomes

The graduate of the DNP program will be able to:

- 1. Assimilate the values of emotional intelligence, servant leadership, and intelligent design through the lens of the Christian Worldview in order to guide and enrich professional practice.
- 2. Formulate organizational and systems components for leadership and quality improvement to enhance patient outcomes.
- 3. Promote transformation of health care through interprofessional collaboration, policy development and technology utilization within one's area of specialization.
- 4. Evaluate outcomes of evidence based research and design appropriate interventions for one's area of specialization to improve the health of individuals, aggregates, and populations.

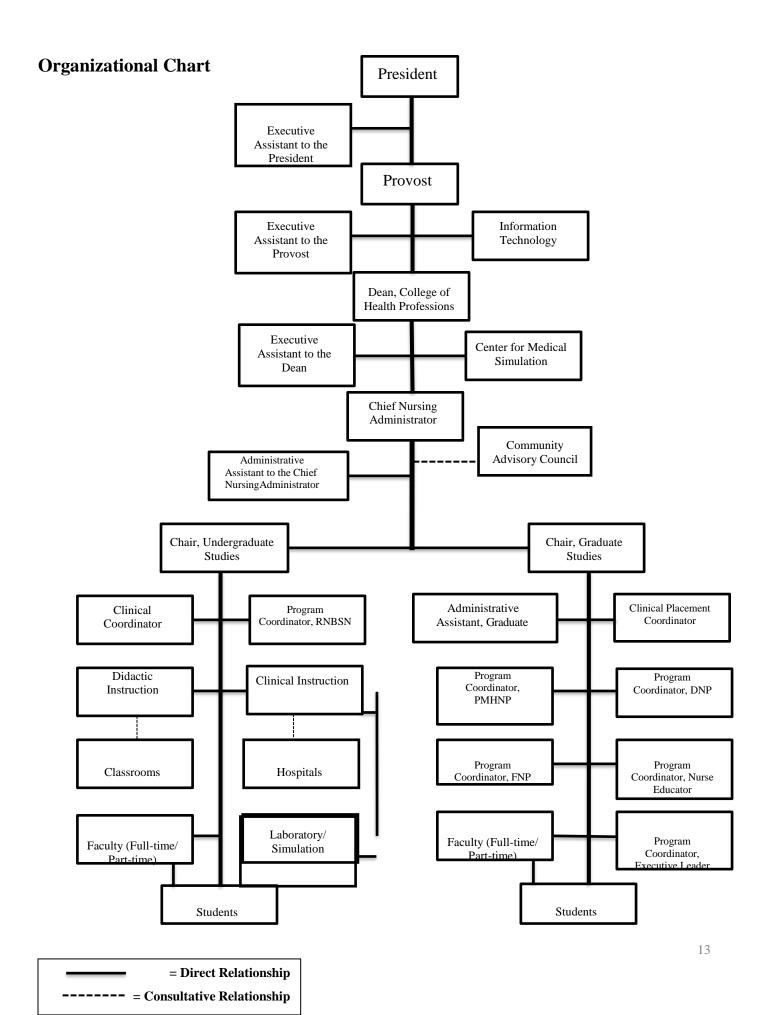
Approval

Approval is granted by: South Carolina Board of Nursing 110 Centerview Drive Columbia, SC 29210 Mailing Addres: PO Box 12367 Columbia, South Carolina 29211-2367 803-896-4550

Accreditation

Anderson University is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award baccalaureate, masters, and doctoral degrees ranting baccalaureate, master's, and doctorate degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404- 679-4500 for questions about the accreditation of Anderson University.

The baccalaureate degree program in nursing, master's degree in nursing, the Doctor of Nursing Practice degree, and the post-graduate APRN certificate program at Anderson University are accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.



Administration, Faculty, and Staff

Please refer to the Anderson University website under the College of Health Professions/School of Nursing/ Graduate Programs for a current list of administration, faculty, and staff.

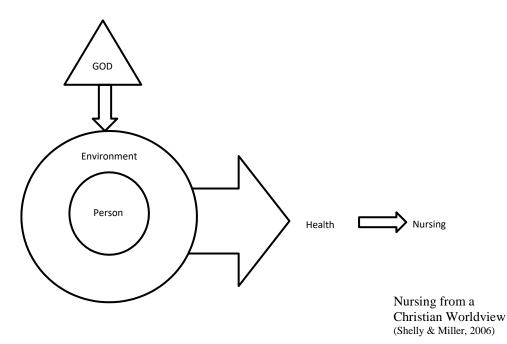
Conceptual Framework

The philosophy of the Anderson University School of Nursing revolves around developing nurses who are grounded in professionalism, clinical competence, and spiritual maturity. As a part of Anderson University, we support the mission statement of the university, which states: Anderson University is an academic community, affiliated with the South Carolina Baptist Convention, providing a challenging education grounded in the liberal arts, enhanced by professional and graduate programs and a co-curricular focus on the development of character, servant leadership, and cultural engagement. This is a diverse community that is Christ-centered, people-focused, student-oriented, quality-driven, and future-directed.

The faculty of the Anderson University School of Nursing is an integral part of the Anderson University community. The faculty strives to enhance student academic excellence and character in a Christian environment. The faculty prepares graduates with an increased level of clinical reasoning skills for personal and professional decision-making. These skills enable graduates to provide care to individuals, families, groups, communities, and populations in response to rapidly changing and complex health systems and technologically advancing global environments within a culture of safety.

The conceptual framework for the School of Nursing at Anderson University is built upon the truth that God is the loving, sovereign creator of all that is. God is triune: Father, Son, and Holy Spirit, continually seeking a restorative relationship with His creation. The understanding of God's nature and His desire to be in a relationship with man is developed through studying scripture, the word of God. Genesis 1:27 reveals, "And God created man in His own image, in the image of God He created him; male and female He created them" (NAS). This illustrates imago Dei, the Latin term for "Image of God." We believe that man was created in the image and likeness of God. We also believe that all humanity is created in the image of God (imago Dei) and thus has intrinsic value. We see this demonstrated for us in the reality of Jesus Christ's incarnation, becoming a man, and His willingness to die for humanity.

The nursing metaparadigm from a Christian worldview as described by Shelly and Miller in *Called to Care*, begins with God creating the world (environment) and all that is included within it. Man (person) was created by God and placed within this environment to live in balance and wholeness (health). Achieving health allows the person to live at peace in a God-centered community with a sense of physical, psychosocial, and spiritual wellness. Nursing works toward the wholeness of the person and the community.



Person

Person is defined as the recipient of nursing, including individuals, families, communities, and other groups (Shelly & Miller, 2016). A Christian worldview emphasizes that all persons are created in the image of God to live in a loving relationship with Him and others. The holistic individual encompasses body, mind, and spirit: (1) the body, anatomy and physiology; (2) the mind/psyche, emotion/affect, intellect/cognition, and will; and (3) spirit, the soul, which expresses itself in relationships with God and with others. While it is helpful to separately conceive body, mind and spirit, in reality, they are indivisible and interrelated. The dynamic nature of the individual undergirds a developmental focus on the lifecycle as a series of phases. During each phase of development, from conception through maturity, there is a changing priority of need fulfillment as perceived by the individual.

The whole individual is in constant interaction with the environment, and therefore, yields a broader society and culture. This sociocultural outgrowth incorporates ethnicity, beliefs, values/ethics, and interpersonal and intersocietal relationships which are developed through communication. Family can be defined as individuals who join together to contribute to the physical, psychosocial, and spiritual needs of each other within an environment of love and affection. Functional family dynamics incorporate caring relationships. Individuals and families build and maintain constructive and responsible community relationships.

Community is an aggregate of people who share common characteristics such as geographical, cultural, religious or relational characteristics. Community connotes an interdependency that is a means for the production, distribution, and consumption of goods and services; for socialization; for social control; for social relationships; and for mutual support (Berman, Snyder, & Frandsen, 2016). Communities are responsible for building and maintaining constructive and productive relationships in the broader societal and global contexts.

Environment

Environment includes the person, those with whom they interact, their physical surroundings, and the variety of settings in which nursing occurs. Environment is the internal and external conditions,

circumstances, and influences affecting persons. The internal environment of the individual encompasses the body, mind, and spirit. The external environment is all of the outer influences that impact upon the person, such as climate, ecology, economy, politics and history, technology, geology, society and culture. The extent of environment ranges from the interpersonal and local to intersocietal and global.

The person's internal and external environments are in constant interaction and change, requiring adaptation, thus influencing health.

Health

The goal of attaining health is the ultimate outcome of nursing care. Health is viewed through a lens that varies from culture to culture and its definition may differ and will impact how care is delivered. Health is a dynamic process and reflects the integrated wholeness of the person's body, mind and spirit; choices; and environmental factors. Health exists on a wellness• illness continuum. The right to seek opportunities for wellness belongs to each person, regardless of social or economic status, personal qualities, or nature of the health need. Usually the person makes decisions about seeking assistance within the health care system relative to his/her perceived health status on the wellness• illness continuum.

Wellness is maximum health potential which is reached when each, the body, mind, and spirit, is at its highest level of wholeness. This means that wellness consists of: (1) the individual, family, or community making responsible choices according to knowledge and an ethical framework. Choices may be influenced by lifestyle, genetic predisposition, and family and cultural belief systems; (2) environmental factors such as healthcare access, financial resources, food sources, climate, etc.; (3) the interaction between choices and environmental factors. For example, choices about the level of wellness the person wishes to achieve or maintain may be limited by society if, by the choices made, a threat is posed to self and/or others.

As the level of wellness decreases, the possibility for illness, suffering, and death increases. Illness is an absence of integrated wholeness or disintegration of wholeness. Both wellness and illness are abstract constructs that are personal and subjective, but may be objectively discernible because of common experience and symptom manifestation. Subjective and objective data may be used to discern the quality and quantity of wellness or illness.

When one or more of the means to wellness is not attained or is flawed, suffering may occur. Suffering is the conscious endurance of pain and distress which occur because of a loss or illness. When health is insufficient to sustain life, death occurs. Death is the end of physical life.

Nursing

As a response to God's grace and love, nursing is a ministry of compassionate care that affects the physical, psychosocial, and spiritual spheres of the individual, family, groups, and communities.

Christ-centered nursing is unique because its emphasis is on caring for and respecting the whole person, the imago Dei, as embodied by God. While this represents both the science and the art of nursing, more importantly, it represents God's grace and is a reflection of His character and love for us. In congruence with the mission, vision, purpose, and outcomes of the School of Nursing, the concepts nursing, environment, health, and person have been defined, clarified, and described in relation to God

and imago Dei. The structure for the School of Nursing from which the outcome criteria are established, the curriculum is designed, and courses are developed is based upon this conceptualization.

Nursing is an applied discipline, which expresses itself in nursing practice and has its foundation in scientific/empirical knowledge, theory, and research. Nursing in its fullest sense is also a caring, therapeutic, and teaching discipline. The body of nursing knowledge is ever expanding through future-directed research and theory development. The research process is one means for developing scientific problem-solving skills, and research findings are utilized to guide nursing practice. Nursing theories are tested and supported by knowledge gained through research.

Theoretical and empirical knowledge from the nursing, biological and social sciences and the humanities are synthesized in utilization of the nursing process. The nursing process is a science-based series of activities employed by the nurse as a methodical, ongoing effort toward achieving desired outcomes for person, environment, and health. The steps of the nursing process include assessment, nursing diagnosis, planning, implementation, and evaluation. The process occurs dynamically in a back and forth fashion.

The caring component of nursing reflects the nurse's concern, empathy, and love for others. The caring role is best fulfilled as the nurse demonstrates the Christ-centered ethic of service in relation to God and to person.

The therapeutic component of nursing is realized by providing health care or knowledge of health care practices to enhance the person's level of wellness. The teaching component of nursing includes providing information to make health care decisions, acquire skills, and change behavior. When it is not possible to promote wellness, nursing seeks to enable persons to adjust to illness and/or relieve suffering. When it is not possible to promote life, nursing seeks to enable persons to adjust to loss and peaceful death.

American Nurses Association Nursing Code of Ethics

- 1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.
- 2. The nurse's primary commitment is to the patient, whether an individual, family, group or community.
- 3. The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.
- 4. The nurse is responsible for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimum patient care.
- 5. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.
- 6. The nurse participates in establishing, maintaining, and improving health care environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action.
- 7. The nurse participates in the advancement of the profession through contributions to practice, education, administration, and knowledge development.

- 8. The nurse collaborates with other health professionals and the public in promoting community, national and international efforts to meet health needs.
- 9. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice, and for shaping social policy.

Graduate Student Nurse Resources

Anderson University does not have an organized graduate student nurse organization. Below is information provided to help students connect with outside student organizations.

AACN Launches New Graduate Nursing Student Academy to Enhance Services and Programs for Future Nursing Leaders

WASHINGTON, D.C., August 1, 2012 – The American Association of Colleges of Nursing (AACN) is pleased to announce the formation of the new <u>Graduate Nursing Student Academy</u> (GNSA) created to provide high value programs, services, and resources to nursing students enrolled in master's and doctoral programs. Through the GNSA, AACN will focus on meeting the professional development needs of graduate nursing students who are poised to assume leadership roles within the profession, including service as future faculty members and researchers.

"Preparing the next generation of nurses to lead change and foster innovation in academic, research, and practice settings is a priority for the association," said former AACN President Jane Kirschling. "AACN stands ready to leverage its resources and work collaboratively with stakeholders to move more nursing students into graduate programs and to offer enrichment opportunities for this important student population."

AACN has a long history of providing services and guidance for undergraduate and graduate students enrolled in schools of nursing. This support manifests in the form of scholarships, Webinars, conference discounts, an online collaboration community, information sharing, advocacy engagement, internships, and most recently, the annual Student Policy Summit and Nursing CAS. Within the larger nursing student population, AACN has a strong interest in serving the unique needs of the more than 110,000 students pursuing master's, PhD, and Doctor of Nursing Practice (DNP) degrees. Since future faculty and researchers will be drawn from this group, AACN is looking to expand efforts to provide information and resources to encourage graduate students to complete their formal study and consider careers in academia.

Academic Policies

Academic policies that apply to all Anderson University students found in the <u>Anderson University</u> <u>Academic Catalog</u> accessible online at <u>http://catalog.andersonuniversity.edu/index.php</u>. The policies in this Graduate Nursing Student Handbook supersede the Anderson University Academic Catalog in areas where policies are different.

Program Information, Policies, and Procedures

These policies are specific to the School of Nursing Graduate program and may differ from the University Policies. The student is held for progression in the School of Nursing to these policies.

Student Disability Services

Anderson University provides accommodations to enable students with disabilities to access the University community, in compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 and their amendments. Reasonable accommodations are determined based on current documentation and are made on a case-by-case basis. Adherence to academic standards that are essential to a course of study is generally considered non-discriminatory.

Students requesting academic adjustments and/or auxiliary aids accommodations from Anderson University must self-identify by contacting the Center for Student Success. Application for accommodations does not ensure that the student qualifies to receive accommodations. Accommodations are not retroactive.

Students requesting academic adjustments and/or auxiliary aids accommodations must have a documented disability as defined by Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. All documentation is evaluated on a case-by-case basis. If provided documentation is deemed insufficient, the student may be required to provide additional documentation. Complete guidelines for documentation are available from the Center for Student Success.

The Center for Student Success determines the student's eligibility for accommodations and, for eligible students, determines appropriate accommodation. If a student cannot demonstrate the following skills and abilities, it is the responsibility of the student to request appropriate accommodation. Anderson University will provide reasonable accommodation as long as it does not fundamentally alter the nature of the program. *In the event a student is unable to fulfill these admission and progression standards, with or without reasonable accommodation, the student will not be admitted into or allowed to progress through the program.*

The nursing program at Anderson University is a rigorous mental and physical program that places specific requirements and demands on the students enrolled in the program. An objective of this program is to prepare graduates to enter a variety of employment settings. These employment settings require a broad spectrum of mental and physical demands on the nurse.

The stated mission of the nursing program at Anderson University is to be Christ-centered, peoplefocused, student-oriented, quality-driven, and future-directed in preparing qualified persons to serve a diverse population through the holistic profession of nursing. Potential nurses are expected to complete all the academic and clinical requirements of the graduate program in nursing before they are eligible to graduate and/or test with a national credentialing agency such as the American Nurses Credentialing Center (ANCC) or the American Academy of Nurse Practitioners (AANP). The purpose of this document is to define the cognitive, affective, and psychomotor skills that are essential to the completion of this program and to perform safely as a competent generalist nurse.

Americans with Disabilities Act ("ADA") Guidelines

Definitions:

Title III of the Americans with Disabilities Act provides comprehensive civil rights protections for

"qualified individuals with disabilities." An "individual with a disability" is a person who:

- has a physical or mental impairment that substantially limits a "major life activity," or
- has a record of such an impairment, or
- is regarded as having such an impairment.

Federal regulations state that "physical or mental impairments" include, **but are not limited to** "such contagious and non-contagious diseases and conditions as orthopedic, visual, speech, and hearing impairments; cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental retardation, emotional illness, specific learning disabilities, HIV disease (whether symptomatic or asymptomatic), tuberculosis, drug addiction, and alcoholism."

"Major life activities" include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, eating, standing, lifting/bending, thinking, concentrating, reading, communicating, sleeping, and working. "Major life activities" also include "major bodily functions" which include, without limitation, functions of the immune system; digestive, bladder and bowel functions; respiratory and circulatory functions; reproductive functions; cell growth; neurological and brain functions; and endocrine functions. Individuals who currently engage in the illegal use of drugs are not protected by the ADA when an action is taken on the basis of the recurrent illegal use of drugs.

"Qualified" individuals are defined as follows:

- A "qualified" individual with a disability is one who meets the essential eligibility requirements of the program or activity offered.
- The "essential eligibility requirements" will depend on the type of service or activity involved.

Transfer of Credits from Other Graduate Level Programs

Students admitted to AU's graduate nursing program may transfer in up to nine credit hours of graduate coursework. For the course to be considered, the student must have earned at least a B in the course, the student's overall GPA was at least a 3.0, the student left in "good standing," the university was regionally accredited, and the credit from the previous university is less than six years old. Some core courses such as **Advanced Pathophysiology**, **Advanced Health Assessment, and Advanced Pharmacology are not** eligible for transfer. Other courses are up to the discretion of the Graduate ARG committee. If the student would like to have a course considered for approval, the student must submit the Transfer Credit Substitution Form and syllabi from the former graduate program for review. The Enrollment Coordinator compiles the information and presents it to the Graduate ARG committee for review. The committee reviews the previous work to ensure it aligns with the Anderson University curriculum and the AACN Master and/or Doctoral Essentials. The ARG committee then makes a recommendation to the Chief Nursing Administrator. If all parties agree with accepting the courses, the Enrollment Coordinator submits the proper University form for the Chief Nursing Administrator's signature before returning to the Registrar's office.

Progression and Dismissal

Graduate Academic Standards

Students enrolled in a graduate nursing program at Anderson University are required to maintain a cumulative grade point average (GPA) of 3.0 in all courses taken toward the degree. Students not meeting the minimum academic standard will be placed on academic probation.

Grades of "C" or Below

In addition to meeting the 3.0 GPA requirement for graduation, graduate students must have no more than one (1) grade of "C" in the entire graduate work. Students earning a grade of "C" will receive an academic warning from the Graduate Nursing Chair or academic probation notice from the office of the Provost based on the resulting cumulative GPA. A student cannot earn a grade of a "C" or below in a 3P course (Advanced Pathophysiology, Advanced Health Assessment, Advanced Pharmacology) or a major didactic course (Primary Care Across the Lifespan, Care of Special Populations, Care of Aging Adults, Integrated Care of Individuals and Communities, Advanced Assessment Processes in Mental Health Across the Lifespan, Management of Behavioral Health Populations Across the Lifespan Psychopharmacological Therapies Across the Lifespan, and Management of the Complex Mental Health Client Across the Lifespan). A "C" in a 3P or major didactic course will result in automatic dismissal.

Academic Warning

A student will be placed on academic warning upon receiving a grade of "C" while maintaining a cumulative GPA of 3.0 or greater. The Graduate Nursing Chair is responsible for notifying the student of academic warning status. A copy of the warning is placed in the advisors' and the student's files.

Academic Probation

Academic probation occurs when the cumulative grade point average is below 3.0 (**not in good standing**). To improve the academic standing of a student with unsatisfactory academic progress, the Graduate Nursing Chair and faculty may specify conditions with which a student must comply to be able to register for subsequent semesters. Specifications may include additional courses, a change in total semester hours, the attainment of a specific semester grade point average, and/or a suggestion of counseling. Students who do not achieve a GPA of 3.0 within the following two semesters after being placed on academic probation will be academically dismissed. Academic probations are reported to the Registrar's office.

Academic Dismissal

Students earning a second grade of "C" or below in a concurrent or subsequent course will be academically dismissed (**not in good standing**) but are eligible to apply for readmission to the program with the next cohort. Students earning an initial grade of "D," "F," or "Unsatisfactory" will receive an academic dismissal (**not in good standing**) from the program and are generally not eligible for readmission. However, the student is invited to appeal with a well-formatted remediation plan to show how the student plans to be successful if allowed to return to the program. A reapplication, in either case, is not a guarantee of acceptance. (See the appeal process below).

