

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

STUDENT HANDBOOK



ACADEMIC YEAR 2021-2022

A-State University
Doctor of Nursing Program
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WELCOME

It is with excitement and anticipation that the faculty and I welcome you to the Doctor of Nursing Practice (DNP) program. You bring a wealth of academic preparation and experience that will serve as a launching board for this advanced level of education and nursing practice. We are looking forward to helping you achieve your goals and congratulate you on recognizing the opportunities that DNP study will bring to 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 found in the Handbook as well as the Graduate Information Guide (GIG). If you have any questions about the information contained in this handbook, be sure to ask for clarification. Your suggestions for additional information that would be helpful in the Handbook are also welcomed.

The Student Handbook is available online

<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 changes to you if changes are made. We look forward to working with you during these next two and a half years as you complete the requirements for the DNP degree and assume a leadership role in nursing. We are glad that you are here!



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MISSION

The mission of the graduate nursing program is to prepare nurses who can provide and support advanced nursing practice, integrate nursing and related theories, utilize and participate in research, engage in collaborative relationships, provide leadership in the nursing arena, and demonstrate an understanding of the political, economic, social, professional, educational, legal and ethical realities which have an impact on nursing and health care.

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.
- Excellence:** Highest quality of nursing education, practice, service and research.
- Diversity:** Respect for varied dimensions of individuality among populations
- Service:** Professional experiences in response to the needs of society.
- Learning:** Acquisition of knowledge and skills in critical thinking, practical reasoning, and decision making.
- Student centered:** Development of essential skills for lifelong learning, leadership, professionalism, and social responsibility

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.

PHILOSOPHY

The faculty holds the following beliefs about personhood, environment, and 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 the 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 healthcare 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 judgment 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 beginning baccalaureate graduate to function as a provider of direct and indirect care to individuals, families, groups, communities and populations. The baccalaureate graduate is also 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 healthcare and healthcare 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 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.

Taken from QSEN Competency: Patient-Centered 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 three levels of education.

Role

The first major component is role. The faculty believe providers of care, manager of care and members of the profession (NLN) are key elements of this component. To clearly explain how these roles develop, each will be examined at all three 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 effect policy and mentor as members of specialty and politically focused nursing organizations.

The Doctor 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 multidimensional and are not limited to existing or prescribed health care settings. Graduates have the skills to initiate change, lead and serve as mentors for other health care team members at the local, regional, state, national and world levels.

Knowledge

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. 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.

Values

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 Doctor 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.

