

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
SCHOOL OF NURSING
DNP POST-MASTER'S PROGRAM OPTION

STUDENT HANDBOOK



ACADEMIC YEAR 2023-2024

A-State University
Doctor of Nursing Program
910 N. Caraway Rd. Nursing Building
State University, AR 72467

WELCOME

Welcome to the Doctor of Nursing Practice (DNP) program. You bring a wealth of academic preparation and experience to serve as a launching board for this advanced level of education and nursing practice. We look forward to helping you achieve your goals and congratulate you on recognizing the opportunities DNP study will bring you.

This DNP Student Handbook has been compiled to provide you with information and the policies relevant to your studies as a DNP student. You are responsible for knowing and understanding the policies and procedures in the Handbook and the Graduate Information Guide (GIG). Please ask for clarification if you have any questions about the information in this Handbook; we welcome your suggestions for additional information.

The Student Handbook is available online at <https://www.astate.edu/a/student-conduct/student-standards/handbook-home.dot>. The faculty reserves the right to revise policies and procedures found herein at any time deemed advisable and will communicate with you if changes are made. We look forward to working with you during your program of study as you complete the requirements for the DNP degree and assume a leadership role in nursing. We are glad that you are here!

Linda Latting, DNP, MSN, RN
DNP Program Coordinator
School of Nursing, College of Nursing and Health Professions
Arkansas State University

Mission and Philosophy

School of Nursing Mission Statement

The mission of the School of Nursing is to educate, enhance and enrich students for evolving professional nursing practice.

The core values:

The School of Nursing values the following as fundamentals essential for entering professional nursing practice:

- **Integrity:** Purposeful decision to consistently demonstrate truth and honesty. We hold high standards of character and integrity as the foundations upon which the university is built.
- **Excellence:** Highest quality of nursing education, practice, service and research. We pursue excellence within the campus community through opportunities for achievement in teaching, research, scholarship, creative activity, and service.
- **Diversity:** Respect for varied dimensions of individuality among populations. We embrace diversity in all of its dimensions realizing that mutual respect for individuality and the inclusion of all are vital for both personal and institutional success.
- **Service:** Professional experiences in response to the needs of society. We support and recognize service at all levels of the university. We strive to contribute to the benefit of the university, the Delta, the state, the nation and the world.
- **Learning:** Acquisition of knowledge and skills in critical thinking, practical reasoning, and decision making. We nurture intellectual flexibility knowledge and skills by integrating teaching, research, assessment and learning to promote continuous improvement of our scholarly community.
- **Student centered:** Development of essential skills for lifelong learning, leadership, professionalism, and social responsibility. We are committed to education, inquiry and service in order to meet students' changing needs. We foster lifelong learning, civic and social responsibility, leadership, and individual and career growth.

School of Nursing Philosophy

The faculty holds the following beliefs about personhood, environment, health, nursing and nursing education. We believe that each **person** has innate worth and individuality, which reflects integration of the “psychological, spiritual, social, developmental and physiological**” nature of one’s being. Though each is unique, all persons possess characteristics that form the bases of identifiable shared basic human needs. We believe that individual experience, heredity, and culture influence each person, and that one’s existence depends on perception of and reaction to change. Inherent in this process is the capacity to make decisions, weigh alternatives, predict and accept possible outcomes.

The faculty believes that **environment** profoundly influences all persons. The environment is the sum of all conditions and forces that affect a person’s ability to pursue the highest possible quality of life. The concept of environment has two major components. The first comprises society and culture, which derive from the need for order, meaning, and human affiliation. The second component consists of the physical and biological forces with which all human beings come in contact. Both of these components of the environment are sources of stimuli that require personal adaptation and/or interaction in order for individuals to survive, develop, grow, and mature.

The faculty believes that **health** is a state of wholeness and integrity. We recognize that health is not a static state for individuals, families, groups, or communities, but that it is a continuum in which the mind, body and spirit are balanced, providing a sense of well-being. Health is influenced by the ability to cope with life processes. The achievement of this potential is determined by motivation, knowledge, ability, and developmental status. The faculty also believes the primary responsibility for one’s health rests with the individual or those upon whom one is dependent.

We believe that each individual has the right to quality health care. The goal of health care is to promote, maintain, or restore an optimal level of wellness. Nurses act as advocates in assisting persons to gain access to and secure maximum benefit from the health care system. The complexity of health care requires that nurses as professionals collaborate to provide the highest level of health care possible.

The faculty believes that **nursing** is both art and science. This unique altruistic discipline has evolved from the study and application of its own interventions as well as applying knowledge from a variety of other disciplines. The focus of nursing is the provision of care across the health care continuum utilizing a systematic nursing process.

We believe that nursing refines its practice in response to societal need, and that **nursing education** must prepare a professional nurse for evolving as well as traditional roles. The faculty recognizes the obligation of the nursing curriculum to include leadership, change strategies, professionalism and community service. We believe that the education of nurses occurs at several levels in order to prepare various categories of practitioners. To acquire the knowledge and judgement inherent in practice, nursing education focuses on critical thinking, decision-making, analysis, inquiry, and research. The faculty also believes that learning is an independent, life-long process. Learning is an opportunity for teacher-student interaction in setting goals, selecting and evaluating learning experiences, and appraising learners' progress. All levels of nursing education share certain rights, duties, and characteristics, such as the scientific basis of nursing care. Accordingly, we actively support the endeavors of the profession to assist nurses in pursuing professional education at beginning and advanced levels.

The purpose of the associate level is to prepare graduates who apply the nursing process in the provision of direct nursing care for individuals with common, well-defined problems. Therefore, the associate curriculum is grounded in the liberal arts and includes professional values, core competencies, core knowledge, and role development. The associate degree graduate is prepared to function as a member of the profession and a manager of care in acute and community-based settings.

The nurse prepared at the baccalaureate level is a professional who has acquired a well-delineated and broad knowledge base for practice. We believe that the role of a baccalaureate graduate is multifaceted and developed through extensive study in the areas of liberal education, professional values, core competencies, core knowledge, and role development. This knowledge base prepares the baccalaureate graduate to function as a provider of direct and indirect care to individuals, families, groups, communities and populations. The baccalaureate graduate is a member of the profession and a designer, manager, and coordinator of care.

The master's level prepares baccalaureate nurses for advanced nursing practice roles. Preparation for advanced practice emphasizes strategies to intervene in multidimensional situations. The knowledge base is expanded in scope and depth through the scientific, theoretical and research components of nursing. Various theories inherent in advanced practice roles and strategies are analyzed and explored to synthesize the interdependence of theory, practice, and scientific inquiry in nursing. This synthesis of knowledge and experience provides the basis for creating, testing, predicting, and utilizing varied and complex interventions for problems of health care and health care delivery. The graduate of the master's program is a leader in the profession and prepared as an independent coordinator of care.

The practice doctorate prepares master's level nurses in advanced leadership skills, health policy, with increased clinical skills and expertise to provide health care, especially in rural and underserved area. They are prepared to initiate change at all levels of current complex health care systems and to lead in implementing the changes required by the evolving health care system. They are prepared to analyze and expand boundaries to improve health care for their communities, region, nation and world.

