



**Saint Mary's
College**

NOTRE DAME, IN

**DOCTOR OF
NURSING PRACTICE
PROGRAM**

**GRADUATE STUDENT
HANDBOOK**

Table of Contents

Preface.....	7
CHAPTER 1	8
Welcome to the DNP program.....	8
Saint Mary’s College Mission Statement.....	9
History of the College	9
Overview of the Graduate Programs.....	10
Doctor of Nursing Practice (DNP).....	11
Conceptual Curricular Model for the DNP Programs	12
The DNP Program Goals include.....	14
DNP Program Outcomes.....	14
Academic Linkages Table.....	15
CHAPTER 2	20
Curriculum and Academic Policies.....	21
DNP Core Faculty/Staff.....	21
About the Program.....	21
Admissions Information.....	22
Requirements for Post BSN to DNP	22
Requirements for MSN-APRN to DNP	22
Application Process	23
Application Form.....	23
Transcripts.....	23
Recommendations.....	24
Admission Testing Requirements	24
Personal Statement.....	24
Admission Decisions	24
Matriculation.....	25
Retention of Records.....	25
Deferrals.....	25
Transfer Admission.....	25
Program Plan.....	26
Completion of the Doctor of Nursing Practice (DNP).....	28
Certification Examination.....	29
ACADEMIC POLICIES	30

Academic Standing	30
Good Academic Standing for Progression	30
Academic Probationary Status	30
Normal Program Progression.....	31
Out of normal progression	31
Financial Impact.....	31
Leave of Absence Policy.....	31
Request for an alternate progression plan	32
Grades lower than B- or Unsatisfactory Grade	32
Continuous Enrollment	33
Inactive Status.....	34
Reinstatement.....	34
Correspondence.....	34
Assignment of credit hours	34
Incomplete Grade.....	35
Title of DNP Student	35
American Nurses Association Code of Ethics	35
Academic Integrity and Academic Honesty	36
Responsibilities for Academic Honesty.....	36
DNP Program: Academic Misconduct Policy.....	37
Student Success.....	38
Academic Appeals	38
Statement of Non-Discrimination	38
Equal Opportunity and Nondiscrimination Policy.....	39
Sigma Theta Tau	39
CHAPTER 3	40
DNP Clinical Policies and Requirements	41
Orientation and Immersion Policy:	41
Orientation	41
Immersion	41
Declaring clinical major.....	41
Annual in-service requirements	41
HIPAA Training.....	41
Bloodborne Pathogens Training	42

Required Equipment, Resources, Professional Membership & Testing	42
Equipment	42
Resources	42
Professional Membership.....	43
Preceptor Fees:.....	43
HESI Testing.....	43
ExamSoft.....	43
Online Testing Policy:	44
Health, Licensure, Safety, and Professional Behavior Requirements:.....	44
Health Requirements.....	44
Required health documentation	45
Immunizations and Tuberculosis (TB) Testing	45
Vaccine Declination.....	46
Licensure.....	46
Safety Requirements	47
CPR Certification	47
ACLS Certification	47
Drug Screening	47
Drug Screening Results.....	47
Criminal Background Check.....	48
Criminal Background Check and Drug Test Procedure.....	48
Essential Abilities	49
Due Dates and Non-Compliance Consequences.....	49
Student Health/Pregnancy.....	49
Compliance	49
Policy Statement	50
Scope of Policy	51
Definitions.....	51
Reasonable Accommodation of Students	52
Modified Academic Responsibilities Policy for Parenting Students	53
Leave of Absence.....	53
Retaliation and Harassment	54
Housing Related Accommodations.....	54
Dissemination of the Policy and Training.....	55
Student Health: Illness/Injury During Clinical	55

Student Impairment and Criminal Background Disclosure Policies.....	55
Impaired Student Policy: Perception of Impairment.....	55
Procedure for Removing an Impaired Student.....	56
Professional Behavior Expectations.....	56
Communication.....	56
Lines of communication:	57
Civility	57
Responsible use of Social Media	57
Clinical Policies	59
Student Clinical Responsibilities	59
Clinical Experience before beginning clinical rotations	60
Clinical Experiences	60
Clinical Sites	61
Clinical Preceptors	61
Student Responsibilities for Finding a Preceptor.....	62
Contracting with a Preceptor.....	63
Preceptor Responsibilities for the Student	64
Direct Patient Care	65
Documentation Requirements in Typhon	66
Calculation of Clinical Time.....	67
Clinical Evaluation requirements.....	68
Supervised Clinical Practicum	68
Clinical Incidents	70
Chapter 4.....	71
Practice Innovation Practicum, Project, and Portfolio.....	71
Practice Innovation Practicum, Project, and Portfolio.....	72
DNP Practice Innovation Practicum	72
DNP Practicum Hours.....	72
DNP Practice Innovation Project and DNP Portfolio	73
DNP Practice Innovation Project Team	73
DNP Practice Innovation Project Focus.....	73
DNP Practice Innovation Project Requirements	73
A Project Proposal Paper and Presentation.....	73
Institutional Review Board Approval	74

Final Practice Innovation Project Paper and Presentation	74
Final Project Approval.....	74
DNP Practice Innovation Proposal and Final Project Possible Outcomes.....	74
Possible Outcomes:.....	74
DNP Portfolio	75
Appendices.....	76

Preface

The Graduate Student Handbook has been written to provide each student with information specific to the curriculum, student rights and resources related to nursing students. The handbook is meant to be congruent with Saint Mary's College Bulletin that contains all academic policies approved by the College Graduate Committee. The content of this handbook does not supersede information provided in the College Bulletin nor do the contents constitute a contract between the Department of Nursing Science and its students. If regulations, program requirements, or services described herein conflict with more current practice, the latter will prevail. Students will be notified of any changes through their Saint Mary's email account.

Verification

Graduate students have the responsibility to acquaint themselves with the contents of this handbook and are held accountable for the information provided. This handbook may be updated at any time and is reviewed on an annual basis by the Department Graduate Program Committee. Students will be notified via email of any substantial changes in policy that occur mid-year.

Student Handbook

The handbook is available on the Department Graduate Program website.

Accreditation



The Doctor of Nursing Practice Program at Saint Mary's College is accredited by the Commission on Collegiate Nursing Education (<http://www.ccneaccreditation.org>).

CHAPTER 1

Welcome to the DNP program

Welcome to the DNP program

The Department of Nursing Science (DNS) welcomes you to our learning community. Your faculty members recognize that we are all professional nurses and, because we are committed to lifelong learning, we will continue to work and learn with you through advanced clinical study and DNP course work. This document provides relevant policies and practices that will support the successful knowledge acquisition and goal attainment for BSN to DNP and MSN-APRN to DNP program. Notably, this handbook should be used in conjunction with the Saint Mary's College Bulletin that contains all student policies approved by the College Graduate Committee. The Department of Nursing Science (DNS) adheres to the College approved policies.

Saint Mary's College Mission Statement

Founded by the Sisters of the Holy Cross in 1844, Saint Mary's College promotes a life of intellectual vigor, aesthetic appreciation, religious sensibility, and social responsibility. Saint Mary's is a Catholic, residential, women's, Liberal Arts College offering undergraduate degrees and co-educational graduate programs.

A pioneer in the education of women, the College fosters an inclusive, academic community where students discover and develop their talents as they prepare to make a difference in the world. All members of the College contribute to this mission in their response to the complex needs and challenges of contemporary life. –revised 2018

Mission of the Department of Nursing Science

The mission statement of the DNS is congruent with the fundamental concepts of the college mission. The mission statement of the DNS guided the development of the DNP program outcomes and is as follows:

Congruent with the Mission of Saint Mary's College, the Department of Nursing Science is a learning community comprised of students, faculty, staff and health care professionals who support each other in the preparation of competent, confident professional nurses at all levels who will assume leadership roles in the promotion of health and healing within diverse communities and health care systems. The learning community promotes scholarship, the use of critical thinking, spiritual inclusion and ethical decision making in clinical practice, life-long learning and an obligation for social responsibility and service for vulnerable and under-served individuals, families and communities.

History of the College

The mission statements for the College and for the DNS are based in the history of the college. In 1843, University of Notre Dame founder Father Edward Sorin wrote to his superiors, Father Basil Anthony Moreau, to request that he send Sisters to a new mission in the wilderness of northern Indiana “to look after the laundry and the infirmary...and also to conduct a school, perhaps even a boarding school.” Four Holy Cross Sisters answered the call and, after a 40-day

voyage from Le Mans, France, they arrived on May 30, 1843. They established the first school and novitiate in 1844 just north of South Bend, Ind., in Bertrand, Michigan.

Answering the needs of their community, the Sisters taught orphan girls and ministered to the poor and the sick. Under Mother Angela Gillespie, the first American to head Saint Mary's Academy, the school moved to its present site in northern Indiana in 1855.

In 1908, the charter for Saint Mary's Academy was amended to authorize the legal existence of a college, and Mother Pauline O'Neill, then director, became the college's first president. Known as the "builder for God" because of the unprecedented growth during her tenure, Mother Pauline's most notable accomplishment –Le Mans Hall- still stands as the most recognizable symbol of Saint Mary's.

The distinguished tenure of Sister Madeleva Wolff began in 1934. She reminded leaders that "the essence of our college is not its buildings, its endowment fund, its enrollment, or even its faculty; the essence is the teaching of truth." Some of her most tangible contributions included the establishment of the School of Sacred Theology which provided a doctoral degree, and the construction of the Moreau Center for the Arts. Sister Madeleva was known for her poetry, her eloquence and her outspokenness. The Madeleva Society, composed of special benefactors of the College, bears her name, as does the Madeleva Memorial Classroom Building and the Madeleva Lecture Series.

Through more than 160 years and 11 presidents, Saint Mary's college has embraced the mission envisioned by Father Moreau and has continued to make real in the lives of students and alumnae its core values: learning, community, faith and spirituality, and justice. From modest beginnings as a boarding school teaching and ministering to orphans, to offering seven bachelor's degrees and boasting more than 18,000 living alumnae, the College has continued to grow and prosper as a Catholic women's college in the liberal arts tradition.

Beginning in 2015, Saint Mary's College began offering graduate degrees in nursing, data analytics and speech-language pathology. The expansion of educational programming is predicated on the college's long-standing responsiveness to the needs of the community in addition to the commitment to academic excellence. Notably, graduate education at Saint Mary's is not restricted to women. The Doctor of Nursing Practice (DNP) programs are an extension of the core values in preparing nurses to advance their nursing skills, engage in advanced knowledge acquisition, and provide leadership in a continuously evolved healthcare ecosystem.

Overview of the Graduate Programs

The Department of Nursing Science offers a DNP program that includes a BSN to DNP program which is designed for a Registered Nurse who has earned a BSN or MSN Entry to Practice degree. The MSN-APRN to DNP program is designed for Advanced Practice Registered Nurses who have an earned MSN degree. The BSN to DNP clinical track offers students the opportunity to become a Family Nurse Practitioner (FNP) or Adult-Gerontology Acute Care Nurse Practitioner; both clinical tracks are designed to provide nurses with the opportunity to pursue

advanced knowledge acquisition and clinical practice in nursing. Our mission statement emphasizes the human need and caring for underserved and disadvantaged populations. We encourage students to find clinical learning experiences that focus on caring for the poor in sites that have a majority of underserved and Medicaid patients.

Doctor of Nursing Practice (DNP)

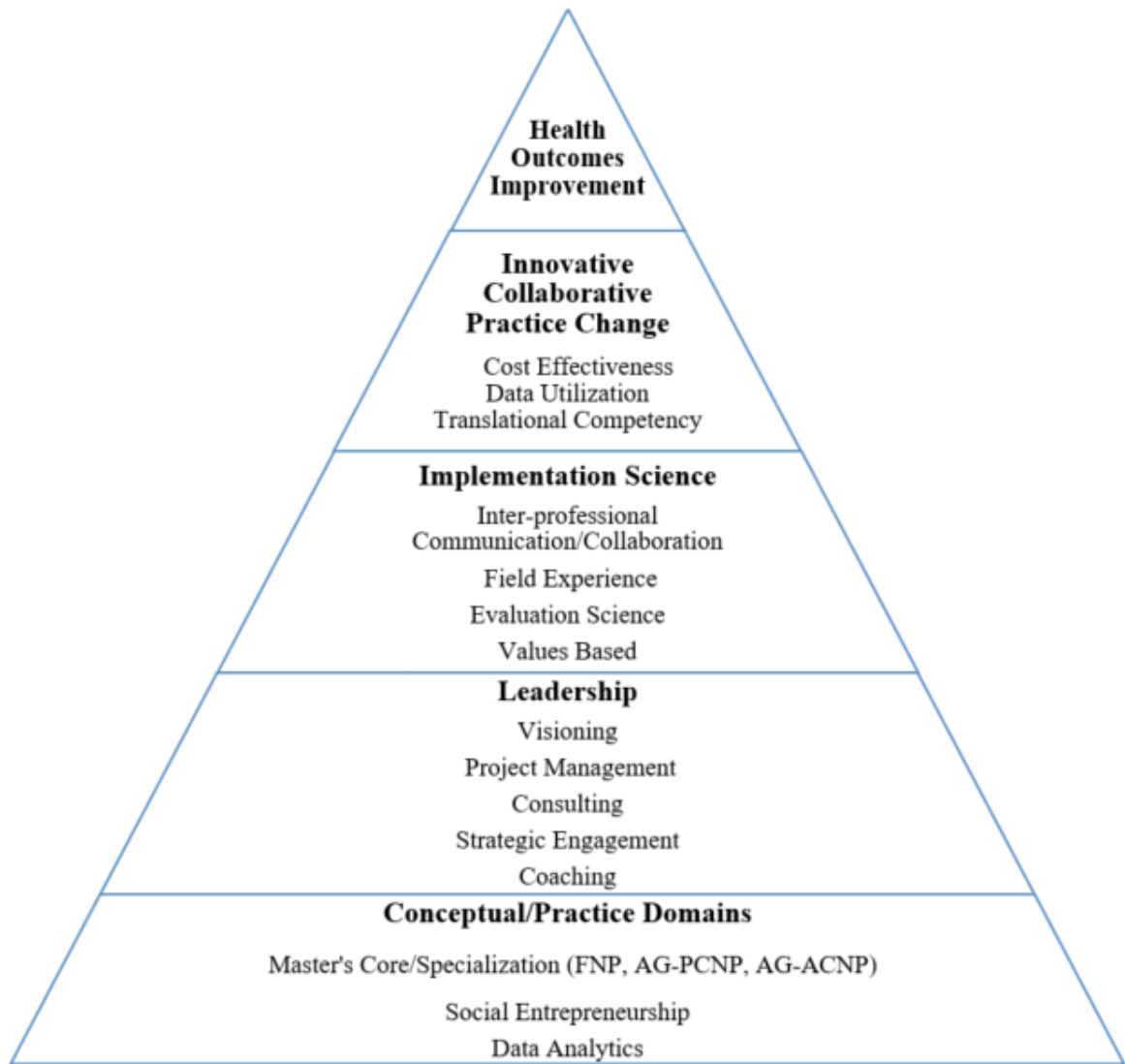
The DNP program curriculum is guided by a comprehensive curricular model that is inclusive of the standards that comprise The Essentials: Core Competencies for Professional Nursing Education (2021) and the National Task Force on Quality Nurse Practitioner Education (2022). The programs offer an innovative approach to DNP education through a curriculum that is planned to develop professional nurse leaders who will improve the quality of health care, patient health outcomes, and health policy through sustainable innovation grounded in available data.

Two paths to the completion of the DNP degree are offered. The first is a BSN to DNP program that will take 12 semesters over 4 years to complete (78 credit hours). The online nature of this program supports nurses who work while pursuing an advanced degree. Graduates of this program must successfully complete 1,090 supervised practicum hours; 690 hours are earned through supervised direct patient care with individuals and families within the scope of each clinical track (FNP or AG-ACNP) and 400 hours are earned through the DNP coursework and supervised practicum.

The second program is a post MSN-APRN to DNP program which is completed over 6 semesters (2 years) depending on the number of supervised clinical hours that the students has completed in their MSN-APRN degree program. Students in the post MSN to DNP program hold certification in a clinical specialty area as a nurse practitioner or a clinical nurse specialist. Graduates of this program will complete a minimum of 400 supervised DNP practicum hours; additional practicum hours will be individualized to the needs of the student.

The curriculum has been carefully planned to support progressive knowledge acquisition and practicum learning experiences, and introduces new courses into the DNP curriculum such as Social Entrepreneurship and the Business of Healthcare and Data Analytics and Outcomes Improvement. A conceptual framework and definitions of the components of the framework are reflected in both the goals of the DNP programs and the DNP Program Outcomes.

Conceptual Curricular Model for the DNP Programs



The components of the curricular model are defined to promote further understanding of the model are defined to promote further understanding of the model:

Innovative Collaborative Practice Change:

1. Cost Effectiveness: Mindful assessment and responsible inter-professional planning for the use of economic and human resources, goods, and services to achieve improvement in health care quality, meet new challenges, and redress inequities in the delivery of care.

2. Data Utilization: The collaborative process of using obtaining and applying data-based evidence for pioneering healthcare transformation and quality improvement to inform effective, safe, and efficient care redesign.