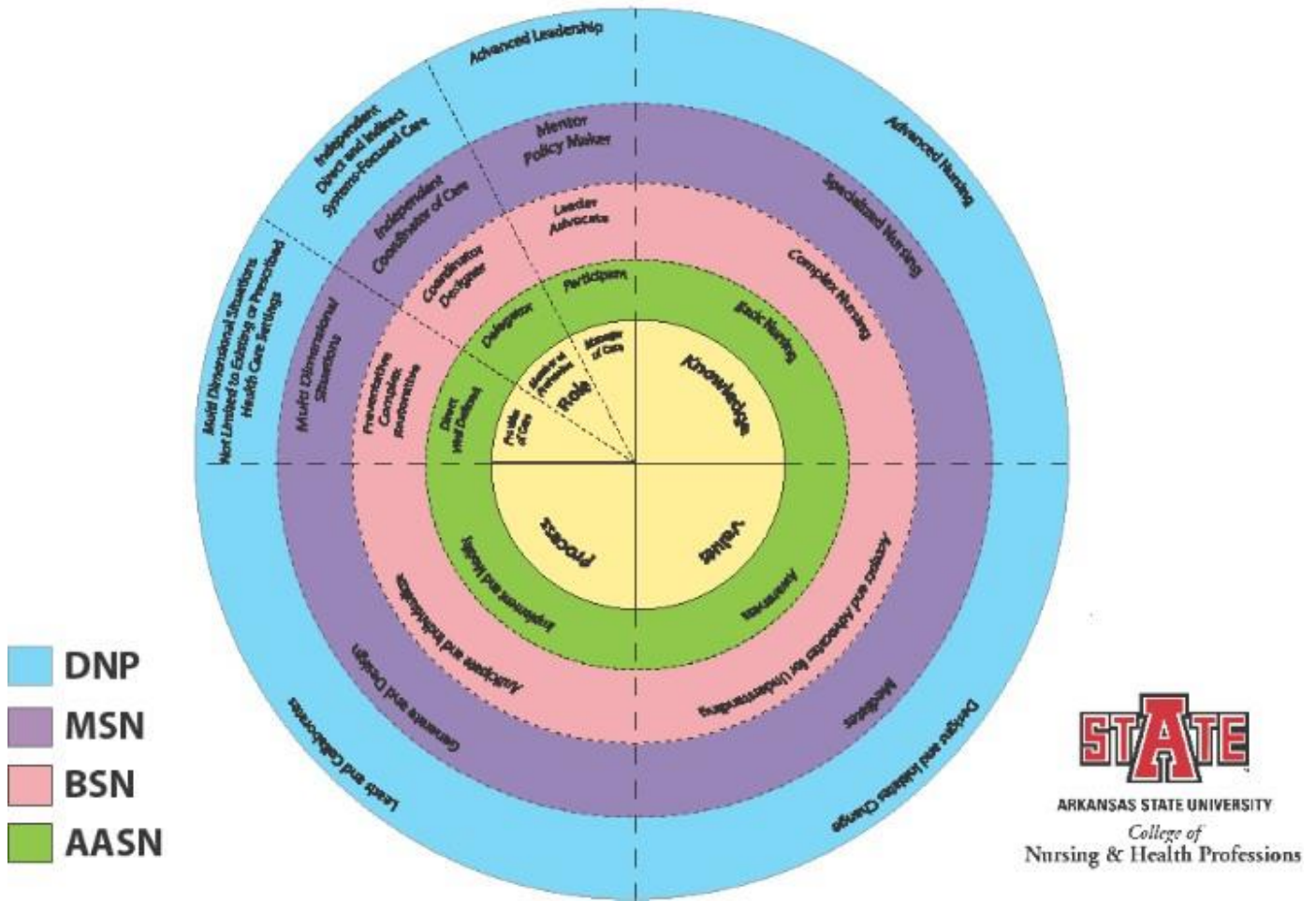
The profession of nursing utilizes a systematic process that incorporates the other three components, role, knowledge and values to evaluate the needs of individuals, groups and/or communities. The process involves assessment, planning, implementation, and evaluation on a continual basis. All nurses 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 Doctor 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.

Arkansas State University

College of Nursing and Health Professions

School of Nursing Organizing Framework



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 41 credit hours is completed in a program of study of 2.5 years in length. These 41 credit hours include 12 courses, with 3 of those courses identified as clinical internship courses. The total clinical clock hours required for those 3 clinical internship courses (12 credit hours) totals 540 clock hours, represented by a 1 credit to 45 clock hour ratio.

PLAN OF STUDY

DNP Post-master's Program Option

Summer	Credits
NURS 8113 Theoretical Foundations for Doctor of Nursing Practice... ..	3
NURS 8123 Leadership, Policy, and Healthcare Systems... ..	3
Total	6 credit hours
Fall	Credits
NURS 8143 Healthcare Finance... ..	3
NURS 8153 Healthcare Informatics... ..	3
Total	6 credit hours
Spring	Credits
NURS 8133 Epidemiology for the DNP... ..	3
NURS 8213 Translational Research for Doctor of Nursing Practice I... ..	3
Total	6 credit hours
Summer	Credits
NURS 8314* Introduction to Internship... ..	4
NURS 8163 Principles of Healthcare Ethics and Genetics... ..	3
Total	7 credit hours
Fall	Credits
NURS 8223 Translational Research for Doctor of Nursing Practice II... ..	3
NURS 8323* Doctor of Nursing Practice Clinical Internship... ..	3
Total	6 credit hours
Spring	Credits
NURS 8235 Doctor of Nursing Practice Evidence Based Project... ..	5
NURS 8335* Doctor of Nursing Practice Clinical Internship II... ..	5
<i>*(1 credit to 45 Clock hours)</i>	
Total	10 credit hours

Total credit hours for Program = 41
Minimum Clinical Clock Hours = 540

COURSE DESCRIPTIONS

NURS 8113. Theoretical Foundations for Doctor of Nursing Practice

Students will examine processes underlying development of models and theories from nursing and health-related disciplines for practice. Analyze application in advanced practice to solve problems and improve outcomes. Theoretical knowledge from sciences is integrated with nursing science to guide APRN. *Prerequisites for the post-masters DNP program option--Admission to the DNP program*
Corequisites for the post-masters DNP program option-NURS 8123

NURS 8123. Leadership, Policy and Healthcare Systems

Students will analyze leadership and organizational theories, evaluate health care delivery systems, and examine the role of the DNP in influencing policy in health care delivery, outcomes and professional nursing.