The Doctor of Nurse practice in Nurse Anesthesia program prepares baccalaureate nurses with critical care experience and a working knowledge of pathophysiology, pharmacology, and anatomy/physiology to become Certified Nurse Anesthetists. They are educated in the roles of advanced leadership, health policy, clinical skills, and expertise to provide care in the full scope of practice in anesthesia care throughout the lifespan. They are prepared to initiate and lead any implementation of change in complex and evolving healthcare systems. They are prepared to analyze and expand boundaries in order to become transformational leaders driving innovation and excellence in healthcare for their communities, region, nation, and the world.

Taken from QSEN Competency: Patient-Centered Care

Revised 10/2018; 5/2023

Purpose

The purpose of the DNP Program is to prepare graduate nurses to provide safe, high quality, cost-effective, coordinated and comprehensive clinical care based on evidence-based practice. The DNP curriculum builds on traditional master's programs with education in evidenced based practice, advanced clinical, organizational, economic, and leadership skills to design and implement programs of care delivery which significantly impact health care outcomes, having the potential to transform health care delivery. Graduates with this terminal practice degree will be prepared for roles in direct care or indirect, systems-focused care.

School of Nursing Organizing Framework

The organizing framework of the nursing department is derived from the philosophy and has four major components. The four components are role, process, values and knowledge. These components are taught at each level of education and provide a construct for development of objectives and outcomes. The framework model clearly shows how each of the components increases in complexity at the four levels of education.

The first major component is role. The faculty believe provider of care, manager of care and member of the profession are key elements of this component (National League for Nursing, 2012). To clearly explain how these roles develop, each will be examined at all four levels.

At the associate degree level, emphasis is placed on providing and managing direct care to individuals with common well-defined problems. The associate degree graduate functions as a team member using nursing diagnoses and established protocols for individuals in acute care and community-based settings. Additionally, the graduate participates as a member of the profession in appropriate specialty and politically focused nursing organizations.

The baccalaureate degree nurse provides direct and indirect nursing care to individuals, families, groups, and populations. The baccalaureate graduate has the ability to individualize nursing diagnoses and protocols to enhance the design and coordination of preventative, complex and restorative care. As a member of professional organizations, the graduate has the capacity to assume leadership and advocacy roles.

The master's graduate is able to function independently in the provision for direct and indirect care. Practice settings for the master's prepared graduate are multi-dimensional. Inherent is the ability to design, facilitate and coordinate care for individuals in a variety of health care settings. Graduates have the skills necessary to lead, affect policy, and mentor as members of specialty and politically focused nursing organizations.

The Doctorate of Nursing Practice graduate functions independently in the provision of direct and indirect, systems-focused care. The DNP graduate is active in evaluating existing health care systems and initiating change to meet the needs of individuals, families, groups and populations. Practice settings for the DNP prepared graduate are multi-dimensional and are not limited to existing or prescribed health care settings. Graduates have the skills to initiate change, lead and serve as mentor for other health care team members at the local, regional, state, and world levels.

The Doctorate of Nursing Practice in Nurse Anesthesia graduate functions independently in the provision of direct patient-centered care with emphasis in providing anesthesia care throughout the lifespan. The graduate of the Certified Registered Nurse Anesthetist (CRNA) program is skilled in evaluation of client safety, communication, and provision of culturally competent care in perioperative settings. The graduate also seeks to advance the profession through leadership, research, and evidence-based practice. Practice settings for the CRNA graduate are multi-dimensional and are not limited to traditional health care settings. Graduates have the skills to initiate change and become transformational leaders that drive innovation and excellence in health care for their communities, region, nation, and the world.-

The second major component is knowledge. The general education curriculum provides a foundation of liberal arts and sciences for the associate and baccalaureate students. These courses help provide the basic psychosocial, spiritual, humanistic, and legal components which assist students in developing an appreciation of each person's interaction with the environment. The knowledge gained enhances the nurse's ability to think critically, reason logically, and communicate effectively.

The associate degree core focuses on liberal arts and sciences, which include courses in English, college mathematics, basic biological science, history and psychology. Content for the associate degree student provides basic nursing knowledge that is applied to common well-defined problems.

The baccalaureate student's general education core is expanded to provide a more in-depth science basis and global view of society. These courses include physical sciences, sociology, world civilization and humanities. The support courses of pathophysiology and statistics are incorporated into the nursing curriculum as the student progresses into complex nursing theory and application.

The master's program builds on the baccalaureate curriculum. Core graduate courses include theory, research, role, and health policy. These courses prepare the master's graduate to integrate the other components of role, process and values. The key support courses for all options include advanced pathophysiology, advanced pharmacology, and advanced health assessment/physical diagnosis. Content in specialty courses reinforces concepts in the core courses as well as preparing the graduate for advanced nursing.

The DNP curriculum builds on traditional master's programs with education in evidenced based practice, advanced clinical, organizational, economic, and leadership skills to design and implement programs of care delivery. Translation of research into practice will significantly impact health care outcomes and have the potential to transform health care delivery.

The Doctor of Nursing Practice in Nurse Anesthesia curricula prepares registered nurses with a baccalaureate degree, critical care experience, and a working knowledge of pathophysiology, pharmacology, and anatomy/physiology for entry level practice as a Certified Registered Nurse Anesthetist (CRNA). The program is designed to cultivate advanced nursing knowledge, provide a scientific basis for management of complex client care situations, and develop skills to promote safety and quality of care in dynamic, rapidly-changing healthcare systems.

Faculty defines the third component, values, as the system of beliefs that guide behaviors, attitudes and moral judgment. Personal values reflect cultural and social influences, relationships and individual needs. Professional values guide nurses' behavior to act in a manner consistent with nursing responsibilities and standards of practice. We believe professional values can be formed through reasoning, observation and experience.

The associate graduate possesses an awareness of personal values and how these values may influence care delivery. Additionally, the associate graduate incorporates professional values in assisting individuals with the process of value clarification that may impact health care decisions. The baccalaureate graduate has a global perspective and is able to help individuals clarify or re-prioritize personal values, minimize conflict and achieve consistency between values and behaviors related to health. The masters' prepared graduate applies professional values when designing health care systems in response to societal need. The master's graduate is able to engage in activities that influence policies and service delivery to diverse populations in a variety of settings. The doctoral graduate (including the CRNA graduate) is prepared as the nursing terminal degree that encompasses all professional role expectations in nursing. Personal values are applied when evaluating and designing health care systems, as well as leading the change of health care systems in response to research translation, population health, and needed policy development.

The profession of nursing utilizes a systematic process that incorporates the other three components, role, knowledge, and values to evaluate the needs of individuals, groups and/or communities. The process involved assessment, planning, implementation, and evaluation on a continual basis. All nurses are prepared to use this process but as one acquires additional knowledge, the nurse begins to use the components of the process in unique and creative ways. As one moves through the educational program, elements such as communicating, educating, supporting, coaching and monitoring are incorporated into the process. Additionally, problem solving, planning, inquiry, and appraisal are used to derive and evaluate the interventions developed.

The associate degree graduate uses a systematic process in nursing care to implement and modify known nursing interventions. The baccalaureate prepared graduate has the capability of anticipating, individualizing, implementing and evaluating various interventions according to unique situations and cultural responses. The master's graduate generates and designs nursing interventions. The master's graduate recognizes the interdependence of theory, practice and scientific inquiry when creating, predicting, and evaluating interventions that are complex and varied. The doctoral graduate (including the CRNA graduate) leads and collaborates change for improved healthcare systems and designs systems for improved population health based on research translation. At all levels relevant research literature is utilized in the application of the nursing process.