3. Translational competency: The ability to move data-based knowledge into clinically useful forms that are implemented across health care teams within systems context and measured by the meaningful impact on outcomes and performance.

Implementation Science:

1. Inter-professional communication/collaboration: The engagement in open and honest communication between healthcare providers, individuals and their families, and the community in a context of shared values in a collaborative model of practice that builds trust, mutual respect, is consistent and is visibly supportive

2. Field Experience: Engagement with healthcare stakeholders to critically examine organizational and health care issues and develop strategies for meaningful change at the local and national levels.

3. Evaluation Science: The systematic use of substantive knowledge about a phenomenon under investigation to: 1) develop and improve organizations focused on preventing and solving a wide range of pressing human concerns and problems; 2) to aid decision making; 3) to facilitate organizational learning and change; 4) to meet transparency and accountability needs; 4) to utilize theory-based methods to evaluate knowledge to provide to determine merit, worth, and impact.

4. Values Based: A process of assessment of the operational integration of mission and values of individuals, communities, and organizations that results in an understanding of unique value and informs collaborative efforts to work together for beneficial change within a system/organization.

Leadership:

1. Visioning: A process of establishing an innovative, forward thinking interprofessional approach to a challenge/problem in order to identify goals, plan interventions, and solve problems that will “challenge prevailing wisdom” and guide the profession and/or the organization into the future.

2. Project Management: A systematic process, informed by strong communication skills, to engage in a team approach to assess, plan, organize, motivate, control resources, protocols and procedures to achieve bring about beneficial change and added value to improve health outcomes.)

3. Consulting: Active engagement as a theoretical and clinical expert to create an engagement culture in the continual process of the analysis of key concepts of patient access, quality, safety, health care delivery, cost, communication, and organizational systems to create sustainable change based on the strengths and challenges of the patient/system.

4. Strategic Engagement: Collaborative, focused interactions with key stakeholders that result in an ongoing, value-based benefit to communities through innovative sustainable change.

5. Coaching: The use of person-centered communication skills to engage with in an innovative process with stakeholders that facilitates healthy, sustainable change based on client/system wisdom and values to move goals to action.

Conceptual/practice domains:

1. Master's core: Completion of coursework and clinical practice to meet the requirements of NONPF for eligibility for national certification as a Family Nurse Practitioner, Adult-Gerontology-Primary Care Nurse Practitioner, or Adult-Gerontology-Acute Care Nurse Practitioner.

2. Social Entrepreneurship: Individuals who assume the role of the social entrepreneur are called to adopt a mission to create and sustain social value, demonstrate dedication to opportunities to serve the mission, engage in a process of continuous innovation, adaptation, and learning, act boldly without being limited by current resources, demonstrate accountability to the constituencies served and for the outcomes resulting from the process (Dees, 2001).

3. Data Analytics: A process and set of strategies central to the DNP role as translator/analyst that is used to reduce error in data collection, measurement and analysis that increase confidence of the team in the consistent, quality evaluation of the impact of translation.

The Mission of the College and the DNS guided the development of the model and together provide the overall goals and program outcomes for the DNP programs.

The DNP Program Goals include:

1. To educate professional nurses who demonstrate ethical leadership and vision while using effective communication and data based, innovative strategies to transform health care systems, improve nursing practice through translation of evidence, and improved health outcomes.
2. To educate professional nurses to advocate for social justice, to work to decrease health disparities, to increase access to health care, and to embrace human differences that include cultural and spiritual uniqueness and the dignity of all people.
3. To educate professional nurses to become nurse practitioners who will practice both independently and collaboratively as members of health care teams to provide direct and state of the art healthcare to improve the health of individual, families, and communities.

DNP Program Outcomes

The Curricular model and the program goals are congruent and support the Program Outcomes for the DNP program. The program outcomes are reflected in the course content throughout every course that is taken by students and are reflected in the course evaluations.

1. Synthesize and apply scientific evidence for the development, implementation, and evaluation of clinical interventions for advanced nursing practice.

2. Demonstrate communication and collaboration skills within intra-professional and interprofessional teams to create change in health care and complex health care delivery systems.
3. Provide advanced evidence-based clinical care management within a collaborative, cultural and spiritual context for individuals, families and/or population.
4. Demonstrate leadership in the use of current and emerging health and data analytic technologies to evaluate and improve outcomes in health care delivery and organizational systems.
5. Advocate for social justice, equity, and ethical policies in health systems, population health initiatives and evidence-based health policy initiatives through collaboration with other health professionals and stakeholders.
6. Apply business and entrepreneurial strategies for meaningful quality improvement and efficient use of resources within healthcare environments.

Academic Linkages Table: AACN Core Competencies, College and Department Mission, and DNP Program Outcomes

AACN The Essentials: Core Competencies for Professional Nursing Education (2021)	NONPF Role Core Competencies (2022)	DNP Program Outcomes	Saint Mary's College Mission Statement & Core Values	Department Nursing Science Mission Statement & Philosophy
<p>Domain 1: Knowledge for Nursing Practice Descriptor: Integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, as well as knowledge from other disciplines, including a foundation in liberal arts and natural and social sciences. This distinguishes the practice of professional nursing and forms the basis for clinical judgment and innovation in nursing practice.</p>	<p>NP Domain 1: Knowledge of Practice The nurse practitioner integrates, translates, and applies established and evolving scientific knowledge from diverse sources as the basis for ethical clinical judgement, innovation, and diagnostic reasoning.</p>	<p>Synthesize and apply scientific evidence for the development, implementation, and evaluation of clinical interventions for advanced nursing practice.</p>	<p>Founded by the Sisters of the Holy Cross in 1844, Saint Mary's College promotes a life of intellectual vigor, aesthetic appreciation, religious sensibility, and social responsibility. Saint Mary's is a Catholic, residential, women's, liberal arts college offering undergraduate degrees and co-educational graduate programs.</p>	<p>Congruent with the Mission of Saint Mary's College, the Department of Nursing Science is a learning community comprised of students, faculty, staff and health care professionals who support each other in the preparation of competent, confident professional nurses at all levels who will assume leadership roles in the promotion of health and healing within diverse communities and health care systems.</p>
<p>Domain 6: Interprofessional Partnerships Descriptor: Intentional collaboration across professions and</p>	<p>NP Domain 6: Interprofessional Collaboration in Practice The nurse practitioner</p>	<p>Demonstrate communication and collaboration skills within</p>	<p>The College fosters an inclusive, academic community</p>	<p>Nursing as a practice profession is actualized through the nursing process, a decision-making framework</p>

<p>with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes.</p> <p>Domain 7: Systems-Based Practice Descriptor: Responding to and leading within complex systems of health care. Nurses effectively and proactively coordinate resources to provide safe, quality, equitable care to diverse populations.</p>	<p>collaborates with the interprofessional team to provide care through meaningful communication and active participation in person-centered and population-centered care.</p> <p>NP Domain 7: Health Systems The nurse practitioner demonstrates organizational and systems leadership to improve healthcare outcome.</p>	<p>intra-professional and interprofessional teams to create change in health care and complex health care delivery systems.</p> <p>Apply business and entrepreneurial strategies for meaningful quality improvement and efficient use of resources within healthcare environments.</p>	<p>where students discover and develop their talents as they prepare to make a difference in the world.</p>	<p>consisting of assessment, diagnosis, planning, implementation, and evaluation. Nursing as a profession is committed to the promotion of wellness of individuals, families and communities. The commitment to wellness extends beyond direct care to include research, planning and implementation of comprehensive health care services, and collaboration with other health professionals within a framework that respects the rights and dignities of all persons.</p>
<p>Domain 2: Person-Centered Care Descriptor: Person-centered care focuses on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate. Person-centered care builds on a scientific body of knowledge that guides nursing practice regardless of specialty or functional area.</p> <p>Domain 3: Population Health Descriptor: Population health spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and</p>	<p>NP Domain 2: Person-Centered Care The nurse practitioner uses evidence-based and best practices to design, manage, and evaluate comprehensive person-centered care that is within the regulatory and educational scope of practice. Fundamental to person-centered care is respect for diversity, differences, preferences, values, needs, resources and determinates of health unique to the individual.</p> <p>NP Domain 3: Population Health The nurse practitioner partners, across the care</p>	<p>Provide advanced evidence-based clinical care management within a collaborative, cultural and spiritual context for individuals, families and/or population.</p> <p>Advocate for social justice, equity, and ethical policies in health systems, population health initiatives and evidence-based health policy initiatives through collaboration with other health professionals and stakeholders.</p>	<p>Core Value Community: We sustain a vital community where each member is valued and where all are bound by a common purpose. In an atmosphere of mutual respect, we are called to share responsibility for the success of the College's mission.</p>	<p>Nursing is an art, a science, and a profession. Historically, nursing as an art has been shaped by its Christian heritage. Nursing may be viewed as a personal calling, by which one fulfills service to others. Nursing as a science encompasses a specialized body of knowledge built upon science and the liberal arts and has specified outcomes related to health and holism. Nursing science involves the study of life processes within the human system and environment for the purpose of assisting clients in the promotion, maintenance and restoration of optimal levels of wellness. Clients include individuals, families, communities, and/or societies.</p>

<p>non-traditional partnerships from affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes.</p>	<p>continuum, with public health, healthcare systems, community, academic community, governmental, and other entities to integrate foundational NP knowledge into culturally competent practices to increase health promotion and disease prevention strategies in effect the care of populations.</p>			
<p>Domain 5: Quality and Safety Descriptor: Employment of established and emerging principles of safety and improvement science. Quality and safety, as core values of nursing practice, enhance quality and minimize risk of harm to patients and providers through both system effectiveness and individual performance.</p>	<p>NP Domain 5: Quality and Safety The nurse practitioner utilizes knowledge and principles of translational and improvement science methodologies to improve quality and safety for providers, patients, populations, and systems of care.</p>	<p>Apply business and entrepreneurial strategies for meaningful quality improvement and efficient use of resources within healthcare environments.</p>	<p>Core Value Justice: We respect all persons because of their God-given dignity. We act as responsible stewards of resources both on and beyond the campus. We advocate social action and practice principles of justice and compassion.</p>	<p>Baccalaureate nursing education provides the foundation for professional nursing practice. Serving as role models, the faculty structure a variety of learning experiences that help learners engage in critical thinking, integrate knowledge, and acquire psychomotor skills necessary for the profession of nursing. The educational process within a Christian community enables the learner to develop professional competence marked by a respect for human dignity and an appreciation for diversity within the context of social responsibility.</p>
<p>Domain 4: Scholarship for Nursing Discipline Descriptor: The generation, synthesis, translation, application, and dissemination of</p>	<p>NP Domain 4: Practice Scholarship and Translational Science The nurse practitioner</p>	<p>Synthesize and apply scientific evidence for the development, implementation, and evaluation</p>	<p>Core Value Learning: We commit ourselves to academic excellence and</p>	<p>The learning community promotes scholarship, the use of critical thinking, spiritual inclusion and ethical decision making</p>

nursing knowledge to improve health and transform health care.	generates, appraises, synthesizes, translates, integrates, and disseminates knowledge to improve person-centered health and systems of care.	of clinical interventions for advanced nursing practice.	foster an environment where all members of the community learn with and from each other. The liberal arts form the foundation for learning.	in clinical practice, lifelong learning and an obligation for social responsibility and service for vulnerable and underserved individuals, families and communities.
<p>Domain 8: Informatics and Healthcare Technologies Descriptor: Information and communication technologies and informatics processes are used to provide care, gather data, form information to drive decision making, and support professionals as they expand knowledge and wisdom for practice. Informatics processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practice and professional and regulatory standards.</p>	<p>NP Domain 8: Technology and Information Literacy The nurse practitioner envisions, appraises, and utilizes informatics and healthcare technologies to deliver care.</p>	<p>Demonstrate leadership in the use of current and emerging health and data analytic technologies to evaluate and improve outcomes in health care delivery and organizational systems.</p>	<p>All members of the College contribute to this mission in their response to the complex needs and challenges of contemporary life.</p>	<p>The undergraduate program prepares the graduate to function as a generalist in a variety of settings and provides the foundation for graduate education and advanced practice in nursing.</p>
<p>Domain 9: Professionalism Descriptor: Formation and cultivation of a sustainable professional nursing identity, accountability, perspective, collaborative disposition, and comportment that reflects nursing's characteristics and values.</p> <p>Domain 10: Personal, Professional, and Leadership Development Descriptor: Participation in activities and self-reflection that foster personal health, resilience, and well-being, lifelong learning, and support the</p>	<p>NP Domain 9: Professional Acumen The nurse practitioner demonstrates the attributes and perspectives of the nursing profession and adherence to ethical principles while functioning as a committed equal partner of the interprofessional health care team, and adherence to ethical principle.</p>	<p>Demonstrate leadership in the use of current and emerging health and data analytic technologies to evaluate and improve outcomes in health care delivery and organizational systems.</p>	<p>Core Value Spirituality: We commit ourselves to meeting the spiritual needs of members of all faith traditions. We encourage and support members as they grow spiritually and as they lead lives of faith.</p>	<p>In accordance with the Mission of the College, the faculty are committed to promoting a life of intellectual vigor, aesthetic appreciation, religious sensibility and social responsibility for its student and community. These values and beliefs, coupled with standards for nursing practice and education, provide the basis for the curriculum in nursing.</p>

acquisition of nursing expertise and assertion of leadership.	NP Domain 10: Personal and Professional Leadership The nurse practitioner participates in professional and personal growth activities to develop a sustainable progression toward professional and interpersonal maturity, improved resilience, and robust leadership capacity.			
---	---	--	--	--

CHAPTER 2

Curriculum and Academic Policies

Curriculum and Academic Policies

DNP Core Faculty/Staff

Faculty	Role	E-mail
Sue Anderson PhD, RN, FNP-BC	Associate Professor Director, Department of Nursing Science DNP Program Director	sanderson@saintmarys.edu
Jennifer Bauer, DNP, FNP-C, RN	Assistant Professor	jbauer@saintmarys.edu
Richard Becker, DNP, RN	Assistant Professor	rbecker@saintmarys.edu
Dani Edson, DNP, AG-ACNP-BC	Clinical Assistant Professor and AG-ACNP Program Director	dedson@saintmarys.edu
Patricia Keresztes, PhD, CCRN, RN	Associate Professor	pkereszt@saintmarys.edu
Nicole Mentag, PhD, MSN, RN	Assistant Professor	nmentag@saintmarys.edu
Kimberly Minich, DNP, FNP-C	Assistant Professor	kminich@saintmarys.edu
Linda Paskiewicz, Ph.D., CNM, RN	Professor Emeritus	lpaskie@saintmarys.edu
Lori Pajakowski, DNP, RN	Assistant Professor	lpajakowski@saintmarys.edu
Annette Peacock-Johnson, DNP, RN	Associate Professor Emeritus	ajohnson@saintmarys.edu
Karla Bronicki	Administrative Assistant	kbronick@saintmarys.edu
April Lane, MA	Student Advisor and Clinical Coordinator	alane@saintmarys.edu

About the Program

Primary and Acute Care Nurse practitioners provide holistic health care based on the best evidence with a strong focus on health promotion, disease prevention, diagnosis and treatment of disease. Nurse practitioners in both roles are experts at implementing education strategies that optimize the patient's ability to heal.

The American Association of Colleges of Nursing (AACN) and the National Organization of Nurse Practitioner Faculties (NONPF) note that the scope of practice of these roles is not reflected in where care is delivered, but rather in the type of care that is delivered. The fundamental difference between primary care and acute care nurse practitioners is found in the type of relationship these providers have with their patients:

- **Primary care** is characterized by long-term, chronic, comprehensive, and continuous care that is holistic in nature. Primary care providers work in a collaborative and interprofessional environment as they facilitate referrals for additional services for patient needs that are beyond the provider's area of expertise.

- **Acute care** is characterized by restorative care that occurs in time sensitive and rapidly changing clinical conditions for patients with unstable chronic conditions, complex acute illnesses, and critical illness. Acute care providers work in a collaborative and interprofessional environment as they facilitate referrals for additional services for patient needs that are beyond the provider's area of expertise.

The DNP Program at Saint Mary's College offers a unique, innovative, and state-of-the-art program of study that prepares students as clinical scholars in one of three clinical focus areas:

- **Family Nurse Practitioner:** Educated to provide continuous primary care to individuals and families across the lifespan. Focus is on family-centered care across the spectrum of wellness to illness, including preventive, chronic, and acute care.
- **Adult-Gerontology Acute Care Nurse Practitioner:** Educated to provide care to individuals from late adolescence (age 15) to frail older adults with acute, critical, and complex health problems. Focus is on individuals who are "physiologically unstable, technologically dependent, and/or highly vulnerable to complications" (AACN, 2012).

Admissions Information

Admission to the Doctor of Nursing Practice program is competitive. Applicants may apply for one of two tracks available: Post BSN to DNP or Post MSN to DNP.

Requirements for Post BSN to DNP

- All applicants must have a Bachelor's Degree in Nursing from a nationally accredited (NLN or CCNE) college or university, or the international equivalent. Candidates are expected to have maintained at least a 3.0 cumulative GPA in undergraduate coursework.
- Submission of a completed NursingCAS application
- Recent statistics course.
- Official transcripts from all previously attended institution
- Unencumbered license or eligibility for RN licensure in the state where clinical course work hours will be completed
- Substantive personal essay statement that reflects on the DNP role and your desire to pursue the specific track for which you are applying.
- Three letters of recommendations from academic and/or other professionals. One letter must be from a former faculty member.
- A resume or current CV
- Personal interview(s) with faculty (if selected).