Limitation in Completion of Requirements

A student in the MSN program must complete all degree requirements within five (5) years. A student in the DNP program must complete all degree requirements within seven (7) years. Time limits are computed from and include the first semester of credit applied to the degree program. Students who do not enroll for three (3) consecutive semesters are subject to all program policies, guidelines, and requirements in place at the time of re-enrollment. This guideline does not mean the student has the option of taking five (5) years to complete the degree if their track is a full-time cohort model.

Readmission/Admission after Voluntary Withdrawal or Transfer

A student who leaves the university and/or School of Nursing in "good standing" through voluntary withdrawal or a student from another nursing program who left that program in good standing and desires to transfer to the Anderson University nursing programs are evaluated for readmission/admission under the following circumstances:

- 1. Make a formal reapplication/application to the School.
- 2. At the time of reapplication/application, submit a statement that addresses the reason for the withdrawal or transfer, outlines what she/he has done to ensure success in the School of Nursing and why she/he should be readmitted/admitted. The statement must be written by the student.
- 3. The student's complete academic record, including all clinical evaluations will be reviewed.
- 4. Readmission/admission is not automatic. Students will be considered as part of the total applicant pool and reviewed by the ARG committee.
- 5. The requirements for completion of program/major requirements within five (5) years of initial enrollment will be in effect for readmitted students.
- 6. All policies in place at the time of readmission/admission will apply.

Readmission after Dismissal/Appeal

A student who is dismissed from the program "**not in good standing**" due to grades may be reevaluated for re-enrollment by the following process. Students must not have made more than two (2) C's or lower to be considered for appeal. Dismissals due to or grades of "D" or "F" are generally not eligible for readmission, but the student is invited to appeal with a well-formatted remediation plan. Dismissals due to academic misconduct are not eligible for appeal for readmission.

- a. Upon dismissal, the student must gain approval from the Graduate Nursing Chair to reapply for the next cohort of the same track.
- b. At the time of reapplication, submit a statement addressing the reasons they wish to reapply to the program and how circumstances have changed that would now make them more successful in the program.
- c. The Admission, Retention, and Graduation Sub-Committee (ARG) will meet to review the student's request and application status.
- d. **Readmission is not automatic**. Students will be considered as part of the total application pool.
- e. The student will need to retake at least one of the courses that a "C, D, or F" was previously earned. The course to be retaken will be at the discretion of the Graduate Nursing Chair and the Chair of the ARG committee.
- f. The student will be placed on academic probation upon re-admission to the graduate nursing program and will remain on academic probation for at least one semester and will be required to maintain at least a cumulative GPA of 3.0. Failure to maintain a cumulative GPA of 3.0 after two semesters upon readmission will result in academic dismissal and permanent exclusion from the graduate nursing program.
- g. The requirements for completion of program/major requirements within (5) years of initial enrollment will be in effect for readmitted students.
- h. Classes that were satisfactorily completed with a grade of "A" or "B" will not need to be repeated provided all course work is completed within the five years as stated above.
- i. All policies in place at the time of readmission/admission will apply.
- j. Readmission may also be hindered by the student-faculty ratio. Per CCNE guidelines, the ideal ratio is one clinically prepared faculty (i.e., FNP for FNP students, PMHNP for PMHNP

students) per six students.

Withdrawal Procedures

<u>Important</u>: Please note any changes in enrollment during the add/drop period of course withdrawal at any point of the semester may result in revisions to your financial and/or billing for the semester. The student should contact the Office of Financial Aid Planning to determine the impact of such changes on their aid eligibility before adding/dropping or withdrawing from courses.

Students who wish to withdraw from a course must notify the Academic Success Advisor and the Graduate Nursing Chair. If the notification to withdraw occurs before the first class begins in a semester, the student will be removed from the class roster. Students who withdraw between the first class and the mid-point of the semester may receive a "W" for the course. Students who withdraw after the mid-point of the class will receive a grade of "F" for the course. In some instances, students with a medical hardship can be granted a W if they withdraw after the set last date to withdraw. These cases will be evaluated individually by the Graduate Nursing Chair and the Director for The Center for Student Success.

Administrative Withdrawal

Faculty may administratively withdraw the student for failure to log into an online Canvas class shell by the posted date for initial response and introduction to the course. Also, if there is a period of 14 consecutive days in which the student fails to log into the class and actively participate in their Canvas class, the faculty can submit an administrative withdraw request to the Registrar's office.

Withdrawing from the University

Under certain situations, it may be necessary for a student to withdraw from the University. A student should notify the Academic Success Advisor (ASA) and Graduate Nursing Chair in writing. The ASA will initiate the withdrawal process. Depending on the date of the official withdrawal request, a grade of "W" or "F' is assigned. Students failing to follow the procedures of official withdrawal are awarded a grade of "F" for all courses in which they remain registered.

Changing Tracks

The student may only change from the MSN-FNP to the DNP-FNP track or MSN-PMHNP track to the DNP-PMHNP track after their first semester and before their second semester. No other track changes are considered. If the student wishes to change tracks, they must contact the Graduate Nursing Chair in writing before the end of the first semester of course work.

Grades

The Anderson University School of Nursing Graduate Program grade scale is as follows:

A= 90-100 B= 80-89 C= 70-79 D= 60-69 F= 59 or below

Course grades are earned by the student based on an accumulation of total possible points in a course. This is individualized based upon the faculty's plan for the course. Some assignments may be recorded as a percentage of the total grade. In the event the total points and grade totals in Canvas do not match the syllabus, the syllabus will stand as the final source. If the student has a question about a grade, they need to consult the syllabus or faculty

Incomplete Coursework

In the event a student or faculty feels a student is going to be unable to complete a course by the end of the semester due to circumstances beyond the student's control preventing the completion of all course requirements on time, a grade of "I" (incomplete) must be requested by a student. The student makes the request in writing to the faculty, who must approve the request before a grade of "I" can be assigned. The request for an incomplete grade form noted on the Registrar home page must be completed and turned into the Office of the University Registrar <u>prior</u> to the end of the last day of classes for the term or semester. If a grade of "I" is granted, the work must be <u>completed within 30 days following the end of the academic term in which the "I" was requested.</u> Otherwise, a failing grade will be recorded.

Students must have completed at least 50% of the coursework and shown a reasonable effort to do the work to be considered for an incomplete status. Students must turn in assignments and document clinical hours in Canvas in order to show evidence of work.

Late Assignments

Late assignments will be assessed 10% off for each day late. For example, 1 day 10%, 2 days 20%, 3 days 30% up to 7 days late or 70%. Assignments will not be accepted if more than seven (7) days late. If you have extenuating circumstances **and** you communicate with your faculty **before** the assignment is late, your case will be reviewed individually by the faculty to consider if there will be a late penalty. Working, vacation, and other planned events like weddings are not extenuating circumstances.

Academic Integrity

Students and faculty at Anderson University are expected to conduct themselves with integrity and to be honest and forthright in their academic endeavors. Just as academic honesty is vitally important to the value of a college education, academic dishonesty is a serious offense because it diminishes the quality of academic scholarship and defrauds other students, faculty, the institution, and society.

By enrolling at Anderson University, students agree to uphold the standards of academic honesty and integrity described in Anderson University's Catalog. Students commit to refrain from all forms of academic dishonesty and, by their example, promote the ideals of honesty, responsibility, trust, fairness, and respect that are central to Anderson University's mission and values.

Students are expected to adhere to the following honor code pledge in all academic activities. "In keeping with Anderson University's ethical standards of academic integrity and institutional values guided by its Christian mission, on my honor I pledge that I have not given, received, and/or witnessed any unauthorized assistance on this work." Refer to the Graduate Catalog for the Academic Integrity Policy.

Academic Dishonesty Additions for the Graduate Nursing Program

Academic misconduct is very serious. Academic misconduct could result in a zero for an assignment, a zero in the class, or expulsion from the university. In addition to the already stated academic misconduct the graduate program also considers such acts as:

• To give or receive information *before, during or after examinations* – including previous test information, copying actual exams or quizzes, or possession and use of unauthorized faculty

materials (test banks associated with texts utilized in the course)

- To turn in assignments which are the result of another's work (fabrication)
- Acting in a disrespectful manner toward patients, visitors, fellow students, program faculty, or clinical faculty
- Falsifying clinical documents, including but not limited to, the number of patients seen, or hours spent at the clinical site
- Duplicating and disbursing in any format copyrighted national certification exam questions or any exams, quizzes utilized by the nursing program
- Sharing or discussing information or details regarding simulation scenarios/clinical experiences that represent a HIPAA violation

Student Grievance, Complaint, and Right of Appeal Guidelines

The graduate nursing program adheres to the formal complaint procedures for the University as outlined in the graduate handbook: <u>https://www.andersonuniversity.edu/campus/complaint-procedure</u>

Students and other interested parties who have complaints regarding institutional policies and practices or who wish to request deviation or release from the requirements of University programs or policies must submit written statements summarizing their concerns to the following offices:

- 1. Enrollment Management and Marketing- matters pertaining to admissions, financial aid, and Registrar functions and policies.
- 2. Academic Affairs- matters related to academic programs and policies
- 3. Student Development- matters related to student development programs and policies including residence life.
- 4. Administration- matters relating to food service, bookstore operations, physical facilities, and grounds, including buildings, programs, and policies.
- 5. Financial Operations- matters relating to financial and business operations
- 6. Athletics- matters relating to athletic programs and policies.

This policy requires the above offices to maintain records of complaints and how they are processed. Each office named above will maintain a "log" in each area recording names of complaints, date of complaints, the nature of complaints, and a supporting file reflecting actions taken in response to complaints. Each office must provide a simple written procedure statement which states the steps in the complaint process to each complaint.

The SC Commission for Higher Education responds to formal complaints against public, independent non-profit, and proprietary institutions of higher education in South Carolina.

For Complaint Information, Procedures, Form and Authorization contact the South Carolina Commission on Higher Education, <u>please click here</u>.

Academic Affairs and Licensing 1122 Lady Street, Suite 300, Columbia, SC 29201 Telephone (803) 737-2260; Fax (803) 737-2297; Web site <u>www.che.sc.gov</u>

The following are discipline-specific grievance processes followed in the graduate program.

Course/Clinical Grievance (SON)

Course/Clinical Grievances Issues/Concerns in a single course, such as the quality of instruction, fairness, and equity in awarding grades or evaluations, should use the following procedures:

- 1. If the issue(s) concerns a single course, the student should make contact with the course faculty (appointment, email, or phone), clinical faculty, and/or the course coordinator (as appropriate), provide a written explanation, and attempt to come to an amicable resolution. A written response will be given to the student within five working days.
- 2. If the issue cannot be settled at the course level, an appointment should be made to provide a written explanation and discuss the issue(s) with the Graduate Nursing Chair. A written response will be given to the student within five working days.

Formal Complaint (SON)

The School of Nursing defines a formal complaint as a concern about a specific aspect of the nursing program expressed by the individual affected and communicated in writing to the Chief Nursing Administrator, who has the authority to respond. However, first, a student must initiate the course/clinical grievance with the specific course and/or clinical faculty and then proceed to the Graduate Nursing Chair for resolution prior to filing a formal complaint in writing to the Chief Nursing Administrator. Once receiving a formal complaint, a written response will be given to the nursing student within five working days.

Right of Appeal (AU)

The School of Nursing adheres to the Anderson University Right of Appeal process as outlined in the Anderson University Academic Catalog <u>http://catalog.andersonuniversity.edu/index.php</u>. Student concerns or complaints are handled in a professional manner. Discussion and problem solving of issues should be based on facts. Resolutions should acknowledge the satisfaction of all parties but must maintain the integrity of the nursing program. If the issue(s) cannot be resolved through the procedures described above in Course/Clinical Grievances, a formal complaint may be filed as described above in the section above titled Formal Complaint. In the current Anderson University Academic Catalog, the process is described and states that after addressing a formal complaint with the Chief Nursing Administrator, then a written appeal is submitted to the Office of the Provost. A response will be returned to the student within five working days. The Office of the Provost renders a final response.

In the School of Nursing, issues/concerns related to deviations from the prescribed admission policies, progression policies, program of study, and graduation policies should be submitted to the Graduate Admission, Retention, and Graduation Subcommittee (ARG) of the faculty. Admission, Retention and Graduation Subcommittee (ARG) Procedures:

- 1. Requests to the Committee must be in writing and received no later than five (5) days prior to the scheduled Committee meeting
- 2. The student will receive a letter from the Committee regarding its decision.
- 3. The student's request and the Committee's decision will be placed in the student's academic file in the School of Nursing.

Grade Appeals/Changes

- 1. If a student files an appeal within a course, it must be in writing, and the student may continue to progress while the appeal is in process until a resolution is determined.
- 2. An appeal must be filed within 30 days of the incident or end of course.
- 3. Each person to whom an appeal is made has five (5) working days in which to

communicate the decision to the student.

Student Representation

Cohort Representative

Student feedback is obtained from each nursing cohort through a representative, chosen by their peers who serve to facilitate communication from the entire cohort to the Graduate Nursing Chair or faculty liaison on matters such as changes in the course calendar, clarification of course requirements, recommendations for change in didactic or clinical activities or student concerns, issues, and suggestions/ideas. <u>See job description</u>.

Faculty Liaison

The faculty nominates one student to serve as faculty liaison. The faculty liaison will be invited to attend at least one graduate subcommittee meeting each semester and will communicate faculty concerns, updates, or news back to all graduate students through each class/cohort representative. This student will also serve as the official liaison for the cohort representatives to the faculty during at least one Graduate Faculty Subcommittee meeting per semester. See job description.

Graduation and Licensure Information

Application for Graduation

Students nearing completion of their degree must complete an Application for Graduate Studies Graduation. Applications are accepted in the fall for spring graduation and in the spring for summer and fall graduation. Deadlines for application are set by the University Registrar and distributed to students. Failure to meet the stated deadline may result in a delay in the time of graduation. Students must complete the Application for Graduate Studies Graduation during the application window. The application and all supporting documents will then be reviewed by the University Registrar, and a degree audit will be performed. Official degree audits are sent to the student's Anderson University email account. All students applying for spring and fall graduation are expected to participate in the commencement ceremony at the end of the semester. Graduation application fee can be found in the graduate catalog.

Students applying for summer graduation are invited to participate in the December commencement. During ceremonial proceedings, family, friends, significant others, and children are expected to remain in the audience and are not permitted in the student section or to walk across the stage with the graduate. Caps, gowns, and hoods are ordered through the University Bookstore.

Licensure and National Certification

ANCC

ANCC (American Nurse Credentialing Center) requires a Validation of APRN Education Form that the student initiates and provides to the program director of the school to fill in and sign in order to register for testing. <u>http://www.nursecredentialing.org/APRN-_Validation-Form</u>.

Once the student completes eligibility requirements to take the certification examination and successfully passes the exam, they are awarded the credential: Family Nurse Practitioner- Board Certified (FNP-BC) or Psychiatric Mental Health Nurse Practitioner-Board Certified (PMHNP- BC). This credential is valid for five (5) years. They can continue to use this credential by maintaining their

license to practice and meeting the renewal requirements in place at the time of certification renewal.

For PMHNP, the only option is the ANCC. <u>http://www.nursecredentialing.org/</u> The National Commission for Certifying Agencies and the Accreditation Board for Specialty Nursing Certification accredits this ANCC certification.

AANPCB

FNPs can choose between ANCC or the American Academy of Nurse Practitioners Certification Board (AANPCB). <u>https://www.aanpcert.org/ptistore/control/certs/program</u>. AANPCB applicants must create an **Online Profile** to apply for certification. Paper applications are available on the AANPCB website for use by individuals who are unable to utilize the web-based application. <u>https://www.aanpcert.org/ptistore/control/certs/process</u>. Candidates will be notified when they are eligible to test and will receive an email from AANPCB notifying them of their eligibility status. AANPCB will also notify **PSI Services LLC (PSI)** of the candidate's eligibility to test. PSI will send the candidate a registration eligibility confirmation email within 24 hours. This email grants the 120-day

window to test provides the candidate with their **Eligibility Identification Number** and a link with instructions for registering to schedule the examination in the PSI system online at <u>www.psiexams.com</u>. Once the student completes eligibility requirements to take the certification examination and successfully pass the exam, they are awarded the credential: Nurse Practitioner-Certified

SCLLR

The South Carolina Labor Licensing and Regulation (LLR) has information regarding "Instructions and Requirements for Advanced Practice Registered Nurse (APRN) Application as noted in the following link. <u>http://www.llr.state.sc.us/POL/Nursing/pdf/RNtoAPRN.pdf</u>. Prior to applying for an Advanced Practice license in South Carolina or your state, the student must meet all eligibility criteria noted on the LLR requirements page.

According to ANCC and AANPCB, after completing core curriculum classes and evidence of completion of 500 clinical hours, students can submit a transcript and Validation of Advanced Practice Nursing Education Form (ANCC) to be eligible to sit for the board certification exam while continuing in the DNP curriculum. Students receive unofficial results of "pass/fail" after taking the exam. The official results are released when the degree is conferred. If the student fails the exam before graduation from the DNP program, they cannot retake the exam until graduation.

Honors and Awards

<u>Sigma</u> is an International Honor Society of Nursing that serves to advance world health and celebrate nursing excellence in scholarship, leadership, and service. Sigma membership is by invitation only to baccalaureate and graduate nursing students who demonstrate excellence in scholarship and nurse leaders exhibiting exceptional nursing achievements. To quality, graduate students (Master's and Doctoral students) enrolled in graduate programs at accredited higher education institutions must have completed at least ¼ of the nursing curriculum and achieved academic excellence as evidence by a GPA of 3.5 or higher on a 4.0 grading scale.

<u>The Deans Award</u>. The Deans Award is voted on by all faculty of the School of Nursing. It is given to one student from each of the MSN and DNP cohorts who best exemplifies the mission and vision of the School of Nursing and has exhibited a servant's heart.

Internet postings and Social Media Policy

It is never appropriate to share comments, updates, or critiques regarding other students, patients, clinical agencies, or other aspects of the clinical experience on any public forum (e.g., Facebook, Twitter). Items, photos, and comments shared on these sites are available to the public, and any that are in direct violation of our values guided by Christian principles of love of God, neighbor, and self may result in disciplinary action (e.g., probation, suspension, and/or dismissal). It is the policy of the School of Nursing that faculty and staff will not interact with students on social media sites.

For your convenience, below is a portion of the code of behavior from the student development and campus life portion of the Academic Catalog:

"Respect for others, by acting in a manner respectful of the rights and privileges of others and upholding that every member of the campus community, regardless of race, sex, age, disability, or religion, as the right to grow and learn in an atmosphere of respect and support."

Violations of this policy are considered very serious because they not only reflect upon your character but reflect upon the School of Nursing and the University, and individuals will be disciplined as appropriate.

These social media sites (e.g., Facebook, Twitter, Snapchat, etc.) are not to be utilized to address items such as clinical concerns, clinical sites, or concerns with the nursing faculty or coursework at Anderson University. Direct violation of this policy may result in disciplinary action as listed above. (e.g., probation, suspension, and/or dismissal)

Assistance with SON Technology

The student must have a reliable computer with current software, sufficient memory, and speed to function in testing situations and Canvas. Laptops must have wireless connectivity and those older than two (2) years are unacceptable. Also, **it is the student's responsibility to contact tech support** whenever problems are encountered, either with the technological products or access within the system.

Advising

Advising for graduate students is handled by an Academic Success Advisor. The Enrollment Counselor will assist the student in the admission and first semester registration process. After the first semester of study drop/add date, the Academic Success Advisor will assist the student in the registration process and guide the student each semester in course selection. Students are required to discuss their progress and classes they plan to take with the Academic Success Advisor. During advisement, students are approved to take courses if they have had the specified prerequisites. Students will not add courses if they are not approved. Failure to register may result in desired classes being closed and may necessitate a delay in completing program requirements. It is the student's responsibility to register for their classes each semester through Self-Service. Failure to register by the "Last Day to Register and Add Courses" will result in automatic withdrawal from the graduate nursing program.

Email

It is crucial and mandatory that students check their Anderson University email at least once every 24 hours. The university and faculty often send important information via email that should not be missed.

Paper Writing

Students are required to format papers and cite sources according to the most recent APA (American Psychological Association) guidelines. Information can be found online at <u>www.apastyle.org</u>.

Simulation Learning Environment Policies

Students are required to attend all scheduled Intensives as per the provided schedule at the beginning of each semester. Intensive experiences are 1-3 days and are part of the clinical experience. The student is expected to arrive on time for the Intensive experiences and stay for the duration of the Intensive. Failure to attend all sessions organized for the appropriate cohort will result in a grade adjustment in the student's clinical or didactic classes. Students are required to dress in professional attire with an appropriate short-collared white lab coat (FNP students) and to bring all necessary and required equipment. Family, friends, significant others, and children are not allowed at the Intensives or in the clinical or residency settings under any circumstances as this is a safety concern and distraction.