Prerequisites for the post-masters DNP program option- for the post-masters DNP program option-Admission to the DNP program
Corequisites for the post-masters DNP program option-NURS 8113

NURS 8143. Healthcare Finance in Advanced Nursing

Provides advanced economic, financial, and business knowledge required for leadership in financial planning and decision making in healthcare delivery systems. Evidence based models of practice, financial frameworks and theory are applied to practice-level, system-wide problems, including inter- and intra-professional teams.

Prerequisites for the post-masters DNP program option-- NURS 8113, NURS 8123
Corequisites for the post-masters DNP program option-NURS 8153

NURS 8153. Healthcare Informatics in Advanced Nursing

Examines the complexities involved in managing resources in our healthcare system. Students will learn to use management theory and informatics applications to increase efficiencies in various functional areas of healthcare services.

Prerequisites for the post-masters DNP program option-- NURS 8113, NURS 8123
Corequisites for the post-masters DNP program option-NRUS 8143

NURS 8133. Epidemiology for the DNP

Evolution and history of methods of epidemiology. Quantization of morbidity and mortality within populations. Overview of study design, data analysis, and inferences. Specific areas of acute and chronic disease epidemiology illustrate epidemiologic methods such as risk factor analysis, surveillance systems, and etiology of disease.

Prerequisites for the post-masters DNP program option-- NURS 8113, NURS 8123, NURS 8143, NURS 8153
Corequisites for the post-masters DNP program option-NURS 8213

NURS 8213. Translational Research I

This course provides the student with the foundation for the DNP evidence-based practice project. The emphasis of this course is on problem identification, information retrieval, critical appraisal, and synthesis of a body of evidence.

Prerequisites for the post-masters DNP program option-- NURS 8113, NURS 8123, NURS 8143, NURS 8153
Corequisites for the post-masters DNP program option-NURS 8133

NURS 8314. Introduction to Clinical Internship

This course provides the student with practice opportunities that includes in-depth work with experts from nursing and other disciplines. During this first clinical internship course students will begin planning for implementation of the DNP project.

Prerequisites for the post-masters DNP program option--NURS 8113, NURS 8123, NURS 8133, NURS 8143, NURS 8153, NURS 8213

Corequisites for the post-masters DNP program option-NURS 8163

NURS 8163. Principle of Healthcare Ethics & Genetics

Focuses on theories of ethics and implications for practice, including principles of genetics for individuals, families and populations at risk for genetic disorders. Topics in ethics and genetics are presented.

Prerequisites for the post-masters DNP program option-- NURS 8113, NURS 8123, NURS 8133, NURS 8143, NURS 8153, NURS 8213

Corequisites for the post-masters DNP program option-NURS 8314

NURS 8223. Translational Research II

This course focuses on translating evidence into practice, identifying practice outcomes, sustaining evidence-based practice changes, and creating an environment to support evidence-based practice.

Prerequisites for the post-masters DNP program option-- NURS 8213

Corequisites for the post-masters DNP program option-NURS 8323

NURS 8323. Clinical Internship I

Building upon previous didactic courses this course is the second of three in a series that will provide clinical experiences culminating in a completed Residency Project.

Prerequisites for the post-masters DNP program option-- NURS 8113, NURS 8123, NURS 8133, NURS 8143, NURS 8153, NURS 8213, NURS 8314, NURS 8163

Corequisites for the post-masters DNP program option-NURS 8223

NURS 8235. Evidence-Based Practice Project

This course is a culmination of the two translational research courses for the DNP student. Students will implement an evidence-based practice project and analyze and disseminate the results of the project.

Prerequisites for the post-masters DNP program option-- NURS 8213, NURS 8223

Corequisites for the post-masters DNP program option- NURS 8335

NURS 8335. DNP Clinical Internship II

This is the third of three courses that builds upon previous didactic courses and will provide clinical experiences culminating in a completed Residency Project.

Prerequisites for the post-masters DNP program option-- NURS 8113, NURS 8123, NURS 8133, NURS 8143, NURS 8153, NURS 8213, NURS 8314, NURS 8163, NURS 8223, NURS 8323

Corequisites for the post-masters DNP program option-NURS 8235

COURSE DELIVERY

The DNP courses will use a hybrid method of course delivery with on-campus education immersions combined with distance education delivery using the Blackboard course management system. Students must have a computer with Internet access that supports video streaming. Each student will be required to attend on-campus immersions each semester during each year the student is enrolled in the program. The student will also be required to attend presentations that will be scheduled at various times. Student attendance for each immersion is a requirement of the DNP program curriculum.