Revised 6/2016; 5/2023

CODE OF ETHICS

Students in the graduate program at Arkansas State are held to the ANA Code of Ethics:

Provision 1: The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

Provision 2: The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.

Provision 3: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

Provision 4: The nurse has authority, accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to provide optimal patient care.

Provision 5: The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.

Provision 6: The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.

Provision 7: The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.

Provision 8: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Provision 9: The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Outcome Statements

The DNP program outcomes (AACN's Essentials of Doctoral Education for Advanced Nursing Practice, 2015), constitute the foundation of the program and run throughout all courses. Assessment includes DNP Essentials (AACN, Program and Course Learning Outcomes).

Upon completion of study for the Doctor of nursing practice, the student learner/graduate is expected to be prepared in:

The Essentials of Doctoral Education for Advanced Nursing Practice (AACN):

- I.) Scientific Underpinnings for Practice
- II.) Organizational and Systems Leadership for Quality Improvement and Systems Thinking
- III.) Clinical Scholarship and Analytical Methods for Evidence-Based Practice
- IV.) Information Systems/Technology and Patient Care Technology for the Improvement and

Transformation of Health Care

V.) Health Care Policy for Advocacy in Health Care

VI.) Interprofessional Collaboration for Improving Patient and Population Health Outcomes

VII.) Clinical Prevention and Population Health for Improving the Nation's Health

VIII.) Advanced Nursing Practice

DNP CURRICULUM

The curriculum of 36-43 credit hours is completed in a program of study that is as little as 1 year in length. These credit hours include 27 credits, with 9 of those courses identified as specialty courses. The total clinical hours required for a DNP degree is 1000 hours. However, a gap analysis evaluating the student's MSN clinical hours may provide credit for up to 460 of these hours. Students will be required to complete an additional clinical course, NURS 881V*, if the gap analysis calculation indicates additional clinical hours are needed to complete the 1000-hour requirement. NURS 881V is a variable credit course so students can earn up to 7 credit hours and fulfill the clinical hours requirement.

*See the [A-State Graduate Bulletin](#) for the current plan of study and course descriptions.

COURSE DELIVERY

The DNP courses will be offered online with distance education delivery using the learning management system. Students must have a computer with Internet access that supports video streaming. Please review the additional online student electronic requirements provided on the A-State website, your course syllabus, and the General Orientation tab under the Getting Started Module in each course.

Clinical Attire & Name Tags

- **Students may not begin their clinical hours until they are cleared to start by faculty.**
- All students are required to dress professionally. A white lab coat will be worn which is freshly laundered and ironed. The lab coat may be worn over scrubs depending on the clinical needs of the day, otherwise wear it over business al clothing. The appropriate length of the lab coat is *no longer* than mid-thigh length. A name-tag will be worn identifying the student as an A-State DNP student. Name tags can be ordered through the [Textbook Brokers](#).

Order form for name tag:

Examples for Appropriate format for name include:

Line 1: (If you want, Mr./Mrs./Miss/Ms.) "Your Name, MSN, APRN, (certification: CNP, CNM, CNS, CRNA)"
Line 2: "A-State DNP Student"

Prior to beginning any clinical activities, students must submit the following documents to the DNP Program Coordinator as well as for any course requirements:

1. Active license to practice as a registered nurse in the state in which they will complete clinical hours,
2. Professional liability insurance indicating role as a DNP student (minimum \$1,000,000/\$3,000,000)
3. Current TB card or evidence of negative finding from chest x-ray
4. CPR certification (BLS)
5. Evidence of Hepatitis B immunization

The DNP (scholarly improvement) Project

The DNP Project is a culmination of the knowledge gained in the DNP courses and applied in a specific area of the student's choice. The Project provides:

1. An opportunity to demonstrate an analytical approach to clinical problems, programmatic, administrative, or policy issues in a format that supports the synthesis, transfer and utilization of knowledge.
2. The ability to demonstrate the identification and resolution of a practice problem through the scholarship of application, integration, and translation.
3. A broad and holistic approach to systematic problem-solving.
4. A contribution from DNP expertise in the workplace or the community, and in the academic area.
5. Experiences that are characterized by strategic interactions between and among faculty, students, and the community in which the DNP is enacted.

Criteria for the DNP Project Manuscript

The DNP project is completed during NURS 8263 DNP Project. The project represents an opportunity for the student to investigate a health care issue in a clinical situation that needs improvement. The focus is broad and includes not only direct care issues, but also interventions and programs that indirectly influence clinical outcomes for a defined population or group of professionals.

Direct clinical care, interventions designed to improve clinical outcomes for a population, administrative interventions to improve clinical outcomes, and policy interventions to improve health conditions and outcomes for populations are included in this definition. The project focuses on the scholarship of practice, with an emphasis on internal (local value) validity rather than external generalizability. The report of the DNP project consists of one scholarly manuscript that describes the nature of the DNP project and a presentation to a learned forum. Student final products are shared in an online repository.

Types of translational scholarly DNP projects include but are not limited to:

- Quality Improvement-focus on the structure, process, and outcomes of health outcomes. Quality improvement is a continuous monitoring process with its own validated methods and tools for analysis. Interventions should be evidence-based, with input from the local stakeholders to have the most meaningful impact to this setting.
- Action Research (Translational Research) - directly impacts practice and builds capacity. Translational action research involves a cycle of data gathering, reflection, and problem redefinition. The student takes research already completed, modifies it for use in the local setting. A variety of methods may be used to collect data.
- Program Evaluation - may fall into one of five categories:
 - o Formative evaluation structured to provide information for immediate project

improvement.

- o Summative evaluation conducted for accountability, which requires determining the overall effectiveness or merit and worth of an evaluation object.
- o Outcome evaluation to measure whether the project achieved its intended outcome. This is also sometimes called Goal-based evaluation to determine the extent to which programs are meeting predetermined goals or objectives.

Ideas that may fall into one of the above categories:

- Translation of research into practice
- Design and evaluation of new care delivery models
- Design and evaluation of programs for patient or community-based populations
- Implementation and evaluation of evidence-based practice guidelines
- Implementation and evaluation of innovative uses of technology in clinical practice to improve outcomes
- System modification for quality improvement processes

Substantive deviations from the suggested scholarly projects will need to be discussed with the Program Director and a Faculty Mentor.

*****All projects should address the purpose, needs for the project, change theory, policy issues, literature review, leadership and change management role competencies, role-specific certification competencies, DNP Essentials, organization/systems implications, educational needs of staff/providers/patients, technological elements, strategic planning, interdisciplinary teamwork, guidelines for data management, IRB review, and financial aspects for implementing the project.***

Roles of DNP Project Team

The DNP Project is produced with the advice and guidance of a team.