Clinical Evaluations and Completion of Clinical Hours

The responsibility for obtaining a preceptor and a clinical site for clinical rotations is the students' however, the Clinical Placement Coordinator will assist with placement if the student is unsuccessful. However, before contacting any potential preceptors, please reach out to the *Clinical Placement Coordinator*. The *Clinical Placement Coordinator* and faculty will assist with establishing Clinical Rotation Agreements/Memorandums of Agreement (MOA) with clinical sites. Anderson University must have a current MOA with every clinical site. The *Clinical Placement Coordinator* is very knowledgeable about clinical availability in many areas and will reach out to the students before starting the clinical rotations. The students need to respond to her emails promptly. There are also institutions that will only deal with the Clinical Placement Coordinator; therefore, if the student contacts the preceptor independently, the student could risk the possibility of not having a clinical placement at a facility due to not following protocol.

In the event the student is unable to find a preceptor for their respective clinical rotation (FNP or PMHNP clinical rotations) by the fourth week of the semester, the student may request a grade of "IP" for "In Progress." The student may reenter the program with the next cohort when that clinical rotation is again available. The student should discuss this process with the *Clinical Placement Coordinator* and complete the necessary paperwork.

Students can bank a maximum of 50 clinical hours upon approval from the program coordinator and clinical placement coordinator. The program coordinator and clinical placement coordinator do hold the right to advise the student to proceed with continuing clinical after receiving the total hours needed for the program if competency is not met.

If the student has completed at least 50% of the clinical hours but is unable to complete their clinical course requirements before the end of the semester, s/he request a grade of "I" or "Incomplete" grade and will complete and submit the appropriate paperwork before the last day of the semester. Students must satisfactorily meet all objectives on their clinical evaluation by the final evaluation. Unsuccessful clinical evaluations may require the faculty to evaluate further the students' clinical progress in the form of a remediation plan or extra clinical hours that semester and will be considered on a case-by-case basis.

Students in the PMHNP post Master's Certificate program are held to the same clinical guidelines as the other PMHNP students. Even though the PMHNP Certificate students have a valid FNP license, they are operating in a student role and cannot write prescriptions or operate under their APRN license.

DNP students require a clinical preceptor for their DNP Scholarly Project. They must secure their preceptor within the first four weeks of their initial Residency course. If a student cannot secure a preceptor by that time, they may request an "IP" or "In Progress" grade. If the student secures a preceptor <u>and</u> has completed 50% or more of the coursework but is unable to finish all of their hours or assignments in the Residency class, the student can submit appropriate paperwork for an "incomplete grade."

Clinical packets (FNP, PMHNP, and DNP Scholarly Project) are provided in each clinical or residency class and explain the expectations of the student and the clinical advisor. Evaluation tools are provided within the course via Canvas. Students must have a midterm and final evaluation completed by their clinical preceptor for FNP and PMHNP clinical rotations and the option for phone conferences or on-site evaluations by clinical faculty. In rotations where the student is at a clinical site for less than 100 hours, they only need their preceptor to complete a final evaluation. DNP student preceptors for students working on their Scholarly Project will complete one evaluation at the end of each clinical rotation.

Regulations for Student/Faculty Data Entry and Deletion of Practice Materials

The policy written here is a procedural method for the entry and deletion of practice data by students and/or faculty from the Anderson University School of Nursing.

Entering Data

Students are encouraged to practice documenting when in the clinical setting to learn the basic concepts of documentation in an Electronic Medical Record (EMR). Clinical preceptors are required to review the data, critique it for accuracy, completeness, and legality. The student should not sign any medical records in their names only.

To comply with federal regulators, such as HIPAA and organizational guidelines for the healthcare organization where students attend clinicals, **no student is to record any patient identifier of any kind, whether intentional or unintentional.** Patient identifiers include, but are not limited to, Account Number, Medical Record Number, Patient Name, Date of Birth, Actual Age, Gender, Patient Initials, Room Number, and Provider Name.

Once a student has completed their clinical day, the student will submit de-identified patient data into the *Typhon* documentation system. The clinical faculty will assess the entries not only for accuracy and completeness of documentation but also to assure no patient identifiers, such as

those listed above, are recognizable in any part of the record.

Penalties

If a student does identify the patient in any way, in any part of the entry, the clinical faculty will delete the record immediately. The student will be counseled, and there may be actions taken by the clinical site where the violation occurred.

Further violations may constitute a corrective action from the clinical faculty involved in regards to the education of students about HIPAA guidelines and regulations. Students who violate the policy a second time may be subject to immediate expulsion from the nursing program.

Faculty Responsibilities

The faculty will review student entries in Typhon (FNP and PMHNP clinical notes) and Canvas.

Occupational Health and Blood-borne Pathogens

Take care to prevent injuries when using:

- Needles, scalpels, and other sharp instruments or devices.
- When handling sharp instruments after procedures.
- When cleaning used instruments and when disposing of used needles.

Never recap used needles, manipulate them with both hands, or use any other technique that involves directing the point of a needle toward any part of the body. Instead, use either a one-handed scoop technique or a mechanical device designed for holding the needle sheath. Do not remove used needles from disposable syringes by hand, and do not bend, break, or manipulate used needles by hand. Place used disposable syringes and needles, scalpel blades, and other sharp items in appropriate puncture-resistant containers located as close as practical to the area in which the items were used. Place reusable syringes and needles in a puncture-resistant container for transport to the reprocessing area.

Use mouthpieces, resuscitation bags, or other ventilation devices as an alternative to mouth-to-mouth resuscitation methods in areas where the need for resuscitation is predictable.

Student Occurrence

Any student involved in a clinical occurrence (e.g., needle stick, patient or student fall/injury, medication error, etc.) must adhere to the following protocol for reporting the occurrence:

- 1. Notify the nurse or provider responsible for the patient immediately.
- 2. Notify the clinical preceptor and/or faculty member as quickly as possible after the occurrence happens. The clinical preceptor and faculty will provide information on appropriate actions to be taken.
- 3. If exposure occurs, complete the Anderson University Exposure Incident Report and provide a copy to the School of Nursing Graduate Chair and Anderson University Health Services.
- 4. Meet any facility policy regarding occurrences. <u>See Exposure Reporting</u>.

Any medical services provided to the nursing student in a clinical facility will be billed against the health insurance of the student. Any financial obligations (e.g., copay, balance due) will be the sole responsibility of the student.

Extended Illness

Students who are absent due to an extended illness are required to bring the Fitness for Duty-Return to

Classroom and Clinical Courses medical clearance form signed by their physician when they return to coursework. As changes to student health status occur (i.e., hospitalization, surgery, pregnancy, etc.), the student is required to inform the Graduate Nursing Chair so that changes may be made to the health record. Full healthcare provider clearance is required. <u>See Fitness for Duty-Return</u>.

A student who appears ill for clinical may be asked by the preceptor to leave and consult a health care provider.

Program Requirements

All required documents must be turned in 60 days before the start of the program. If documents are not turned in, the student may lose their admission status.

All documents must be updated when expired, or the student may not go to clinical. To ensure all documents are up to date, students must check Typhon each semester.

Nursing License

All students must obtain and continue to maintain an unencumbered registered nursing license. Proof of licensure is required prior to admission and 60 days before starting the program. If you do not live in South Carolina and cannot find clinical placement in your state, you will be required to obtain a South Carolina nursing license to complete clinical in South Carolina.

Background Check

In compliance with the affiliation agreements between Anderson University, School of Nursing, and practice facilities/agencies, a criminal background check is required for all nursing students participating in clinical education/ learning experiences. The enforcement of this policy is in conjunction with the facilities'/agencies' compliance with Joint Commission on Accreditation of Healthcare Organizations (JCAHO) Standards that require criminal background checks on anyone providing care, treatment, or services.

The purpose of this policy is to:

- 1. Promote and protect patient/client safety;
- 2. Comply with clinical affiliates that may require a student and faculty background check as a condition of their contract;
- 3. Promote the adequate opportunity for the student to petition or review the convictions to continue in the nursing program; and,
- 4. Provide early identification of students who may have difficulty meeting eligibility for licensure requirements.

Results of the criminal background checks will be made available to the Clinical Placement Coordinator, the Graduate Nursing Chair and the Chief Nursing Administrator by the designated agency/company selected to perform the criminal background check. The Graduate Nursing Chair and Chief Nursing Administrator will make the results available to the individual student if requested. The Graduate Nursing Chair or Chief Nursing Administrator will validate to the clinical facilities/agencies that the student has passed a criminal background check.

New students must complete the criminal background check, and the School of Nursing must receive the results before starting the program. Part of the application process is a signed student acknowledgment that they do not have any criminal history that would disqualify them from clinical practice and/or licensure to the best of their knowledge. A background check that does show a record of criminal activity may prevent a student from enrolling and/or continuing in the nursing program.

A significant criminal background screen means a conviction for any matter (a) listed in the *Laws Governing Nursing in South Carolina*, published by the South Carolina Department of Labor, Licensing and Regulation, Board of Nursing, that would prohibit licensure; (b) noted by the program accrediting agency; and/or (c) identified by a clinical affiliate as unacceptable for clinical practice. The Graduate Nursing Chair and Chief Nursing Administrator have the discretion to require the applicant to provide an explanation for any item that is positive and may consult legal counsel if they feel the results would in any way hamper clinical relations.

All criminal background information will be kept in confidential electronic files by the investigating agency and archived for at least seven years. The Graduate Nursing Chair and Chief Nursing Administrator will have access to these files. A copy of the criminal background check will be kept in a secured cabinet in the School of Nursing.

If a student believes her/his background information is incorrect, she/he will have an opportunity to demonstrate the inaccuracy of the information to the investigating agency. The search of court records and documents is the responsibility of the student in question. The student will not be able to enroll in the nursing program until the matter is resolved.

What does the background check consist of?

- Criminal History Investigation (7 years)
- Sexual Offender Registry/Predator Registry
- Social Security Number Verification
- Positive Identification National Locator with Previous Address
- Maiden/AKA Name Search
- Medicare/Medicaid Sanctioned, Excluded Individuals Report
- Office of Research Integrity (ORI) Search
- Office of Regulatory Affairs (ORA) Search
- FDA Debarment Check
- National Wants & Warrants Submission
- Investigative Application Review (by Licensed Investigator)
- National Healthcare Data Bank (NHDB) Sanction Report
- Misconduct Registry Search
- Executive Order 13224 Terrorism Sanctions Regulations
- Employment Verification (3 most recent employers)

Confidentiality, Security, and HIPAA

The faculty and staff of Anderson University School of Nursing recognize the importance of protecting the private and confidential information regarding clients, their families, employees, staff, and peers, as well as the operation(s) of agencies within which the faculty and students practice.

It is the legal and ethical responsibility of every faculty member and student to maintain and abide by laws relative to privacy, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA) guidelines. This policy includes materials discussed in both the classroom, simulation lab, and clinical settings. Information pertinent to clients may be relayed only to those individuals who have the authority to have that information. All information pertaining to clients is confidential, regardless of

form (verbal, hard copy, film, or computerized form). Unauthorized access, use, or disclosure is illegal.

The faculty and students agree to:

- Follow the HIPAA guidelines.
- Read, understand, and follow confidentiality and privacy policies in each clinical experience. Policies vary from health care agency to agency; student and faculty are responsible for reviewing them at the beginning of every clinical experience;
- Protect the confidentiality of clients, families, employees, peers, and agency at all times;
- Access, use, or share confidential information only as it is essential and allowed by law;
- Never release protected health information to any unidentified source; know the person you are talking to;
- Never talk about clients in public; never discuss confidential information where other clients, visitors, or other employees might overhear, including elevators, dining facilities, and telephones;
- Never leave client records or information where unauthorized persons might see them;
- Never copy information nor remove any part of the client's record from the agency;
- Never use client's names. Safeguards that exist to protect client data include institutional systems of passwords that identify users and their access to privileges in the computer system. The ability to use an electronic signature is a privilege that is granted in accordance with agency policies. It is not a right to have passwords and computer access.

Data Security

Faculty and students agree:

- Never lend or share his or her password with anyone else;
- Never use another individual's login, ID, or password;
- To report breaches or suspected breaches of security to appropriate agency authority immediately;
- To realize that email is not private or secure and therefore does not communicate information via this system.

HIPAA for Student Records

In compliance with HIPAA regulations and privacy of health information, students' health information submitted to the School of Nursing as a requirement for enrollment and participation in clinical learning experiences will be secured in the individual student's records in locked cabinets or in a secure online repository such as Typhon.

The Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule provides a Federal law to protect privacy and confidentiality by preventing a release of an individual's (client's) individually identifiable health information (i.e., the information in a medical record).

The faculty of the Department of Nursing at Anderson University recognizes the importance of protecting health information and understands the responsibility to educate the students as to the requirements of the Health Insurance Portability And Accountability Act of 1996 (HIPAA). HIPAA protects all health care information generated by a healthcare provider, health plan, or facility. This information is protected whether it is verbal, written, or electronic. The following information is a description of the HIPAA guidelines as they apply to students and faculty.

A graduate nursing student who has access to individually identifiable health information must complete HIPAA Privacy Rule training. Typically, this Privacy Rule training must be completed prior to the student beginning clinical. Records of the training sessions are maintained in the Department of Nursing.

Graduate nursing students may view individually identifiable health information for treatment purposes ONLY. In other words, Anderson University graduate students must be involved in the care of the client to view a client's individually identifiable health information (i.e., the contents of a medical record).

Individually identifiable health information may be stored in a variety of formats, including paper, electronic (computers), video, audio, and photographs. Regardless of the format, all individually identifiable health information must be protected. Under no circumstances should any of this information be copied and/or removed from the clinical agency.

Drug Screening

The use of substances that interfere with the judgment and/or motor coordination of nursing students poses an unacceptable risk for clients, Anderson University, the faculty, and clinical agencies. In compliance with clinical agency requirements, Anderson University School of Nursing requires annual drug screening. Drug screening will be completed before the start of the program. Some clinical facilities will require an additional drug screening prior to entering the facility. Students previously tested may be subject to random testing after that while in clinical courses. Random drug screens must be completed within seven days of request. Additionally, upon reasonable suspicion of drug and/or alcohol use in the clinical, classroom, or laboratory settings, Anderson University School of Nursing has the right to require a student to submit to testing for substance abuse at the student's expense. Refusal by a student to submit to screening will result in that student's dismissal from Anderson University School of Nursing.

Procedure for Drug Screening

Before participation in clinical experiences, students will be required to follow the drug screening procedures established by Anderson University School of Nursing. Screens will be conducted by a qualified laboratory (LabCorp ®) using established methods and procedures selected by the School of Nursing through a selected outside vendor. The initial screening must be completed within 60 days prior to the start of the program. If the screen is not completed within 60 days, the student will be responsible for the cost. The student may be screened for amphetamines, cocaine metabolites, marijuana metabolite, opiates, phencyclidine (PCP), propoxyphene, barbiturates, benzodiazepines, methadone, alcohol, and other chemicals as required by clinical agencies. A drug screen will be presumed positive if any of the drugs tested are found. Presumed positives will be confirmed by a second test from the original urine sample. If the screen is positive, the available evidence, including health history, will be used to determine the presence or absence of drug abuse. The School of Nursing will ensure confidentiality of results by making the information available only to the student and appropriate administrators. Random screens may be ordered at the discretion of the graduate faculty.

Refusal to Test

Refusal by a student to submit to testing will result in that student's dismissal from Anderson University School of Nursing.

Positive results

Positive drug screens shall be reviewed by the School of Nursing. If the student tests positive for one or

more of the above drugs and asserts that the positive test is a result of taking a drug prescribed to them by a health care provider, the School of Nursing will review, with the student, the actual prescription, the amount taken daily, the time and amount of the last dose, and the reasons for the prescribed drug. Additionally, the student will be required to contact the prescriber and/or pharmacy and authorize the release of medical information to indicate the illness for which the drug was prescribed, the length of time the student will have to take the drug, and other relevant information.

A violation of the drug screening policy consists of:

- A student cannot provide a valid and current prescription that explains a positive drug screen
- A positive result for illegal substances or alcohol
- Refusal to provide a drug screen sample for testing upon request

These instances may result in dismissal from the School of Nursing. A recommendation will be provided to the student for community resources in the event of a positive drug screen for illegal substances or alcohol.

• CBD oil may show up on a drug screen as THC. If THC is found on the drug screen, this is considered a positive drug screen, and the student will be dismissed from the program. Therefore, the student is encouraged not to use any CBD-type product

Reasonable Suspicion of Drug/Alcohol Use

In addition to the pre-clinical screening process for substance abuse, for the protection of patients, faculty, staff, and students, the School of Nursing has the right to require a student to submit to testing for substance abuse at the student's expense when a faculty member has reasonable cause to believe that a student is under the influence of alcohol and other drugs including:

- 1. Observable phenomena, such as direct observation of drug use or the physical symptoms or manifestations of being under the influence of a drug or alcohol, such as, but not limited to, slurred speech, impaired physical coordination, inappropriate comments or behaviors, pupillary changes, noticeable change in grooming habits or odor of alcohol or other drugs
- 2. Abnormal conduct or erratic behavior, absenteeism, tardiness, or deterioration in performance
- 3. A report of drug use provided by credible sources
- 4. Evidence of tampering with a drug test
- 5. Information that the individual has caused or contributed to the harm of self, visitors, other staff, or patient while under the influence of drugs
- 6. Evidence of involvement in the use, possession, sale, solicitation, or transfer of drugs

If a faculty member observes such behavior, and if such behavior is observed or validated by another faculty member or clinical agency staff member, the faculty member must excuse or remove the student from the educational or patient setting immediately and contact the Chief Nursing Administrator in order to review the situation and authorize the faculty member to make arrangements for testing. The faculty member is to make arrangements to have the testing performed immediately. If a drug use/abuse incident occurs while on a clinical unit, the student will be responsible for obtaining transportation to the designated lab or other testing agency; the student will not be allowed to drive from the clinical facility. The student will be requested to sign an informed consent to be tested before the specimen is collected at the designated testing agency.

Cardiopulmonary Resuscitation (CPR) Certification

All Anderson University graduate nursing students must be American Heart Association CPR certified. New students must provide documentation of their certification prior to the start of the program. Continuing students should provide documentation of recertification at the beginning of each academic year. Students failing to provide documentation will be prohibited from attending clinical experiences and progressing in the graduate nursing program.

Professional Liability Insurance

Students enrolled in Anderson University School of Nursing will be covered by a general liability umbrella policy maintained by Anderson University, which does not cover students for professional liability. Students are required to have their own professional liability insurance policy. Details and sample organizations that provide this service will be included in the admission packet for the graduate nursing program.

Health Insurance

Health insurance is required for all Anderson University nursing students throughout the nursing program in order to participate in clinical courses. Students must show evidence of having insurance annually. Students are required to sign a statement indicating their understanding of maintaining personal health insurance at all times, and failure to do so will result in dismissal from the program. Students are personally liable for health/medical costs incurred while attending the University.

Health Screening

Before attending clinical experiences, students must provide documentation of current immunizations. <u>See Immunization form</u> in the admissions packet.

Tuberculosis screening –Students must complete an initial two-step PPD series, i.e., two tests administered one to three weeks apart. One-step PPD yearly screenings are required after that. If the student has a positive result, a chest x-ray no more than three (3) months prior to the first clinical experience is required. Students with prior positive PPD will need a clear chest x-ray within six (6) months of the first semester with updates every 3-5 years, depending on the level of exposure or risk.

Verification of Masters Clinical Hours

For students entering the MSN-DNP program, verification of clinical hours in their prior program must be completed and <u>submitted with other admission information</u>. The DNP Residency faculty may also ask for this at the beginning of the Residency program. Even if the student comes into the program with more than 500 hours, they will still be required to fulfill the total number of Residency hours. Anderson University requires 500 hours for the Advanced Practice Residency and 800 hours for the Executive Leadership Residency.

Unsafe/Unethical Student Practice

The faculty of the School of Nursing has an academic, legal and ethical responsibility to protect the public and health care community from unsafe nursing practice. It is within this context that students can be disciplined or dismissed from the Nursing Program for practice, which threatens or has the potential to threaten the safety or well-being of a client, family member, another student, a faculty member or other health care provider.

An unsafe/ unethical practice is defined as:

- An act or behavior of the type which violates the South Carolina Nursing Practice Act
- An act or behavior, which violates the Code of Ethics for Nurses of the American Nurses' Association

- An act or behavior, which violates the objectives and/or policies of the School of Nursing
- An act or behavior, which violates the objectives and/or policies of each Nursing Course
- An act or behavior, which violates the objectives and/or policies of the Health Care Agency
- An act or behavior, which constitutes nursing practice for which a student is not authorized or educated at the time of the incident

When an incident occurs which a faculty member believes may constitute an unsafe/unethical practice, the faculty member shall immediately notify the student and instruct the student to leave the clinical setting; the faculty member will inform the Graduate Nursing Chair, who will inform the Chief Nursing Administrator. The student may receive a course failure.

The program coordinator, Graduate Nursing, and Chief Nursing Administrator review all of the written documentation involved in the incident to determine whether there are grounds that unsafe/unethical practice has occurred. If it is determined at this point that critically unsafe/unethical practice and/or behavior has occurred, the Graduate Nursing Chair will meet with the Chief Nursing Administrator to review all the written documentation and for providing recommendations with regard to the status of the student.

After a gravely unsafe incident, a recommendation for dismissal from the nursing course and/or program is made, the Chief Nursing Administrator will refer the matter to the ARG (Admission, Retention, and Graduation) Subcommittee. The student has the right of due process and will be notified in writing at least three days prior to the scheduled meeting and provided an opportunity to respond to the allegations. The student will be notified in writing of the ARG Subcommittee's decision. The student has the right to appeal the ARG's decision. Refer to the Anderson University Academic Catalog.