DNP Immersions

Immersion 1, Summer, Year 1: Topics: Plan of study for program, critical dates, the GIG, the website, the library online, the booklist, PhD vs. DNP, Quality Improvement/EBP Translation vs Research, Theory and Leadership course overviews and additional resources. Hosted in Zoom.

Immersion 2, Fall, Year 1: Topics: Excel class, Finance and Informatics course overview.

Immersion 3, Spring, Year 1: Topics: Epi and Trans I course overview.

Immersion 4, Summer, Year 2: Topics: Information for clinicals, clinical contact information, clinical logs, contractual agreements, Internship and Ethics/Genetics course overview.

Immersion 5, Fall, Year 2: Topics: Trans I and Internship II course overview.

Immersion 6, Spring, Year 2: NURS 8235 Evidence Based Project & NURS 8335 Clinical Internship II. Topics: Graduation, Create@state presentation, journal submissions, EBP & Internship II course overview.

PRACTICE HOURS

The AACN DNP Essentials require 1000 practice hours as part of this degree. Practice hours in the masters in nursing program will be recognized as partial fulfillment of the 1000 hours. Students will submit proof of their education in a masters nursing degree program as well as proof of their current APRN licensure to reflect credit for the 500 hours credit towards the 1000 hours needed for the DNP degree during their application to the program. The remaining practice hours will be completed as part of the DNP courses. Clinical practice hours can be completed in your home town with an appropriate clinical affiliation agreement in place.

Clinical Courses

The following courses are clinical which all occur in program year 2:

Summer Semester (4)			Credit hours
NURS	8314	Introduction to Clinical Internship (180 clinical hours)	4

Fall Semester (5)			Credit Hours
NURS	8323	Clinical Internship I (135 clinical hours)	<u>3</u>

Spring Semester (6)			Credit Hours
NURS	8335	DNP Clinical Internship II (225 clinical hours)	5

Clinical Pearls:

- Students may not begin their clinical rotation until they are cleared to start by their clinical faculty. These dates will vary due to individual clinical sites as well as clinical faculty. The first day of classes for the summer term is June 1st, so I would anticipate beginning your clinical rotations hopefully by the end of that week.
- 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 casual 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 AState bookstore.

Order form for name tag:

<http://www.astate.edu/college/conhp/departments/nursing/files/pdfs/NameTagOrderForm.pdf>

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 have on file in the School of Nursing office the following documentation as discussed in the Graduate Information Guide (GIG):

1. Active license to practice as a registered nurse in the state of Arkansas,
2. Professional liability insurance indicating role as nurse practitioner 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 8235 Doctor of Nursing Practice Evidence Based Project. However, students work on written sections of the manuscript during courses throughout the program. 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, a presentation to a learned forum called Create@state, and a poster for the same venue. 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, APRN-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. Assure IRB compliance, mentor student throughout the preparation of the DNP project proposal, the project development, implementation, and evaluation process, and the final written DNP Project Manuscript;
2. Collaborate with students to schedule DNP Project Team meetings for Create@state presentation.
3. Lead DNP Project Team review and approval of the DNP Project Proposal, Final DNP Project Manuscript, and oral presentations.
4. Communicate effectively with team members.
5. Provide feedback to students on written drafts in a timely manner.
6. Document student progress toward completion of DNP Project requirements.
7. Mentor School of Nursing faculty with interest in participating in DNP student's Projects.
8. Share responsibility along with the student for all documentation of the progress toward completion of the project.

9. DNP Project Faculty Mentor will file DNP Proposal form with Team approval to the DNP Director.

Role of Faculty DNP Project Team Members (those 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. Provide feedback to students on written drafts in a timely manner.
4. Communicate concerns to students and DNP Project Faculty Mentor in a timely manner.

Role of DNP Clinical Mentor (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.