Role of the DNP Team Faculty Mentor:

1. Support and enhance DNP students in developing inter-professional and intra-professional skills, doctoral writing skills, and leadership skills in conducting the DNP project and its associated project paper. These attributes will be done within the construct of course guidelines.
2. Ensure all clinical requirements are met prior to the start of project hours.
3. Maintain rigor of the DNP project by assuring scholarly and doctoral writing, appropriate literature references and reviews. Assuring the project is multi-dimensional, is education, and/or quality improvement, or safety oriented all while using APA standards.
4. Mentor the student in developing and applying the principles of business, finance, economics and/or policy initiatives as it relates to their DNP project topic.
5. Review and give feedback on sections of their DNP papers prior to the grade that is required for course work. Mentor students in developing the critical thinking skills of a doctoral student while they are developing and advancing their skills in research and scholarly writing.
6. Review and give feedback student's IRB application prior to student's submission for a grade and submission to IRB.
7. Mentoring how to professionally disseminate DNP project results in different venues.
8. Assure all DNP projects remain evidenced-based with appropriate evidenced based references.
9. Keep open communication with the course instructor and the program director regarding the progress of the students being mentored

10. Mentors in the DNP project process to include the critical and systematic process of the AACN Essentials of Doctoral Education for Advanced Nursing Practice.
11. Holds a terminal degree in Nursing.

Role of Faculty DNP Project Team Members (other than the Faculty Mentor):

1. Critique drafts of the developing DNP Project proposal.
2. Participate in team review and approval of the Project Proposal, Final Project Report and oral defense presentations.
3. Communicate concerns to students and DNP Project Faculty Mentor in a timely manner.

Role of DNP Practice Partner (Outside the department):

1. Provide expertise in the selected area of study for the student.
2. Assist students in the selection and project design most appropriate for their area of expertise.
3. Provide feedback to students on written drafts in a timely manner.
4. Participate in DNP Project team review and approval of the Project Proposal, Final Project Report and oral defense presentations as needed.
5. Communicate concerns to students and DNP Project Faculty Mentor as needed.
6. Review the preceptor handbook.

Role of the DNP Student:

1. Maintain consistent and effective communication with Faculty Mentor and all team members, using only school email.
2. Collaborate with DNP Project Faculty Mentor to schedule team meetings.
3. Generate and submit all forms as required.
4. Submit work to the DNP Project Team that demonstrates a high level of scholarship and interventions.
5. File Certificate of Completion of CITI training, IRB proposal, IRB notification of approval and final study report.

DNP Project Process

1. Prior to the start of NURS 8213 Translational Research I, a Faculty Mentor will be assigned to each student by the DNP program coordinator.
2. The DNP student will contact the assigned DNP Faculty Mentor to discuss the project topic (problem to be improved). If the Faculty Mentor leaves A-State, the department chair, in consultation with the remaining team members and the student, either appoints another advisor or assumes the position.
3. The student completes CITI training appropriate to the project and uploads the certification to the DNP Workroom as well as in any courses requiring through an assignment.
4. The student completes the IRB application appropriate to their project and uploads to the DNP Workroom as well as in any courses requiring this through an assignment. Students will contact the Faculty Mentor for assistance with filing IRB application forms (See section on IRB below).
5. Submit IRB application allowing 2-3 weeks for response. Incomplete or unsatisfactory proposals may require revision and resubmission and extended time for approval. See DNP Workroom specific assignments.
6. Notify the Faculty Mentor of IRB status and maintain IRB notification of approval for filing/ portfolio, etc.
7. Project implementation or data collection may not begin until IRB approval is formally obtained.
8. Implement and evaluate approved projects.
9. Submit draft of DNP Project Proposal to Faculty Mentor for initial review and feedback.
10. When a proposal is ready for further review, Project team members will evaluate the proposal. The student will orally present the proposed DNP Project to the Team in preparation for scholarly

dissemination. The student will be prepared to discuss the entire proposal. The verbal presentation should include statements of the problem, a brief review of salient literature and theoretical framework, methods to be used, anticipated results, and potential implications of the study. PowerPoint slides should be used. The DNP Project Faculty Mentor will conduct the meeting. All team members and the student must be present for the oral presentation to the DNP Project Team.

11. Completed DNP Presentation - Students must be prepared to discuss the entire project and written report in the timeframe of 20 minutes. The candidate must present the entire project and satisfy the Team that he or she is qualified to receive the degree of Doctor of Nursing Practice. The Faculty Mentor introduces the Team members, the doctoral student and the project title.
12. The candidate may be questioned by members of the audience and by the Team members.
13. Submit a written draft of completed DNP Project Manuscript to the Faculty mentor and then to all DNP Team members for review and feedback. Allow 1-2 weeks for review and to make recommended revisions.
14. After public presentation, any revisions to the DNP Project should be discussed with the Team members and students in closed session. Then, the DNP candidate will be asked to leave during the deliberation process { 10 to 15 minutes).
15. The Team will decide if revisions should be approved by the advisor or the entire team. The Faculty Mentor announces the results of Team deliberation.
16. The Faculty Mentor will forward the completed Project form to the Graduate School.
17. The student should prepare final electronic copies and should submit to the Faculty Mentor for the library repository and keep for their portfolio.

Institutional Review Board (IRB) Approval and Forms

Depending on the nature of the investigation, an application for exempt, expedited, or full review is submitted to the IRB at Arkansas State University. The student will work with the Faculty Mentor to determine which application is appropriate for the proposed study. Students must also identify and follow the procedures for study review and approval at the site where data will be collected. The clinical site may also have their own IRB and procedures to follow. Students are kept informed about College and University matters including the review process of the IRB application in the College via their assigned University e-mail address only. Information will not be sent to personal email addresses.

Furthermore, the student may not collect data until official written approvals obtained from the Institutional Review Board.

If changes are made in the protocol or consent form, or if problems arise in the conduct of the study, the student must report them to their Faculty Mentor, and to the IRB. It is the student's responsibility to notify the IRB when the study is completed (if it is deemed research).

Note: Portions of this document were adapted from the University of Indiana's DNP handbook and forms, as well as the National Organization of Nurse Practitioner Faculties (2005) Recommended Criteria for NP Scholarly Projects in Practice Doctorate Programs, the American Association of Colleges of Nurses (2006) The Essentials of Doctoral Education for Advanced Nursing Practice and the University of Kentucky College of Nursing DNP Portfolio and Practice Inquiry Project Handbook Supplement (2014), and A-State School Website.

Advising

An Advisor will be assigned to you upon admission to the program.

RETENTION

Students must maintain a GPA of 3.0, according to the Graduate school requirements. Admission to clinical courses requires a grade of B or better in all graduate level courses.

All policies as represented in the A-STATE Graduate Bulletin remain in effect, including requisites and co-requisites identified for each course. Effective Fall 2013, all DNP students will be required to earn a minimum grade of "B" in all courses before progression in the curriculum.

DISMISSAL POLICIES**CLINICAL AGENCY DISMISSAL POLICY**

Students dismissed or removed from clinical agencies at the request of the faculty mentor or contracting agency will be placed on probation for no less than one (1) month. Faculty will make every attempt to locate another suitable clinical practice site. Faculty will work with students to produce a plan of action for students to correct the behavior that led to dismissal. By the end of the probationary period students must demonstrate improvement or correction of the behavior that led to dismissal. If the student fails to improve or demonstrate correction of the behavior that led to removal, dismissal from the program can result.