Requirements for MSN-APRN to DNP

- A MSN-APRN degree from a nationally accredited (CCNE or NLN) college or university, or the international equivalent. Candidates are expected to have maintained at least a 3.0 cumulative GPA in undergraduate and master's coursework.

- Submission of a completed NursingCAS application
- Recent statistics course.
- Official transcripts from all previously attended institutions
- Advanced practice national certification for MS--DNP pathway (for current Nurse Practitioners only)
- Unencumbered RN license in the state where clinical course work hours will be completed.
- Substantive personal essay statement that reflects on the DNP role and your desire to pursue the specific track for which you are applying.
- Three letters of recommendations from academic and/or other professionals. One letter must be from a former faculty member.
- A current resume or CV
- Personal interview(s) with faculty (if selected for one)

Application Process

A complete application for graduate admission at Saint Mary's College consists of the following requirements:

- Application form and application fee
- Official transcripts from all colleges and universities previously attended
- Three letters of recommendation (one must be from a former faculty member)
- Personal statement
- Resume
- Licensure/Certification Information
- Signed Essential Abilities Policy Form (Appendix A)

Application review of completed applications will begin as early as December and will continue until all applications have been reviewed. The application deadline is June 15.

Application Form

Saint Mary's College uses the NursingCAS application system. Applications for the fall term open September 1.

Candidates must complete the application form, submit the application fee for NursingCAS (no additional fee is collected by Saint Mary's), and provide all supporting documents through the NursingCAS application system.

Transcripts

Official transcripts are required from all undergraduate institutions attended by the applicant. Any transcripts that are not in English must be accompanied by certified translations and certified credit evaluations. During the application review process, transcripts and certified translations and evaluations provided through the NursingCAS system may be used to evaluate an applicant. If an applicant is admitted and matriculates, he/she must arrange for official transcripts, with degree conferral, to be sent directly to Saint Mary's College. The Admission

Committee may rescind an offer of admission if official transcripts provided for matriculation differ from those submitted at the time of review.

Recommendations

Three letters of recommendation are required. Letters providing the most value to the Admission Committee come from former faculty members, supervisors, or colleagues who have direct knowledge of the applicant's intellectual ability, work ethic, motivation, and ability to be successful in this doctoral program. At least one letter must be from a faculty member who has direct knowledge of the candidate's academic potential.

Admission Testing Requirements

Official TOEFL (80) or IELTS (6.5) scores are required for all applicants for whom English is a second language, unless the undergraduate degree was earned at an institution where English was the primary language of instruction.

The Doctor of Nursing Practice does not require any additional standardized tests.

Personal Statement

The personal statement is intended to help the Admission Committee understand each applicant's academic interests, career goals, and past experiences as they relate to the program.

Applicants must reflect on the DNP role and the applicant's desire to pursue the specific track for which he/she is applying in the personal statement.

Admission Decisions

A Graduate Admission Committee, made up of members of the faculty in the program, will review all applications and make admissions decisions. The Committee's decisions will be reviewed by the Dean of Graduate Studies, who will resolve any concerns with the departmental committee before applicants are notified of the status of their application.

Applications may be:

- Held for additional information and reviewed once the information requested is received
- Accepted
- Accepted conditionally:
 - Pending successful completion of baccalaureate or master's degree
 - Pending achievement of 80 on the TOEFL or 6.5 on IELTS.
 - Pending successful completion of prerequisite courses with a grade specified by the graduate program director.
- Denied
- Waitlisted

Admission decisions will be communicated electronically and via mail. Admission decisions will be communicated on a rolling basis.

All admission decisions are final and may not be appealed.

Matriculation

Accepted students must confirm their intention to enroll by submitting an enrollment deposit. Students enrolling at Saint Mary's College must have on file all official final transcripts showing proof of baccalaureate degree, all official final transcripts showing proof of completion of the Master's Degree, if applicable. See the Bulletin for the updated policy. Enrollment deposits are not refundable.

The Office of Graduate Admission reserves the right to rescind an offer of admission if an application is found to be fraudulent or to include plagiarism. Offers of admission may also be rescinded if final grades from courses in progress at the time of admission are judged by the graduate program director to be significantly lower than the level of achievement presented in the rest of the academic record.

Retention of Records

All application documents submitted by applicants are imaged and indexed into the student information system. For matriculating students, paper documents when submitted, are given to the Graduate Programs Office (and the Office of the Registrar) at the beginning of the student's first term and become part of his/her student record. Incomplete applications, as well as complete applications for students who are not accepted or did not enroll, are kept on file by the Graduate Admission Office for two years.

Deferrals

Upon request, Saint Mary's may grant a deferral to accepted students whose plans change before they are able to enroll. It is assumed that the academic record will remain unchanged during the deferral period. Students who defer admission and complete prerequisite undergraduate or graduate level courses between the time of acceptance and deferred enrollment must reapply for admission. Requests for deferrals should be made in writing. Deferred student admission status will carry to the next admission cycle (for most applicants).

Transfer Admission

Saint Mary's College allows applications from students who have already earned graduate school credits at another institution. Transcripts will be reviewed as part of the admission process, and the applicant will be notified at the point of admission if transfer credits will be applied toward the Saint Mary's College degree. Only credits from accredited graduate programs, with a grade of B or better, will be reviewed for transfer. A student may transfer no more than six semester hours or its equivalent (within the last five-year period) from an unfinished graduate program. If a student has completed a master's program, he or she may transfer up to nine semester hours into a Saint Mary's master's program. If a student has completed a clinical master's degree and is pursuing a doctoral degree at Saint Mary's, he or she may transfer up to 50% of the total credits required for the Saint Mary's degree.

Program Plan

BSN to DNP Curriculum: All Clinical Tracks Program Requirements:

78 credit hours
 690 supervised clinical contact hours
 400 DNP practicum hours
 1,090 total supervised hours (clinical + practicum hours)

MSN-APRN to DNP Curriculum:

37 credit hours
 600 hours of clinical contact hours (transferred in from clinical MSN Program)
 400 DNP practicum hours
 1,000 total supervised hours

Legend:

Didactic hours: 1 didactic hour = 1 class hour.

Every didactic hour requires a minimum of 4 hours of independent preparation. Therefore, a 3-hour didactic course will require a minimum of 12 hours per week of reading, thinking, and writing.

Clinical contact hours: 1 clinical hour = 60 **direct** patient care contact hours

DNP Practicum hours: 1 DNP practicum hour = 40 DNP Practicum hours

Track Key:

FNP: Family Nurse Practitioner

AG-ACNP: Adult-Gerontology Acute Care Nurse Practitioner

AG-PCNP: Adult-Gerontology Primary Care Nurse Practitioner

	Fall Semester	Spring Semester	Summer Semester
First Year 18 Credits	NURS 600 Communication and Relationship Centered leadership (3 cr) NURS 622 Statistics for Health and Biological Sciences (3 cr)	NURS 604 Evidence-based Practice 1: Evidence Synthesis for Practice (3 cr) NURS 612 Social Entrepreneurship and the Business of Health Care (3cr)	NURS 602 Philosophical and Ethical Foundations for the Advanced Nursing Practice Role (3cr) NURS 620 Human Population Ecology (3 cr)
Second Year 18 credits 30 direct patient care hours	NURS 624 Evidence-based Practice II: Translation of Evidence for Practice (3cr) NURS 644 Advanced Physiology & Pathophysiology (3cr)	NURS 651 Advanced Pharmacology (3cr) NURS 670 Data Analytics and Outcomes Improvement (3cr)	NURS 610 Healthcare Policy and Advocacy (3cr) NURS 688 Advanced Health Assessment and Diagnostic Reasoning (3cr: 2.5 didactic; 0.5 clinical= 30 clinical contact hours)

	Fall Semester	Spring Semester	Summer Semester
<p>Third Year</p> <p>21 credits</p> <p>180 direct patient care hours</p> <p>160 DNP practicum hours</p>	<p>NURS 701 DNP Practice Innovation 1 (1 cr: 40 DNP practicum contact hours). S/F grading</p> <p>All students: NURS 724 Advanced Clinical Studies: Population-based Mental Health Care Across the Lifespan (3cr: 2 didactic; 1 clinical =60 clinical contact hours)</p> <p>FNP Students: NURS 633 Health Promotion for Population Health (2 cr)</p> <p>AG-ACNP, AG-PCNP Students: NURS 711 Population-based Gerontologic Health & Wellness (2cr)</p>	<p>NURS 702 DNP Practice Innovation II (1 cr: 40 DNP practicum contact hours) S/F grading</p> <p>NURS 725 Quality Effectiveness and Safety in Organizational Systems (3 cr)</p> <p>All Students: NURS 722 Advanced Clinical Studies: Primary Care and Health Promotion for Adults I (5 cr: 3 didactic; 2 clinical =120 clinical contact hours)</p>	<p>NURS 703 DNP Practice Innovation III (2 cr: 80 DNP practicum contact hours) S/F grading</p> <p>NURS 682 Procedures for Advanced Practice Registered Nurses (1 cr)</p> <p>NURS 718 Resource and Practice Management (3 cr)</p>
	Fall Semester	Spring Semester	Summer Semester
<p>Fourth Year</p> <p>21 credits</p> <p>480 direct patient care hours</p> <p>240 DNP practicum hours</p>	<p>NURS 704 DNP Practice Innovation IV (2 cr: 80 DNP practicum contact hours) S/F grading</p> <p>FNP, AG-PCNP Students: NURS 710 Advanced Clinical Studies: Primary Care and Health Promotion for Reproductive Health (5 cr: 3cr didactic; 2 cr clinical =120 clinical contact hours)</p> <p>AG-ACNP Students: NURS 717 Advanced Clinical Care for Adults and Older Adults (5 cr: 3 didactic; 2 cr clinical =120 clinical contact hours)</p>	<p>NURS 705 DNP Practice Innovation V (2 cr: 80 DNP practicum contact hours) S/F grading</p> <p>FNP Students: NURS 730 Advanced Clinical Studies: Primary Care and Health Promotion of Children and Adolescents (5 cr: 3 cr didactic; 2 cr clinical = 120 clinical contact hours)</p> <p>AG-ACNP Students: NURS 726 Advanced Clinical Studies: Trauma Care with Adults and Older Adults (5 cr: 3 cr didactic; 2 cr clinical = 120 clinical contact hours)</p> <p>AG-PCNP Students: NURS 723 Advanced Clinical Studies: Primary Care of Adults and Older Adults II (5 cr: 3 cr didactic; 2 cr clinical = 120 clinical contact hours)</p>	<p>NURS 706 DNP Practice Innovation VI (2 cr: 80 DNP practicum contact hours) S/F grading</p> <p>FNP Students: NURS 770 Clinical Residency in Primary Care of Individuals and Family (5cr: 1 didactic; 4 cr clinical = 240 clinical contact hours)</p> <p>AG-ACNP Students: NURS 772 Clinical Residency in Acute and Critical Care of Individuals and Families (5cr: 1 didactic; 4 cr clinical = 240 clinical contact hours)</p> <p>AG-PCNP Students: NURS 774 Clinical Residency in Primary Care of Adults and Older Adults and Families (5cr: 1 didactic; 4 cr clinical = 240 clinical contact hours)</p>

MSN-APRN to DNP Curriculum, Social Entrepreneurship Track

Year 1
Fall Semester
NURS 600 Communication and Relationship Centered Leadership (3 cr) NURS 622 Statistics for Health and Biological Sciences (3 cr) NURS 701 DNP Practice Innovation I (1cr: 40 DNP practicum contact hours)
Spring Semester
NURS 612 Social Entrepreneurship and the Business of Health Care (3cr) NURS 604 Evidence Based Practice I: Evidence for Synthesis for Practice (3cr) NURS 702 DNP Practice Innovation II (1 cr: 40 DNP practicum contact hours)
Summer Semester
NURS 610 Healthcare Policy and Advocacy (3cr) NURS 703 DNP Practice Innovation III (2cr: 80 DNP practicum contact hours)
Year 2
Fall Semester
NURS 624 Evidence Based Practice II: Translation to Evidence for Practice (3cr) NURS 704 DNP Practice Innovation IV (2cr: 80 DNP practicum contact hours)
Spring Semester
NURS 725 Quality Effectiveness & Safety in Organizational Systems (3 cr) NURS 670 Data Analytics and Outcomes Improvement (3cr) NURS 705 DNP Practice Innovation IV (2cr: 80 DNP practicum contact hours)
Summer
NURS 718 Resource & Practice Management (3cr) NURS 706 DNP Practice Innovation VI (2cr: 80 DNP practicum contact hours)

Completion of the Doctor of Nursing Practice (DNP)

The DNP is a terminal degree in nursing and, as a clinical doctorate, emphasizes expert clinical practice. To qualify for the DNP degree, all students must successfully complete the required course work in their program of study:

BSN to DNP: Requires a minimum of 78 credits and a minimum of 1,090 supervised practicum hours that are completed in 12 semesters. The practicum hours include 400 DNP practicum hours and 690 supervised direct patient care hours. Additional time to complete the program is negotiable, up to 5 years, a time consistent with the college graduate program policies.

MSN-APRN to DNP: Requires a minimum of 35 credits in residence and a minimum of 1,000 supervised clinical hours that are completed in six (6) semesters. All post MSN

students must submit verification of the number of supervised clinical practicum hours in their advanced practice educational programs (MSN/MS). Students are responsible for obtaining this documentation from the school in which the program was completed and submitting it during the first semester of the DNP program. Faculty advisers and the program director use this documentation to determine how many hours of practicum the student will need in their plan of study for the post--master's DNP degree in order to meet the 1,000-practicum hour requirement.

All DNP students must complete their DNP practicum hours through a faculty-guided scholarly experience which is completed in the final semesters of the student's doctoral program (see individual program plans). This culminating experience provides evidence of the student's critical thinking and ability to translate evidence into practice through problem identification, proposal development, implementation, and evaluation. The DNP Practice Innovation Project encompasses the synthesis of coursework and practice application and results in a deliverable product that is reviewed and evaluated by a faculty advisor and a scholarly project team.

The DNP final project is discussed in Chapter 4 of this handbook and consists of:

- A scholarly comprehensive paper
- A public oral presentation
- The submission of an abstract for presentation at a regional or national meeting.

Failure to satisfy the program requirements will result in forfeiture of degree eligibility. In rare circumstances, and where a leave of absence is not appropriate, a student may petition the graduate program director and the Provost for one additional semester to complete the requirements for completion of the DNP program.

Certification Examination

Students graduating from this program are eligible to take the certification exam offered by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP). In addition to certification examinations offered by the AANP and ANCC, graduates of the Adult-Gerontology Acute Care Nurse Practitioner Track also are eligible to take the certification examination offered by the American Association of Critical Care Nurses (AACCN).

The ANCC offers certification examinations in nurse practitioner tracks offered by Saint Mary's College: Family Nurse Practitioner, Adult-Gerontology Primary Care Nurse Practitioner, Adult-Gerontology Acute Care Nurse Practitioner. Candidates who pass this examination are designated as board certified nurse practitioners (e.g. FNP-BC). More information may be found at the ANCC Certification website: [ANCC Certification Information](#)

The AANP offers certification examinations in these nurse practitioner tracks offered by Saint Mary's College: Family Nurse Practitioner and Adult-Gerontology Primary Care Nurse Practitioner. Candidates who pass this examination are designated as certified nurse practitioners (e.g. FNP-C). More information may be found at the AANP Certification website: [AANP Certification Information](#)

ACADEMIC POLICIES

Academic Standing

These policies are approved by the College Graduate Program Committee and the President's Academic Advisory Council and are available in the Graduate component of the College Bulletin.

Good Academic Standing for Progression

A degree--seeking graduate student is in good academic standing if he or she: 1) meets the standards of quality of his or her academic program; 2) makes satisfactory progress toward completion of degree requirements within the established time limit; 3) meets the requirement regarding continuous registration; 4) meets the minimum required cumulative grade point average of 3.0.

Academic Probationary Status

A graduate student in the DNP program is expected to maintain a B average throughout his or her program of study (3.0/4.0 GPA). The student and his or her advisor will receive written notification of academic probationary status from the Program Director if:

- The student earns a grade lower than a B- in a course, or
- The student earns a single semester GPA lower than 3.0.

Written communication will be directed to the student's permanent address on file with the college. A second course grade lower than a B-- may result in dismissal from the program even if the cumulative GPA is above 3.0. Students may continue on academic probation for no more than two consecutive semesters. No grades below a B- may be counted as fulfilling degree requirements; such grades will be calculated into the grade point average. Grades below B- such as a C or D grade are awarded to graduate students and are used to calculate both semester and cumulative GPA. However, they will not be accepted for completion of graduate coursework. Students may be required to repeat courses to complete the degree.

The instructor has the jurisdiction in determining and assigning grades at the end of the semester. The criteria for assigning grades is determined by the faculty. The Department of Nursing Science supports the use of the College Grade scale to calculate the overall GPA (College Bulletin on page 394).