Transportation

Students are required to provide their own transportation to clinical agencies. Students are reminded that if they transport other classmates, they are assuming personal liability in the event of an accident.

Emergency Contact Policy

Students will be required to provide the School of Nursing with the name and telephone number of someone close to the student who could be contacted in case of an emergency. Students should provide the School of Nursing Graduate Programs telephone number (864-622-6088) to family members who may need to contact the student in case of an emergency. Should this event occur, the student's location in class or clinical will be determined. The faculty will be contacted by the School of Nursing and will then inform the student.

Student Records

Student records will be maintained in secure electronic databases, and certain documents may be left in a secure physical location for accreditation purposes. The Enrollment Coordinator will keep documents related to admissions, such as transcripts and application materials. Typhon will serve as a repository for clinical documents only and not contain other grades or sensitive information related to counseling. The nursing school's policy is based on three record-keeping processes. These are:

- Active student records
- Graduated student records A file will be kept in the secure electronic database pertaining to the prior academic processing and progress notes, the academic success of the student,

student health records, and materials noting the eligibility for taking board certification exam and applying for an Advance Practice license. These records will be kept for three years after graduation and then moved to a secured storage environment

• Dismissed/withdrawn student records – A file will be kept in the secure electronic database pertaining to the student's academic progress, academic advising and progress notes, and the rationale and grievance process noted in the student being dismissed from the nursing school. These records will be kept for four years after the student was initially enrolled. At this point, the records will be shredded or deleted

The individuals having access to these files include administration, faculty, and staff serving in the nursing school. If the student files a verbal or written request to obtain any of his/her academic records, the university process of sharing the records will be implemented.

Dress Code

The School of Nursing requires the students to wear the official Anderson University white coat and picture name badge while in the clinical facility. Dress should be professional and adhere to the policies of the agency. In the PMHNP clinical settings, white coats may or not be appropriate. Please refer to your agency policy.

Jewelry: Only the following jewelry may be worn:

- a. Smooth wedding bands with no stones
- b. One pair of small stud style earrings silver, gold or white. Only one earring per ear should be worn and size should not exceed 8mm. No dangle or loop earrings with stones may be worn. No other visible piercings are permitted
- c. Medic Alert necklace or bracelet
- d. No oral jewelry allowed
- e. Body Tattoos or other Facial Jewelry: All body tattoos and other facial jewelry must be concealed or covered

Personal Hygiene: Personal cleanliness is a prerequisite for client care. Regular bathing, hair washing, and use of deodorant are part of personal cleanliness. Perfume, cologne, scented lotion, or body spray is not allowed.

Hair: Hair must be neat at all times. Long hair must be pulled back or neatly restrained. Extreme hairstyles and/or colors are to be avoided. Devices used to restrain the hair are to be unobtrusive and of color consistent with the hair color. Hair color is to be that typically occurring naturally in humans, i.e. black, brown, blonde, natural shades of red and gray. The final determination of appropriate appearance of hair for any given clinical experience will be made by the faculty member responsible for each course.

Beards and mustaches should be kept trim and neat.

- Makeup: Makeup may be worn. It should be adequate to look attractive, but not so much as to attract attention.
- Fingernails: Nails should be kept clean and short enough to avoid scratching the patient. They should be even with the end of the fingers. No artificial nails, acrylic nails, or gel nails are allowed. Only clear, unchipped nail polish is allowed.

Gum Chewing: Chewing gum will NOT be permitted in the clinical facility.

Smoking: Anderson University is a smoke-free, tobacco-free campus. The use of tobacco products is prohibited on campus grounds. Smoking is not permitted while in student uniform/professional dress before or during any clinical/laboratory activity. Should the odor of tobacco be detected by the faculty or clinical facilitator, the student will be asked to leave, and the student will receive an unexcused absence for that day.

Facilities and Services

The main campus for the Undergraduate programs in the School of Nursing is a state-of-the-art facility within a 3 level structure containing approximately 26,000 square feet connected to Vandiver Hall. The building has an elevator to access the 2nd floor. The building has wireless access to the internet, all classrooms, offices, debriefing rooms, simulation bays, and Nursing Skills and Health Assessment Labs. All labs and classrooms have AV equipment to support the learning environment.

The first floor of this building contains the following:

- Reception area
- Administrative offices (College of Health Professions Dean and administrative assistant, Chief Nursing Administrator and administrative assistant, and Undergraduate Chair)
- Conference room seating up to 20 guests with kitchen facility
- Small conference room seating 6 guests
- Secured records storage
- Copier and mail room
- Student lounge (400 square feet)
- Classroom (40 student capacity)
- Health assessment lab
- Faculty lounge
- Faculty offices (6)
- Clinical instructor office
- Restroom facilities

The second floor contains:

- Two amphitheater-style classrooms (48 student capacity each)
- Nursing skills lab
- State of the art human simulation environment
- Two debriefing rooms (6 student capacity each)
- Simulation Coordinator office
- Human cadaver dissection lab
- Restroom facilities
- Equipment storage space

Health Assessment Laboratory

The health assessment lab contains 10 exam tables (with equipment storage).

Nursing Skills Laboratory

The nursing skill lab contains 10 hospital beds (with equipment storage)

- Full body low-fidelity manikins
- Task trainers (IV arms, ostomy training, blood pressure, upper torsos)

Simulation Learning Environment

The Simulation lab contains 5 simulation rooms at the Anderson campus and 2 Simulation rooms at the University Center in Greenville (UCG). Combined resources include:

- Labor and delivery (birthing simulator and infant simulator), Pediatric simulator, Adult medicalsurgical simulator, Adult ICU simulator, Trauma/ED simulator, and a pelvic model for GYN exams.
- Simulators are wireless for portability
- Plasma screens on the walls in the Anderson simulation environment can provide information to students (vital signs, power points, etc.)
- Each simulation room in Anderson has audio-video recording capability and a control room. Rooms at UCG have intercom ability but no recording.
- Electronic medication dispensing cart
- Defibrillator
- 12 lead EKG
- Emergency airway cart
- Ventilator
- IV and feeding tube pumps

Human Cadaver Dissection Laboratory

The human cadaver dissection lab contains 4 dissection tables and cooler with racks for specimen storage. Anderson University generally has nine cadavers available for teaching purposes. Both graduates and undergraduates are able to utilize this resource.

Student Lounge

In Anderson, the student lounge provides students a place to study, relax and fellowship with other nursing students. It includes refrigerator and microwave access. At the UCG campus, a similar student lounge is available as well as common areas for student fellowship.

Graduate Program Facilities

The Graduate Programs for the School of Nursing are housed at the University Center of Greenville (UCG). In July of 2017, the School of Nursing moved into an 8750 square foot space along with the Physical Therapy program in a combined College of Health Professions space. Approximately 5000 square feet is office space, 1,100 is common/hall areas, a 400 square feet lounge area, a 400 square feet restroom space, a 400 square feet for conference room space, and 300 square feet for a faculty workroom. In addition, a portion of the office space was designed to accommodate two simulation rooms set up as provider offices with a control room between them, a procedure room for suturing or similar procedures, and a debriefing room, all to enhance the on-campus intensive experience for graduate students. In 2021, additional space was acquired for the Physical Therapy program and can be used by Graduate Nursing. This space (2347 square feet) includes a treatment room, a lounge, and a small work room.

The University Center Greenville offers/provides:

- 150,000 square feet of total space.
- 50,000 square feet of the 150,000 is space dedicated to a particular Member University for staff, faculty, and dedicated classrooms.
- 100,000 square feet of shared space for dozens of classrooms, computer labs, 7,000 square foot library with computers and student meeting rooms, a 3,000 square foot auditorium, conference rooms, a boardroom and common areas.
- Technology Infrastructure (high speed research university "internet 2", Charter Business/Commercial, and campus wide state of the art Aerohive wireless.
- State of the art instructional technology in classrooms consisting of multiple large LCD displays, mid-range Dell computers, Dell touchscreen monitors, instructional software, and stereo sound.
- Extensive internal and external technical support staff/resources.
- Staff and senior leadership focused on regional higher education needs and academic program alignment, Member University service/support, operations, marketing/advertising, and community engagement.
- Availability from 8:00am to 9:00pm Monday through Thursday, 8:00am to 5:00pm Friday and Saturday, and 1:00pm to 5:00pm Sunday.

Library

In 2007, the university opened the grand new Thrift Library on the AU main campus containing a computer lab, café, curriculum lab, special collections, music technology lab, 100-seat multimedia center, conference room and 10 group study rooms. The library's 150,000+ volume collection includes traditional books and media as well as 50,000+ eBooks, 100+ databases and more than 50,000 full text periodicals. The library supports the University's educational mission through its resources and services by teaching information literacy and by encouraging its users to be self-directed, lifelong learners. Additional References and Journals have been purchased by the School of Nursing to provide the most current and up-to-date resources necessary for the program. Thrift Library was renovated in fall 2017 to make it into a Learning Commons environment. In summer 2020, Thrift library migrated to a new library catalog and discovery service, OneSearch. OneSearch is a search platform that aggregates the electronic and print resources and allows for searching in one central location.

Bookstore

The bookstore is located on the AU main campus in the Student Center and carries a wide variety of required and optional reading, course supplies, clothing, and other merchandise.

Financial Aid

Making a college education affordable and accessible is a vital part of our mission at Anderson University. There are many different sources of financial aid available to qualified students.

Deadline for application for financial aid for enrolled students is July 15th of each year. They student is responsible for obtaining adequate funds. Funds may be obtained in the form of a Stafford Loan or alternative loan. See office of financial aid for details.

Financial Aid may be available for Masters and Doctoral students, but federal financial aid is not available for post-graduate certificate programs.

Human Subjects Committee (HSC)

The Human Subjects Committee (HSC) at Anderson University is established pursuant to federal regulations. The HSC is a committee composed of faculty from multiple disciplines who review all proposed AU human subjects research to ensure that the safety and welfare of subjects are protected. All human subject research requires review and approval by the HSC prior to subject recruitment and data collection and prior to the use of data or private information. The AU HSC members have the responsibility for reviewing all research involving human subjects conducted by AU faculty, students, or staff, regardless of the source of funding.

Anderson University encourages the conduct of research in the various colleges and in collaboration with other educational institutions, agencies, and organizations. While respecting the right of faculty to full academic freedom in research, the university is firmly committed to adhering to basic ethical principles underlying the acceptable conduct of research involving human subjects.

There are three categories of HSC review of research involving human participants. A complete description of each category and further information regarding the Human Subjects Committee and paperwork will be included in the appropriate classes where the student will be developing the scholarly project. The three categories are:

- 1. Exempt from review
- 2. Expedited review
- 3. Full review

All research using human participants, regardless of the category, must be submitted to the HSC <u>PRIOR</u> to beginning a research project. Use the criteria in the appendices to determine which category of review is needed. The HSC committee meets the second Monday of the month, September to April.The DNP Program Coordinator will obtain the Chief Nursing Administrator's signature and submit the forms to HSC. <u>ALL</u> required forms need to be submitted via email to the Human Subjects Committee Chair one week prior to the meeting day

DNP Scholarly Project

The purpose of a DNP scholarly project is to provide a program deliverable that allows the student to demonstrate the eight Essentials of Doctoral Education by the American Association of Colleges of Nursing (AACN) while also demonstrating mastery with advanced knowledge. The student will be guided through the process of successful completion of an evidence-based practice project, starting with proposal development, Institutional Review Board (IRB) submission, implementation, evaluation, and dissemination of the findings.

Students will be given the opportunity to partner with a clinical advisor who is an expert in the field of study and will help guide and supervise their projects. Also, a faculty member will review their work and assist with the completion of the project. The expectations of a clinical advisor, faculty advisor, and the student are included in the **Clinical Advisor Packet** for **DNP Scholarly Project**; see your faculty or Canvas shell for this packet.

DNP Scholarly Projects/Capstone Projects Sample Titles

Examples of DNP scholarly projects from Anderson University's DNP Program and other DNP Programs are noted below as a guide.

Anderson University School of Nursing Doctor of Nursing Program

- The Impact of Congestive Heart Failure Guidelines on Telemetry Floor Nurse Knowledge Levels and 30-Day Readmission Rates
- Heart Failure Education for Improving Documentation of Intake and Output by Cardiovascular Nurses: A Quality Improvement Project
- Increasing the Utilization of the Pediatric Asthma Score in a Pediatric Emergency Department
- Standardized Rounding on Patients Within an Emergency Department Setting: A Feasibility Study
- Utilization of a Real-Time Polling System to Increase College Student Awareness of Binge Drinking
- Exploration of the Link Between Exercise and Quality of Life in Parkinson's Disease
- Improving the Knowledge and Self-Efficacy of Palliative Care Among Oncology Nurses
- Implementing Pediatric Fluoride Varnish Application in a Rural Primary Care Medical Office: A Feasibility Study
- Pediatric Obesity: Is There Value in Video-Based Education in Primary Care?
- Diabetes Self-Management Education Support (DSMES), Provider Attitude and Referral Rates
- PHQ-9 Scores Relative to Hospital Length of Stay in Adults with Depression: A Correlational Study
- Team Building Exercises in a State Funded Psychiatric Hospital: Can They Increase Job Satisfaction?
- Increase Perioperative Nurses' Engagement with use of a Stoplight Tool: A Feasibility Study
- Atrial Fibrillation: Finding Evidence-based Practice Solutions using Established Treatment Pathways
- Weekend Diversional Activities in the Psychiatric Setting: A Nurse Driven Protocol
- Pre-surgical Education to Improve Self-efficacy and Pain Perception in Lumbar Fusion Patients: A Quality Improvement Project
- Measuring the Impact of Palliative Care Education in the Primary Care Setting
- Empowerment Teaching Approach with Peer Support to Improve Patient Self-Efficacy in the Clinical Management of Atrial Fibrillation: A DNP Pilot Study
- Implementing Mindfulness Training to Reduce Nurse Burnout: A Feasibility Study
- A Quality Improvement DNP Initiative to Decrease 30-day Readmission Rates in a Long-Term Care Facility
- Improved Communication using SNAPPI: A DNP Pilot Study



These project titles were shared by the universities as listed as examples of projects completed by DNP students. The abstracts are not included. DNP graduates and/or their faculty advisers' names are not listed.

We welcome additional project titles. Please contact Candi Hoffman in the NONPF office at 202-289-8044 or via email at choffman@nonpf.org

UAB School of Nursing Doctor of Nursing Practice Program

- Development of a Multidisciplinary Emergency Medicine Triage System
- Smoking Cessation Program for Patients with Coronary Artery Disease
- Safe Foot Care in African American Type 2 Diabetes
- Artificial Hydration at End of Life: Evidence Based Guidelines for Approaching Decision-Making Conversations
- Promoting Nutritional Awareness and Improving Dietary Habits: A Community Based Approach
- A Multi-factorial Tailored Intervention to Improve Adherence in Uninsured and Underserved African Americans with Hypertension
- Evidence Based Practice Update for Nurse Practitioners in Urgent Care
- Standardized Procedure for Assessment and Documentation of Pain in LTC
- Gerontological Nursing Education for Implementation of an Acute Care of Elders (ACE) Model
- Education Incarcerated African American Males on Sexually Transmitted Diseases
- The Effect of an Evidence-Based Support Intervention to Facilitate Treatment Preference Decision Making by Surrogates of Persons with Incapacitating Dementia
- An Interdisciplinary Project Using a Solution-Focused Approach to Update Healthcare Provider's Knowledge of Diabetes in the Delivery of Consistent, Accurate, and Adequate Diabetes Education
- Can an Educational Intervention Lower Blood Sugar Levels in Latinos at Risk for Developing Diabetes Mellitus
- Strategies to Improve Patient Flow in an Urgent Care Facility
- Empowering Community Health: A Faith-Based Approach
- An Investigation of Perceived Barriers to Pain Management Among Nursing Staff Working in a Midwestern Long-Term Care Facility

University of Kentucky School of Nursing Doctor of Nursing Practice Program

- Evaluation of nurse acceptance and medication errors during implementation of computerized prescriber order entry system at a university hospital
- A Medication Safety Education Program to Reduce the Risk of Harm Caused by Medication Errors

- Teenage Pregnancy: An Impact Evaluation of the Healthy Choices Abstinence Program
- Title of Project: Integrated Model of Dementia Care in a Nursing Home
- An Evaluation of a School Based Asthma Protocol
- A Heart Failure Self Management
- Tele=Visitation: A Strategy to Reduce Distress Among Isolated Blood and Marrow Transplant Patients Post-transplantation
- An Evidence-Based Toolkit to Prevent Meningococcal Meningitis in College Students
- Implementation and Evaluation of an Evidence-Based Oral Care Guideline in a Mechanically Ventilated Patient Population
- Self-Reported Pain Diary For Assessment Of Chronic Pain In The Communicative, Cognitively Intact Nursing Home Resident
- Transition to Community Pilot Study
- Implementation of Group Visits into a Family Medicine Clinic and Residency Training Program
- An Evidence Based Ovarian Cancer Education Toolkit: A Pilot Study
- The Effectiveness of a Palliative Care Program for Individuals with
- Chronic Pain in Society: A Unique Approach for Primary Care Advanced Disease: A Pilot Study
- Consequences, Prevention and Treatment of Childhood Overweight and Obesity
- S.O.S. Project (Supporting Other Sisters)
- Mothers Offering Mothers Support (MOMS): A Pilot Study Intervention to Increase Social Support and Decrease Depression in Postpartum Women
- Prevalence of Symptoms in Multiple Sclerosis Patients
- Obesity Prevention in Young Children

University of Maryland School of Nursing Doctor of Nursing Practice Program

- Measures of Pain and Acceptance of Ductal Lavage in Women from Families at High Genetic Risk of Breast Cancer
- The Use of Documentation Prompts as an Intervention Strategy for Primary Care Providers Managing Children in Out of Home Placement
- Predictors of the First-year Nursing Student at Risk of Early Departure
- The Predictive Value of Second Trimester Blood Pressures on the Development of Preeclampsia
- Use of the Electronic Health Record in the Measurement of Nurse Practitioner Performance
- Nursing Informatics Certification and Competencies: A Report on the Current State and Recommendations for the Future
- Blunt Cerebrovascular Injuries at the R. Adams Cowley Shock Trauma Center and the University of Maryland Medical Center: A Systems Analysis at a Tertiary Care Center
- Perceptions of Body Image, Body Satisfaction, and Knowledge of Obesity-Related Health Risks among African American College Students

Duke University School of Nursing Doctor of Nursing Practice Program

- Providing Oncology Patients with Online Access to Lab Results at Memorial Sloan Kettering Cancer Center
- Implementation of Daily Goal Sheets in the Cardiothoracic ICU
- W.A.T.C.H. Mobile Health Clinic (a performance improvement project based on the Diffusion of Innovation Model focusing on colorectal cancer screening)

- Improving adolescent diabetes management through a school-based diabetes care initiative
- Divine Design: Development of a Web-Based Health Information Database and Call Center
- The Impact of the ACES (Asthma Control and Elimination of Symptoms) Program on Children with Asthma
- Adapting a Duke University Model of Advanced Practice Nurses in Germany: A Pilot Program
- Translation of Autism Screening Research into Practice