***IF THE STUDENT IS REMOVED FROM A CLINICAL AGENCY A SECOND TIME, HE/ SHE WILL FAIL THE COURSE.**

GENERAL DISMISSAL POLICY

A student may be asked to leave the nursing program regardless of academic grade if any of the following conditions exist:

1. Demonstrated lack of aptitude for advanced practice in nursing.
2. Failure to exhibit behavior of:
 - a.) Integrity,
 - b.) Dependability and accountability
 - c.) Concern for human and societal needs. (See Honor Code)
3. Clinical nursing performance that jeopardizes safety of patients.
4. Physical or emotional condition of a nature that affects, or is affected by, one's performance in nursing.
5. Failure to conform to the legal and ethical standards of the nursing profession.
6. Having excessive absences, or inadequate clinical contact hours obtained throughout clinical rotation (see attendance policy).

Withdrawal from Courses

The option of withdrawing from a course and receiving a grade of "W" is possible within the withdrawal period listed on the academic calendar each semester. Students electing to take a "W" in a nursing course are to understand that re-enrollment in that course is subject to the review of the faculty

ACADEMIC RIGHTS AND APPEAL POLICIES

Arkansas State University is a community of scholars whose members include its faculty, students and administrators. It is a forum where ideas are discovered, discussed and tested. The basic purposes of the university are the enlargement, dissemination and application of knowledge. These are achieved through classroom instruction, research, special lectures, concerts, discussion groups, seminars, experimentation, out-of-class activities, and group living and leadership development.

The basic necessity for achievement of these purposes is freedom of expression and assembly. Without this freedom, effective testing of ideas cease and teaching, learning and research are rendered ineffective. Yet absolute freedom in all aspects of life leads to anarchy, just as absolute order leads to tyranny. Both anarchy and tyranny are antithetical to the purposes and necessities of the university. Therefore, the university always must strive for that balance between maximum freedom and necessary order which best promotes its basic purposes by providing an environment most conducive to many faceted activities of teaching, learning and research.

The student, as a member of the academic community, has both rights and responsibilities. The most essential right is the right to learn, and the university has a duty to provide for the student those privileges, opportunities and protections that best promote the learning process. The student has a responsibility to other members of the academic community, the most important being to refrain from interference with the rights of others, which are equally essential to the purposes and processes of the university.

Regulations governing the activities and conduct of student groups and individual students are not comprehensive codes of desirable conduct; rather, they are limited to meeting the practical, routine necessities of a complex community and to the prohibition or limitation of behavior, which cannot be condoned because it interferes with the basic purposes, necessities and processes of the academic community, or with rights essential to other members of that community.

The student is not only a member of the academic community—he/she is also a citizen of the larger society. The university will use every method at its disposal to ensure that the campus environment is conducive to the learning process. It cannot condone those activities designed to disrupt and destroy the basic functions of the university. Each student has an obligation to the larger society, which is the responsibility of the legal and judicial authorities of the city, county, and state. The university cannot be expected to shelter a student from the reality of this obligation.

The university, in its relationship to each student, recognizes the constitutional rights of freedom of speech and due process when the student's right to continue as a student is in question. A student who feels that his/her constitutional rights have been violated and who has not found satisfactory relief within the university structure has access to the judicial process of the civil courts.

In order to protect student rights, to facilitate the definition of student responsibilities, to preserve necessary order, and to provide avenues through which students may seek to effect change, the guidelines in the following pages are established.

The freedom and effectiveness of the educational process depend upon the provision of satisfactory conditions and opportunities for learning. The responsibility to secure, respect and protect such opportunities and conditions must be shared by all members of the academic community. The faculty has the

central role in the educational process and has the primary responsibility for the intellectual content and integrity of the university.

It is the faculty's role to encourage discussion, inquiry and expression among students and to act as an intellectual guide and counselor. They should foster honest academic conduct and evaluate students fairly and accurately. They should not exploit students for private advantage, and they should respect the faculty-student fiduciary relationship. The establishment and maintenance of the proper faculty and student relationships are basic to the university's function. This relationship should be founded on mutual respect and understanding and assumes a common dedication to the educational process. If problems arise in this relationship, both student and faculty should attempt to resolve them in informal, direct discussions as between well-intentioned and reasonable persons.

ACADEMIC RESPONSIBILITIES OF THE STUDENT

The student is responsible for being informed about academic requirements, both general and specific, for completing a degree program as outlined in the Undergraduate or Graduate Bulletin.

The student is responsible for learning the content of a course of study according to standards of performance established by the faculty.

The student's behavior in the classroom shall be conducive to the learning process for all concerned.

THE ACADEMIC RIGHTS OF THE STUDENT

The student shall have the right to an academic environment that is accepting of all students without regard for race, national origin, gender, disability, ethnicity, sexual orientation, age, or religion.

The student shall be free to take reasoned exception to data and views offered in the classroom, and to express differences of opinion without fear of penalty.

The student has a right to protection against improper disclosure of information concerning grades, health or character that an instructor acquires in the course of his/her professional relationship with the student.

The student has a right to a course grade that represents the instructor's professional judgment of the student's performance in the course.

The student has the right to accurate and clearly stated information in order to determine:

1. The general requirements for establishing and maintaining an acceptable academic standing.
2. His/her overall academic relationship with the university and any special conditions that apply.
3. The graduation requirements for a particular curriculum and major.
4. The student has a right to be governed by educationally justifiable academic regulations.
5. The student has a right to competent instruction.

ACADEMIC MISCONDUCT

Arkansas State University enthusiastically promotes academic integrity and professional ethics among all members of the A-State academic community. Violations of this policy are considered as serious misconduct and may result in severe penalties.

A. PLAGIARISM

Plagiarism is the act of taking and/or using the ideas, work, and/or writings of another person as one's own.

- To avoid plagiarism, give written credit and acknowledgment to the source of thoughts, ideas, and/or words, whether you have used direct quotation, paraphrasing, or just a reference to a general idea.
- If you directly quote works written by someone else, enclose the quotation with quotation marks and provide an appropriate citation (e.g., footnote, endnote, bibliographical reference).
- Research, as well as the complete written paper, must be the work of the person seeking academic credit for the course. (Papers, book reports, projects, and/or other class assignments)

Discipline: Faculty members may respond to cases of plagiarism in any of the following ways:

- Return the paper or other item for rewriting; the grade may be lowered.
- Give a failing grade on the paper or other item—"F" if a letter grade is used or zero if a numerical grade is used.
- Give the student who plagiarized a failing grade in the course.
- Recommend sanctions, including disciplinary expulsion from the university.

B. CHEATING

Cheating is an act of dishonesty with the intention of obtaining and/or using information in a fraudulent manner.

- Observing and/or copying from another student's test paper, reports, computer files and/or other class assignments.
- Giving or receiving assistance during an examination period. (This includes providing specific answers to subsequent examinees and/or dispensing or receiving information that would allow the student to have an unfair advantage in the examination over students who did not possess such information.)
- Using class notes, outlines, and other unauthorized information during an examination.
- Using, buying, selling, stealing, transporting, or soliciting, in part or in whole the contents of an examination or other assignment not authorized by the professor of the class.
- Using for credit in one class a term paper, book report, project, or class assignment written for credit in another class without the knowledge and permission of the professor of the class.
- Exchanging places with another person for the purpose of taking an examination or completing other assignments.