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. Upon admission to the program, a Faculty Mentor will be assigned to each student by the DNP committee.
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. Following discussions in NURS 8113 Theoretical Foundations for Doctor of Nursing Practice, the student will submit their proposal form to their Faculty Mentor for review and approval.
4. By the end of NURS 8123 Leadership, Policy, and Healthcare Systems, the student works with the Faculty Mentor to select a project team. The team will consist of at least four members including the Faculty Mentor, one additional graduate faculty from the department, and the student. The Faculty Mentor will chair the team. The DNP Project Team must be in place during the semester preceding NURS 8213 Translational Research I (fall, year 1).
5. The student completes CITI training appropriate to the project.
6. The student completes the IRB application appropriate to their project. Students will contact the

- Faculty Mentor for assistance with filing IRB application forms (See section on IRB below).
7. Submit IRB application allowing 4-6 weeks for response. Incomplete or unsatisfactory proposals may require revision and resubmission and extended time for approval.
 8. Notify the Faculty Mentor of IRB status and maintain IRB notification of approval for filing/ portfolio, etc.
 9. Project implementation or data collection may not begin until IRB approval is formally obtained.
 10. Implement and evaluate approved projects.
 11. Review ePortfolio (all written coursework to date) and DNP Project Materials requirements.
 12. Submit draft of DNP Project Proposal to Faculty Mentor for initial review and feedback.
 13. 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 the scholarly dissemination through the Create@state event. The student will be prepared to discuss the entire proposal. The verbal presentation should include statements of the problem, 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.
 14. At completion of the oral presentation meeting, the DNP Project Team will provide verbal feedback and recommendations to the student regarding the oral presentation. At the closure of the oral presentation meeting the Faculty mentor will summarize the major points raised by the team and solicit recommendations for approval. The DNP Team may choose to:
 - Approve the proposal-** DNP Project Faculty Mentor will file approval of the DNP Project Proposal on behalf of the DNP Team. Once the DNP Project Proposal is approved, the student becomes a candidate and may write DNP(c) after his or her name until graduation at which time the DNP candidate will be granted the degree along with the rights and privileges awarded by the degree.
 - Conditionally approve with minor revisions and no re-review.** The student will file a final/revised project proposal to the Faculty Mentor within one month of the proposal defense meeting.
 - Require minor or major revisions and re-review.** Revisions required: The student must develop a significantly revised or new proposal. The DNP Faculty Mentor will work with the student on the revision. The Team will review the new proposal and all prior steps will be repeated.
 - Reject the proposal.** The student must develop a significantly revised or new proposal. The DNP Faculty Mentor will work with the candidate on the revision. The Team will review the new proposal and all prior steps will be repeated.
 15. Completed DNP Presentation - Students must be prepared to discuss the entire project and written report in the timeframe of 30 minutes to 1 hour. 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.
 16. The candidate may be questioned by members of the audience and by the Team members.
 17. A PROJECT dissertation/thesis proposal approval form, found on the Graduate School website must be completed and submitted to the team for approval then sent to the Graduate Program Director and the department chair for signatures.
 18. 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 2-4 weeks for review and to make recommended revisions.
 19. 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).

20. 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.
21. The Faculty Mentor will forward the completed Project form to the Graduate School.
22. The student is required to pay for one copy of the bound DNP Project document (for the DNP program).
23. 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 (most will use Human Subjects review and then select “Assessment”). 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 approval is 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.

Holly, C. (2014). *Scholarly inquiry and the DNP project*. Springer.

A-State DNP ADMISSION REQUIREMENTS

The Doctor of Nursing Practice (DNP) Program is offered as a post-master’s nursing degree.

1. All applicants must first apply online and be accepted to the ASTATE Online.
2. Master's Degree in nursing from a CCNE, COA, or ACEN accredited program.
3. A minimum graduate cumulative GPA of 3.0 (4.0 scale).
4. A current unencumbered APRN license in the USA with national specialty certification (CRNA, CNS, CNP, or CNM certified) as appropriate.
5. Successfully completed a graduate-level statistics or biostatistics course with a grade of “B” or above.
6. Submit curriculum vitae/have at least one (1) year experience (2000 hours) as an APRN prior to application to the DNP program verified by employer.

7. An essay of no more than 450 words, to discuss your DNP degree career goals.
8. Three work reference forms completed: One by an individual who has direct supervision over you, and two professional colleagues who can provide a valid evaluation of your performance based on the behaviors identified in the reference form.
9. Satisfactory criminal background check through the School of Nursing.
10. 5010. English Proficiency is required. If your primary language is not English, a TOEFL score of 83 on the preferred internet-based test, (IBT), 570 on the paper-based test, or 213 on the computer-based test are required.

Admission Procedures for the DNP Program

1. Apply to ASTATE Online first.
2. Applicants must also complete an online application to the DNP Program which is found on the website.
3. Any prospective student's application will not be processed until both the AOS/DNP Program application and supporting materials have been received.
4. Meet the application deadline, which is May 1st of the year prior to June entry (summer start).
5. In addition to the application, the following documentation must be submitted to the School of Nursing. Evidence of the following is required before registering for clinical practicums.