Curriculum Plans

Family Nurse Practitioner Tracks

| BSN-MSN | | | - |
|---------|---|----------------|---------------|
| Course | FAMILY NURSE PRACTITIONER TRACK (FNP) | MSN | Semester |
| Number | | Essential | Credit |
| | | | Hours |
| | Semester 1 (Fall) | | 1 |
| NUR 540 | APRN Procedures in Primary Care (0,1) | IX | 1 |
| NUR 591 | Advanced Pathophysiology | Ι | 3 |
| NUR 592 | Advanced Physical Assessment (diagnostics) | Ι | 3 |
| NUR 508 | Informatics in Healthcare Delivery | V | 3 |
| NUR 506 | Health Policy and Advocacy | VI | 3 |
| | | | 1 |
| | Semester 2 (Spring) | | • |
| NUR 510 | Faith & Learning Worldviews | | 2 |
| NUR 593 | Advanced Pharmacology | Ι | 3 |
| NUR 541 | Primary Care Across the Lifespan | IX | 3 |
| NUR 543 | FNP I (200 Clinical Hours – 0,2) | IX | 2 |
| BUS 573 | Improving Healthcare Quality, Safety, & Outcomes | III | 3 |
| | | | 1 |
| | Semester 3 (Summer) | | _ |
| NUR 640 | Care of Special Populations | IX | 3 |
| NUR 641 | FNP II (200 Clinical Hours -0,2) | IX | 2 |
| NUR 601 | Organizational & Systems Leadership | II | 3 |
| NUR 603 | Care of Aging Adults | IX | 2 |
| | | | 1 |
| | Semester 4 (Fall) | | |
| NUR 602 | Interprofessional Collaboration in Health Promotion | VII, VIII | 3 |
| NUR 643 | Integrated Care of Individuals and Communities | VIII, IX | 3 |
| NUR 646 | FNP III Practicum (200 Clinical Hours – 0,2) | IX | 2 |
| NUR 645 | FNP Certification Review | | 1 |
| NUR 507 | Integration of Scholarship into Practice | IV | 3 |
| | | | 1 |
| | То | tal semester c | redit hours 4 |

| Course | FAMILY NURSE PRACTITIONER TRACK (FNP) | DNP | MSN | Semester |
|---------|--|--------------|-------------------------|--------------|
| Number | | Essential | Essential | Credit Hours |
| | Semester 1 (Fall) | 1 | | |
| NUR 540 | APRN Procedures in Primary Care (0,1) | | IX | 1 |
| NUR 591 | Advanced Pathophysiology | | I | 3 |
| NUR 592 | Advanced Physical Assessment (diagnostics) | | Ι | 3 |
| | Semester 2 (Spring) | | | 7 |
| NUR 510 | Faith & Learning Worldviews | | | 2 |
| NUR 593 | Advanced Pharmacology | | Ι | 3 |
| NUR 541 | Primary Care Across the Lifespan | | IX | 3 |
| NUR 543 | FNP I (200 Clinical Hours – 0,2) | | IX IX | 2 |
| NUK 343 | 11011 - 0,2) | | ΙΛ | 10 |
| | Semester 3 (Summer) | | | 10 |
| NUR 640 | Care of Special Populations | | IX | 3 |
| NUR 641 | FNP II (200 Clinical Hours – 0,2) | | IX | 2 |
| NUR 715 | Scholarly Writing | | | 2 |
| NUR 603 | Care of Aging Adults | IX | | 2 |
| | | | | |
| | Semester 4 (Fall) | | | - |
| NUR 507 | Integration of Scholarship into Practice | | IV | 3 |
| NUR 643 | Integrated Care of Individuals and Communities | | VIII, IX | 3 |
| NUR 646 | FNP III Practicum (200 Clinical Hours – 0,2) | | IX | 2 |
| NUR 645 | FNP Certification Review | | VIII | 1 |
| | | | | 9 |
| | Semester 5 (Spring) | | | |
| NUR 703 | Clinical Epidemiology and Analytical Methods | III, VII | | 3 |
| NUR 701 | Scientific Underpinning for Nursing Practice | | | 3 |
| NUR 780 | DNP Residency I – Advance Practice (100 Clinical | VI,VIII | | 1 |
| | Hours) | | | |
| | | | | |
| NUE 702 | Semester 6 (Summer) | TT | Γ | |
| NUR 702 | DNP Project I-IRB | III | | 3 |
| NUR 704 | Clinical Scholarship for Evidence-Based Practice | I, III | | 3 |
| NUR 781 | DNP Residency II – Advance Practice (100 Clinical Hours) | VI,VII,VIII | | 1 |
| | nours) | | | -1 |
| | Semester 7 (Fall) | | | |
| NUR 705 | DNP Project II – Implementation | IV,VI | | 3 |
| NUR 705 | Advocacy in Healthcare Policy | V | VI | 3 |
| NUR 707 | Interprofessional Collaboration for Improving Health | VI | VII, VIII | 3 |
| non /o/ | Outcomes | V 1 | , <u>,</u> , , <u>,</u> | 5 |
| NUR 782 | DNP Residency III – Advance Practice (100 Clinical | VI, VII,VIII | | 1 |
| | Hours) | | | |
| | | • | • | 10 |
| | Semester 8 (Spring) | | | |
| NUR 708 | DNP Project III - Dissemination | III, VIII | | 3 |
| BUS 573 | Improving Healthcare Quality, Safety, & Outcomes | | III | 3 |
| NUR 790 | DNP Transition to Practice (200 Clinical Hours) | VI,VII,VIII | | 2 |

| | Semester 9 (Summ | ner) | | | |
|---------|--|------|--------------|----------------|------|
| NUR 709 | Organizational & Systems Leadership- Role Development | II | II | 3 | |
| NUR 710 | Applied Informatics and Change Systems | IV | | 3 | |
| NUR 711 | DNP Project Extension | | | 1 | |
| | | | | | 7 |
| | | | Total Semest | er Credit Hour | s 74 |

Psychiatric Mental Health Nurse Practitioner Tracks

| Course | PSYCHIATRIC MENTAL HEALTH NURSE | MSN | Semester |
|---------|---|---------------|----------|
| Number | PRACTITIONER TRACK (PMHNP) | Essential | Credit |
| | | | Hours |
| | Semester 1 (Fall) | | |
| NUR 591 | Advanced Pathophysiology | Ι | 3 |
| NUR 592 | Advanced Physical Assessment (Diagnostics) | Ι | 3 |
| NUR 506 | Health Policy and Advocacy | VI | 3 |
| NUR 508 | Informatics in Healthcare Delivery | V | 3 |
| | | | 1 |
| | Semester 2 (Spring) | • | |
| NUR 510 | Faith & Learning Worldviews | | 2 |
| NUR 593 | Advanced Pharmacology | Ι | 3 |
| NUR 650 | Advanced Assessment Processes in Mental Healthcare Across | IV, V, VI, | 3 |
| | the Lifespan | VII, VIII, | |
| BUS 573 | Improving Healthcare Quality, Safety, & Outcomes | III | 3 |
| NUR 550 | PMHNP Introduction to the Clinical Experience (0,1) | IX | 1 |
| | | | 1 |
| | Semester 3 (Summer) | 1 | |
| NUR 651 | Management of Behavioral Health Populations Across the | IV, V, VI, | 3 |
| | Lifespan | VII, VIII, | |
| NUR 554 | PMHNP I (200 Clinical hours – 0,2) | IX | 2 |
| NUR 652 | Psychopharmacological Therapies Across the Lifespan | I | 3 |
| NUR 601 | Organizational & Systems Leadership | II | 3 |
| NUR 603 | Care of Aging Adults | IX | 2 |
| | | | 1 |
| | Semester 4 (Fall) | ** * * * | |
| NUR 653 | Management of the Complex Mental Health Client Across the | IV, V, | 3 |
| | Lifespan | VII, IX | 2 |
| NUR 656 | PMHNP II (200 Clinical Hours – 0,2) | IX | 2 |
| NUR 602 | Interprofessional Collaboration in Health Promotion | VII, VIII | 3 |
| NUR 655 | PMHNP Certification Review | | 1 |
| NUR 507 | Integration of Scholarship into Practice | IV | 3 |
| | - * | 1 | 1 |
| | Tota | l semester cr | |

| BSN-DNP |
|---------|
|---------|

| Course Number | PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER (PMHNP) | DNP Essential | MSN Essentials | Semester Credit Hours | |
|--|--|--|-------------------------|-----------------------------|----|
| | Semester 1 (Fall) | | | nours | |
| NUR 591 | Advanced Pathophysiology | | Ι | 3 | |
| NUR 592 | Advanced Physical Assessment (Diagnostics) | | Ι | 3 | |
| | | | | · | 6 |
| | Semester 2 (Spring) | Г | | | |
| NUR 510 | Faith & Learning Worldviews | | | 2 | |
| NUR 593 | Advanced Pharmacology | | I | 3 | |
| NUR 650 | Advanced Assessment Processes in Mental Healthcare Across the Lifespan | | IV, V, VI, VII, VIII | 3 | |
| NUR 550 | PMHNP Introduction to the Clinical Experience (100 clinical hours- 0,1) | | IX | 1 | |
| | | | | | 9 |
| NUD 651 | Semester 3 (Summer) | | | 2 | |
| NUR 651 | Management of Behavioral Health Populations Across the Lifespan | | IV, V, VI, VII, VIII | 3 | |
| NUR 554 | PMHNP I (200 Clinical Hours – 0,2) | | IX | 2 | |
| NUR 652 | Psychopharmacological Therapies Across the Lifespan | | Ι | 3 | |
| NUR 603 | Care of Aging Adults | | IX | 2 | |
| NUR 715 | Scholarly Writing | | | 2 | |
| | Semester 4 (Fall) | | | | 12 |
| NUR 507 | Integration of Scholarship into Practice | | IV | 3 | |
| NUR 653 | Management of the Complex Mental Health Client Across the | | IV, V, VII, | 3 | |
| NUR 656 | Lifespan | | IX | 2 | |
| NUR 655 | PMHNP II (200 Clinical Hours – 0,2) PMHNP Certification Review | | IX | 2 | |
| NOK 055 | | | | 1 | 9 |
| | Semester 5 (Spring) | _ | | - | |
| NUR 703 | Clinical Epidemiology and Analytical Methods | III, VII | | 3 | |
| NUR 701 | Scientific Underpinnings for Nursing Practice | Ι | | 3 | |
| NUR 780 | DNP Residency I – Advance Practice (100 Clinical Hours) | VI, VIII | | 1 | |
| | Someoton ((Summer)) | | | | 7 |
| NUR 702 | Semester 6 (Summer) DNP Project I-IRB | III | | 3 | |
| | Clinical Scholarship for Evidence-Based Practice | III I, III | | 3 | |
| NILID 704 | | 1, 111 | | | |
| NUR 704 NUR 781 | DNP Residency II – Advance Practice (100 Clinical Hours) | VI, VII VIII | | 1 | |
| | | VI, VII,VIII | | 1 | 7 |
| NUR 781 | DNP Residency II – Advance Practice (100 Clinical Hours) Semester 7 (Fall) | VII,VIII | | | 7 |
| NUR 781 NUR 705 | DNP Residency II – Advance Practice (100 Clinical Hours) Semester 7 (Fall) DNP Project II – Implementation | VII,VIII IV, VI | | 3 | 7 |
| NUR 781 NUR 705 NUR 706 | DNP Residency II – Advance Practice (100 Clinical Hours) Semester 7 (Fall) DNP Project II – Implementation Advocacy in Healthcare Policy | VII,VIII IV, VI V | VI | 3 3 | 7 |
| NUR 781 NUR 705 NUR 706 NUR 707 | DNP Residency II – Advance Practice (100 Clinical Hours) Semester 7 (Fall) DNP Project II – Implementation Advocacy in Healthcare Policy Interprofessional Collaboration for Improving Health Outcomes | VII,VIII IV, VI V VI | VI | 3 3 3 | 7 |
| NUR 781 NUR 705 NUR 706 | DNP Residency II – Advance Practice (100 Clinical Hours) Semester 7 (Fall) DNP Project II – Implementation Advocacy in Healthcare Policy | VII,VIII IV, VI V | VI | 3 3 | 7 |
| NUR 781 NUR 705 NUR 706 NUR 707 | DNP Residency II – Advance Practice (100 Clinical Hours) Semester 7 (Fall) DNP Project II – Implementation Advocacy in Healthcare Policy Interprofessional Collaboration for Improving Health Outcomes | VII,VIII IV, VI V VI VI VI, | VI | 3 3 3 1 | 10 |

| BUS 573 | Improving Healthcare, Quality, Safety, & Outcomes | | III | 3 | | |
|---------------------|--|----------|-----|---|---|--|
| NUR 790 | DNP Transition to Practice (200 Clinical Hours) | VI, | | 2 | | |
| | | VII,VIII | | | | |
| | | | | | 8 | |
| Semester 9 (Summer) | | | | | | |
| NUR 709 | Organizational & Systems Leadership-Role Development | II | II | 3 | | |
| NUR 710 | Applied Informatics and Change Systems | IV | | 3 | | |
| NUR 711 | DNP Project Extension | | | 1 | | |
| | | | | | 7 | |
| | Total Semester Credit Hours 75 | | | | | |

FNP to PMHNP- Certificate

| Course | PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER | MSN | Semester |
|---------|---|-----------------|-----------------|
| Number | (PMHNP) | Essential | Credit Hours |
| | Online | | |
| | Semester 1 (Spring) | · | |
| NUR 505 | Faith & Learning Overview | | 1 |
| NUR 650 | Advanced Assessment Processes in Mental Health Care Across the | IV, V, VI, | 3 |
| | Lifespan | VII, VIII | |
| | | | 4 |
| | Semester 2 (Summer) | | |
| NUR 651 | Management of Behavioral Health Populations Across the Lifespan | IV, V, VI, | 3 |
| | | VII, VIII | |
| NUR 652 | Psychopharmacological Treatment Across the Lifespan | Ι | 3 |
| NUR 550 | PMHNP Introduction to the Clinical Experience (100 clinical hours- 0,1) | IX | 1 |
| | | | 7 |
| | Semester 3 (Fall) | | |
| NUR 653 | Management of the Complex Mental Health Client Across the Lifespan | IV, V, VII, | 3 |
| | | IX | |
| NUR 602 | Interprofessional Collaboration in Health Promotion | VII, VIII | 3 |
| NUR 554 | PMHNP I (200 clinical hours-0,2) | IX | 2 |
| | | | 8 |
| | Semester 24 (Spring) | | |
| NUR 656 | PMHNP II (200 Clinical Hours-0,2) | IX | 2 |
| NUR 655 | PMHNP Certification Review | | 1 |
| | | | 3 |
| | Т | otal Semester C | Credit Hours 22 |

MSN to DNP Tracks

| ASN-DNP | EL | | |
|---------|--|---------------|----------|
| Course | EXECUTIVE LEADERSHIP | DNP | Semester |
| Number | | Essential | Credit |
| | | | Hours |
| | Semester 1 (Spring) | - | 1 |
| NUR 701 | Scientific Underpinnings for Nursing Practice | Ι | 3 |
| NUR 703 | Clinical Epidemiology and Analytical Methods | III, VII | 3 |
| NUR 730 | DNP Residency I – Executive Leadership (200 Clinical | VI, VIII | 2 |
| | Hours) | | |
| | | | |
| | Semester 2 (Summer) | I | I |
| NUR 702 | DNP Project I-IRB | III | 3 |
| NUR 704 | Clinical Scholarship for Evidence-Based Practice | I, III | 3 |
| NUR 731 | DNP Residency II- Executive Leadership (200 Clinical | VI, VII, | 2 |
| | Hours) | VIII | |
| NUR715 | Scholarly Writing | III,VII | 2 |
| | | | 1 |
| | Semester 3 (Fall) | r | - |
| NUR 706 | Advocacy in Healthcare Policy | V | 3 |
| NUR 705 | DNP Project II - Implementation | IV, VI | 3 |
| NUR 707 | Interprofessional Collaboration for Improving Health | VI | 3 |
| | Outcomes | | |
| NUR 732 | DNP Residency III – Executive Leadership (200 Clinical | VI, VII, | 2 |
| | Hours) | VIII | |
| | | | 1 |
| | Semester 4 (Spring) | r | - |
| NUR 708 | DNP Project III - Dissemination | III, VIII | 3 |
| NUR 733 | DNP Transition to Practice for the Executive Leader (200 | VI, VII, | 2 |
| | Clinical Hours) | VIII | |
| NUR 510 | Faith & Learning Worldviews | | 2 |
| | | | , |
| | Semester 5 (Summer) | r | - I |
| NUR 709 | Organizational & Systems Leadership - Role Development | II | 3 |
| NUR 710 | Applied Informatics and Change Systems | IV | 3 |
| | | | |
| | Total Se | mester Credit | Hours 42 |

55

| Course | Advanced Practice | DNP | Semester |
|---------|--|------------------|----------|
| Number | | Essential | Credit |
| | | | Hours |
| | Semester 1 (Spring) | • | |
| NUR 703 | Clinical Epidemiology and Analytical Methods | III, VII | 3 |
| NUR 701 | Scientific Underpinnings for Nursing Practice | Ι | 3 |
| NUR 780 | DNP Residency I – Advance Practice (100 Clinical Hours) | VI, VIII | 1 |
| | | | |
| | Semester 2 (Summer) | | |
| NUR 702 | DNP Project I-IRB | III | 3 |
| NUR 704 | Clinical Scholarship for Evidence-Based Practice | I, III | 3 |
| NUR 781 | DNP Residency II – Advance Practice (100 Clinical Hours) | VI, VII, | 1 |
| | | VIII | |
| NUR 715 | Scholarly Writing | III,VII | 2 |
| | | | |
| | Semester 3 (Fall) | | |
| NUR 705 | DNP Project II – Implementation | IV,VI | 3 |
| NUR 706 | Advocacy in Healthcare Policy | V | 3 |
| NUR 707 | Interprofessional Collaboration for Improving Health Outcomes | VI | 3 |
| NUR 782 | DNP Residency III – Advance Practice (100 Clinical Hours) | VI, VII, VIII | 1 |
| | | |] |
| | Semester 4 (Spring) | | |
| NUR 510 | Faith & Learning Worldviews | | 2 |
| NUR 708 | DNP Project III – Dissemination | III, VIII | 3 |
| NUR 790 | DNP Transition to Practice (200 Clinical Hours) | V, VII, VIII | 2 |
| | | • | • |
| | Semester 5 (Summer) | | |
| NUR 709 | Organizational & Systems Leadership-Role Development | II | 3 |
| NUR 710 | Applied Informatics and Change Systems | IV | 3 |
| | | • | • |

Course Descriptions

| MSN/DNP Essential | Course Name | Course Description | Student Learning Outcomes: At the completion of the course the learner/student will be able to: |
|---|---|---|--|
| (For PMHNP certificate track only) MSN/DNP Essn: N/A NONPF | NUR 505 Faith and Learning Overview | Semester Credit hour (1). This course is a discussion- driven seminar. The student actively engages in reflection based on assigned readings related to the topics of Servant Leadership and the formation of a Christian Worldview. | Demonstrate the art and science of professional caring through incorporating the principles of Servant Leadership into practice. Apply to nursing practice an ethical framework that incorporates the Christian Worldview, moral concepts, and |
| Ethics/Core MSN/DNP Essn: N/A NONPF Ethics/Core | NUR 510 Faith and Learning Worldviews | Semester credit hours (2) NUR 510- Faith & Learning- Worldviews This course provides the foundation for Christian thought within the context of a Christian worldview with application to the profession of nursing. Various types of worldviews will be discussed with an emphasis on the understanding and application of the Christian worldview in providing holistic care to patients as well as servant leadership within advanced roles. | professional ethics. Discuss the components of a Christian worldview. Describe how the Christian worldview serves as the foundation of spiritual leadership. Develop a style of spiritual leadership that supports one's professional nursing role. Articulate how the principles of spiritual leadership and emotional intelligence serve to support a Christian worldview. |
| MSN/DNP Essn: MSN II | BUS 501 Management Thought and Application | Semester credit hours (3). This course assists students in developing essential management skills for a global business world. The course focuses on a study of | Development of advanced business knowledge: a. Review the history of management thought and management principles. |

| | | | | h Domonstrat- |
|----------------------|----------------------------------|--|----|---|
| | | management strategies and techniques and their application in the development of an ethical approach to improve managerial effectiveness. The students' critical thinking and analytical skills will be honed. Cases and business simulations will be used to develop a knowledge base for use in the remaining courses of the program. | 2. | b. Demonstrate comprehension of integrated management concepts. c. Conduct a self-analysis of managerial skills and develop a plan on how to improve one's ability to be an effective manager. Application of advanced business knowledge: a. Exhibit an ability to apply management concepts. b. Understand a manager's roles and how to implement them. c. Enhance decision-making skills. d. Demonstrate the capability to analyze and develop solutions to managerial issues. |
| | | | 3. | Integration of ethical principles: a. Understand how to create and maintain an ethical culture. b. Demonstrate an ability to think and act ethically in managerial settings. |
| MSN/DNP Essn: N/A | BUS 525 Managerial Accounting | Semester credit hours (3). This course will examine the use of accounting information for planning, control and decision- making along with how all information of the organization is used. The student's analytical ability is developed through problems and cases that stress preparation, usefulness, and limitations of financial data while keeping an ethical focus on the potential use or misuse of the outcomes. | 1. | Development of business decision making related to accounting. a. Review the basics of management accounting concepts and applications. b. Demonstrate comprehension of management accounting concepts. c. Demonstrate managerial skills using management accounting applications in situations common to most organizations. Application of accounting to business knowledge. b. Exhibit an ability to apply management accounting concepts. c. Understand how a manager should implement the concepts. |

| | | | | d. Enhance decision-making |
|---|---|--|----------------|--|
| | | | 3. | skills. e. Demonstrate the capability to analyze and develop solutions to managerial issues which have managerial accounting elements. Integration of ethical principles. a. Understand how to create and maintain an ethical culture. b. Demonstrate an ability to think and act ethically in managerial settings. |
| MSN/DNP Essn: MSN VI | BUS 571 Healthcare Policy and Structure | Semester credit hours (3). This course provides a critical review of the healthcare system in the United States with a study of healthcare policy development and implementation. Examines healthcare policy from local, state, national, stakeholder and organizational perspectives. Explores historical, sociocultural, political and economic factors and implications for consumers, healthcare professionals, and healthcare organizations. | 1. 2. 3. | Apply understanding of historical, current, and emerging issues in healthcare policy and delivery to administrative decision-making and policy advocacy. Identify contemporary health policy issues in various sectors of the US health system. Analyze and develop recommendations for health policy issues using a collaborative policy analysis process that gathers and incorporates quantitative and qualitative evidence and input multiple stake holders. Consider diverse perspectives and develop communication skills for clear, credible and productive written and verbal presentation, discussion, and debate of ideas. |
| MSN/DNP Essn: MSN III NONPF Quality Competency Core | BUS 573 Improving Healthcare Quality, Safety & Outcomes | Semester credit hours (3). This course focuses on the evaluation, improvement, and management of business, clinical and satisfaction outcomes in healthcare organizations. Examines clinical | 1. 2. | Design and specify indicators for monitoring, assessing and improving healthcare quality, safety, and satisfaction. Complete a quality improvement patient safety project using a defined improvement |
| Competency Graduate QSEN Competency- Quality Improvement; Safety | | and business process applications relating to quality and performance improvement, informatics, evidence-based management, patient safety, program evaluation, public reporting, value based | 3. | methodology. Evaluate organizational culture as a component of healthcare quality and safety. |