Discipline: Faculty members may respond to cases of cheating in any of the following ways:

- Allow the testing to progress without interruption, informing the offending student about the offense—and award a failing grade on the test—"F" if a letter grade is used or zero if a numerical grade is used.
- Seize the test of the offending student and give a failing grade on the paper.
- Give the offending student a failing grade in the course.
- Recommend sanctions, including disciplinary expulsion from the university.

Sanctions for Academic Misconduct

Sanctions for Academic Misconduct may be imposed by the faculty member or instructor discovering the Academic Misconduct except in the case of dismissal from a particular program which shall be made by the department chair or program director, or suspension or expulsion from the university, which shall be made by the dean. The following sanctions may be imposed for Academic Misconduct:

- A failing grade on the paper or project;
- Rewriting or repeat performance of course work;
- A failing grade for the class;

- Dismissal from the class;
- Dismissal from a particular program;
- Suspension or Expulsion from the university;
- Other appropriate sanctions as warranted by the specific acts of the student.

A student may not avoid academic sanctions by withdrawing from a class, a program, or the university.

PROCEDURES FOR HANDLING ACADEMIC MISCONDUCT CHARGES FOR VIOLATIONS OF THE STANDARDS OF STUDENT CONDUCT

A student disagreeing with the sanction issued based on Academic Misconduct should follow the Academic Grievance Procedure located in the [Student Handbook](#).

STUDENT ACADEMIC GRIEVANCE PROCEDURE

Under certain circumstances, Arkansas State University students have the right to grieve alleged violations of their academic rights. A grievance is a complaint alleging that one or more of the "academic rights of students" have been violated. [The Student Handbook](#) contains the academic grievance procedure.

A-State Online Students and those residing Out-of-State

Students, including A-State Online students and those residing Out-of-State, must follow Arkansas State University's published grievance policy. If any student must report an unresolved grievance, the student may complete the [student complaint form](#) for the Arkansas Department of Higher Education (ADHE). Resolutions by ADHE are final.

Students must submit a written grievance to ADHE using the form. The grievant must also provide written documentation from Arkansas State University verifying that the A-State appeal process has been followed.

Grievances regarding student grades or conduct violations are governed entirely by institutional policy and Arkansas law and will not be considered by ADHE.

COLLEGE HEARING TEAM

The college hearing team shall be organized in the following manner:

At the beginning of each Fall semester, each college dean, independent department chair, and other academic unit supervisors shall identify a "hearing team pool," consisting of nine (9) to eighteen (18) faculty members, five (5) to ten (10) undergraduate students, or five (5) to ten (10) graduate students, depending on the rank of the student making the appeal.

When a hearing team must be convened, the dean shall appoint a college hearing team comprised, to the extent possible, of individuals knowledgeable in the area asserted in the grievance. The hearing shall take place no sooner than five (5) and not later than ten (10) working days after the hearing team is appointed, unless there is a compelling reason why another time must be selected. At a prearranged time prior to the hearing, the members of the hearing team will meet with the dean to receive all relevant background materials and to review the process to be utilized during the hearing. The individual against whom the complaint has been filed and the student may attend this meeting as observers. All non-team members will then withdraw and the hearing team will elect a chair to preside at the subsequent hearing.

The hearing will be conducted in private. Witnesses will be admitted for testimony only and then asked to leave. The testimony will be tape recorded, but the final deliberations of the team will not be recorded.

The student and the individual against whom the complaint has been filed must appear in person and answer questions from members of the hearing team. The student and the individual against whom the complaint has been filed each may have one person present during the hearing to advise them. Those persons may not address the hearing team, speak on behalf of the student or individual against whom the complaint has been filed, question witnesses, or otherwise actively participate in the hearing.

A university attorney may also attend the hearing and may advise the team on procedural issues but may not question witnesses or otherwise actively participate in the hearing. The dean shall attend as an observer only.

The student and the person against whom the complaint has been filed may make an oral statement and/or submit sworn written statements and other exhibits and witnesses on their behalf. The student and the individual against whom the complaint has been filed may hear and question all witnesses testifying before the hearing team. Neither the student nor the individual against whom the complaint has been filed may be present during the deliberations of the hearing team.

The hearing team shall conduct its deliberations based upon the evidence presented at the hearing that is relevant to the issue or issues before the team. The hearing team shall present to the dean a written report detailing its findings and its recommendations relative to the complaint within five (5) working days following the conclusion of the hearing. Member(s) of the hearing team may file a minority opinion, which shall be appended to the team report. Within ten (10) working days following receipt of the hearing team report, the dean will notify the student and individual against whom the complaint was filed whether the recommendations are accepted or rejected. The decision of the dean is final as to the student except in the case of expulsion from the university where the student shall have a final appeal to the Vice Chancellor for Academic Affairs and Research which must be filed in writing within ten (10) working days following receipt of the dean's decision.

If the individual against whom the complaint was filed refuses to accept a remedy accepted by the dean, the individual may appeal to the Vice Chancellor for Academic Affairs and Research in writing within ten (10) working days following receipt of the dean's decision. The decision of the Vice Chancellor for Academic Affairs and Research to accept or reject the recommended remedy is final as to the individual against whom the complaint has been filed.

Technology Proficiency

Competency in the use of the computer to access information, communicate by Email, use Excel, Word Processing and PowerPoint is a component of the program. It is to your advantage to have your own computer, modem, and access to the Internet. A detailed technology statement is located in each course in the General Orientation tab under Getting Started.

Writing Proficiency

Minimal level expectation for written academic assignments includes use of the 7th edition of the Publication Manual of the American Psychological Association (APA) style format, expression of a logical flow of ideas, and proper grammar, spelling and sentence structure (APA, 2020). The APA manual has information regarding content and organization of a manuscript, expression of ideas, as well as information about editorial style and manuscript preparation. All written academic assignments must be typed and

properly referenced. You are encouraged to seek faculty assistance with a draft version of your work prior to the assignment due date. The American Psychological Association (APA) publication guidelines are used in the Nursing Program.

Student Assignments

Student papers/assignments may be displayed as student examples for course files and accreditation purposes. Student work used for any other purpose will require permission from the student(s) prior to faculty use.

Pregnancy and change in Health Status

Student pregnancy or a change in health status is to be reported to the clinical instructor. A physician's consent is required for students to continue clinical agency experiences. After surgery or other hospitalization, a physician's release to return to clinical is required.

Health Insurance and Health Care Responsibility

Students are expected to have health care insurance while enrolled in the program. The student is responsible for all costs related to their health care, including any costs associated with any type of clinical exposure, while enrolled in the program.

TUITION AND FINANCIAL AID POLICY

A. Graduate Assistantships –A-State has a limited number of assistantships available to students in the nursing program. The student must have applied for admission to the graduate school to be eligible for a graduate assistantship position. Assistantships are available to qualified students in fall, spring and summer sessions. Applications are through the program director, or the Graduate School.

B. Scholarships –DNP students are eligible for one scholarship(s) offered by the College of Nursing and Health Professions. Notification about scholarships is done through the DNP student listserv and announcements to classes. Scholarship applications are usually filed in Spring Semester of each year.