Normal Program Progression

The DNP Program at Saint Mary's College is delivered in hybrid, year-round format over four years. Courses are offered once per year. The faculty of the Department of Nursing Science recognize that life events happen that may impact progression in the program. This policy refers to situations that often lead to a student being out of the normal program progression. Due to nursing regulatory issues, students are expected to graduate from the program in no more than 150% of the expected time (6 years) from the time of admission.

Out of normal progression

A student becomes out of normal progression when one of the following events occur:

1. Requests a leave of absence for an extenuating circumstance.
2. Requests an alternate plan of study due to an extenuating circumstance.
3. Earns a grade lower than B- or an Unsatisfactory Grade in any course.

Financial Impact

It is the student's responsibility to communicate with the Students Account Manager and the Financial Aid Office to determine if there will be any change to the tuition fee structure and financial aid.

Leave of Absence Policy

A leave of absence (LOA) is a time during which a student remains in the intended graduate program but is inactive. Students do not take courses at Saint Mary's College during a leave of absence or engage in academic or practicum activities that are part of their program of study. A leave of absence is not typically granted for more than one academic year but may be extended depending on the circumstances.

Students wishing to take a leave of absence must notify the DNP Program Director and Advisor/Clinical Coordinator as soon as they are considering this option. A leave of absence is generally granted for one year for students who have extenuating circumstances, such as prolonged illness, serious injury, family circumstances, relocation, change in employment status, that would otherwise make remaining in progression impossible or difficult. Without prior approval from the Director of the Department of Nursing Science or the DNP Program Director, transfer credits will not be granted for courses taken elsewhere during a leave of absence.

In the written request for a leave of absence, the student should include the following:

1. Name, current address, telephone number, Saint Mary's College email address.
2. Brief description of the nature of the circumstance leading to the request for a leave of absence. When appropriate, students also are encouraged to contact the Accessibility Resource Office (ARO) (574-284-4262) to discuss possible accommodations.
3. The semesters in which the student wishes for the leave of absence to be effective.
4. The semester in which the student intends to return.

Once the leave of absence is granted, the student is responsible for petitioning for reinstatement to the program. In order to be reinstated the student must contact the DNP Program Director and the Advisor/Clinical Coordinator two (2) months before the anticipated return. In this reinstatement application, the student must include the following:

1. Name, current address, telephone number, Saint Mary's College and alternate email addresses.
2. Resolution of the circumstances leading to the request for a leave of absence. When the ARO has developed accommodations for a graduate student, the ARO must send a letter outlining the specifics of the accommodations to faculty members. Accommodations are not granted without a letter from the ARO nor are accommodations retroactive.
3. The semester the student intends to return and courses the student wishes to enroll in.

Students who do not qualify for or are not granted a LOA may transition to inactive status (See policy on Continuous Enrollment and Academic Standing: Inactive Academic Status). Inactive status does not require formal approval but does count against the maximum time to graduation.

Request for an alternate progression plan

Students who have extenuating life circumstances may request an alternate progression plan to be prepared by the DNP Program Director. An alternate progression plan typically reduces the course load that the student enrolls in each semester, and therefore extends the time for graduation by one year. Alternate progression plans that delay graduation by more than one year are generally not permitted.

Grades lower than B- or Unsatisfactory Grade

According to Saint Mary's College policy, students who earn a grade lower than B- or earns a single semester GPA lower than 3.0 will be placed on academic probation status. As stated in *The Bulletin*: "*Students may continue on academic probation for no more than two consecutive semesters. No grades below a B- may be counted as fulfilling degree requirements; such grades will be calculated into the grade point average. Grades below B- such as a C or D grade are awarded to graduate students and are used to calculate both semester and cumulative GPA; however, they will not be accepted for completion of graduate course work.*"

Consistent with Saint Mary's College policy, the minimum acceptable grade in DNP program courses is B-. In courses that are graded as Satisfactory/Unsatisfactory, the student must receive a satisfactory grade in order to progress in the program. Students who receive a grade lower than B- or an Unsatisfactory grade in a course must retake the course when it is offered the next year. According to Saint Mary's College policy, a student who receives a second grade lower than B- or Unsatisfactory will be dismissed from the DNP Program at Saint Mary's College.

Students must refer to the Bulletin, paying close attention to pre-requisite courses. Students may not take a course if a pre-requisite course was not successfully completed. In some circumstances, this means that the student may need to be out of classes for a semester or year.

In cases where a student receives a grade lower than B- or Unsatisfactory due to a disability, that student is strongly encouraged to contact the Accessibility Resource Office ([Accessibility Resource Office](#)) to discuss possible accommodations that will foster success upon the student's return.

When a student receives a grade lower than B- or Unsatisfactory, the student:

1. Will receive a letter from the DNP Program Director notifying him or her of the grade and academic probationary status. The student also will receive a proposed plan of study for future semesters and recommendations for supplementary coursework if necessary.
2. Must contact the DNP Program Director and the Advisor/Clinical Coordinator two (2) months before the anticipated return with a statement of intent to return to the program. The student must be specific about the semester and courses that he or she will be enrolled in upon return to the program.
3. Must discuss the circumstances leading to the unsatisfactory performance in the course with a detailed plan for success.
4. Must provide evidence of completion of any required supplementary coursework and the outcome of that work.

Continuous Enrollment (Verbatim from the Bulletin)

Once admitted to a graduate degree program, graduate students must be registered for a minimum of one credit hour (not audit) or a zero-credit hour "continuous enrollment" course during all phases of their graduate education. All students, including those who have completed all coursework, must register each semester until all degree requirements are met. Students are responsible for completing the registration process each semester. A student who does not maintain continuous enrollment must communicate with the director of the relevant graduate program prior to applying for reinstatement.

Those students who have completed all coursework and are writing a master's thesis or preparing for a comprehensive exam should register for the corresponding course in their department of study for the purpose of continuing enrollment. Courses with grades of "V" (audit) are not considered valid registration for continuous enrollment purposes; students completing work for a course in which they received an "X" (incomplete) must maintain continuous enrollment in the following semester while completing all incomplete courses.

A student who does not meet the continuous enrollment requirement unless they have received an approved leave of absence, is considered inactive and not in good academic standing. Continuous enrollment may continue until the student's length of continuous enrollment reaches the Maximum Time to Degree as determined in the policies of the program into which the student matriculated. If degree requirements are not completely met by the Maximum Time to Degree, the student is considered inactive.

Inactive Status

Students who do not maintain continuous enrollment are considered inactive. Please see the Reinstatement policy for more details.

Reinstatement

A student who has officially withdrawn from and wishes to return to a Saint Mary's College graduate program must send a written request stating the reasons for seeking readmission to the Dean of Graduate Studies, who will forward a copy to the graduate program director (see continuous enrollment policy). The program director will ask the Graduate Admission Office to send the student an application for readmission. All transcripts and course descriptions for academic work completed during the intervening time must be submitted to the Graduate Admission Office. The application, along with any new academic information, will be reviewed by the DNS admission committee before the student receives a decision.

Correspondence

When a student's status changes to "out of normal progression" the student will receive an email and letter from the DNP Program Director. The letter will be sent via U.S. Mail to the address on file with the Registrar's Office. It is the student's responsibility to update the Registrar on any address changes. The email will be sent to the student's official Saint Mary's email address. It is the student's responsibility to frequently check the email account for correspondence.

If the program has not received the required request to re-enter the program two months prior to the start of the next semester, the Advisor/Clinical Coordinator will send the student one courtesy email and letter via US Mail reminding the student of the request requirement. If the student does not respond to the reminder within 10 business days, the student will be administratively withdrawn from the DNP Program.

Assignment of credit hours

Saint Mary's College operates under a semester credit hour system and defines credit hours based on the Carnegie unit. Each semester hour of credit represents one hour per week (15 weeks) of lecture or recitation and 3 to 4 hours of time spent in independent preparation (readings, papers, etc). The length of a clinical, laboratory, practicum, or internship period depends upon the requirement of the course. The DNP program uses a clinical hour to credit ratio of 1:60; for each one hour clinical credit students will have 60 supervised direct patient care clinical hours. The DNP program uses a DNP Practice Innovation Project Practicum to credit ratio of 1:40; for each one hour of DNP practicum credit, students will have 40 hours of supervised work toward the DNP Practice Innovation Project.

The assignment of credit policy applies equally to courses offered for less than 15 weeks, such as summer session courses. Such courses contain an equal or greater number of hours of direct instruction and independent preparation as the same course offered in the standard 15-week semester.

The assignment of credit policy applies equally to courses delivered through all modes of instruction including online courses. A course taught online in the DNP program has been reviewed and approved by the Teaching Learning Technology Roundtable. An online course is approved only once it has been determined that the course covers the same content and achieves the same outcomes as the same course taught on campus.

The Department of Nursing Science adheres to this policy as set forth and approved by the College Graduate Program Committee and the President's Academic Affairs Committee that is published in the College Bulletin on page 390.

Incomplete Grade

All work for credit is expected to be completed within the term it is attempted including independent studies. This expectation of students also should guide faculty members who teach graduate courses. That is, faculty are obligated to evaluate and grade graduate work by the end of the term in which the course is offered.

An incomplete grade (X) should only be given when an emergency or other legitimate reason prevents a student, who has been passing the course, from completing some critical portion of the required work. An incomplete grade is not automatic and must be negotiated with the course instructor prior to the final exam week. If an incomplete is granted by the instructor, the student is generally expected to complete the course requirements within 30 days after the beginning of the next term. If no change has been made by the approved due date, the grade will convert to a grade of F. Extensions for incompletes beyond 30 days require formal approval from the Graduate Program Director.

Title of DNP Student

In all posters, presentations, and emails, students must identify themselves as "Doctor of Nursing Practice or DNP, {Clinical Track} Student. For example: Jane Smith, DNP-Family Nurse Practitioner student.

Students **may not** use the term DNP Candidate or DNPc in any communications, papers, posters, or presentations.

American Nurses Association Code of Ethics

Faculty and students of the Saint Mary's College Department of Nursing Science adhere to the ANA Code of Ethics for Nurses. The provisions of the ANA Code of Ethics are available from the ANA website: [ANA Code of Ethics](#)

Conduct by students in violation of the ethical provisions identified in the ANA Code of Ethics for Nurses is viewed as professional and academic misconduct and failure to meet program objectives.

Academic Integrity and Academic Honesty

The academic integrity and academic honesty policy provided in this handbook is congruent with the policies of the College Graduate Program and can be found in the College Bulletin on page 389.

Saint Mary's College is dedicated to intellectual inquiry and the personal and professional growth of its students. Academic integrity is foundational to the vibrant academic life and social structure of the College and represents the mutual engagement in learning between students and faculty members. Academic integrity is grounded in certain fundamental values which include truth, honesty, respect, responsibility, and fairness that form the basis for a vibrant academic culture. The highest standards of academic integrity are expected of all graduate students and faculty members in academic coursework and research activities. Activities that compromise truth gleaned through the advancement of learning and knowledge development undermine intellectual effort.

Academic integrity, in all its forms, is an explicit value of the College. Academic honesty is a form of academic integrity. Academic honesty can be best understood by the ethical standards guiding faculty in their academic work. Specifically, an individual's contributions, in terms of words and scholarly findings, are attributable to the individual scholar alone; no other individuals can honestly claim another's ideas as their own. Furthermore, the integrity of scholarly knowledge rests on the accurate demonstration of the assumptions and reasoning that produced it. These standards are used as the implicit basis for teaching and learning in the College.

Responsibilities for Academic Honesty

Academic honesty consists of truth telling and truthful representations in all academic contexts. All members of the academic community have a responsibility to ensure that academic honesty is maintained.

Faculty responsibilities include

- Upholding the College's principles of academic honesty,
- Mitigating opportunities (where reasonable) for dishonesty,
- Promulgating this policy to graduate students by placing it in the course syllabi
- Protecting students' privacy¹, whether in confronting an individual suspected of dishonesty or receiving reports of dishonesty from others,
- Assigning appropriate grades to those who violate academic honesty as stipulated in the course syllabus
- Reporting instances of academic dishonesty to the designee of the Dean of Graduate Studies.

Student responsibilities include, but are not limited to

- Refraining from violations of academic integrity.
- Completing individual assignments with their own work,
- Completing collaborative assignments by appropriate division of labor,

- Completing internship, clinical or practicum assignments including time of service with their own work,
- Refusing to participate in an act of academic dishonesty,
- Notifying instructors of dishonesty that is observed.

It is certainly the case that investigating alleged instances of dishonesty may require some dissemination of information about the original occurrence. Protection implies that we actively seek to limit this dissemination to only those who need to know as part of such a process or those to whom there is a legal obligation to provide such information.

Violations of academic integrity include, but are not limited to: cheating on assignments or exams, fabrication of data, tampering, sabotaging another student's work, plagiarism, falsification of records and official documents, unauthorized access to computerized academic or administrative records or systems, and aiding and/or facilitating any such activities. It is assumed that all work submitted by a student represents the student's own ideas and work. Verbatim copying, paraphrasing, adapting or summarizing the work of another, regardless of the source – whether books, journals, periodicals, websites, or other forms of media-- must be properly cited. Any representation of the work of another that is not properly referenced is considered to be plagiarism. Ignorance of what constitutes plagiarism is not a defense to an allegation of a violation of the academic integrity policy. Any act that involves misrepresentation regarding the student's academic work or that abridges the rights of other students to fair academic competition is unacceptable.

Any context in which students neglect or actively decline to be fully honest in academic work is academic dishonesty. Similarly, failure to report observations of academic dishonesty is considered to constitute a violation of academic integrity. The medium in which full honesty is ignored – whether electronic, print or verbal (e.g., verbally claiming responsibility for another person's academic work) – is immaterial. Neither is it important whether the academic work in question is required for a course or optional, a quiz or a test, a term paper or an in--class essay, graded or ungraded, etc. Neither does it matter whether the student benefits directly or at all from the dishonesty.

DNP Program: Academic Misconduct Policy

The nursing profession and advanced nursing practice require the highest levels of honesty and integrity. It is a professional obligation that students have read the ANA Code of Ethics and understand the applicability to work conducted and submitted in an educational program. Academic misconduct is not tolerated in the DNP Program at Saint Mary's College. Students who know of instances of academic misconduct are required to report it immediately.

The following policy applies to a DNP student who engages in an act of academic misconduct.

On the first offense and depending on the severity of the misconduct, at minimum, the faculty member will issue a failing grade for the assignment and engage in a meeting with the student to discuss the misconduct. The misconduct, the student's response, and required remediation as

specified by the course instructor will be documented and kept in the student's file. The faculty member has the right to issue a failing grade for the course depending on the severity of the misconduct.

On the second offense of any kind, even in subsequent courses, the faculty member will issue a failing grade for the course, which may delay graduation for one year or more. Depending on the severity of the offense, the faculty may choose to refer the student to the Graduate Nursing Faculty Council for program dismissal.

Upon the first or second act of academic misconduct, the student will be required to engage in remediation as specified by the course faculty member. The required remediation must be completed within the timeframe specified by the faculty. There are no time extensions granted for remediation. Failure to complete remediation on time will result in course failure.

On the third offense of any kind, the result of academic misconduct is automatic program dismissal.

Students also must be aware that documentation of patient encounters in Typhon is legal medical documentation. Fabrication or deliberate misrepresentation of patient encounters, large and/or repeated errors in time documentation constitute cause for immediate program dismissal.

Student Success

Saint Mary's College believes that all students should be successful in their program of study. Students who are having difficulty as evidenced by missed classes, incomplete or unsatisfactory coursework, or other behaviors that are concerning will first meet with course faculty, who will document the behavior and develop a mutually-agreed upon improvement plan for the course. This plan will be kept in the student's private file. When patterns of concerning behavior are noted, the DNS Director, Program Track Coordinator, and student will develop a written Learning Contract, noting behaviors, objectives, and actions that the student must adhere to. Students who do not adhere to the Learning Contract will face consequences that may range from course failure to program dismissal.

Academic Appeals

The Department of Nursing Science adheres to the Grade and Dismissal Appeals approved by the College Graduate Program Committee and the President's Academic Affairs Committee that can be found on Page 388 of the College Bulletin.

Grade Appeals and Dismissal Appeals information is available in the Graduate Academic Policy component of the college Bulletin on page 388.

Statement of Non-Discrimination

Saint Mary's College graduate programs follow the College's non--discrimination policy. Non-urgent incidents of bias may be reported to the Office of Academic Diversity, Equity, and Inclusion by following the appropriate "Report an Incident" link on MySaintMarys home page.

Equal Opportunity and Nondiscrimination Policy

All College policies, practices, and procedures are administered in a manner consistent with our Catholic identity. With the foregoing understanding, Saint Mary's College will not engage in discrimination based on sex, race, color, national origin, religion (except where religion is a bona fide occupational qualification), age, disability, citizenship status, genetic information, veteran status, or any other characteristic protected by law. Based on our Catholic values, the College also prohibits discrimination based on sexual or political orientation. In the areas of undergraduate admission, academic year housing, and varsity athletics, Saint Mary's College will remain exclusive in respect to sex, but not as to any of the other above--mentioned characteristics. Student complaints regarding discrimination should be filed using the following reporting mechanism: <https://publicdocs.maxient.com/incidentreport.php?SaintMarysCollege>.