| | | purchasing, and accountable care. | | |
|--|---|--|----------------------------------|---|
| MSN/DNP Essn: N/A NONPF Ethics/Core | BUS 572 Healthcare Finance and Economics | Semester credit hours (3). This course examines the demand for and supply of healthcare services through the lens of healthcare finance and economics. Applies principles of healthcare providers and health insurers make decisions. Topics may include health insurance, payment methods, managed care, revenue cycle management, budgeting, cost- benefit analysis, and cost- effectiveness analysis for various sectors of the healthcare industry. | 1. 2. 3. | Critically evaluate the applications and limitations of economic theory to describe and interpret healthcare markets. Compare and contrast the distinguishing features and characteristics of public and private health insurance markets in the US. Evaluate the financial, operational and behavioral implications of historical, current and emerging payment methods used to reimburse health service providers. Use financial information and budgets for monitoring, control and evaluation of practical problems in healthcare organizations. |
| MSN/DNP Essn: N/A NONPF Ethics/Core | CRJ 620 Principles of Emergency Preparedness and Disaster Management | Semester credit hours (3). This course informs and educates the student in the basic tenets of emergency management: mitigation, planning, preparedness and response. The student is provided an opportunity to critically evaluate national policies as they relate to emergency management within the healthcare setting. | 1. 2. 3. 4. 5. 6. | Describe how mitigation and risk assessment contribute to emergency management programs and plans. Describe the elements of mitigation plans: a. Documentation of the planning process b. Risk Assessment Mitigation c. Strategy Coordination of Mitigation Planning d. Plan Maintenance Process. Explain the mitigation plan development and implementation process. Describe the Federal Emergency Management Agency (FEMA) mitigation plan review process and criteria. Analyze local and state mitigation plans to determine the adequacy of the plans and recommend improvements. Describe the basic tenets of emergency management: a. Mitigation b. Planning c. Preparedness d. Response |

| MSN/DNP Essn: N/A NONPF Ethics/Core | CRJ 625 Public Health in Disaster Management | Semester credit hours (3). This course examines incident preparedness and response from a variety of public health dimensions, including: acute and chronic healthcare delivery, impacts on vulnerable populations, delivery of basic human services, epidemiologic response, and effective collaborations in public health preparedness planning. Students learn how to prepare for and address disruptions of public health systems arising from disasters. | Develop an in-depth understanding of why public health professionals must be an integral part of the complete range of disaster activities. Develop an understanding of the principles of medical care and the public health needs of displaced persons, and the complex emergency "relief" phases and their components. Be able to identify appropriate measures for environmental hazards and human impact. Be able to identify pre, intra, and post-disaster epidemiologic activities. Be able to identify, behavioral and emotional reactions of |
|--|--|--|--|
| | | | severe stress from disaster, and understand how to triage behavioral casualties for referral to the behavioral specialists. |
| MSN/DNP Essn: MSN IX | NUR 530 Executive Leadership I (100 clinical hours – 0,1) | Semester credit hours (1). This course emphasizes the application of the concepts, principles, and practices of an executive leader with a focus on | Demonstrate competence in Executive Leadership that promotes positive health care outcomes for individuals, populations, or systems. |
| | | case management. The student demonstrates the competencies essential to an executive leader. | Apply the concepts of communication and professionalism to the role of the Executive Leader. |
| | | | Assess the patient care delivery model of the healthcare system. Examine case management |
| | | | process throughout the healthcare system. |
| | | | Correlate the process of case management with positive outcomes and quality improvement. |
| MSN/DNP Essn: MSN IX | NUR 532 Executive Leadership II (100 clinical hours – 0,1) | Semester credit hours (1). This course emphasizes the application of the concepts, principles, and practices of an executive leader with a focus on risk management. The student demonstrates the competencies essential to an executive leader. | Demonstrate competence in Executive Leadership that promotes positive health care outcomes for individuals, populations, or systems. Assess the knowledge of patient safety, quality improvement, and risk management. Evaluate how the legal system applies to nursing practice. |

| | | | Analyze the impact of healthcare legislation on the quality and cost of patient care. Correlate the process of risk management with positive outcomes and quality improvement. |
|---|--|--|--|
| MSN/DNP Essn: MSN IX | NUR 632 Executive Leadership Practicum (200 clinical hours – 0,2) | Semester credit hours (2). This course emphasizes the application of the concepts, principles, and practices of an executive leader with a focus on the nurse executive role within the healthcare organization. The student demonstrates the competencies essential to an executive leader with a nurse executive mentor. | Demonstrate competence in Executive Leadership that promotes positive health care outcomes for individuals, populations, or systems. Apply all of the skills of communication and relationship-building to the executive setting. Assess the working knowledge of the healthcare environment. Analyze leadership, professionalism and business skills of the executive leader and apply them to the healthcare setting in collaboration with a nurse executive mentor. |
| MSN/DNP Essn: MSN IV BSN III NONPF Scientific Foundation Competencies Core Competency Graduate QSEN Competency- Evidence-Based Practice (EBP) | NUR 507 Integration of Scholarship into Practice *Notes – Understanding research and implementing* | Semester credit hours (3). The course provides an overview of various research methods and the application to evidence-based practice. The student learns to examine policies in the work place and seek evidence to translate current policies and identify gaps in the literature. | Integrate theory, evidence, clinical judgement, research, and interprofessional perspectives using translational processes to improve practice and associated health outcomes for patient aggregates. Advocate for the ethical conduct of research and translational scholarship (with particular attention to the protection of the patient as a research participant). Articulate to a variety of audiences the evidence base for practice decisions, including the credibility of sources of information and the relevance to the practice problem confronted. Apply practice guidelines to improve practice and the care environment. Perform rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice. |

| MSN/DNP Essn: MSN V BSN III, IV NONPF Technology and Information Literacy Competencies Core Core Competency Graduate QSEN Competency- | NUR 508 Informatics in Healthcare Delivery | Semester credit hours (3). This course introduces various patient care technologies to enhance healthcare delivery. The student learns to integrate technology into practice, facilitate the use of data management to improve outcomes of care, and implement evidence-based information into health education for diverse populations. | Utilize patient-care technology in delivering care to patients. Apply patient-care technologies when coordinating care with other healthcare providers. Explore data management systems to analyze and improve outcomes of care. Facilitate the use of electronic health records functions available to improve patient care. |
|---|--|--|--|
| Informatics MSN/DNP Essn: MSN II BSN II NONPF Health Delivery System Competencies Core Competency Graduate QSEN Competency- Safety | NUR 601 Organizational & Systems Leadership | Semester credit hours (3). This course focuses on leadership and management of healthcare organizations with an emphasis on organizational structure, process and outcomes. This course further enriches the students' knowledge on the practical methods for managing others within a variety of healthcare situations. | Apply leadership and decision making skills to the healthcare setting to be able to improve outcomes for patients through the collaboration of the healthcare team. Demonstrate effective leadership skills by implementing patient safety and quality improvement initiatives. Develop an understanding of how the healthcare delivery system is organized and financed. Apply business and economic principles to the healthcare delivery system to include budgeting, cost/benefit analysis, |
| MSN Essn: VII and VIII BSN VI NONPF Leadership Competencies Core Core Competency Graduate QSEN Competency- Teamwork and Collaboration | NUR 602 Interprofessional Collaboration in Health Promotion | Semester credit hours (3). This course develops knowledge, skills, and attitudes needed to actively function within an interprofessional team. The roles and responsibilities of team members and teamwork skills including oral and written communication skills are addressed. Students employ collaborative teamwork strategies through engaging in design, coordination, and evaluation of patient-centered care for diverse populations. | marketing, and human resource management. 1. Demonstrates the understanding of the foundations of the Masters prepared nurse. 2. Demonstrates ways to advocate for the role of the professional nurse as a member and leader of interprofessional healthcare teams. 3. Integrates clinical prevention and population health concepts in the development of culturally relevant and linguistically appropriate health education, communication strategies, and interventions. |

| | | | Evaluates the effectiveness of clinical prevention interventions that affect individual and population-based health outcomes using health information technology and data sources. |
|-------------------------------|---|--|---|
| DNP Essn: VI MSN VII, VIII | NUR 707 Interprofessional Collaboration for Improving Health Outcomes | Semester credit hours (3) This course expands upon the role of the DNP as someone with advanced preparation in the interprofessional dimensions of healthcare enabling then to facilitate collaborative team functioning. Students will work in teams to analyze complex practice and organizational issues while learning to assume leadership of the team when appropriate. | Demonstrate an understanding of the foundations of the DNP role. Analyze the historical, socio- cultural, political, and professional factors affecting the development of the DNP role. Analyze models of interprofessional collaboration utilized for analysis of individual, unit based and organizational communication that promotes quality and culturally competent care. Employ consultative and leadership skills with intraprofessional teams to create change in health care and complex healthcare delivery systems. |
| MSN/DNP Essn: MSN I | NUR 520 Pathophysiology and Physical Assessment for Nurse Educators | Semester credit hours (3). This course builds upon previous nursing knowledge to synthesize evidence-based practice to determine appropriate interventions for a diverse population. Learners apply principles of evidence-based practice in education when designing and delivering content using active learning strategies and appropriate assessment techniques. Students develop curriculum related to pathophysiology and physical assessment content for the practicing nurse or undergraduate nursing student. | Identify a specific learning need of members of a diverse population. Design a teaching plan based on specific learning needs, using evidence-based best practice models. Provide information about available community resources that can help with specific needs. Identify an appropriate plan for follow-up interaction to assess effectiveness of education. Utilize active learning strategies to deliver content. |
| MSN/DNP Essn: N/A | NUR 521 Foundations in Nursing Education | Semester credit hours (2). This course introduces the learner to key principles vital to nursing education. Discussions include the significance of | Explore the significance of the NCLEX including development, adaption and revision. |

| | | standardized testing, BSN Essentials, QSEN competencies, and the NCLEX exam. The course provides a philosophical and historical understanding of higher education | Understand and apply BSN Essentials to curriculum and current educational practice. Develop an understanding of the process of designing, writing and the significance of standardized testing. Utilize QSEN to develop curriculum and course outcomes. Compare accrediting bodies in education and understand the significance of program accreditation. |
|--|---|--|---|
| MSN/DNP Essn: MSN I | NUR 524 Pharmacology for Nurse Educators | Semester credit hours (2). This course focuses on evaluation of quality processes and improvement science related to pharmacotherapy. Students develop curriculum related to pharmacology content for practicing nurses or undergraduate nursing students. Students apply principles of evidence-based practice in education when designing and delivering content. | Identify a teaching need related to a specific medication or medication delivery system. Design a teaching plan using educational techniques that foster student engagement. Develop goals and objectives related to specific pharmacological content for either practicing nursing or undergraduate students. Write exam questions or design an evaluation tool that would be appropriate for either practicing nurses or nursing students. Evaluate the effectiveness of the educational delivery process and method of evaluation. |
| MSN/DNP Essn: MSN VI BSN V NONPF Policy Competency Core Core | NUR 506 Health Policy and Advocacy | Semester credit hours (3). This course examines the effects of legal and regulatory processes and health policy on nursing practice, healthcare delivery, economics, health systems, policy makers, stakeholders, and global health outcomes. | Identify how health policy influences the structure of healthcare, practice, and health outcomes. Participate in the development and/or implementation of institutional, local, state, and/or federal policy. Examine the effect of legal and regulatory processes on nursing practice, healthcare delivery and outcomes. Advocate for policies that improve the health of the public and the profession of nursing. |
| MSN/DNP Essn: N/A | EDU 521 Assessment Data to Inform Instruction | Semester credit hours (3). This course is a study of how to use assessment results to improve student learning. The course will consider test validity | Identify various methods used for student assignment and the significance of each. Understand and apply the results of item analysis to an |

| | | and reliability so that test results can be interpreted to indicate learners' proximity to learning targets. Topics include test planning and formatting, strategies for learner's involvement in the testing process, communication with caregivers, portfolios, and scoring instruments. Electronic methods for delivering assessments will be explored. | assessment as well as individual test items. 3. Develop a test plan and construct appropriate items. 4. Identify effective electronic methods for delivering assessments electronically. 5. Explore options for on-line portfolios for student evaluation. 6. Identify potential accommodations that may be made for students with identified disabilities. 7. Apply principles of federal laws to sharing of student information. |
|-------------------------|---|--|---|
| MSN/DNP Essn: MSN IX | NUR 523 Nurse Educator I (100 clinical hours – 0,1) | Semester credit hours (1). This practicum experience engages the learner in either the higher education or healthcare setting to provide classroom instruction. The learner plans and implements active learning strategies in the classroom to deliver specific content to the students. Current technology is included based upon best practices in education. | Design a teaching plan for a specific patient population using current technology as a means of delivery. Utilize knowledge from current practice to design, implement and evaluate an educational plan for members of the health care team using evidence-based practice. Formulate a personal philosophy of nursing and education based on a Christian Worldview framework. Identify personal leadership skills that will help effectively teach, coach and mentor students. |
| MSN/DNP Essn: MSN IX | NUR 623 Nurse Educator II (200 clinical hours – 0,2) | Semester credit hours (2). This practicum experience engages the learner to provide instruction in a classroom setting using current best practices providing active learning experiences. The learner creates an assessment to evaluate learning experiences and analyzes the results based on validity and reliability. | Write goals and objectives for delivery of specific content. Implement a teaching plan for classroom instruction using a backward design framework. Utilize principles of student engagement when providing classroom instruction. Create a test plan based on curriculum for student evaluation. Analyze exam results based upon applied interpretation of statistical information. |
| MSN/DNP Essn: MSN IX | NUR 624 Nurse Educator Practicum (200 Clinical hours – 0,2) | Semester credit hours (2). This practicum experience engages the learner in a higher | Design and lead a course using information gained from previous course. |

| | | education setting to lead a | 2. Develop student documents |
|----------------------------|--|--|--|
| | | course with a mentor. The learner develops a semester calendar plans, implements and | appropriate for the course including syllabus, calendar, and evaluation tools. |
| | | evaluates teaching strategies, assists in the development and delivery of assessments as well as evaluation of results. | Implement student centered learning activities such as Team Based Learning in the classroom setting. |
| | | | Construct an assessment for the students after creating a test plan. |
| | | | Evaluate the effectiveness of the instruction and evaluation methods used. |
| MSN/DNP Essn: N/A | NUR 522 Curriculum Design, Teaching and Technology for | Semester credit hours (3). This course examines the design and implementation of | Analyze various methods for instruction that engage the student. |
| | Education | appropriate and effective teaching strategies using best practices in education. Students | Apply best practices in education to develop curriculum for on-line learning. |
| | | are given opportunities to develop curriculum and evaluate various teaching | Design a teaching plan for classroom instruction using a backward design framework. |
| | | models. | Integrate current technology applications in both traditional |
| | | | and on-line learning environments. |
| MSN/DNP Essn: MSN IX | NUR 540 APRN Procedures in Primary | Semester credit hours (1). This course provides a hands-on | Discuss indications, contraindications and technique |
| NONPF Independent | Care (0,1) | opportunity to learn skills needed to perform frequently encountered primary care | of procedures commonly performed by primary care providers. |
| Practice Competencies | | procedures. Students have the opportunity to practice each of the skills in a simulation | Learn pre-procedure evaluation and post-procedure management. |
| Population focused- FNP | | environment. | Become proficient in performing multiple common procedures encountered in the primary care setting. |
| | | | Discuss prevention and management of complications of procedures. |
| MSN/DNP Essn: MSN I | NUR 591 Advanced Pathophysiology | Semester credit hours (3). This course presents an | 1. Identify regulatory and compensatory mechanisms as |
| BSN IX | | orientation to disease as disordered physiology; analyzing | they relate to commonly occurring diseases. |
| NONPF | | the mechanism(s) of production | 2. Integrate pathophysiologic |
| Scientific Foundation | | of the signs and symptoms of different disease syndromes. | concepts of disease in assessment of patients across |
| Competencies | | Students learn the | the life span. |
| And | | mechanism(s) underlying | 3. Apply pathophysiologic concepts of disease to the management |

| NONPF | | complex disease processes and | of commonly occurring |
|----------------|----------------------|---|--|
| Independent | | clinical manifestations. | conditions across the life span. |
| Practice | | | |
| Competencies | | | |
| Core | | | |
| Competency | | | |
| MSN/DNP Essn: | NUR 592 Advanced | Semester credit hours (3). | 1. Interview a patient and obtain a |
| MSN I | Physical Assessment | This course prepares the | complete health history as well |
| BSN IX | (Diagnostics) | student with advanced clinical assessment and reasoning skills | as an integrated focused history, including a review of systems for |
| NONPF | | through the lifespan with | a chief complaint. |
| Scientific | | emphasis on differentiating | 2. Perform an integrated focused |
| Foundation | | normal from abnormal findings | multi-system physical exam in |
| Competencies | | in the domains of physical, | an organized manner. |
| And | | psychosocial, behavioral, and | 3. Demonstrate cultural |
| NONPF | | genetic assessments. The | compassion and professional |
| Independent | | students practice performing | demeanor during the interview |
| Practice | | comprehensive assessments | and the physical exam. |
| Competencies | | and age-appropriate | 4. Assess patients in all stages of |
| | | developmental screenings. | development during wellness or |
| Core | | Additionally anticipatory | illness. |
| Competency | | guidance for well visits and | |
| | | health teaching for common | |
| | | illnesses and disease prevention | |
| | | is addressed. | |
| MSN/DNP Essn: | NUR 593 Advanced | Semester credit hours (3). | 1. Explain the basic principles of |
| MSN I | Pharmacology | This course focuses on the | pharmacology and |
| BSN IX | | knowledge and application of | pharmacotherapeutics. |
| | | advanced pharmacotherapeutic | 2. Describe the most commonly |
| NONPF | | principles organized in a system- | prescribed agents in the major |
| Scientific | | based approach, to prepare | drug classes. |
| Foundation | | students to design | 3. Explain the mechanism of action |
| Competencies | | individualized | of the major drug classes. |
| And NONPF | | pharmacotherapeutic plans for disease prevention and | 4. Analyze the adverse effect and |
| Independent | | commonly encountered | drug interaction profiles of the major drug classes and |
| Practice | | illnesses. Risk stratification, | individual drugs within these |
| Competencies | | monitoring for clinical | classes. |
| competencies | | effectiveness, drug interactions, | 5. Make appropriate therapeutic |
| Core | | medications side effects, and | treatment decisions for |
| Competency | | appropriate patient education is | individual patients utilizing drugs |
| | | integrated. | from the major drug classes. |
| | | | 6. Apply the laws governing the |
| | | | prescribing of drugs when |
| | | | writing prescriptions. |
| MSN Essn: IX | NUR 541 Primary Care | Semester credit hours (3). | 1. Assess the developmental status |
| | Across the Lifespan | This course develops and | and functional capacity adults |
| BSN VII | | | |
| BSIN VII | | enhances the student's | and older adults. |
| NONPF Practice | | knowledge and skill in the | Formulate differential diagnoses |
| | | | |

| Population Focused FNP Graduate QSEN Competency- Patient Centered Care | | chronic diseases in families. Management includes incorporating theory and research related to evidence- based practice in identifying, monitoring, and treating health problems and maintaining and promoting health across the lifespan. Interdisciplinary collaboration, including development of practice guidelines, documentation, and the process of referral are discussed. | acute/chronic illness in adults and older adults applying knowledge from related disciplines and nursing. Develop advanced practice plans of care to manage the delivery of health care to adults and older adults in diverse settings. Evaluate the health status of adults and older adults. Utilize relevant research findings in the clinical management of adults and older adult's health. Analyze existing protocols using established standards of care for intervention in health promotion and acute and chronic health alterations in adults and older adults. Integrate legal, ethical, socioeconomic, psychosocial, and cultural factors in delivery of health care to adults and older adults. Relate the role and scope of practice of the family nurse practitioner to health care situations of adults and older adults. Evaluate adequacy of health |
|--|---|--|--|
| | | | community resources, support networks and advocacy structures for the older adult. |
| MSN/DNP Essn: MSN IX NONPF Independent Practice Competencies Population Focused FNP Graduate QSEN Competency- Patient Centered Care | NUR 543 FNP I (200 clinical hours – 0,2) | Semester credit hours (2). This course introduces the student to problem-solving and clinical decision-making processes used by advanced practice nurses. Evaluation and management of the most common episodic health problems and chronic disease states of adults and children seen in primary care settings is emphasized. Evidence-based pharmacologic and non- pharmacologic interventions are examined. Students analyze and explore health disparities, disease prevention and | Structures for the older adult. Demonstrate appropriate and effective oral and written communication with older adults and older clients, their families, and other health professionals. Perform comprehensive and developmentally appropriate health assessments on adults and older adults. Develop management plans for health promotion, disease prevention, and acute and chronic illnesses in adults and older adults. Manage the health of adults and older adults, and their families incorporating ethical, legal, |