C. State Scholarship/Loan Funds –A scholarship/loan fund for students residing in Arkansas who, after graduation, practice in a rural area as a NP or teach in an Arkansas school of nursing as a nurse educator. Loan forgiveness is based on fulfilling work obligations as a rural NP or nurse educator. Information and applications are available from the Graduate Chair.

GENERAL INFORMATION

School Offices

The offices of the Dean of the College of Nursing and Health Professions, the Associate Dean of the College of Nursing and Health Professions, the Student Affairs Coordinator, and Faculty are located in the College of Nursing and Health Professions building. In locating a specific office, inquire at the Receptionist's Desk in room 203D.

Computers

To participate in required course work, you will need access to a computer, the Internet, and an email account. While many students enjoy the convenience of doing their coursework on their home computer,

computer access is available on campus for students who do not own a computer. All Arkansas State University computing facilities, equipment, software and reference manuals are for class use only. No use of a commercial nature or use for personal gain or profit will be allowed. Copying of computer software or related reference manuals for commercial or personal use is a violation of federal copyright laws and will not be allowed. Playing games on the computers will not be allowed. Using computers and printers to print banners, posters, term papers, resumes, greeting cards, etc. will not be allowed unless it is for an A-STATE computer or word processing class assignment. Please review the A-State IT [Policies and Procedures](#).

E-mail

Students get an account in the system upon being admitted to Arkansas State University. Until a student is admitted, individuals cannot be given an A-STATE account. Further information can be obtained at [A-State IT services](#). You must have an established email account before your first class meeting. All communication must be conducted through your A-State email account. Please include your Student ID number and a phone contact number in all correspondence.

Parking

All students, faculty and staff who park a vehicle on the A-STATE campus are required to register the vehicle and display a sticker. Students can register their vehicle at [Parking Services](#).

University Policies

All university policies, as published in the [Bulletin](#), extend to all sites where students are engaged in the role of a DNP nursing student.

Library Services

Extensive library services are available to students at the Dean B. Ellis Library. Services include interlibrary loans, on-line computer searches, personal computers, and photocopiers. Students should contact the library (870-972-3077) for a current listing of library hours.

Licensure

All DNP students must hold an unencumbered license as a Registered Nurse in their state of residence and the state where they will complete clinical hours.

SMOKING POLICY

Effective August 1, 2010 Arkansas State University became a Smoke Free Campus in response to Arkansas state law, The Arkansas Clean Air On Campus Act of 2009. Further, the School of Nursing prohibits all tobacco products including smoked and smokeless on campuses and in classrooms, computer labs and clinical sites. Please see the University policy regarding vaping and E-cigarettes. While in the clinical setting, students will comply with the organization's specific policy. Effective October 1, 2005 Arkansas State law prohibits smoking on any grounds owned by the hospital including, but not limited to, buildings in and on which medical facilities operate together with all property owned by a medical facility that is contiguous to the buildings which medical services are provided. Any student that smokes on hospital grounds will be subject to that facility's policy or procedure actions [removal from premises or fined] and will not be allowed to return to the clinical site. This may result in removal from the course.

STUDENT ORGANIZATIONS AND PARTICIPATION

GRADUATE STUDENT ADVISORY COUNCIL

Students in all graduate programs at A-State have an organization of their own. This organization, which works with the Graduate School and Graduate Dean is the Graduate Student Advisory Council. A student from one of the graduate programs represents the College of Nursing and Health Professions. If you have concerns about graduate study in general or campus services to graduate students, contact your representative to the Graduate Student Advisory Council. The Constitution and By-Laws of the Graduate Student Advisory Council are on file in the Department of Nursing Office for review.

SIGMA THETA TAU

Sigma Theta Tau is the international honor society of nursing with the A-State chapter, Eta Theta. The purpose of this society is: 1) to recognize superior achievement and scholarship; 2) to recognize the development of leadership qualities; 3) to foster high professional standards; 4) to encourage creative work; and 5) to strengthen commitment to the ideals and purposes of the profession. Membership Criteria: Graduate students must have a cumulative grade point average (GPA) of at least 3.5 and have completed at least $\frac{1}{4}$ of the program of study.

Appendix

DNP Project, Paper, Presentation Rubric

For use in DNP student defense to DNP Director(s), Faculty Mentor, Faculty, and in coordination with the written paper.

| Topic | Score | Comments | Follow-up needed |
|--|---|----------|---|
| | 0=not addressed 1=poorly addressed 2=missing components 3=satisfactorily addressed 4=superiorly addressed | | Provide reference to resources for the student on the area of improvement |
| I. Executive Summary (the final paper) | | | |
| <i>Introduction</i> supports relevance of problem/issue and relates to project. | | | |
| Includes a purpose/ <i>problem</i> statement that is clear. | | | |
| <i>Objectives</i> : Includes PICOT; are specific and measurable. | | | |
| <i>Background</i> includes a brief summary of the focused evidence related to the problem/issues. | | | |
| <i>Literature Review</i> : Adequately addresses the significant research available to address the problem, intervention. | | | |
| Practice-based <i>theory</i> guides the discussion. Translational, evidence-based practice, or quality improvement model used to address the change involved in this project. Visual/model is provided. <i>Key concepts</i> clearly defined relative to project/problem. | | | |
| Addresses <i>Needs Assessment</i> relative to the problem/program: Include literature support, identifies the population/group/organization type. Assesses available resources. Identifies stakeholders. States clearly desired outcomes and changes. Addresses <i>team selection</i> , <i>cost-benefit analysis</i> , and <i>scope of the project</i> , and <i>timelines</i> . | | | |
| <i>Strategic Plan</i> : Process and implementation approach are clearly described. Statement addressing IRB status and any additional relative considerations. Includes <i>logic model</i> : Identifies the interventions chosen and relative metrics. Addresses data organization, such as descriptive data and subject/group/program/population/organization characteristics. Addresses the plan for sharing | | | |

| | | | |
|---|----|--|--|
| the results. Addresses inferential data to be used. Addresses use of excel or similar tools to analyze and present data. | | | |
| <i>Interventions:</i> Includes educational component for staff or patients (must address health literacy, cultural/language considerations). Addresses technology in the interventions. Addresses legislative, organization, or public policy implications. Addresses <i>resources</i> needed/utilized and financial aspects to be considered (include budget in appendices). | | | |
| <i>Results:</i> Follow SQUIRE OR STARi guidelines. Includes metrics that address the objectives of the project. Reflects use of excel in tables and graphs as appropriate. Reflects frequency count, descriptive results, and inferential results. Addresses cost results real or implied. | | | |
| Addresses <i>significance</i> to nursing/nurses, patient/population, and or system/organization. | | | |
| <i>Conclusions recommendations implications</i> include a brief summary of findings, and clearly articulates recommendations for the organization and implications for future practice. | | | |
| <i>Appendices</i> include copy of deliverables for the projects (not all coursework is appropriate for inclusion in the project, but many are). | | | |
| Project as a whole supports integration of a trio of roles: APRN/Leader/Change Agent). | | | |
| Summary <i>writing</i> is scholarly, clear, and concise. APA is followed. | | | |
| Oral Presentation | | | |
| Able to articulate and critique the state of evidence related to the project, strategies used to implement and evaluate the problem/project. Includes an introductory | NA | | |

| | | | |
|--|----|--|--|
| statement that is clear, concise, engaging; describes, connects the topic to the literature, and purpose of the work. Includes a purpose statement that is clear, concise, and relevant. | | | |
| Methods: Connected to the purpose of the scholarship; identifies the method used to support the purpose. Demonstrated collaborative partnership building and leadership skills in implementing projects. | NA | | |
| Results are clear, connected to the purpose of the scholarship; provides explanation of what was expected, discovered, accomplished, collected, and produced. | NA | | |

| | | | |
|--|----|--|--|
| Able to articulate professional growth and application of leadership knowledge, skills, and attitudes gained or changed as a result. Articulates how the work advances knowledge in the discipline, why it's important, or how it can be used. | NA | | |
| Able to respond orally to questions related to the project. | NA | | |
| Confirms executive summary and electronic version of poster provided to partnering organization. | NA | | |