Reports will be directed to the appropriate vice president for review. Title IX Coordinator All inquiries concerning the application of Title IX and its implementing regulations may be referred to the College's Title IX Coordinator. The College's Title IX Coordinator is: Kris Urschel, Director of Human Resources, College Counsel and Title IX Coordinator Facilities Building (574)284-4777 titleix@saintmarys.edu

Sigma Theta Tau

Sigma Theta Tau International Honor Society of Nursing is the international honor society for nursing. The mission of Sigma Theta Tau International is to improve the health of people worldwide through the development of nurse leaders and nursing knowledge. The society provides its members with opportunities to contribute to the accomplishment of its mission and challenges its members with the responsibility to do so.

The purposes of Sigma Theta Tau International are to:

- Recognize superior achievement
- Recognize and develop leadership qualities
- Foster high professional standards
- Encourage creative work
- Strengthen commitment to the ideals and purposes of the profession

Students who are eligible for induction into Sigma Theta Tau will be invited to join the Nu Omicron--At--Large chapter. Graduate students who have not previously been inducted into Sigma Theta Tau will be invited to become a member during their fourth semester in the DNP program.

CHAPTER 3

DNP Clinical Policies and Requirements

DNP Clinical Policies and Requirements

Orientation and Immersion Policy:

Orientation

Orientation is an on-campus event that is intended to introduce new students to Saint Mary's College, DNP program faculty, course and clinical expectations, and how to access and use BlackBoard. The information provided during Orientation is intended to foster student success in this online DNP program.

Orientation is generally scheduled for early August. New students will be notified in advance of the orientation schedule. **Attendance for the full orientation is mandatory.** Students who miss orientation are responsible for obtaining all missed information prior to the beginning of class.

Immersion

Immersion events are an on-campus event that are intended to enhance student learning, promote networking among students, allow face-to-face interactions with faculty, and to immerse the student in their educational process through in-class experiences and testing. Immersion events are scheduled three times per year, generally from a Friday afternoon until Sunday afternoon. The start and end time of these events will vary depending on scheduled events.

Attendance at Immersion events is mandatory for the entire event. Students who cannot attend the entire Immersion must discuss the compelling reason (personal health issue or marriage, immediate family health concerns, wedding, or funeral) for missing the Immersion with the DNP Program Director and course faculty. In an email sent prior to the Immersion, the student must explain the reason for missing the event and provide any requested documentation. Students who do not have a compelling reason to miss an Immersion will have an unexcused absence and will therefore earn a grade deduction in each course that the student is enrolled in.

Declaring clinical major

Students must declare their clinical major (Family Nurse Practitioner, or Adult-Gerontology Acute Care Nurse Practitioner) upon acceptance to the DNP program. Students may change their clinical major until midterm of the 6th semester of study. Those wishing to change their clinical focus must complete the Graduate Change of Track Form (Appendix B) as provided by Academic Advisor and Clinics Coordinator April Lane by midterm of the 6th semester.

Annual in-service requirements

HIPAA Training

All documentation must include student's name on the completion document.

Students are required to engage in yearly HIPAA training. If this is completed as part of employment, the completion certificate may be used as proof of training. Students submitting HIPAA training as part of their work must have documentation that includes the student's name and date of completion. Students who do not complete HIPAA training as a part of their employment may do so through CastleBranch. The cost for completing this training through CastleBranch (https://www.castlebranch.com/online_submission/package_code.php) is \$10 and may be purchased by using the code IJ29HIPAA.

Bloodborne Pathogens Training (documentation must include student's name on the completion document)

Students are required to engage in yearly Bloodborne Pathogens training. If this is completed as part of the student's employment, the completion certificate may be used as proof of training. Students submitting bloodborne pathogens training as part of their work must have documentation that includes the student's name and date of completion. Students who do not complete this training as part of their employment may complete it through CastleBranch. The cost for completing this training through CastleBranch (https://www.castlebranch.com/online_submission/package_code.php) is \$10 and may be purchased by using the code IJ29OSHA module only.

Required Equipment, Resources, Professional Membership & Testing

Equipment

- NURS 688, 6th Semester, Summer 2: Cardiology stethoscope with neonatal, pediatric, and adult chestpiece, otoscope/ophthalmoscope, tuning fork and reflex hammer: \$420. Kit without stethoscope: \$305. Purchased from the DNS
- NURS 682, Summer 3, Semester 9: Suturing and biopsy practice kit, approximately \$130
- Laptop computer, software platform such as Office
- Internet access

Resources

- Shadow Health: NURS 651, 5th Semester, Spring 2: Advanced Pharmacology; NURS 688, 6th Semester, Summer 2: Advanced Physical Assessment: \$99 for first package; \$89 for second package
- Epocrates (or other evidence-based prescribing reference): ~\$150/year. Discounted pricing is often offered to students. NURS 688, 6th Semester, Summer 2. Used in coursework through Semester 12.
- Typhon: One-time fee of \$90, includes access to data for up to five years after graduation. First semester of program, used throughout.

Professional Membership

- American Association of Nurse Practitioners student membership: \$55/year.
<https://www.aanp.org/membership#student>

Preceptor Fees:

- Students are financially responsible for all fees associated with finding a clinical preceptor and any other fees required by the preceptor or health system.

HESI Testing

The schedule for proctored testing is:

- HESI Pathophysiology Exam (50 questions). Taken with NURS 644
- HESI Pharmacology Exam (50 questions). Taken with NURS 651
- HESI Physical Assessment Exam (50 questions). Taken with NURS 688
- HESI Exit Exam (100 questions). Taken with NURS 770, 772, or 774

HESI exams are mandatory standardized exams intended to help students prepare for the certification exam. These exams will be administered online at the end of the semester. The score on this exam will count toward the final grade in the course. It is up to the course faculty member to determine how much this score contributes to the final grade. All students are encouraged to review their summary report and engage in the appropriate remediation. Students who do not earn a HESI score of 750 or higher on two subsequent exams will be reviewed by the Graduate Nursing Faculty Council. Students must sign in to the exam under their Saint Mary's email address and must be proctored during the exam. The academic honesty policy applies to HESI testing.

When taking a **HESI exam** using ProctorU, the following rules apply:

- Sign into the test using the ProctorU username that you created for Saint Mary's College. If you have a ProctorU or Elsevier account from another institution – DO NOT use it to sign in.
- A student may only sign into the exam once. Students who are concerned that the exam results were not uploaded should not sign in and take the exam again. Instead, the student may communicate with ProctorU and notify the DNP Program director immediately about the concern. Taking a HESI exam more than once will result in a zero for the assignment and the student will be responsible for any fees incurred for additional testing.
- A student who takes the same exam more than once may receive a zero (0) for the exam or have the lower score applied to their grade. It is up to the faculty member to determine the penalty for taking the exam more than once.

ExamSoft

ExamSoft is the testing platform that has been adopted by the Department of Nursing Science for the undergraduate and graduate program. Your faculty member will update you on how to use this platform.

Online Testing Policy:

Students who take remote exams must treat the experience as if they were in the classroom. This policy includes behaviors that will be flagged as potential cheating. Verified cheating may result in a zero on the exam or course failure.

Students who are taking exams must:

- Remain in their seats.
- Refrain from asking questions about the exam.
- Be aware of their behavior during the exam.
- Keep their eyes on their computer. Looking away from the computer and around the room is not permitted.
- Have nothing other than the laptop out on the desk – this means no papers, books, notes, telephones, or smartwatches.
- Remove hats, hoodies and headphones. None may not be worn during the exam.
- Place any bookbags or purses in another room.
- Unless specified by the instructor, students may NOT have resources on their desk (e.g.: books, paper, pencils, phones, smart devices, calculators, or any other electronic devices).
- Be aware that talking with anyone, including reading questions out loud, during the exam is not permitted.
- Be aware that eating and drinking during the exam are not permitted.
- Report incidents of cheating to the course professor immediately.
- Prior to taking the exam, students must scan their environment, which includes the top and under the desk.
- If asked to scan a government issued ID card, it must be held in such a way that it is clearly readable.
- The camera must be positioned so that the student's face is clearly visible throughout the exam.

Health, Licensure, Safety, and Professional Behavior Requirements:

Health Requirements

Student personal, health, and immunization records are maintained in the Department of Nursing Sciences Student. It is the responsibility of each student to assure the documents are current. It is also the responsibility of each student to provide his/her own health insurance. Licensure and proof of health insurance must be uploaded at the beginning of the first semester of the doctoral program. All other required documentation must be uploaded to Typhon or submitted to April Lane (alane@saintmarys.edu) no later than March 1 of the fifth semester of the program. This timing will ensure that all students will be able to begin the clinical requirements for NURS 688

Advanced Health Assessment offered during the summer semester (6th semester). All documentation must include the student's name on the actual document.

Required health documentation

1. **Physical Exam (Appendix C):** A physical examination is required, and results returned to the Department of Nursing. Arrangement for this exam may be made through your family health care provider or through Health and Wellness Services at Saint Mary's College. The form is found in Appendix C of this handbook and is located on BlackBoard in the DNP Student Resources site. **(Due March 1 of the 5th semester).**
2. **Health insurance:** Students must upload to Typhon proof of health insurance at the beginning of their first semester in the doctoral program and updated yearly if the health insurance changes. **(Due September 1 of 1st semester).**

Immunizations and Tuberculosis (TB) Testing (Due March 1, 5th semester): Appendix E

Tuberculosis Testing Policy

The Department of Nursing Science and health care systems require students to be tested for tuberculosis (TB) prior to attending any clinical experiences. The two Interferon Gamma Release Assay (IGRA) blood tests that have been approved by the U.S. Food and Drug Administration (FDA) to test for TB infection are the QuantiFERON®-TB Gold In-Tube test (QFT-GIT) and the T-SPOT TB® test (T-Spot). The student may choose either blood test.

A positive result from an IGRA test requires a physical examination by a qualified health care provider and a chest x-ray. In addition, a letter outlining the diagnosis and plan of care must be submitted to the Nursing Department before a student attend any clinical experiences.

Tuberculosis Risk Assessment Form (Appendix E): A tuberculosis risk assessment form must be completed by each student annually and when the student has traveled outside of the United States. Students who have traveled to TB endemic areas as described by the Centers for Disease Control and Prevention may be required to undergo additional testing.

TB screening policies may vary by clinical agency. Students must comply with agency policy.

3. Proof of immunity to the following communicable diseases (Appendix D)

- a. Proof of one (1) rubella immunization or rubella titer (may be MMR).
- b. Proof of two (2) rubeola vaccines or rubeola titer (may be MMR).
- c. Verbal history of chicken pox or varicella zoster titer.

Immunization dates may be verified by your family health care provider. Titers may be drawn by family health care provider or done through Health and Wellness Services. Students are responsible for the costs of the titers.

4. Influenza Vaccine (Due no later than October 31): Each fall, students must submit proof of obtaining a yearly influenza vaccine.

5. Hepatitis B Vaccination: The Department of Nursing in collaboration with clinical agencies, requires that nursing students receive the Hepatitis B vaccine. Hepatitis B vaccine may be obtained from your family health care provider or through Health and Wellness Services. The vaccination consists of a series of three injections. Students must begin the injections at least one month prior to beginning clinical; the second injection will follow in one month. The final injection is to be given six months after the first injection. It is not necessary that the series be completed at one location. The Hepatitis B series is available for a fee from Health and Wellness Services. If the series is started with the family health care provider, students may receive the other injections from Health and Wellness Services. If for some medical, religious, or philosophical reason the student elects not to receive the vaccine, a letter stating such must be signed, dated and submitted by the student prior to clinical practicum. Failure to either receive the vaccine or sign a declination form will result in dismissal from the program.

6. Covid vaccination. Saint Mary's College policy is that students must have the Covid-19 vaccine and CDC-recommended boosters. **Students must document their vaccination record** by [uploading their information](#) to the medical records system, Medicat. For further questions, students should contact HCCenter@saintmarys.edu.

Undergraduate and graduate students attending classes on campus may request vaccine-specific verified medical exemptions for individual vaccines, including Covid. Healthcare institutions may refuse to permit students who are exempted from any vaccine to engage in clinical experiences which will impact program progression.

7. An updated tetanus, diphtheria, pertussis (Tdap) booster: Vaccination is strongly advised if it has been 10 years since the last tetanus vaccination.

Vaccine Declination

Students are required by health agencies to have received vaccinations for common communicable diseases. If for some medical or religious reason the student elects not to receive vaccines, they must receive an exemption from the College. A general vaccination exemption from all vaccine requirements for religious reasons can be requested. Information on how to request an exemption can be [found here](#).

Failure to either receive vaccines or sign a declination form and receive an exemption from the College will result in denial of admission to the major. Students who decline vaccinations must be aware that healthcare institutions may prohibit them from engaging in clinical experiences at that institution which may result in the inability of the student to progress in the program.

Licensure

Students must upload to Typhon a copy of their current license as a Registered Nurse in all states where the student will engage in clinical rotations. RN licenses must be uploaded in the student's first semester and must be updated when licenses are renewed. **(Due September 1 of the first semester; updated with renewal).**

Safety Requirements

CPR Certification (Due March 1, 5th semester, updated with renewal)

The Department of Nursing Science requires all nursing students to be CPR certified prior to entry into clinical practices. The CPR course should be two-year certification from the American Heart Association or American Red Cross and must be a course for Health Care Providers (not a HeartSaver course). The course must include CPR and choking techniques for infants, children, adults and use of AED. CPR needs to be current throughout your clinical courses.

ACLS Certification (Due March 1, 5th semester, updated with renewal)

All students enrolled in the Adult Gerontology Acute Care Nurse Practitioner track must be ACLS certified prior to entry into clinical practices.

Drug Screening (Due March 1, 5th semester)

To provide a safe working environment, hospitals and other clinical agencies require individuals who provide care to patients to undergo drug testing. Students are required to have a negative drug screen, minimum 9-panel, prior to engaging in any clinical activity. The student is responsible for the cost of the drug screening, which must be submitted as indicated by the DNS.

Drug Screening Results

A student's ability to engage in clinical experiences is contingent upon drug screen results that demonstrate no evidence of illicit drug use. Students who test positive for a drug specifically prescribed for a medical condition (eg. ADHD) must submit documentation from the health care prescriber that includes the name of the drug, dosing schedule, and reason for the prescribed medication. This documentation will be reviewed by a Medical Review Officer (MRO) for approval. For students with a positive drug screen, admission to the program is contingent on MRO review and clearance. Students with a positive drug screen without MRO review and clearance will be denied entry into the nursing program.

Students who test positive for illegal substances on a urine drug screen will be required to have blood or hair follicle testing to confirm the positive result through MRO review. The results of the positive drug screening will be reported to the student's state Board of Nursing. The student will be required to complete any mandated programs by the BON prior to resuming any clinical activities. If the student is permitted to resume clinical activities, the student will be required to submit a minimum of three random urine drug tests throughout the year. The consequence for any subsequent positive results for illegal substances is immediate dismissal from the program. All testing will be done at the student's expense.

Criminal Background Check (Due March 1, 5th semester)

Criminal history background checks are required of all nursing students in compliance with state and federal (House Bill 1633) regulations for individuals in clinical settings and when working with patients or individuals who are minors or vulnerable. All clinical agencies require a criminal background check. Additionally, a past criminal history may have a negative impact on a nursing graduate's ability to obtain a license to practice nursing. Current Indiana law states that individuals who have convicted of certain crimes may not be employed by or operate a home health facility or work in the Indiana public school system.

The student is responsible for the cost of the criminal background check. Further, students will be asked to complete a Criminal History Disclosure Statement Form on an annual basis. The student is responsible for reporting any criminal arrest or situation (including operating while impaired--OWI) which occurs during the academic year to the Director of the Nursing program before the next clinical day.

Violation of the above policies, even for the first offense, may subject the individual to disciplinary action up to and including dismissal from the program.

Criminal Background Check and Drug Test Procedure

- Background checks and drug tests are purchased through Castle Branch.com. Students are responsible for the cost of the package. To order the background check and drug test, follow these steps:
 1. Go to <https://portal.castlebranch.com/IJ29>
 2. At the Red Bar, choose "Place Order"
 3. Under "Please Select", choose one of the following codes:
 - IJ29bg-Background only: \$56
 - IJ29dt-Drug Test only: \$32
 4. Follow directions to set up an account and start the order.
 5. When the background check result is available, print only the one- page "Results Summary" and turn the "Results Summary" page into the nursing office by the March 1 submission deadline.
 6. When your Drug Test Result is available, Print only the one-page drug test result and turn the "Drug Screening Results" page into the nursing office by the March 1 submission deadline.

For questions or troubleshooting help, please contact the Castle Branch service desk at 888.723.4263, x7196 or <https://mycb.castlebranch.com/help>

Students must complete a Criminal History Disclosure Statement Form annually after first criminal background check. The student must report any criminal arrest or situation (including operating while impaired) which occurs during the academic year to the Director of Nursing before the next clinical day.

Essential Abilities

All students are required to read, sign, and adhere to the Essential Abilities policy statement upon admission and/or prior to beginning coursework. (Appendix A).