| | | management, and health promotion for all ages. | | cultural, economic, political and psychosocial principles. |
|------------------|---------------------------------|---|----|--|
| | | promotion for an ages. | 5. | Evaluate the effectiveness of interventions and management strategies in improving the health status of adults and older adults. |
| | | | 6. | Collaborate with other health professionals to provide comprehensive health services for adults and older adults. |
| | | | 7. | Teach individuals, families, and groups skills and behaviors to promote health, prevent disease, and manage acute and chronic illnesses in adults and |
| | | | 8. | older adults. Implement current research related to diagnostic and treatment protocols to improve the delivery of health care to adults and older adults. |
| MSN Essn: IX | NUR 603 Care of Aging Adults | Semester credit hours (2) This course prepares the | 1. | Identify common medical and psychiatric health issues in the |
| NONPF: | | student to manage the care of | | geriatric population. |
| Population | | the aging adult with complex | 2. | Describe elements of geriatric |
| specific, | | health needs. Evidence-based | | assessment and integrate factors |
| FNP/PMHNP | | practice is discussed in | | that may be unique to aging |
| Independent | | identifying, monitoring, and | | individuals and families. |
| practice | | treating selected medical and | 3. | Formulate interdisciplinary plans |
| practice | | psychiatric problems in the | 5. | of care for complex medical and |
| | | | | - |
| QSEN-EBP | | aging adult to provide optimal | | psychiatric disorders in the |
| | | health care. Emphasis on | | geriatric population. |
| MSN-PO #2 | | exploring the unique needs of | 4. | Interpret interdisciplinary |
| MSN-SO-#2,#3 | | the aging population, identifying | | feedback to adjust plans of care |
| | | variations in the responses of | | for patients with complex |
| | | aging adults to selected health | | medical and psychiatric conditions in geriatric |
| | | conditions, and exploring differences in the evaluation | | populations. |
| | | and management of selected | | populations. |
| | | conditions in aging adults (2) | | |
| MSN/DNP Essn: | NUR 640 Care of Special | Semester credit hours (3). | 1. | Discuss current issues and |
| MSN IX | Populations | This course prepares the | | barriers to care in women's |
| - | · · · · · · | student to manage the care of | | healthcare and in pediatric and |
| NONPF | | women and children. Acute and | | adolescent healthcare. |
| | | chronic maternal child health | 2. | Design strategies to improve the |
| Practice Inquiry | | conditions in the primary care | | delivery of health care to |
| Competency | | environment are addressed. | | women, children, and |
| . , | | Evidence-based practice is | | adolescents. |
| Population | | discussed in identifying, | 3. | Apply knowledge from nursing |
| Focused FNP | | monitoring, and treating | | and related disciplines to |
| | | | | formulate diagnoses and |

| Graduate QSEN Competency- Patient Centered Care | | healthcare problems in women and children. | intervention strategies to promote health and manage selected acute and chronic health alterations in women, children, and adolescents. 4. Utilize relevant research findings for application in clinical management of health for women, children, and adolescents. 5. Evaluate the health status of women in diverse populations throughout the lifespan & evaluate health status of children and adolescents |
|---|--|--|---|
| | | | through the developmental life stages. 6. Relate the role and scope of practice of the family nurse practitioner to health care situations of women, children, and adolescents. |
| MSN/DNP Essn: MSN IX NONPF Independent Practice | NUR 641 FNP II (200 clinical hours – 0,2) | Semester credit hours (2). This course prepares students to address complex health problems in individuals of all ages in primary care settings. Relevant evidence-based interventions are examined. | Assess the influence of family or psychosocial factors on population illness and conditions related to women's reproductive health, children, and adolescents. Assess, analyze, and interpret |
| Competencies Population Focused FNP Graduate QSEN Competency- | | The role of the APRN and the scope of practice in acute and chronic care in various settings are analyzed with an emphasis of cultural competence for the care of diverse populations. | history, physical findings, and diagnostic information to develop appropriate differential diagnoses for childbearing women, children, and adolescents. Apply differential diagnostics |
| Patient Centered Care | | | when prescribing medications related to altered pharmacodynamics and pharmacokinetics to children, adolescents, and to pregnant and lactating women. |
| | | | Apply effective developmentally appropriate communication techniques with children, adolescents, and childbearing families. Collaborate with the interprofessional healthcare team to provide integrated family-centered plans of care for |

| | | | childbearing families, children, and adolescents. 6. Consider epidemiology, environmental, and community characteristics and life stage development for children, adolescents, and childbearing families in order to plan individualized care and make appropriate referrals. |
|--|--|---|---|
| MSN/DNP Essn: MSN VIII and IX BSN VII NONPF Independent Practice Competencies And Health Delivery System Competencies Population Focused FNP Graduate QSEN Competency- Patient Centered Care | NUR 643 Integrated Care of Individuals and Communities | Semester credit hours (3). This course utilizes previous knowledge to engage students in synthesis and analysis of the complexities of care across the lifespan for individuals and communities. Emphasis is placed on the sociocultural, educational, nutritional, and environmental aspects of care as well as skills related to health assessment and screening measures to promote wellness and family-centered care in ambulatory community settings. Students engage in community assessments and population- based health program planning and implementation. | Perform comprehensive and developmentally appropriate assessments communities as a whole and individuals within the community. Develop management plans for health promotion, disease prevention, and acute and chronic illnesses within the context of community considering sociocultural, educational, nutritional, and environmental aspects of care. Manage the overall health of communities incorporating ethical, legal, cultural, economic, political and psychosocial principles. Evaluate the effectiveness of interventions and management strategies in improving the health status of entire communities. Collaborate with other health professionals to provide comprehensive health services for communities. Explore the process of implementing long-term health and wellness programs based on the community assessment and |
| MSN/DNP Essn: MSN IX NONPF | NUR 646 FNP III Practicum (200 clinical hours – 0,2) | Semester credit hours (2). This is the final course in the practicum series preparing the student for entry into practice | current research. Demonstrate proficiency in family assessment in a variety of settings. Identify and plan evidenced- |
| Independent Practice Competencies | | as an advanced practice nurse. Students analyze and synthesize knowledge of acute and chronic disease and evidence-based management, along with theoretical applications, the | Identify and plan evidenced- based interventions to promote health in communities, families, and individuals at risk. Assess and analyze social and economic data, support systems, and resources, and |

| Denvel | | lun availanderen (f. 19. – 1931) | <u> </u> | and a sector of the sector of |
|------------------|-------------------------|----------------------------------|----------|---|
| Population | | knowledge of culture, and the | | collaborate with the |
| Focused FNP | | complexities related to health | | interprofessional team in |
| | | disparities in order to plan and | | assisting communities, families, |
| Graduate QSEN | | implement care. Students | | and individuals to develop safe, |
| Competency- | | examine barriers to health | | effective coping systems and |
| Patient | | promotion and care delivery for | | lifestyle adaptations for acute or |
| Centered Care | | diverse populations. Students | | chronic illness, family |
| | | explore issues in advanced | | circumstances, and end of life |
| | | nursing practice, | | issues. |
| | | professionalism, and care | 4. | Order, perform, and interpret |
| | | delivery. | | age-, gender-, and condition- |
| | | | | specific diagnostic tests and |
| | | | _ | screening procedures. |
| | | | 5. | Formulate comprehensive |
| | | | | differential diagnoses, |
| | | | | considering epidemiology, |
| | | | | environmental, and community |
| | | | | characteristics and life stage |
| | | | | development for communities, |
| | | | | families, and individuals order to |
| | | | | plan care and make appropriate |
| | | | 6 | referrals. |
| | | | 6. | Identify potential interactions |
| | | | | when prescribing medications |
| | | | | for individuals with one or more co-morbities. |
| | | | - | |
| | | | 7. | Provide holistic health |
| | | | | promotion, disease prevention, |
| | | | | and treatment strategies to |
| | | | | improve or maintain health for all family members. |
| MSN/DNP Essn: | NUR 650 Advanced | Semester Credit hours (3). | 1. | Assess psychiatric/ mental health |
| MSN VII and VIII | Assessment Processes in | This course introduces the | 1. | problems using the most current |
| BSN IX | Mental Healthcare | theoretical content and clinical | | edition of the APA-DSMCritical |
| DOINTA | Across the Life Span | practice for assessing, | | Thinking |
| NONPF Practice | Across the Life span | diagnosing and intervening in | 2. | Differentiate major |
| | | dysfunctional coping patterns | 2. | psychopathology based on the |
| Inquiry | | and psychiatric disorders across | | current APA-DSM diagnostic |
| Competencies | | the life span. The DSM-V is | | criteria and evidenced based |
| And | | introduced to assess and | | practice research(Core |
| Allu | | diagnose mental health | | competency-Critical Thinking and |
| Independent | | disorders across the life span. | | Research) |
| Practice | | | З. | Understand the relationship |
| | | | | between culture, religious |
| Competencies | | | | beliefs, mental health, and |
| NONDE | | | | psychopathology. – Cultural |
| NONPF | | | | Competence, Caring, Role |
| Population | | | | Competence |
| Focused PMHNP | | | 4. | Utilize appropriate |
| | | | | comprehensive assessment and |
| Graduate QSEN | | | | mental health status tools |
| Competency- | | | | |

| | | | 1 | |
|--------------------------|--------------------------|--|----|---|
| Patient Centered Care | | | | Critical Thinking, Research, Role |
| Centered Care | | | 5. | Competence Synthesize physical and |
| | | | J. | laboratory assessment data |
| | | | | essential for diagnosing medical |
| | | | | causes of the psychiatric |
| | | | | syndromes <i>Critical Thinking,</i> |
| | | | | Role Competence |
| | | | 6. | Identify tools and assessments |
| | | | | utilized in the diagnosis and |
| | | | | treatment of mental health disorders Critical Thinking, |
| | | | | Role Competence. |
| | | | 7. | Apply tools and assessments in |
| | | | /. | the management of mental |
| | | | | health populations across the |
| | | | | lifespan Critical Thinking, Role |
| | | | | Competence |
| MSN/DNP Essn: | NUR 653 Management | Semester credit hours (3). | 1. | Formulate a comprehensive plan |
| MSN IX | of the Complex Mental | This course builds upon NUR | | of care for all psychopathologies |
| | Health Client Across the | 653 Management of Behavioral | | across the life span, with |
| NONPF Practice | Lifespan | Health Clients in to explore and | | consideration to culture, genetic, |
| Inquiry | | define the theoretical content | | life style, religion and socio- |
| Competencies | | and clinical practice for | | economic status. Critical |
| | | assessing, diagnosing and | | Thinking, Role Competence, |
| And | | intervening in dysfunctional | | Research, Cultural |
| Independent | | coping patterns and psychiatric | 2. | Understand the interrelationship |
| Practice | | disorders across the life span. | | between theory, assessment, |
| Competencies | | The DSM-V is applied to assess, diagnosis and treat mental | | diagnosis and intervention in relationship to patient |
| | | health disorders across the life- | | outcomes. Critical Thinking, Role |
| | | span. Appropriate | | Competence, Research |
| | | pharmacological and non- | 3. | Apply neurobiological, |
| NONPF | | pharmacological therapies will | | psychophysiological and |
| Population | | be utilized. | | mechanistic theory when |
| Focused PMHNP | | | | planning a treatment strategy |
| | | | | for individual patients across the |
| Graduate QSEN | | | | life span. Critical Thinking, Role |
| Competency- | | | | Competence, Research, |
| Patient | | | | Communication |
| Centered Care | | | 4. | Utilize appropriate non- |
| | | | | pharmacological and |
| | | | | pharmacological treatment for |
| | | | | individuals with complex mental health needs from childhood to |
| | | | | geriatrics. Critical Thinking, |
| | | | | Caring, Communication, |
| | | | | Research. By providing guidance |
| | | | | and counseling regarding |
| | | | | treatment aspects and plans to |
| | | | | the individuals and their families, |
| | | | | on a level appropriate to |

| | | | 5. | developmental and educational stages of the individual. <i>Caring,</i> <i>Teaching, Communication</i> Identify risk factors in the phases of a psychiatric illness. <i>Caring,</i> <i>Role Competence, Critical</i> <i>Thinking</i> Synthesize the knowledge gained from psychopharmacology, assessment/diagnosis and non- pharmacological treatments. <i>Role Competence, Critical</i> <i>Thinking</i> |
|---|--|--|----------------------------------|---|
| MSN Essn. IX NONPF Practice Inquiry Competencies And Independent Practice Competencies NONPF Population Focused PMHNP Graduate QSEN Competency- Patient Centered Care | NUR 651 Management of Behavioral Health Populations Across the Lifespan | Semester credit hour (3) This course will examine the major psychopathologies in throughout the life span including epidemiology, cultural and spiritual beliefs, specific assessment issues and tools as well as evidenced based therapies. Interventions include pharmacologic and nonpharmacological therapies. This course will also address health care promotion as well as legal/ethical aspects of population specific care. | 1. 2. 3. 4. 5. 6. | Apply assessment skill for behavioral health population to formulate a comprehensive plan of care for all pharmalogical and nonpharmacological treatment, across the life span. <i>Critical</i> <i>Thinking, Role Competence,</i> <i>Research, Cultural</i> Understand the interrelationship between theory, assessment, diagnosis, and intervention in relationships to patient outcomes. <i>Critical Thinking, Role</i> <i>Competence, Research</i> Appropriately utilize major counseling, psychotherapeutic theories and non- pharmacological treatments. <i>Critical Thinking, Role</i> <i>Competence</i> Explore the personal and professional characteristics of the effective therapist. <i>Critical</i> <i>Thinking, Caring, Professional</i> <i>Role</i> Relate individual client issues and needs to major psychotherapeutic approaches through a cultural lens. <i>Critical</i> <i>Thinking, Cultural Competence</i> Synthesize the knowledge gained from assessment/diagnosis, psychopharmacological treatments. <i>Role Competence, Critical</i> <i>Thinking</i> |

| | | | 4 | |
|-----------------------------------|--------------------------|--|----|--|
| MSN/DNP Essn: MSN VII and VIII | NUR 550 PMHNP | Semester credit hours (1) | 1. | Synthesize theoretical, scientific, |
| IVISIN VII and VIII | Introduction to the | | | and clinical knowledge for the |
| NONPF | Clinical Experience (100 | This course promotes the initial | | assessment and management of |
| NONPF | hours) | role development of the | | both physical and psychiatric health and illness states. |
| lin do a condo a t | | advanced PMHNP on the | 2 | |
| Independent | | psychiatric treatment team | 2. | Utilize evidence based clinical |
| Practice | | focusing on the role of the | | practice guidelines to guide |
| Competencies | | advanced practice nurse in the | | assessment activities, identify |
| | | physical and psychiatric | | health promotion needs, and |
| NONPF | | assessment of clients. It | 2 | provide anticipatory guidance. |
| Population | | provides opportunities for | 3. | Recognize the influence of |
| Focused PMHNP | | application of the essentials of | | culture and religion in the |
| | | the advanced psychiatric nurse | | presentation of psychiatric signs |
| Graduate QSEN | | practitioner through clinical | 4 | and symptoms. |
| Competency- | | teaching and supervision. (0,1) | 4. | Perform and accurately |
| Patient | | | | document appropriate systems |
| Centered Care | | | | and symptom-focused physical examinations, with emphasis on |
| | | | | • |
| | | | | the mental status exam and |
| | | | 1 | neurological exam. |
| MSN/DNP Essn: | NUR 554 PMHNP I (200 | Semester credit hours (2). | 1. | Synthesize theoretical, scientific, |
| MSN VII and VIII | hours) | This course promotes the initial | | and clinical knowledge for the |
| NONDE | | role development of the | | assessment and management of |
| NONPF | | advanced PMHNP on the | 2 | both health and illness states. |
| | | psychiatric treatment team | 2. | Utilize evidence based clinical |
| Independent | | focusing on integration and | | practice guidelines to guide |
| Practice | | synthesis of | | assessment activities, identify |
| Competencies | | psychopharmacologic and non- | | health promotion needs, and |
| | | pharmacologic therapies, | 2 | provide anticipatory guidance. |
| NONPF | | assessment, diagnosis, | 3. | Recognize the influence of |
| Population | | treatment and management of the psychiatric mental health | | culture and religion in the presentation of psychiatric signs |
| Focused PMHNP | | | | |
| | | patient of all age groups. It | 4 | and symptoms. |
| Graduate QSEN | | provides application, in the clinical area, of the essentials of | 4. | Perform and accurately |
| Competency- | | the advanced psychiatric nurse | | document appropriate systems and symptom-focused physical |
| Patient | | practitioner through clinical | | examinations, with emphasis on |
| Centered Care | | teaching and supervision. | | the mental status exam and |
| | | teaching and supervision. | | neurological exam. |
| | | | 5. | Assess the impact of acute |
| | | | J. | and/or chronic physical illness, |
| | | | | psychiatric disorders, and |
| | | | | stressors on the family system. |
| | | | 6. | Collect data from multiple |
| | | | 0. | sources using assessment |
| | | | | techniques that are appropriate |
| | | | | to the patient's language, |
| | | | | culture, and developmental |
| | | | | stage, including, but not limited |
| | | | | to, screening evaluations, |
| | | | | psychiatric rating scales, |
| | | | I | psychiatric rating states, |

| | | | genograms, genetic studies and other standardized instruments. 7. Formulate psychopharmacologic and non-pharmacologic |
|--|--|--|--|
| | | | treatment plan for mental health problems and psychiatric disorders based on biopsychosocial and psychophysiological theories, evidence-based standards of care, and practice guidelines. |
| MSN/DNP Essn: MSN I NONPF | NUR 652 Psychopharmacological Therapies Across the Lifespan | Semester Credit hours (3). This course explores advanced psychopharmacology concepts, theories and issues building on | Articulate current neurophysiological theories, genetic and cultural influences regarding the development and |
| Scientific Foundation Competencies | | the knowledge of general pharmacology, with an emphasis on the | incidence of mental health disorders from childhood to geriatrics. <i>Role Competence,</i> |
| NONPF Population Focused PMHNP | | neurophysiological basis of psychiatric/mental health problems of individuals, ranging from childhood to geriatrics. Emphasis is on the application of neuroscientific, neurobiological and genetic contemporary knowledge to | Caring, Critical Thinking Utilize appropriate principles in the prescribing of psychotic and non-psychotic medications used to treat mental health/psychiatric problems. Role Competence, Critical Thinking |
| | | psychopharmacological treatment strategies and their modifications to improve patient care. | Utilize the pharmacologic characteristics (mechanisms of action, indications, contraindications, interactions and toxicity) and psychopharmacodynamics of the major drug categories when prescribing psychiatric medications. Role Competence, Critical Thinking |
| | | | Monitor for expected therapeutic outcomes and potential adverse effects associated with selected drug therapy and polypharmacy Role Competence, Research, Caring |
| | | | Synthesize neuro-biologic and mechanistic evidence when selecting treatment strategies so as to match treatment to the unique needs of the patient. Role Competence, Research, Critical Thinking |
| | | | 6. Recognize the need for interdisciplinary collaboration in the psychopharmacological |

| | | | | treatment of psychiatric patients. <i>Communication,</i> <i>Professionalism, Role</i> <i>Competence</i> |
|--------------------------|---------------------------------|--|----|--|
| MSN/DNP Essn: MSN IX | NUR 656 PMHNP II (200 hours) | Semester credit hours (2). This course is a comprehensive | 1. | Gain skills in implementing evidence-based practice |
| NONPF | | clinical residency designed to advance the student's clinical | | interventions, case load management, and analyzing |
| Independent | | practice with clients in a variety of psychiatric mental health | | process dynamics with individuals, families, and groups |
| Practice | | settings. Practitioners utilize | | so that patterns in self and |
| Competencies | | independent clinical decision- | | others are identified accurately |
| NONPF | | making, interdisciplinary collaboration, evaluate quality | | and with regularity. <i>Quality</i> Competencies |
| Population | | of care, and develop | 2. | Explore the PMHNP scope of |
| Focused PMHNP | | organizational and role | | practice through exposure to |
| | | competencies in a variety of settings. | | multiple roles and models. They will continue to refine diagnostic |
| Graduate QSEN | | settings. | | skills, pharmacological |
| Competency- | | | | management, non- |
| Patient Centered Care | | | | pharmacological management, |
| | | | | and clinical reasoning. <i>Quality</i> Competencies |
| MSN/DNP Essn: | NUR 701 Scientific | Semester credit hours (3). | 1. | Analyze the role of theory in |
| DNP I | Underpinnings for | This course explores the | | guiding practice change |
| | Nursing Practice | structure and nature of the science of nursing practice. | 2. | initiatives. Distinguish between research |
| | | Students engage in an | Ζ. | and quality Improvement. |
| | | evolutionary review of the | 3. | Use the appropriate theory, |
| | | philosophical and scientific | | model, or guideline to facilitate |
| | | trends in nursing practice and | | improved healthcare outcomes. |
| | | supportive theory development forming the underpinnings of | 4. | Evaluate several quality improvement models to guide |
| | | modern nursing. This review | | the process of change when |
| | | helps students conceptualize | | translating research into |
| | | and develop the foundational | | practice. |
| | | basis of the DNP project. | 5. | Analyze system's change skills |
| | | | | useful in negotiation, consensus building and partnerships with |
| | | | | stakeholders. |
| | | | 6. | Analyze theories from nursing, |
| | | | | and the behavioral and social |
| | | | | sciences as frameworks for change. |
| | | | 7. | Integrate a mid-range theory |
| | | | | and quality improvement |
| | | | | process to propose a strategy for |
| | | | | change, resulting in improved health care outcomes. |
| MSN/DNP Essn: | NUR 702 DNP Project I- | Semester credit hours (3). | 1. | Design a scholarly project to |
| DNP III | IRB | This course explores issues for | | evaluate outcomes of practice, |
| | | nurses practicing in academic, | | practice patterns, or systems of |