References:

Roush, K., Tesoro, M. (2018). An examination of the rigor and value of final scholarly projects completed by DNP nursing students. *Journal of Professional Nursing*, 34(1). <https://doi.org/10.1016/j.profnurs.2018.03.003>

VCU DNP Program Toolkit.

<https://rampages.us/mcohan/wp-content/uploads/sites/16995/2018/04/DNP-Project-Toolkit-2017.pdf>

University of Washington School of Nursing NMETH 801 Practice Doctorate Project: Implementation Final Examination Rubric. <http://students.nursing.uw.edu/wp-content/uploads/2019/09/DNP-Final-Exam-Rubric.pdf>

DNP Director/Designee Signature: _____

Date: _____

***This form is subject to change.*

DNP CLINICAL LOG TOOL

| | A | B | C | D | E | F | G | H |
|----|---|-------------------------|---------------------|--|---|--|-------|-------------------|
| 1 | ARKANSAS STATE UNIVERSITY | | | | | | | |
| 2 | COLLEGE OF NURSING AND HEALTH PROFESSIONS | | | | | | | |
| 3 | DNP CLINICAL LOG | | | | | | | |
| 4 | | | | | | | | |
| 5 | Name: | | | | | | | |
| 6 | Faculty: | | | | | | | |
| 7 | Courses Included: | | | | | | | |
| 8 | Project Focus: | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | Semesters Included: | | | | | | | |
| 12 | Date | Activity | Description | Objective | DNP Essential | SLO (DNP Program Outcomes from Syllabus) | Hours | Accumulated Hours |
| 13 | 1/7/21 | Meeting: Senate hearing | Hearing on CRNA pre | Need CRNA representatives to testify on practice | Health Care Policy for Advocacy in Health Care | Assume leadership and consultation roles in the planning and providing of services and in influencing public policy for the health care of clients. | 4 | 4 |
| 14 | | | | | | | | |

DNP Post-masters Handbook Acknowledgment

This is to attest that I have been informed of the Arkansas State University, College of Nursing and Health Professions, DNP Post-masters Handbook. I understand that I am responsible for the information contained in the DNP Post-masters Handbook and that I am to review every semester for additions and changes.

Student Printed Name

Student Signature

Date

1. SAMPLE SCHOOL/SITE PERMISSION LETTER

Required by all students

[MUST Place on clinical site’s letterhead]

Date

Arkansas State University – Jonesboro
Institutional Review Board
c/o Research and Technology Transfer
Post Office Box 2760
State University, Arkansas 72467

To Whom It May Concern:

A Doctor of Nursing Practice student in the Arkansas State University-Jonesboro Department of Nursing has requested permission to complete the Doctor of Nursing Practice Project named below at {Insert School/Institution/Clinic Name} during the period of {Insert Start Date} to {Insert End Date}.

This letter notifies you that I/we grant permission to {Insert Student Name}, a student of Arkansas State University-Jonesboro Doctor of Nursing Practice Program, to collect data at the location listed below.

Project Title: {insert your quality improvement project title here} Principal

Investigator(s): {insert your name here – must be student only}

Study Site Location: {insert Institution/Clinic name here}
{Street address}
{City, State, zip code}

Permission granted by:

Print Name and Title

Signature

Date

2. DNP Project Completion Site Request
(If NOT completing the project at your place of employment)

Please immediately upload the following information into Medatrax upon directions in your DNP program course. Delays in submitting this Site Request may interrupt the original plan of study and delay the completion of the program.

Name of the desired site for DNP project completion:

Physical address of the chosen site for DNP project completion:

Name and role of the person at this site authorized to sign clinical affiliation agreements:

Email address and phone number of the person authorized to sign clinical affiliation agreements:

**3. Arkansas State University School of Nursing
Clinical Practice Partner Verification Form
(Use if you are NOT completing your project at your place of employment)**

Directions: Identify a terminally degreed expert who is willing to coach/mentor you in your efforts to complete your project. Ask them to complete this form. Once completed, electronically upload this form **along with the Practice Partner’s CV** into Medatrax.

Note: Illegible forms will be returned to the student.

Clinical Practice Partner’s Name & Credentials
(Must have a terminal degree such as DNP, PhD, EdD, PharmD, MD):

Clinical Practice Partner’s Title/position
(Such as Administrator, Educator, Physician, CNO, Dean):

Clinical Practice Partner’s Employer:

Clinical Practice Partner Employer’s Address:

RN and APRN (if applicable) license number/s including

state _____

Clinical Practice Partner’s Contact information:

Email: _____

Telephone number: _____

Mailing Address: _____

Terms of Agreement

I agree to be the practice partner for the student listed above during the time needed to complete the DNP project for A-State’s School of Nursing and will submit a current CV to the above-listed student. I am aware of the time and responsibility that is required to advance student learning. I understand the student is not allowed patient interaction for this project. I verify that I am employed at the facility where the DNP project will be completed.

Practice Partner Signature

Date

Please Print Name

4. Clinical Practice Partner Site Agreement Form

Please upload the completed **Clinical Practice Partner Site form and the Practice Partner’s CV** into Medatrax upon admission to the program. Delays in submitting this Agreement may interrupt the original plan of study and delay the completion of the program.

DNP Student Name and A-State ID number _____

Practice Partner Name: _____ E-mail address: _____

Preferred Contact: Home Phone _____ Cell Phone _____ E-mail _____

Title/Role: _____ Credentials: _____

License #: _____ State: _____ Expiration Date: _____

Project Site: _____

Project Site Address: _____

Terms of Agreement

I agree to be the practice partner for the student listed above during the time needed to complete the DNP project for A-State’s School of Nursing and I will provide a current CV for the student to submit to the School of Nursing. I am aware of the time and responsibility that is required to advance student learning. I understand the student is not allowed patient interaction for this project. I verify that I am employed at the facility where the DNP project will be completed.

Practice Partner Signature Date

Please Print Name

The DNP student agrees to the following. Please initial each statement and sign and date below:

_____ I agree to maintain professional liability insurance coverage as required by the DNP program for the duration of the period of time needed to complete the DNP project.

_____ I understand the DNP project does not involve contact with or treatment of any patient.

_____ I understand that patient health information cannot be utilized in the DNP project without execution of a clinical affiliation agreement between A-State and the clinical facility.

_____ I have spoken to my employer, where I will be completing my DNP project, and they have no objection or restrictions regarding the publication of my DNP project.

Student Signature Date

Printed Name