Due Dates and Non-Compliance Consequences

Prior to engaging in any clinical activity, it is a legal, university, and clinical institutional requirement and professional obligation that the following steps are completed before students engage in clinical activity. This is a summary of requirements that **MUST** be completed prior to engaging in clinical activity:

- Before beginning coursework, Essential Abilities (Appendix A) statement must be read, signed, and submitted to April Lane.
- By September 1 of first semester in the program: Submit active Registered Nurse license and proof of health insurance to April Lane.
- By March 1 of the fifth semester in the program: Submit all required documentation, which includes physical exam, BLS CPR, ACLS (AG-ACNP students only) record of up-to-date immunizations (MMR or titers, TdAP, Varicella immunization or history of chicken pox infection, Hepatitis B), TB skin test, criminal background check, and urine drug screen.
- By October 31, annually: Submit proof of Influenza immunizations.
- The required information must be uploaded to Typhon.

Submission of all required documentation is a professional responsibility. Students who need more than one reminder to submit this information to April Lane will be suspended from clinical course work until it is turned in. Students who engage in any clinical time prior to completion of these steps will not be able to count that time toward course completion and will need to make up this time.

Clinical agencies often request proof that all of the required health and safety requirements have been met. In order to do this, students are required to sign the Release of Information form found in Appendix F.

Student Health/Pregnancy

Title IX Rights of Pregnant and Parenting Students

Compliance

- a. *Reporting:* Any member of the Saint Mary's College community may report a violation of this Policy to any supervisor, manager, or to the Title IX Coordinator. All mandated reporters are responsible for promptly forwarding such reports to the Title IX office. The Title IX Coordinator is responsible for overseeing complaints of discrimination involving pregnant and parenting students.

The Title IX Coordinator for Saint Mary's College is:

Kris Urschel, Director of Human Resources

106 Facilities Building

titleix@saintmarys.edu

574-284-4777

Complaints may also be filed with the U.S. Department of Education, Office for Civil Rights at:

Office for Civil Rights (OCR)

North Central Regional Office

500 W. Madison Street, Suite 1414

Chicago, IL 60661

(312) 730-1630

Email: OCR@ed.gov

Web: <http://www.ed.gov/ocr>

Complaints may be filed online, using the form available at:

<http://www.ed.gov/ocr/complaintintro.html>

Policy Statement

Saint Mary's College is committed to creating and maintaining a community where all individuals enjoy freedom from discrimination, including discrimination on the basis of sex, as mandated by Title IX of the Education Amendments of 1972 (Title IX). Sex discrimination, which can include discrimination based on pregnancy, marital status, or parental status, is prohibited and illegal in admissions, educational programs and activities, hiring, leave policies, employment policies, and health insurance coverage. Saint Mary's College hereby establishes a Policy and associated procedures for ensuring the protection and equal treatment of pregnant individuals, persons with pregnancy-related conditions, and new parents.

Under the Department of Education's (DOEd) Title IX regulations, an institution that receives federal funding "shall not discriminate against any student, or exclude any student from its education program or activity, including any class or extracurricular activity, on the basis of such student's pregnancy, childbirth, false pregnancy, termination of pregnancy or recovery therefrom." According to DOEd, appropriate treatment of a pregnant student includes granting the student leave "for so long a period of time as is deemed medically necessary by the student's physician," and then effectively reinstating the student to the same status as was held when the leave began.

This generally means that pregnant students should be treated by Saint Mary's College the same way as someone who has a temporary disability, and will be given an opportunity to make up missed work wherever possible. Extended deadlines, make-up assignments (papers, quizzes, tests, and presentations), tutoring, independent study, online course completion options, and

incomplete grades that can be completed at a later date, should all be employed, in addition to any other ergonomic and assistive supports typically provided by Disability Services. To the extent possible, Saint Mary's College will take reasonable steps to ensure that pregnant students who take a leave of absence or medical leave return to the same position of academic progress that they were in when they took leave, including access to the same course catalog that was in place when the leave began. The Title IX Coordinator has the authority to determine that such accommodations are necessary and appropriate, and to inform faculty members of the need to adjust academic parameters accordingly.

As with disability accommodations, information about pregnant students' requests for accommodations will be shared with faculty and staff only to the extent necessary in order to provide the reasonable accommodation. Faculty and staff will regard all information associated with such requests as private and will not disclose this information unless necessary.

Administrative responsibility for these accommodations lies with the Title IX Coordinator, who will maintain all appropriate documentation related to accommodations.

In situations such as clinical rotations, performances, labs, and group work, the institution will work with the student to devise an alternative path to completion, if possible. In progressive curricular and/or cohort-model programs, medically necessary leaves are sufficient cause to permit the student to shift course order, substitute similar courses, or join a subsequent cohort when returning from leave.

Students are encouraged to work with their faculty members and Saint Mary's College support systems to devise a plan for how best to address the conditions as pregnancy progresses, anticipate the need for leaves, minimize the academic impact of their absence and get back on track as efficiently and comfortably as possible. The Title IX Coordinator will assist with plan development and implementation as needed.

Scope of Policy

This Policy applies to all aspects of Saint Mary's College program, including, but not limited to, admissions, educational programs and activities, extra-curricular activities, hiring, leave policies, employment policies, and health insurance coverage. This policy includes all undergraduate and graduate programs and students.

Definitions

- a. *Caretaking*: caring for and providing for the needs of a child.
- b. *Medical Necessity*: a determination made by a health care provider (of the student's choosing) that a certain course of action is in the patient's best health interests.
- c. *Parenting*: the raising of a child by its parents in the reasonably immediate post-partum period.
- d. *Pregnancy and pregnancy-related conditions*: include (but are not limited to) pregnancy, childbirth, false pregnancy, termination of pregnancy, conditions arising in connection with pregnancy, and recovery from any of these conditions.

- e. *Pregnancy discrimination*: includes treating an individual affected by pregnancy or a pregnancy-related condition less favorably than similar individuals not so affected, and includes a failure to provide legally mandated leave or accommodations.
- f. *Pregnant student/Birth-parent*: refers to the student who is or was pregnant. This Policy and its pregnancy-related protections apply to all pregnant persons regardless of gender identity or expression.
- g. *Reasonable accommodations*: (for the purposes of this Policy) changes in the academic environment or typical operations that enable a pregnant student or student with a pregnancy-related condition to continue to pursue their studies and enjoy the equal benefits of the College.

Reasonable Accommodation of Students Affected by Pregnancy, Childbirth, or Related Conditions

- a. Saint Mary's College and its faculty, staff, and other employees will not require a student to limit their studies as the result of pregnancy or pregnancy-related conditions.
- b. The benefits and services provided to students affected by pregnancy will be no less than those provided to students with temporary medical conditions.
- c. Students with pregnancy-related disabilities, like any student with a short-term or temporary disability, are entitled to reasonable accommodations so that they will not be disadvantaged in their courses of study or research, and may seek assistance from the Title IX office.
- d. No artificial deadlines or time limitations will be imposed on requests for accommodations, but the [School] is limited in its ability to impact or implement accommodations retroactively.
- e. Reasonable accommodations may include, but are not limited to:
 1. Accommodations requested by the pregnant student to protect the health and safety of the student and/or the pregnancy (such as allowing the student to maintain a safe distance from hazardous substances);
 2. Modifications to the physical environment (such as accessible seating);
 3. Mobility support;
 4. Extending deadlines and/or allowing the student to make up tests or assignments missed for pregnancy-related absences;
 5. Providing remote learning options;
 6. Excusing medically-necessary absences (this must be granted, irrespective of classroom attendance requirements set by a faculty member, department or division)
 7. Breastfeeding students must be granted reasonable time and space to pump breast milk in a location that is private, clean, and reasonably accessible. Bathroom stalls do not satisfy this requirement.

Nothing in this policy requires modification to the essential elements of any academic program. Pregnant students cannot be channeled into an alternative program or school against their wishes.

Modified Academic Responsibilities Policy for Parenting Students

- a. Students with child caretaking/parenting responsibilities who wish to remain engaged in their coursework while adjusting their academic responsibilities because of the birth or adoption of a child or placement of a foster child may request an academic modification period during the first three (3) months from the time the child has entered the home. Extensions may be granted where additional time is required by medical necessity or extraordinary caretaking/parenting responsibilities.
- b. During the modification period, the student's academic requirements will be adjusted and deadlines postponed as appropriate, in collaboration among the Title IX office, the student's academic advisor and the appropriate academic department(s).
- c. Students seeking a period of modified academic responsibilities may consult with their academic advisor or with the Title IX office to determine appropriate academic accommodations requests. The Title IX office will communicate all requests under this policy to the student's academic advisor and coordinate accommodation-related efforts with the advisor unless the student specifically requests that the advisor be excluded. The student is encouraged to work with their advisor and faculty members to reschedule course assignments, lab hours, examinations, or other requirements and/or to reduce the student's overall course load, as appropriate, once authorization is received from the Title IX office. If, for any reason, caretaking/parenting students are not able to work with their advisor/faculty to obtain appropriate modifications, students should alert the Title IX office as soon as possible, who will help facilitate needed accommodations and modifications.
- d. In timed degree, certification or credentialing programs, a student who seeks modifications upon the birth or placement of their child will be allowed an extension of up to three (3) months to prepare for and take preliminary and qualifying examinations, and an extension of up to six (6) months toward normative time to degree while in candidacy, to the extent those deadlines are controlled by Saint Mary's College. Longer extensions may be granted in extenuating circumstances.
- e. A student can request modified academic responsibilities under this Policy regardless of whether the student elects to take a leave of absence.
- f. While receiving academic modifications, the student will remain registered and retain benefits accordingly.

Leave of Absence

- a. As long as a student can maintain appropriate academic progress, faculty, staff, or other Saint Mary's College employees will not require a student to take a leave of absence, or withdraw from or limit their studies as the result of pregnancy, childbirth, or related conditions, but nothing in this policy requires modification of the essential elements of any academic program.

- b. An enrolled student may elect to take a leave of absence for up to six (6) months because of pregnancy and/or the birth, adoption, or placement of a child. The leave term may be extended in the case of extenuating circumstances or medical necessity.
- c. A student taking a leave of absence under this Policy will provide notice of the intent to take leave thirty calendar days prior to the initiation of leave, or as soon as practicable.
- d. Intermittent leave may be taken with the advance approval of the Title IX office and the student's academic department(s), when medically necessary.
- e. Students who elect to take leave under this Policy may register under an "on leave" etc. status to continue their eligibility for certain benefits. While registered under that status, students who choose to take a leave of absence under this Policy can elect to keep their health insurance coverage and continue residing in university housing, subject to the payment of applicable fees.
- f. To the extent possible, Saint Mary's College will take reasonable steps to ensure that upon return from leave, the student will be reinstated to their program in the same status as when the leave began, with no tuition penalty.
- g. Continuation of a student's scholarship, fellowship, or similar Saint Mary's College sponsored funding during the leave term will depend on the student's registration status and the policies of the funding program regarding registration status. Students will not be negatively impacted by or forfeit their future eligibility for their scholarship, fellowship, or similar Saint Mary's College supported funding by exercising their rights under this Policy.
- h. The Title IX office can and will advocate for students with respect to financial aid agencies and external scholarship providers in the event that a leave of absence places eligibility into question.

Retaliation and Harassment

- a. Harassment of any member of the Saint Mary's College community based on sex, gender identity, gender expression, pregnancy, or parental status is prohibited.
- b. Faculty, staff, and other Saint Mary's College employees are prohibited from interfering with a student's right to take leave, seek reasonable accommodation, or otherwise exercise their rights under this Policy.
- c. Faculty, staff, and other Saint Mary's College employees are prohibited from retaliating against a student for exercising the rights articulated by this Policy, including imposing or threatening to impose negative educational outcomes because a student requests leave or accommodation, files a complaint, or otherwise exercises their rights under this Policy.

Housing Related Accommodations

Pregnant students' on-campus housing status will not be altered based on pregnancy status unless requested by the pregnant student. A parenting student's access to housing is governed by Residence Life policies.

Dissemination of the Policy and Training

A copy of this Policy will be made available to faculty, staff, and employees in annually required training and posted on the Saint Mary's College website. Saint Mary's College will alert all new students to this Policy and the location of this Policy as part of orientation. The Title IX office will make educational materials available to all members of the Saint Mary's College community to promote compliance with this Policy and familiarity with its procedures.

Revised 12/8/17

Student Health: Illness/Injury During Clinical

1. In a medical emergency, sharps injury, or other clinical injury as defined by the clinical preceptor, the student should be seen in the agency's emergency room, or if none, sent to the nearest emergency room. The student will be responsible for any bills incurred for these events. The preceptor and student will immediately notify the nursing faculty of any such events.
2. In non--emergency situations, the student may verbally tell the nursing faculty that they elect to seek care from a private health care provider/clinic. Any costs incurred will be the responsibility of the student. The student and/or preceptor will notify the nursing faculty of any of these events as soon as possible.
3. Documentation of an injury requires the completion of the form contained in the Appendix G. The student is responsible for completing the form and obtaining the comments of the preceptor or agency representative. The student is responsible for forwarding the completed form to the course nursing faculty as soon as possible following the incident. The nursing faculty will review the information and make appropriate recommendations. The document will be filed in the student's personal file in Student Services.

Student Impairment and Criminal Background Disclosure Policies

Impaired Student Policy: Perception of Impairment

Any evidence of impairment due to such factors as the effects of medications (prescribed or non-prescribed) or sleep deprivation or is unprofessional behavior.

The ANA Guide to the Code of Ethics for Nurses: Interpretation and Application states "Nurses must be vigilant to protect the patient, the public and the profession from potential harm when a colleague's practice, in any setting, appears to be impaired" (ANA, 2008, p. 155). In addition, the faculty abides by the ANA Scope and Standards of Practice which states that "the registered nurse takes appropriate action regarding instances of illegal,

unethical, or inappropriate behavior that can endanger or jeopardize the best interests of the healthcare consumer or situation” (ANA, 2010, p. 47).

If a student presents to clinical with any evidence of impairment, the student will immediately be removed from the clinical setting and must pay for transportation to a substance abuse testing location, which will be determined by the clinical faculty member in consultation with the DNP Program Director. Students who are removed from a clinical setting due to suspected impairment may not drive away from the clinical facility. The student will be required to submit for substance abuse testing which may include urine, blood, and hair follicle testing. The student is responsible for receiving immediate testing and bears the costs involved with transportation to and from the testing site and the testing. Refusal to submit to testing will be considered a positive test and will result in dismissal from the course and/or program. Positive drug tests results must undergo review by a Medical Review Officer.

In addition, students must abide by the Saint Mary’s College Drug Policy (see Saint Mary’s College student handbook).

Procedure for Removing a Student Who is Suspected of Being Impaired from an Educational/Clinical Setting

Although this policy is directed toward preceptors, students have a responsibility to know the consequences of impaired behavior. If the student is perceived to have the odor of alcohol, or marijuana, or observed behaviors such as, but not limited to, slurred speech, unsteady gait, confusion, sharp mood swings/behavior especially after an absence from clinical experience, lack of manual dexterity, excessive health problems, increased absenteeism, tardiness or irritability, severe weight loss, needle track marks especially in the inner elbow, carelessness in appearance and hygiene, or euphoria, which causes the preceptor to suspect the student could be impaired by a substance, the preceptor must:

1. Immediately inform the student as to why actions are being taken to relieve the student of his/her duties.
2. Immediately notify the SMC Faculty for further action.
3. Under no circumstances is an impaired student permitted to drive away from the facility. The student may only leave if using public transportation (e.g. taxi). The student is responsible for paying this cost.

Professional Behavior Expectations

Communication

The Saint Mary’s College email system is the official method for communicating electronically with faculty members. It is a professional obligation that students check their Saint Mary’s College email and BlackBoard on a daily basis. The student is responsible for frequently monitoring these communication channels and responding in a timely manner.

Faculty members make every effort to respond to emails within 48 hours. If a student does not receive a reply within this timeframe, the student is encouraged to send another email as a courtesy to the faculty member. Non-emergent emails that are received by faculty during the weekend may not be answered until the next standard working day.

If a faculty member provides a cell phone number and permits students to call or text message, this communication should only pertain to clinical or course issues and be within the standard working day, Monday through Friday, 8 a.m. to 5 p.m., or during approved clinical course times outside of these hours. Course or clinical emergency calls or text messages are permitted outside of these hours. Exceptions to this guideline may be granted at the discretion of individual faculty members.

Lines of communication:

Students who have questions about or issues with a class, must first contact the faculty member of that course. When discussing the issue with the faculty member, remember the following:

1. Professionalism requires that you discuss the issue first with the course faculty member.
2. Be professional – state the issue without making accusations.
3. Be clear when you state your case – include specific information about the issue and what you believe should be done about it.
4. Avoid negative or emotional outbursts in person, over the phone, or in an e-mail.
5. Give the faculty involved a chance to present her or his side of the story.

Students who have issues with clinical placements and appropriateness of a preceptor should first contact their faculty member. Questions about affiliation agreements, registration, required courses, or college policies and procedures should contact April Lane.

Students who have unresolved issues with a course, feel harassed or bullied, have life/work/school balance issues, or any other program questions or issues should contact the DNP Program Director, Dr. Sue Anderson.

Civility

Consistent with the values of Saint Mary's College, the American Nurses' Association Code of Ethics for Nurses, and the Essential Abilities, all communication with students, faculty, preceptors, clinic staff, and patients must reflect professional standards. This means communication must be clear, concise, civil, and professional. Harassment and demeaning communication are not tolerated. Students violating this policy will receive one written warning. Subsequent violations are subject to disciplinary action.