| | | clinical, and health policy | | care within a practice setting, |
|------------------------------------|--|--|----------------------------|---|
| | | environments to advance | | healthcare organization, or |
| | | nursing practice. Students | | community. |
| | | identify a nursing practice | 2. | Prepare (Human Subjects |
| | | problem and link the problem to | | Committee) HSC proposal and |
| | | existing scientific knowledge. | | obtain approval. |
| MSN/DNP Essn: DNP VI,VIII | NUR 730 DNP Residency I- Executive Leadership (200 clinical hours – 0,2) | Semester credit hours (2). This residency prepares the student to serve in a chosen specialty area within the scope of practice at increasing levels of complexity. The student is supported by an expert clinician within the healthcare setting as specialized knowledge and skills are strengthened in the analysis and application best practices. Enrollment in this course will be repeated in subsequent semesters until requirements for the DNP clinical hours are satisfied and degree is conferred. | 1. 2. 3. 4. 5. | Demonstrate leadership which has the potential to improve health care outcomes, address gaps in care, and promote delivery of high quality advanced nursing care. Employ high level consultative and leadership skills with inter- professional health care teams to create change in the health care environment and nursing. Synthesize the ability to apply evidence-based practice and evaluate health outcome. Advocate for advanced nursing practice within the health care environment. Design and analyze strategies to promote advanced nursing, population health policy, and |
| MSN/DNP Essn: DNP VI, VII, VIII | NUR 731 DNP Residency II- Executive Leadership (200 clinical hours- 0,2) | Semester credit hours (2) This residency prepares the student to serve in a chosen specialty area within the scope of practice at increasing levels of complexity. The student is supported by an expert clinician within the healthcare setting as specialized knowledge and skills are strengthened in the analysis and application best practices. Enrollment in this course will be repeated in subsequent semesters until requirements for the DNP clinical hours are satisfied and degree is conferred. | 1. 2. 3. 4. 5. | quality patient care outcomes. Demonstrate leadership which has the potential to improve health care outcomes, address gaps in care, and promote delivery of high quality advanced nursing care. Employ high level consultative and leadership skills with inter- professional health care teams to create change in the health care environment and nursing. Synthesize the ability to apply evidence-based practice and evaluate health outcomes. Advocate for advanced nursing practice within the health care environment. Design and analyze strategies to promote advanced nursing, population health policy, and quality patient care outcomes. |
| MSN/DNP Essn: DNP VI, VIII | NUR 780 DNP Residency I- Advanced Practice (100 clinical hours- 0,1) | Semester credit hours (1). This residency prepares the student to serve in a chosen | 1. | Demonstrate leadership which has the potential to improve health care outcomes, address |

| | | specialty area within the scope of practice at increasing levels of complexity. The student is supported by an expert clinician within the healthcare setting as specialized knowledge and skills are strengthened in the analysis and application best practices. Enrollment in this course will be repeated in subsequent semesters until requirements for the DNP clinical hours are satisfied and degree is conferred. | gaps in care, and promote delivery of high quality advanced nursing care. 2. Employ high level consultative and leadership skills with inter- professional health care teams to create change in the health care environment and nursing. 3. Synthesize the ability to apply evidence-based practice and evaluate health outcomes. 4. Advocate for advanced nursing practice within the health care environment. 5. Design and analyze strategies to promote advanced nursing, population health policy, and quality patient care outcomes. |
|------------------------------------|--|--|---|
| MSN/DNP Essn: DNP VI, VII, VIII | NUR 781 DNP Residency II- Advance Practice (100 clinical hours- 0,1) | Semester credit hours (1). This residency prepares the student to serve in a chosen specialty area within the scope of practice at increasing levels of complexity. The student is supported by an expert clinician within the healthcare setting as specialized knowledge and skills are strengthened in the analysis and application best practices. Enrollment in this course will be repeated in subsequent semesters until requirements for the DNP clinical hours are satisfied and degree is conferred. | Demonstrate leadership which has the potential to improve health care outcomes, address gaps in care, and promote delivery of high quality advanced nursing care. Employ high level consultative and leadership skills with inter- professional health care teams to create change in the health care environment and nursing. Synthesize the ability to apply evidence-based practice and evaluate health outcomes. Advocate for advanced nursing practice within the health care environment. Design and analyze strategies to promote advanced nursing, population health policy, and quality patient care outcomes. |
| MSN/DNP Essn: DNP VI, VII, VIII | NUR 782 DNP Residency III-Advance Practice (100 clinical hours- 0,1) | Semester credit hours (1). This residency prepares the student to serve in a chosen specialty area within the scope of practice at increasing levels of complexity. The student is supported by an expert clinician within the healthcare setting as specialized knowledge and skills are strengthened in the analysis and application best practices. | Demonstrate leadership which has the potential to improve health care outcomes, address gaps in care, and promote delivery of high quality advanced nursing care. Employ high level consultative and leadership skills with inter- professional health care teams to create change in the health care environment and nursing. |

| | | Enrollment in this course will be repeated in subsequent semesters until requirements for the DNP clinical hours are satisfied and degree is conferred. | Synthesize the ability to apply evidence-based practice and evaluate health outcomes. Advocate for advanced nursing practice within the health care environment. Design and analyze strategies to promote advanced nursing, population health policy, and quality patient care outcomes. |
|-------------------------------|---|---|---|
| MSN/DNP Essn: DNP III, VII | NUR 703 Clinical Epidemiology and Analytical Methods | Semester credit hours (3). This course facilitates the identification of risk factors for disease and opportunities for preventative healthcare in order to inform policy decisions and evidence-based practice. Students examine outcomes and practice patterns in the community against national benchmarks to determine variances in outcomes and population trends. | Evaluate outcomes of practice, patterns, and systems of care against national benchmarks to determine variances in practice outcomes and population trends. Identify risk factors for disease and opportunities for preventative healthcare in an effort to inform policy decisions and evidence-based practice. Utilize information technology and research methods to analyze data from practice. Examine various analytical methods available for translating evidence into practice. |
| MSN/DNP Essn: DNP I, III | NUR 704 Clinical Scholarship for Evidence- Based Practice *Notes - consumers of research and promoting change* | Semester credit hours (3). This course explores methods for critical appraisal of existing literature and other evidence to devise the best practice principles. The student learns to apply relevant findings for development of practice guidelines and practice improvement projects. | Explore methods for critical appraisal of the literature to devise best practice principles. Recognize application of the translation of research into practice. Summarize improvements of the reliability of healthcare practice and outcomes. Explore the nurse's potential role as a practice specialist/consultant in collaborative knowledge- generating research. Apply principles of evidence dissemination to improve healthcare outcomes. Review and identify scholarly peer-reviewed venues for required guidelines. |
| MSN/DNP Essn: DNP IV, VI | NUR 705 DNP Project II – Implementation | Semester credit hours (3). This course strengthens the collaborative role of the student within the professional healthcare team. Guidance | Implement approved DNP project within discipline specific area. |

| | | from faculty will be provided as students implement and evaluate the DNP project. | Analyze and evaluate DNP project outcomes and prepare for dissemination. Prepare DNP project submission in the style required by selected peer-reviewed journal. |
|---|---|--|---|
| MSN/DNP Essn: DNP III, VIII Spring 2019 | NUR 708 DNP Project III - Dissemination | Semester credit hours 3). This course provides opportunities for continued analysis and interpretation of findings. Following the completion of the DNP project, students disseminate the findings to peers and community of interest. | Disseminate scholarly project evidence to one or more groups in an effort to improve health outcomes. Submit DNP project to selected peer-reviewed journal. |
| MSN/DNP Essn: DNP VI, VII, VIII | NUR 790 DNP Transition to Practice (200 clinical hours – 0,2) | Semester credit hours (2). This course is a culmination of all residency experiences preparing the student to demonstrate and refine assessment skills, foundational practice knowledge, and application of biophysical, psychosocial, behavioral, sociopolitical, cultural, economic, and nursing science. The student demonstrates advanced levels of clinical judgement, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care. | Demonstrate advanced levels of clinical judgement, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care to improve patient outcomes. Guide, mentor, and support other nurses to achieve excellence in nursing practice while in the clinical setting. Refine conceptual and analytical skills in evaluating organizational, population, fiscal, and policy issues within the clinical setting. |
| MSN/DNP Essn: DNP VI, VII, VIII | NUR 733 DNP Transition to Practice for the Executive Leader Practice (200 clinical hours-0,2) | Semester credit hours (2). This course is the culmination of all residency experiences preparing the student to demonstrate and refine both leadership and management skills within the role of the executive leader. | Apply the advanced practice nurse skills of clinical judgement, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care to improve patient safety and outcomes as a nurse executive. Demonstrates leadership and management skills while supporting others to achieve excellence in nursing practice while in the clinical setting. Apply executive leadership skills to educate and guide individuals, families, and communities through complex health and situational transitions. |

| MSN/DNP Essn: DNP II MSN II | NUR 709 Organizational and Systems Leadership – Role Development | Semester credit hours (3). This course expands the student's knowledge of care delivery approaches, with emphasis on accountability for patient and/or population safety in collaboration with an interdisciplinary team. The student incorporates principles of business, finance, economics and health policy to healthcare delivery and ethical challenges. | Identify a specific safety need of a targeted population and potential members of the health care team for collaboration. Develop a plan to communicate information to members of the team and create a plan to address safety need. Engage in practice inquiry to improve health outcomes, policies, and healthcare delivery systems. Employ principles of business, finance, economics and health care policy. Identify an ethical dilemma in current practice and evaluate potential outcomes of alternative approaches. |
|-----------------------------------|--|---|--|
| MSN/DNP Essn: DNP V MSN VI | NUR 706 Advocacy in Healthcare Policy | Semester credit hours (3). This course prepares the student to design, influence, evaluate, and implement health care policy in various health care settings. The student learns to analyze health care policy and engage in advocacy in the political arena. | Analyze a health policy or political challenge related to discipline-specific area from the perspective of consumers, health professionals, and other stakeholders. Advocate for social justice, equity, and ethical policies within all healthcare arenas. Demonstrate leadership in the development and implementation of institutional, local, state, federal, and/or international health policy. Influence policy makers through active communication with committees, boards, or task forces. Identify political figures within your state and write a letter to address a current issue related to the nursing profession or to advocate for an underserved population. |
| MSN/DNP Essn: DNP IV | NUR 710 Applied Informatics and Change Systems | Semester credit hours (3). This course prepares the student to apply new knowledge, manage individual and aggregate level information, and assess the efficacy of patient care technology appropriate to the chosen area of expertise. | Identify programs that evaluate and monitor outcomes of care and quality improvement. Analyze and communicate critical elements necessary to the selection and use of healthcare information systems and patient care technologies. |

| MSN/DNP Essn: DNP III MSN/DNP Essn: | NUR 715 Scholarly Writing for Nursing and Healthcare | Semester credit hour (2). This course will promote the development of scholarly writing techniques required for a variety of applications within nursing and healthcare, including writing for publication and grant application preparation. Ethical and legal issues associated with writing within the profession will be explored. Critical appraisal of sources for evidence-based practice to enhance scholarly writing will be emphasized. | Demonstrate leadership skills while evaluating and resolving ethical and legal issues within healthcare systems. Evaluate consumer health information sources for accuracy, timeliness, and appropriateness. Employ technical skills necessary to develop and execute an evaluation plan for data extraction from practice information systems and databases. Demonstrate proficient use of grammar, syntax, and APA style in professional writing. Examine the ethical and legal issues surrounding plagiarism and publication of scholarly work. Critically appraise levels of evidence in research for inclusion in a scholarly document. Discriminate among different types of scholarly writing based on the purpose of the document. Assemble a portfolio of resources and funding to support scholarly work. |
|--|--|---|--|
| MSN Encompasses all essentials | Certification Review | This seminar is a review of the knowledge needed for successfully completion the FNP | Course The Certification Review Seminars |
| NONPF Independent Practice Competencies | | certification process. | provide continuing education contact hours, as well as valuable study tips and information to be utilized in preparing for certification exams. |
| Population Focused FNP | | | |
| MSN/DNP Essn: MSN Encompasses all Essentials NONPF | NUR 655 PMHNP Certification Review | Semester credit hour (1). This seminar is a review of the knowledge needed for successfully completion the PMHNP certification process. | Psychiatric Mental Health Review Course The Certification Review Seminars provide continuing education contact hours, as well as valuable study tips and information to be utilized in preparing for certification exams. |

| Independent | | | |
|----------------|---------------------|---------------------------|-----------------------------------|
| Practice | | | |
| Competencies | | | |
| | | | |
| NONPF | | | |
| Population | | | |
| Focused PMHNP | | | |
| MSN/DNP Essn: | NUR 711 DNP Project | Semester credit hour (1). | Continue progress on DNP project. |
| DNP VIII | Extension | | |
| | | | |
| Offered at any | | | |
| time | | | |

Appendices

Fitness for Duty-Return to Classroom and Clinical Courses

Exposure Incident Report

Nursing Student Acknowledgement of Policies and Expectations

School of Nursing, Graduate Program Immunization Form

Graduate Student Cohort Representative Job Description

Graduate Faculty Liaison Job Description

SCHOOL OF NURSING

Fitness for Duty - Return to Classroom and Clinical Courses

| Student Name: | Student ID: | |
|----------------|-------------|--|
| Absence Dates: | | |

This form is required for all students who have experienced an illness, injury, pregnancy, hospitalization or other circumstance which resulted in either a physical or psychological limitation(s) or an absence from the program of more than 3 days consecutively.

As the healthcare provider completing this form, please use the following information to determine if this student is prepared to physically and emotionally handle returning to the classroom and clinical setting, which includes:

- Each clinical day is 8-12 hours in length
- Students are expected to complete nursing care activities comparable to that of a staff nurse with the supervision of their clinical instructor
- Physical demands in the nursing program include duties that frequently require squatting, bending, kneeling, reaching, and stair climbing, lifting and carrying up to 50 pounds; frequently pushing and pulling up to 200 pounds with assistance; occasionally lifting up to 200 pounds with assistance and occasional carrying up to 51 to 74 pounds. Duties also require constant use of sense of sight, hearing, touch, and speech. Environmental conditions include procedures that involve handling blood and body fluids using standard (universal) precautions.

Please indicate your recommendation regarding this student's ability to return to the classroom/clinical setting. The student must be free of any restrictions or limitations which may endanger the student's health or a client's safety in the clinical setting.

_____ I find the above named student fit for duty with NO restrictions or limitations in the classroom or clinical setting.

I find the above named student fit for duty only WITH the following restrictions or limitations for the specified time period:

I find the above named student NOT fit for duty; may reconsider after_____(date)

Data

Healthcare Provider Signature/Title

| Healthcare Provider Signature/Title | Date | |
|--|-------|---------|
| | UPIN# | |
| Healthcare Provider Printed Name/Title | | |
| | | |
| Address | | |
| Office phone number/email address | | |
| - | | 6.12.14 |

Exposure Incident Report

| Student: | Date Completed: |
|--|----------------------------|
| Date of Exposure/Incident: | Time of Exposure/Incident: |
| Where did the exposure/incident occur? | |
| Describe the task you were performing at the time of exp | posure/incident? |
| | |
| | |
| List the part of the body that was exposed? | |
| Did the foreign object penetrate your body?Y | es <u>No</u> |
| If yes, what was the exposure? | |
| Was any liquid injected into your body?Y | |
| If yes, what was the liquid? | |
| Were you wearing personal protective equipment at the | time of exposure? Yes No |
| If yes, what type were you wearing? | |
| Did you receive medical treatment?Y | esNo |
| If yes, where? | |
| Date:Doctor's name providing trea | atment: |
| Additional Information about the incident: | |
| | |
| Student Signature: | Date: |
| Instructor's Signature: | Date: |

A copy must be provided to the School of Nursing Graduate Chair and Anderson University Health Services

Nursing Student Acknowledgement of Policies and Expectations

I have read and understand the Anderson University School of Nursing Graduate Student Handbook and I agree to abide by the terms therein.

In the event there are policies in the Graduate Nursing Student Handbook that differ from the Anderson University Academic Catalog, the policies in the Graduate Nursing Student Handbook will supersede.

If any updates or changes are made to the Graduate Nursing Student Handbook for my academic year I understand I will be held responsible to those updated policies and procedures as well.

Student's Full Name (please print)

AU ID Number

Student Signature

Date

Immunization Form

*This form must be completed and signed by a physician, physician assistant, or advanced practice registered nurse (NP). You must include titer results where applicable and may include other supporting immunization documentation.

| Name | | Date | | |
|---------------------------|--------|--------|--------|---------------|
| Immunization | Dates | Dates | Dates | Dates |
| | Dose 1 | Dose 2 | Dose 3 | |
| Tdap (DPT series | | | | |
| and TD/Tdap | | | | |
| booster in last 10 | | | | Required Tdap |
| years) | | | | |
| Meningococcal | | NA | NA | NA |
| Vaccine (1 dose) | | | | |
| Strongly recommended | | | | |
| but not required | | | | |
| Varicella (2 doses) *1 | | | NA | NA |
| MMR (2 doses) | | | NA | NA |
| *2,3 | | | | |
| Flu Vaccine | | NA | NA | NA |
| Attach most recent | | | | |
| documentation | | | | |

*1 Evidence of immunity required. Varicella titer date ______(attach lab report). If no evidence of immunity, 2 doses of Varicella required.

*2 If born after 1957, >1 MMR after 1980 is required.

*3 If no documentation of MMR, complete the following:

| | Dates | Dates | Dates | Dates |
|------------|--------|--------|--------|---------|
| | Dose 1 | Dose 2 | Dose 3 | Booster |
| Measles | | | | |
| Mumps | | | | |
| Rubella *4 | | | | |

*4 If no documentation of Rubella immunization, complete Rubella titer (attach lab report).

| | Dates | Dates | Dates |
|--|--------|--------|------------------------------------|
| | Dose 1 | Dose 2 | Dose 3 (4-6 months after Dose 1 |
| Hepatitis B (the series must be started at least prior to the first clinical day)*5 | | | |

*5 If no documentation of Hepatitis B immunization, complete Hepatitis B titer (attach lab report).

Note: Students who are pregnant or lactating should postpone Hepatitis B vaccination until completion of pregnancy or lactation.

Job Title: Graduate Cohort Representative Department: Nursing, Graduate

Position Overview:

The Cohort representatives are positions of honor elected by their peers. They will serve until graduation under normal circumstances. To serve as an official representative of the students in each cohort of the Master of Science in Nursing Program and Doctor of Nursing Practice Program in expressing student opinions, concerns, interests, and suggestions/ideas to Graduate Nursing Chair and faculty liaison.

Essential Job Functions:

- Serve as a liaison between the graduate student body and faculty.
- Ensure that the students are properly represented and informed.
- Ensure and maintain availability to graduate student body and faculty.
- Demonstrate ability to communicate and present information in an organized, constructive and effective manner.
- Will meet with the Faculty liaison at least once a semester prior to a Graduate Subcommittee meeting to share concerns and ideas.

Requirements

- Must be in good academic standing according to School of Nursing standards.
- Possess ability to show initiative and motivation.
- Possess excellent communication and listening skills.
- Maintain open line of communication and availability to faculty and graduate student body.

Job Title: Graduate Faculty Liaison Department: Nursing, Graduate

Position Overview:

The graduate faculty liaison is a position of honor. The liaison is nominated by the faculty and will serve for one year as an official liaison for the students in the Graduate Nursing Program in sharing faculty concerns, interests, suggestions/ideas and news to the graduate class cohort representatives. Also, serve as the official liaison for the cohort representatives to the faculty during at least one Graduate Faculty Subcommittee meeting per semester.

Essential Job Functions:

- Serve as a liaison between the faculty and the graduate student body.
- Ensure that the students are properly represented and informed.
- Ensure and maintain availability to faculty and graduate student body.
- Demonstrate ability to communicate and present information in an organized, constructive and effective manner.

Requirements

- Must be in good academic standing according to School of Nursing standards.
- Possess ability to show initiative and motivation.
- Possess excellent communication and listening skills.
- Maintain open line of communication and availability to faculty and graduate student body.

References

- American Association of Colleges of Nursing (AACN). (2012). AACN launches new graduate nursing student academy. Retrieved from http://www.aacn.nche.edu/news/articles/2012/gnsa
- Berman, A.T., Snyder, S., and Frandsen, G. (2016). *Kozer & Erb's Fundamentals of nursing concepts, process, and practice*, 10th ed. Essex, England: Pearson Education Limited.
- Shelly, Judith A. & Miller, Arlene, B. (2006). *Called to care: A Christian worldview for nursing*. Downers Grove, IL: InterVarsity Press.