Responsible use of Social Media

The following guidelines are intended to minimize the risks of using social media:

- First and foremost, nurses must recognize that they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times.
- Nurses are strictly prohibited from transmitting by way of any electronic media any patient--related image. In addition, nurses are restricted from transmitting any information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.
- Do not share, post or otherwise disseminate any information, including images, about a patient or information gained in the nurse--patient relationship with anyone unless there is a patient care related need to disclose the information or other legal obligation to do so.
- Do not identify patients by name or post or publish information that may lead to the identification of a patient. Limiting access to postings through privacy settings is not sufficient to ensure privacy.
- Do not refer to or about patients in a disparaging manner, even if the patient is not identified.
- Do not take photos or videos of patients on personal devices, including cell phones. Follow employer policies for taking photographs or video of patients for treatment or other legitimate purposes using employer--provided devices.
- Maintain professional boundaries in the use of electronic media. Like in--person relationships, the nurse has the obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Use caution when having online social contact with patients or former patients. Online contact with patients or former patients blurs the distinction between a professional and personal relationship. The fact that a patient may initiate contact with the nurse does not permit the nurse to engage in a personal relationship with the patient.
- Consult employer policies or your preceptor or leader within the clinical agency or organization for guidance regarding work related postings.
- Promptly report any identified breach of confidentiality or privacy.
- Be aware of and comply with employer policies regarding use of employer--owned computers, cameras and other electronic devices and use of personal devices in the work place.
- Do not make disparaging remarks about employers or co--workers. Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments.
- Do not post content or otherwise speak on behalf of the employer unless authorized to do so and follow all applicable policies of the employer.

Adopted from: "A Nurse's Guide to the Use of Social Media"
https://www.ncsbn.org/Social_Media.pdf.

Clinical Policies

Student Clinical Responsibilities

The National Organization of Nurse Practitioner Faculties (NONPF) (2017) Core Competencies, The Doctoral Essentials, and DNP program outcomes guide the development of course content and outcomes, clinical evaluation, and preparation for professional practice as an FNP, AG-PCNP, or AG-ACNP.

Student Progress and expected outcomes:

- **First clinical course:** 30 Direct Patient Care Clinical Hours. NURS688 Advanced Health Assessment and Diagnostic Reasoning. In this clinical course, students will require close preceptor guidance as they gain competence and confidence with gathering a patient history, performing hands-on physical assessment skills, and begin to critically think about the subjective and objective data that were gathered. Students in this course will develop and refine their documentation skills and begin to develop diagnostic reasoning skill.
- **Second clinical course:** 60 Direct Patient Care Clinical Hours. NURS 724 Advanced clinical studies: Population based Mental Health Care Across the Lifespan (FNP, AG-PCNP, AG-ACNP): Students in this clinical course will require close preceptor guidance but should demonstrate an increased level of competence in caring for individuals with mental health issues. They should focus on diagnostic reasoning and decision--making, communication skills, documentation, appropriate consultation and referral, and professional role development. Students should translate knowledge of pharmacology into medication management of individuals with chronic or acute needs. Students should be able to practice acute/ and follow up histories and focused physical assessment, complete physical exams, skills, and procedures when able.
- **Third clinical course:** 120 Direct Patient Care Clinical Hours. NURS 722: Advanced clinical studies: Primary Care management of adults and older adults (FNP, AG-PCNP, AG-ACNP): In their third clinical course, students are expected to transfer new knowledge from their theory courses into their clinical practice. For example, the student should be able to assess and communicate mental health issues of their patients. They will continue to need close preceptor guidance as they again focus on diagnostic reasoning and decision--making, communication skills, documentation, appropriate consultation and referral, and professional role development. Students should be able to demonstrate increasing independence, comprehensiveness and proficiency in caring for an adult population with minor acute and chronic illness. Students should be able to transfer their knowledge of pharmacology and pathophysiology in their assessment and management plan based on developmental needs of the patient.
- **Fourth clinical course:** 120 Direct Patient Care Clinical Hours NURS 710 Advanced clinical studies: Primary care management of reproductive health (FNP, AG-PCNP) and NURS 717 Advanced clinical studies: Advanced clinical care for adults and older adults: Students are expected to transfer their knowledge of mental health concerns, pharmacology, physiology, and primary care of adults and demonstrate a progressive and increased level of independence, depth in assessment, and management and evaluation of

patient and family related problems. Students in the primary care tracks will require preceptor guidance as they acquire new skills required for women's health care. Students in the acute care track will require preceptor guidance as they acquire new skills required for adults and older adults in various clinical settings.

- **Fifth clinical course:** 120 Clinical Hours. NURS 730 Advanced clinical studies: Primary Care of children and adolescents (FNP); NURS 722 Advanced Clinical Studies: Primary Care of Adults and Older Adults II (AG-PCNP); NURS 726 Advanced Clinical Studies: Trauma Care with Adults and Older Adults (AG-ACNP): Students are expected to transfer their knowledge of mental health concerns, pharmacology, pathophysiology, communication, to the assessment and care of children and their families. Students are expected to demonstrate increased competency and independence in patient assessment and management plan development appropriate for the age of the child, adult, or older adult. Students are expected to demonstrate competence as a member of an interprofessional team.
- **Sixth Clinical Course:** 240 Clinical Hours. NURS 770 Clinical Residency in Primary Care of Families (FNP); NURS 774 Clinical Residency in Primary Care of Adults, Older Adults and Families AG-PCNP) and NURS 772 Clinical Residency in Acute and Critical Care of Individuals and Families (AG-ACNP): Students should demonstrate a synthesis of clinical knowledge and skills acquired in in their five major clinical courses that prepare them to care for patients of all ages. They should demonstrate a level of independence, depth, competence and proficiency in clinical skills, communication skills, and the management of patient related problems of a novice nurse practitioner. Students should demonstrate the use of best practices and evidence to support their plan of care and evaluate patient outcomes.

Clinical Experience before beginning clinical rotations

Students are required to have a minimum of 2 years or 2,000 hours of clinical experience as a Registered Nurse prior to beginning a clinical rotation. Students who are in the Adult-Gerontology Acute Care Nurse Practitioner Program must have a minimum of 2,000 hours of clinical experience as a Registered Nurse and at least 1,000 of those hours must be in an in-patient acute care clinical setting. Work experience documentation may be provided by nursing supervisors or the human resources department.

Clinical Experiences

Students may only engage in clinical experiences during the academic semesters (Fall, Spring, Summer). Students may not engage in clinical experiences prior to the beginning of the semester nor after the last day of classes. In special circumstances, which must be preapproved, students may engage in clinical activities during finals week. When considering such requests, the student should have less than 10% of required direct care hours to complete and there was an extenuating situation that contributed to not meeting the required number of hours during the semester. Students must keep the course and clinical faculty apprised of extenuating circumstances and request final-exam week clinical time well in advance. This permission is granted at the discretion of the course lead faculty and program track director.

Clinical Sites

Clinical sites must support learning outcomes for their clinical track. The National Task Force on Quality Nurse Practitioner Education: Criteria for Evaluation of Nurse Practitioner Programs 2016 (5th Edition) (NTF Criteria) notes that “student clinical experiences at the student’s site of employment need to be faculty-guided learning experiences and outside the student’s employment expectations/responsibilities.”

Students are responsible for selecting a preceptor and an appropriate clinical site for clinical courses while completing a minimum of 690 supervised clinical hours. It is preferred that the student complete hours with a nurse practitioner with population-focused expertise in primary care or acute care settings. Physicians also may serve as preceptors. Course faculty will provide guidance and work with clinical preceptors throughout the course.

Clinical Preceptors

According to the NTF Criteria, preceptors must:

- Be a nurse practitioner with a minimum of a Master’s Degree or extensive clinical experience in the content area in which he/she provides clinical supervision; or a physician (MD or DO); and be nationally certified in the clinical practice area.
- Engage in patient care that is consistent with the program’s mission: Primary care across the lifespan (FNP); Primary care of adolescents, adults, and older adults (AG-PCNP); Acute care of adolescents, adults, and older adults (AG-ACNP).
 - Preceptors for half of the required hours in NURS 724 Advanced Clinical Studies: Population-based Mental Health Care Across the Lifespan may be a licensed psychologist or social worker. It is desirable that students in this course spend some time with a prescriber of psychotropic medications (e.g. Advanced Practice Nurse or Psychiatric-Mental Health Nurse Practitioner (PMH-NP), psychiatrist or physician who practices in the psychiatric-mental health clinical area) when possible.
- Have an unrestricted license to practice in the state where the clinical experiences are completed.
- Have clinical practice experience: a minimum of one year of clinical experience in the population-focused practice area prior to engaging in clinical supervision.
- Engage in clinical practice consistent with the population focus of specialty courses i.e. mental health, pediatric, gender health, adult and geriatric patients.
- Be willing to:
 - Precept the student by facilitating the educational process for the required number of clinical hours;
 - Engage in formative and summative evaluation with the student in person and complete an online evaluation; and
 - Communicate with and meet with the faculty member throughout the semester.
- In order to foster the best learning experience, students may not use family members or close friends as preceptors.

Student Responsibilities for Finding a Preceptor

Clinical sites must be role and scope-of-practice appropriate. This means that Primary Care clinical track students must engage in clinical experiences within the primary care setting. Acute Care clinical track students must engage in clinical experiences within the acute care setting. Students must consult with course lead faculty there is any confusion about the appropriateness of a clinical site.

Students are required to be actively involved in securing clinical preceptors, as most students have contacts within their communities that they plan to work with. However, in cases where students have cannot find a preceptor, the DNP Program Director and Academic Advisor and Clinics Coordinator April Lane are willing to assist the student. The following tips have been helpful for students searching for a clinical preceptor:

1. Most health systems will only accept their employees for precepted clinical experiences. Therefore, it is best to begin the search for preceptors within the health system in which the student is employed. Many health systems will even allow precepted clinical experiences for nurses who are in PRN positions.
 - Health systems generally have a preceptor procedure and one person who coordinates precepted clinical experiences for nurse practitioner students. It is the student's responsibility to find out what the procedure is for securing preceptors and who the preceptor coordinator is within the system. The student should then contact that person via phone and email in order to secure a preceptor.
 - Some health systems allow students to contact providers directly to arrange for precepted experiences. It is the student's responsibility to ask about and follow the health system's procedure for precepted clinical experiences.
 - Students may need to look outside of their area for preceptors. It is advisable to widen the search to a 90-mile radius. Some agencies to consider are urban and rural areas; providers in solo practice not associated with large health systems; critical access hospitals; federally qualified health centers; community health centers that serve an indigent population; health centers that serve cultural communities; state and federal prison systems; and clinics associated with a particular age group (i.e. women's health, pediatric clinics, geriatric clinics).
2. Students are required to join the American Association of Nurse Practitioners and are strongly encouraged to join nurse practitioner organizations in their state and local area. It is wise to attend meetings of the national, state, and local organizations to begin networking with nurse practitioner colleagues. Networking is a very important element in finding willing preceptors.

3. Saint Mary's College has a very strong alumni network. Students are encouraged to reach out to Saint Mary's College nursing alumnae in their area and ask for help. To access this system:
 - Go to <http://connect.saintmarys.edu/s/1611/index.aspx?gid=4&pgid=61>
 - Click First Time Login at the top.
 - When prompted for your temporary password, use your student ID number.
 - Create a username and password for your account.
4. Review the preceptor and clinical site directory in Typhon. This directory includes all past preceptors who have worked with Saint Mary's College students.
5. Contact agencies that assist students in finding clinical placements such as NPHub (<https://nphub.com/>), NP Nation (<https://preceptor.careerwebsite.com/>), PreceptorLink (<https://www.preceptorlink.com/>) or .ENPNetwork (<https://www.enpnetwork.com/nurse-practitioner-preceptors>).

When a student cannot find a preceptor, the student must do the following:

1. Notify the DNP Program Director and Academic Advisor and Clinics Coordinator April Lane immediately.
2. Provide both with the name and contact information for the person within the student's health system that coordinates precepted experiences for nurse practitioner students.
3. The DNP Program Director will brainstorm with the student on potential clinical placements. She is willing to make calls to the health system in which the student is employed and other facilities within the student's area.
4. If a precepted clinical experience cannot be secured in the student's home area, and to avoid having the student fall behind in the DNP Program, the DNP Program Director will attempt to secure that experience within the South Bend/Southwest Lower Michigan, Chicago area. If this happens, it is up to the student to obtain a Registered Nurse license in the state where the clinical experience will occur and pay for all related expenses while the student is completing the clinical.
5. Students residing in states that prohibit precepted clinical experiences while enrolled in an out-of-state online program or in states where it is nearly impossible to find preceptors will need to discuss their plans for these experiences with the DNP Program Director.
6. Students are responsible for any costs associated with finding a preceptor or fees required by agencies for working with a preceptor.

Contracting with a Preceptor

- Students must provide the Preceptor Information Form (Appendix J and in DNP Student Resources in BlackBoard) to either the health system designee who coordinates clinical placements and/or the preceptor. This form must be completed and then sent to April Lane at least 120 days prior to the beginning of the clinical semester to initiate the contract process with the agency. Students may not engage in any clinical activity until

the contracting process is complete. Questions about this process may be directed to Miss Lane or Dr. Sue Anderson.

- Students must provide preceptors with a completed Student Profile (Appendix H and on BlackBoard in DNP Student Resources) and Clinical Skills Inventory (Appendix I and on BlackBoard in DNP Student Resources)
- Students must negotiate the days and times that they plan to be in the clinical setting with the preceptor. Once this schedule has been created, the student must inform the clinical faculty of the clinical schedule.

Preceptor Responsibilities for the Student

Nurse practitioner clinical education occurs through strong collaboration between Saint Mary's College nurse practitioner faculty and qualified preceptors. Preceptors provide direct clinical supervision by being physically present and being actively engaged in the teaching/learning process as the student provides direct care for patients.

It is expected that preceptors are willing to:

- Be physically present when the student is engaged in a clinical practicum experience.
- Serve as a mentor and role model.
- Teach.
- Create a clinical schedule that enables students to meet course objectives and achieve the required number of direct patient care hours.
- Assist the student in learning to navigate the health system and clinical site.
- Demonstrate and help student refine assessment skills, sharpen diagnostic reasoning and clinical decision making, document with clarity and precision, engage in pertinent patient education.
- Challenge the student to sharpen interpersonal skills when communicating with staff, members of the interprofessional team, and patients. This includes clearly describing the format in which the preceptor expects the student to provide a report for patient interactions.
- Provide the opportunity for the student to engage in direct patient care. This means that beyond very limited time in initial observation which enables the student to understand office flow, students should actively be involved in:
 - gathering subjective data which includes all elements of the patient history;
 - engaging in hands-on physical assessment of the patient, which includes comprehensive and focused visits;
 - learning to perform routine procedures within the clinical scope of practice;
 - suggesting and interpreting the results of appropriate laboratory testing and imaging studies;
 - deriving logical differential diagnoses based on subjective and objective data;
 - suggesting pharmacological options which includes drug class, evidence supporting prescription, dosing (including pediatric calculations), refills;

- suggesting non-pharmacological options based on best evidence;
- providing pertinent, culturally appropriate, evidence-based, and relevant patient education;
- suggesting a plan for referrals within the interdisciplinary team when appropriate;
- suggesting a logical plan for follow up visits;
- Documenting data clearly and in accordance with Centers for Medicare and Medicaid Services guidelines. If electronic health record documentation is not permitted by organizational policy, the student should provide sample documentation for selected patients. The student will document all patient encounters in Typhon. Clinical faculty, rather than clinical preceptors, are responsible for reviewing these data.
- Providing appropriate ICD-10 and E&M coding options.
- Provide formative and summative evaluation,
- Determine if the student’s learning objectives have been achieved,
- Adhere to professional standards and ethical principles; practice in a legal and safe manner.
- Discuss the student’s progress with the faculty member at midterm and the end of the semester.
- Immediately contact the student’s clinical faculty member with any concerns.
- Review time logs and patient cases if requested by clinical faculty.

Ultimately, evaluation of student performance is the responsibility of the NP faculty member with input from the preceptor.

Direct Patient Care

Students enrolled in the Saint Mary’s College DNP Program Advanced Practice Nursing clinical tracks are required to engage in a minimum of 690 hours of direct patient care. Direct patient care is defined as “care that involves assessment, diagnosis, treatment, and evaluation of real clients or patients” (National Task Force on Quality Nurse Practitioner Education, 2016, p. 19).

Direct patient care for Saint Mary’s students is defined as the time spent in direct, face-to-face contact and care of the patient in the clinical setting. This includes collecting subjective and objective data, deriving diagnosis/diagnoses, developing a care plan, and documenting findings in the patient chart (if permitted). If students are not permitted to document care in the clinical setting, they may claim up to 1 hour per clinical day for documenting patient case logs in the clinical documentation system (Typhon). Direct patient care may include activities such as rounding in facilities; and researching medical conditions, standards of care, medications, and reviewing medical records related to care of each patient.

Preparation and research that occurs outside of the clinical setting is not counted as direct patient care. Clinical course faculty and preceptors should always be consulted if there is a question about what clinical activities constitute direct patient care.

Prior to beginning any clinical activity, the supervising clinical faculty must be provided with a detailed schedule of when the student will be at the clinical setting. This includes dates, start and stop times. The supervising clinical faculty must be notified immediately per phone call and email that there has been a change in the clinical setting, such as a late start, early leave, or sick day. Sick or missed days must be entered in Typhon Time Logs as such.

Documentation Requirements in Typhon

Students are strongly advised to review the Typhon Training Guide (Appendix K and on BlackBoard) and view the videos that are provided on BlackBoard in the DNP Student Resources. Help with Typhon is located in a Help link in Typhon, which includes instructions, video tutorials, and FAQs. Students who need further assistance with Typhon must contact Dr. Sue Anderson.

For each clinical day, students are required to create the following data entries in Typhon:

- **A time log:**
 - **Shift time:** This is a simply a clock in/clock out time function. Typhon gives students the option of clocking out for lunch. Students should clock out if they leave the clinical site to eat lunch; they do not need to clock out for lunch if they have a working lunch with the preceptor at the clinical site, discussing patient cases or research. Students should use the appropriate check boxes if they were at the clinical site but no patients were seen or if they were ill on a scheduled clinical day. Please note that shift time does not constitute the required clinical time.
 - **Other activities:** Activities that are not captured in a patient case log are entered in the time log. (Please see the next section about calculation of clinical time.)

- **A new case log:**
 - **Patient case log:** Students are responsible for entering a case log for each patient seen during each clinical day. Please review the Typhon Training Guide for more information about how to create case logs.
 - **Note:** Students must note their level of involvement in the patient contact and decision making: independent, <50%, >50% of care. Early in the semester, students often “shadow” or “observe” preceptors. This time must be kept to a minimum, usually no more than a day or two, as students are expected to be actively involved in direct patient care. Students must notify their clinical faculty if they are not permitted to be actively involved in direct patient care.

Clinical faculty are responsible for reviewing case and time logs within one week. Faculty will either “approve” or “not approve” each entry. Students will receive an email notifying them of cases that were not approved and will have 2 days to provide the required information. Clinical preceptors may be asked to verify data entries.

Case and time log data entry after seven days is not permitted, and students forfeit that clinical time. This means that forfeited clinical time must be made up. Falsification of clinical time

and/or activities may result in course failure, immediate suspension, and possible dismissal from the program.

Calculation of Clinical Time

Clinical time is based on time spent delivering direct patient care rather than shift time. Clinical time is calculated in Typhon through the following data entry points:

- **Time with patient:** This is entered in Typhon when creating a patient case log. This is the time the student spends with the patient in person or through telephone or other telehealth technologies. It includes the time spent gathering subjective/objective data, discussing issues such as lab results, answering questions, gathering more information, follow up instructions, education and anticipatory guidance, referrals, and documentation in the clinical electronic health record. Entries of time with patient must be exact, neither estimated nor rounded.
- **Consult with preceptor:** This also is entered in Typhon when creating a patient case log. Preceptor consultation is defined as the time spent discussing a specific patient with the preceptor or other members of the inter-professional team. Consultation time with a preceptor may occur in person, over the telephone, or via telehealth. This time must be linked with a patient case log and must be the exact amount of time spent with the preceptor.
- **Other activities:** This is entered in Typhon when creating a time log (see previous section). Students may keep track of patient care activities that may not be captured in patient case logs. When claiming time for any of the following categories, a brief note should be included in the time log.
 - Documentation: Students who are not permitted to document in the clinical setting may claim 1 (one) hour for each clinical day for Typhon documentation.
 - Lab review: Includes review of lab findings or imaging studies for patients who were not seen in the clinic.
 - Patient call back: The time spent talking to patients on the telephone answering questions, or gathering or relaying information.
 - Patient record review: Preceptors often have interesting case studies that they share with students. Students may claim this as clinical time if it contributed to their clinical knowledge development.
 - Clinical review/research (at clinic only): Includes time spent looking up pathophysiology, pharmacology, guidelines, referrals, resources, etc.
 - Patient no-show preparation: Enables students to claim time for preparation for a patient who did not present for an appointment.

A majority of achieved clinical time (approximately 80%) must be from time spent in face-to-face contact with the patient and consulting with the preceptor. The remainder of achieved clinical time may be from the “other activities” category. Please note that the required clinical time is not equal to shift time but is found in Typhon under the “My hours by course” link in the Total Achieved Hours column.

Clinical Evaluation requirements

Professional learning includes periodic evaluation of role performance from the preceptor and clinical faculty. Students also must engage in self-evaluation of their clinical experiences.

Typically, students will receive two site visits from supervising clinical faculty. In accordance with the laws of the State of Washington, students will meet with supervising clinical faculty and the preceptor three times during the semester, at the beginning of the semester, when the student reaches the midpoint of required clinical hours for formative evaluation and when the student completes the required clinical hours for summative evaluation.

Formative evaluation: Ongoing evaluation of the student's role performance. This is provided by frequent feedback from preceptors and clinical faculty. This feedback should include areas in which the student performs well, and areas in which the student needs to improve. Students should pay particular attention to this feedback and use it as a way to improve knowledge and skill. Specific feedback from the preceptor and faculty that will enhance clinical knowledge and performance should be noted in the midterm and final evaluations. Clinical faculty and preceptors will complete a midterm evaluation of the student.

Summative evaluation: Evaluation that occurs at the mid-point and end of the clinical practicum and is based on criteria identified in the clinical evaluation tool. Students are not expected to master all performance criteria immediately, it is expected that they demonstrate progression and improvement of skills and competency throughout the semester. This feedback includes numeric scoring and written feedback, both of which are extremely important for student learning and progression. Written feedback should include specific examples and a plan for remediation if necessary. Clinical faculty and preceptors will complete a midterm evaluation of the student.

Preceptors will receive a link to complete the summative midterm and final evaluation via email. Students should alert the preceptor that the link has been sent and ensure that it has been completed.

Evaluation of Clinical Preceptor and Clinical Site: Students are required to complete an evaluation of their preceptor and clinical site. The evaluation forms are found in Typhon under the "My Evaluations & Surveys" link.

Supervised Clinical Practicum

This section is intended to help students understand their responsibilities for all supervised clinical courses. The specific learning outcomes for each of the didactic, clinical and practice innovation courses are contained in the course syllabi that are provided at the start of each class. It is the student's responsibility to read the Preceptor Handbook to gain an understanding of the scope of the selection and role of clinical preceptors.

The student's role and responsibilities include the following for all clinical agencies used during the program of study.

1. Adhere to all clinical agency policies and procedures.

2. Adhere to all of Saint Mary's College Department of Nursing Science (DNS), and Indiana State Board of Nursing policies and procedures, ANA Standards of Practice, ANA Code of Ethics, and the Nurse Practice Act of the state within which the clinical experience is occurring. Failure to exhibit integrity, ethical conduct, professional standards, or any violation of the responsibilities listed herewith may result in a failing grade and/or dismissal from the nursing program and the College.
3. Comply with all health documentation and other professional requirements of the clinical agency prior to the start of the clinical experience.
4. Dress in a professional manner as required by the DNS, course syllabi, and clinical agency dress code policy. Student will wear an official SMC student name tag at all times while at the clinical site.
5. Maintain patient confidentiality. Under no circumstance may records be removed from the agency. Comply with HIPAA standards per clinical agency and course syllabi policy.
6. Student conduct in the clinical setting must be in a manner that demonstrates safety, adherence to professional standards, and reflects positively upon the DNS.
7. Be prepared to work the day(s) and hours of the preceptor, and as agreed upon between the student, the preceptor, and the nursing faculty.
8. Provide preceptor with DNS Preceptor Handbook and all relevant clinical documents from SMC including a student profile, a brief resume of your educational and professional background, a clinical skills inventory, and a learning contract.
9. Establish with the preceptor a schedule of clinical experiences and maintain clinical logs per course syllabi.
10. Attend all scheduled clinical days, or notify the nursing faculty and the clinical preceptor if an absence is necessary. Arrange for make--up time.
11. Collaborate with the clinical preceptor, and course faculty, to develop specific learning goals for this clinical experience.
12. Students must demonstrate competence of APN skills to the preceptor prior to performing these alone.
13. Maintain the student APN/DNP role. At no time is the student to assume a fully independent role in seeing patients without appropriate collaboration and reporting to the preceptor per the course syllabi.
14. Arrange appointments, either in person or electronically, with the course faculty to discuss progress toward goal achievement.
15. Document and notify the nursing faculty immediately of any unprofessional behavior or breach of contract by the preceptor.
16. Maintain clinical logs per course policies and according to the course objectives. Participate in scheduled clinical site visits and clinical conferences with nursing faculty and/or preceptor. SMC DNS utilizes an online patient encounter documentation system for students to maintain their clinical logs.
17. Complete the Student Evaluation of Preceptor form in the online patient encounter documentation system at the end of the semester.
18. Ensure that all preceptors have received and completed a Preceptor Evaluation of Student form at the end of the semester.

Preceptors must be physically present in the clinic setting when the student is engaging in clinical practicum experiences. Each provider in a clinical practice who is working with the student must complete the Preceptor Information Form and be properly vetted.

Clinical Incidents

When a clinical incident occurs, students must immediately notify their clinical supervising faculty. Within one day of the event, the student must complete the Clinical Incident Report Form (Appendix L and in DNP Student Resources in BlackBoard) and send it to the clinical supervising faculty member and the Graduate Program Director. A clinical incident is any unexpected patient incident related to patient care (errors, safety hazard, injury, sentinel event) that occurs when the student is engaging in Saint Mary's College DNP Program clinical activity. The reporting requirement includes incidents in which there was no adverse patient outcome.

Chapter 4

Practice Innovation Practicum, Project, and Portfolio

Practice Innovation Practicum, Project, and Portfolio

DNP Practice Innovation Practicum

The Practice Innovation Project is the capstone deliverable product that reflects synthesis and integration of all of the skills and knowledge gained in the doctoral program. This project is developed throughout sequential DNP Practicum courses that highlight the student's doctoral level skill and thinking in the areas of collaboration, communication, creativity and innovation, critical thinking, interprofessional teamwork, and the use of evidence to support sustainable change serve as a catalyst for improved healthcare outcomes.

The following courses provide a foundation for work in the DNP Practice Innovation Project Courses:

- NURS 600: Communication and Relationship--Centered Leadership;
- NURS 612: Social Entrepreneurship and the Business of Healthcare;
- NURS 670: Data Analytics and Outcomes Improvement;
- NURS 604 Evidence Based Practice 1 and NURS 624, Evidence Based Practice 2;
- NURS 622: Statistics for Health and Biological Sciences;
- NURS 633 Health Promotion for Population Health;
- NURS 725: Quality Effectiveness and Safety in Organizational Systems

DNP Practicum Hours

Students must complete 400 DNP Practicum hours in the DNP Practicum courses (NURS 701, 702, 703, 704, 705, 706). These courses prepare doctoral students to develop, deliver, evaluate and disseminate the findings from the Practice Innovation Project. Each DNP Practicum course provides specific outcomes that are planned to support the progress, completion, and dissemination of the findings from the project.

Students are required to record all activities done in completion of the required 400 DNP practicum hours in the Typhon Conference Logs (found under "Other Activities& Reports on the Typhon homepage). When recording the hours in conference logs students must include the following:

- The date of when the activity was completed.
- A descriptive topic name for the activity (e.g. Library, CITI Program completion).
- A speaker only if the activity included talking to someone about the project. If it did not include a conversation about the project (i.e. library research), the student should write N/A in the required speaker field.
- A description of the activities, including which course and program outcomes were met by doing the activity and a brief reflection on how the activity contributed to the Practice Innovation Project.
- The number of hours that the student engaged in the activity on that particular day.

- Typhon asks if the activity was awarded CME/CEU Credit. Students should choose “no.”
- The appropriate associated course (NURS 701, 702, 703, 704, 705, 706) in which the activity was completed.

DNP Practice Innovation Project and DNP Portfolio

The DNP Practice Innovation Project is completed in two phases: Proposal and Final Project. In order to graduate from the DNP Program, students must successfully complete both phases of the project and maintain required documentation in the DNP Portfolio.

DNP Practice Innovation Project Team

Faculty Team Leader: Doctorally prepared (PhD, DNP) Saint Mary’s College faculty member. This member serves as the lead faculty mentor on the project and must have some level of expertise in the student’s topic. Typically, the faculty team leader is the person who teaches the NURS 700 courses.

Community Key Stakeholder: This member serves as the student’s local mentor for the project and should have some level of expertise and involvement in the student’s topic.

DNP Practice Innovation Project Focus

Primary care Nurse Practitioner tracks: Focus must be well situated within the scope of practice of a Primary Care Nurse Practitioner with the aim to promote health and treatment of disease states, improve quality of health care, or increase access to health/healthcare for patients in that setting.

Acute care Nurse Practitioner tracks: Focus must be well situated within the scope of practice of an Acute Care Nurse Practitioner with the aim to promote health and treatment of disease states, improve quality of health care, or increase access to health/healthcare for patients in that setting.

Topic areas may include, but are not limited to:

- Evidence-to-practice translation
- Quality improvement
- Practice-based or clinical inquiry
- Program development and evaluation
- Policy

DNP Practice Innovation Project Requirements

A Project Proposal Paper and Presentation

The Project Proposal Phase includes the following:

- A scholarly paper that successfully reflects the requirements of the DNP Practice Innovation Project Proposal Grading Sheet (Appendix M).

- A proposal presentation (Appendix N) with the Faculty Team Leader in which the student summarizes the plans for the project and responds to any questions posed. The student should plan at least one hour for this meeting.
- Students who successfully complete the Project Proposal Phase must have the Proposal Approval form (Appendix Q) signed by the faculty team leader and upload it to Typhon External Documents.

Institutional Review Board Approval

After successfully completing the proposal defense, students must submit their project for approval to the Saint Mary's College and health system (if required) Institutional Review Board before any data are collected. There are no exceptions for this policy. The IRB approval form must be uploaded to Typhon and included in the final project paper appendices.

Final Practice Innovation Project Paper and Presentation

The final Practice Innovation Project product consists of a scholarly paper and public presentation completed via a poster presentation at an Immersion weekend. The grading schema for the final paper is found in Appendix O. The final paper will be graded by the student's faculty team leader.

Students also will present their work in a final presentation, typically in poster format. The grading sheet for the poster is found in Appendix P.

A poster presentation at a DNP Immersion will serve as the final public defense. The poster must include a summarization of the Project. The criteria and grading sheet for the public defense are found in Appendix P.

The poster must be submitted for presentation at a regional, state or national conference. Students are encouraged to submit their work for publication.

Final Project Approval

After the final paper and presentation are successfully completed, The Practice Innovation Project Completion Form must be signed by the faculty team leader and student (Appendix R and in DNP Student Resources on BlackBoard).

DNP Practice Innovation Proposal and Final Project Possible Outcomes

Possible Outcomes:

- **Pass with or without minor revisions: Average score between 87-100%**
 - Proposal phase: The student may proceed with development and submission of required documentation to the Saint Mary's College and/or health system Institutional Review Board (IRB). Revisions must be completed within two weeks after receiving feedback.

- Final project phase: The student has successfully completed the written paper, presentation, and portfolio requirements. Revisions must be completed within two weeks after receiving feedback.
- **Pass with revisions: Average score between 86-80%**
 - Proposal phase: The student must address all recommendations within two weeks after receiving feedback and prior to proceeding with IRB document development and submission.
 - Final project phase: Student must address all recommendations within two weeks after receiving feedback.
- **Fail: Average score below 80%**
 - Proposal phase: The student may not proceed with the project until deficiencies are addressed and corrected. In this case, the student will have one more opportunity to repeat the proposal defense. A second failure means the student must meet with her/his team and the program director.
- Final project phase: Student must meet with her/his team and the program director.

○

DNP Portfolio

All students must maintain current documentation in the DNP Portfolio. The portfolio serves to highlight scholarly development as students' progress through the DNP Program. The portfolio includes a repository of student work throughout the program. Students are responsible for uploading to the appropriate External Documents Folder in Typhon:

- Major graded papers and presentations from each course in the DNP Program.
- An updated resume or CV each year.
- Evidence of completion of the CITI Program (done in NURS 701).
- Proposal Paper and Presentation
- Proposal Approval Form (Appendix Q)
- Project Completion Form (Appendix R)
- Final project paper

Appendices

- Appendix A: Essential Abilities Form
- Appendix B: Change of Clinical Track Form
- Appendix C: Physical Exam Form
- Appendix D: Immunizations Form
- Appendix E: Tuberculosis Risk Assessment Form
- Appendix F: Release of Information Form
- Appendix G: Documentation of Injury Form
- Appendix H: Student Profile
- Appendix I: Skills Inventory
- Appendix J: Preceptor Information Form
- Appendix K: How to use Typhon guide
- Appendix L: Clinical Incident Form
- Appendix M: DNP Practice Innovation Project Proposal Paper Grading Sheet
- Appendix N: DNP Practice Innovation Project Proposal Presentation Grading Sheet
- Appendix O: DNP Practice Innovation Project Final Paper Grading Sheet
- Appendix P: DNP Practice Innovation Project Final Poster Grading Sheet
- Appendix Q: DNP Practice Innovation Project Proposal Signature Page
- Appendix R: DNP Practice Innovation Project Completion Signature Page