- i. Copy of unrestricted RN and APRN Licenses (both)
- ii. Copy of Advanced Practice Certification (CNM, CNP, CNS, CRNA)
- iii. Curriculum Vitae (CV)
- iv. Three (3) professional work references sealed in an envelope with signature on the seal
- v. Copy of current CPR (AHA for Professionals) valid through the academic year
- vi. Evidence of Hepatitis B immunization or signed declination statement
- vii. Copy of professional liability insurance
- viii.. Copy of valid health insurance
- ix. Copy of TOEFL score if applicable
- x. Criminal background check/ verified credentials

6. Complete the following and mail in a comprehensive packet to:
A-State University, College of Nursing and Health Professions,
ATTN: DNP Program Coordinator
P.O. Box 910 State University, AR 72467

GRADING SYSTEM POLICY (see pg. 38 Graduate Bulletin)

Grading Scale:

GRADE	Range
A	90 –100%
B	80 –89.99
C	75 –79.99
D	70 –74.99
F	<70

Each course within the nursing programs has a descriptive course syllabus with information concerning content and determination of course grade. It is the student's responsibility to be familiar with and meet the requirements of each course.

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 ASU Graduate Bulletin remain in effect, including prerequisites 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.

NOTE: Colleges and Departments (e.g., Art, Nursing, Biology) may add to these guidelines in order to enforce academic integrity and professional ethics to meet their special needs (e.g., clinical, computer, laboratory experiences).

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.

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" (as stated in the Student Hand book on page 15) have been violated.

STUDENT RIGHTS GRIEVANCE PROCEDURE

Step 1: Since the faculty has the primary responsibility for course development, course delivery, the assessment of student achievement, and the sanction for academic misconduct, any student who has a complaint related to an academic issue should first consult with the course instructor within ten (10) working days of the incident and try to resolve the complaint. If the grievance involves a faculty member who is no longer employed at the university, or with whom the student does not feel comfortable approaching the student should move to step two of this process. If the complaint is resolved, the grievance process ends.

Step 2: If the complaint is not resolved in step one, and if the student wishes to pursue the complaint further, the student shall consult with the department chair/unit supervisor within fifteen (15) working days of the academic incident. The appropriate chair/unit supervisor shall consult informally with the student and the individual against whom the complaint has been made to attempt to resolve the complaint. The chair/unit supervisor shall notify the student and the individual against whom the complaint has been made in writing of the resolution or lack thereof within ten (10) working days of the student's first consultation with the chair/unit supervisor. If the complaint is resolved, the grievance process ends.

Step 3: If the complaint is not resolved in step two, and if the student wishes to pursue the complaint further, the student shall file a formal written complaint with the department chair/supervisor within thirty five (35) working days from the academic incident. The written complaint must specify the academic right(s) the student alleges has (have) been violated and must include:

- a. Date and details of the alleged violation;
- b. Any available evidence of the alleged violation;
- c. Names, addresses, and phone numbers of witnesses to the violation;
- d. The requested remedy to the alleged violation.

The chair/unit supervisor shall investigate the complaint using whatever processes are appropriate including, but not being limited to, written responses from or interviews with faculty members, other students, and other parties. The chair/unit supervisor shall notify the student and the individual against whom the complaint has been filed in writing of the chair/unit supervisor's finding and recommendation within ten (10) working days of receipt of the written complaint. If both parties in the complaint accept the recommendation, they will sign a statement to that effect and the grievance process ends. The chair/unit supervisor shall retain the written records of the process for five calendar years. Upon request, the chair/unit supervisor shall provide either or both parties with copies of all information gathered during the investigation.

Step 4: If the complaint is not resolved in step three, either party may request that the dean appoint a college hearing team. The request for a college hearing team review must be made in writing to the dean within ten (10) working days of completion of the process listed in step three.

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) found at: <http://www.adhe.edu/students-parents/colleges-universities/student-grievance-form/>. 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.

Writing Proficiency

Minimal level expectation for written academic assignments includes use of the sixth 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. In-state criteria –Students in selected counties in Missouri, Tennessee and Mississippi that lie within 75 miles of the University may qualify for in-state tuition rates at A-State. The counties to which the policy applies are:
- 1. Missouri -Butler, Carter, Dunklin, Howell, Mississippi, New Madrid, Oregon, Pemiscot, Ripley, Scott, and Stoddard;
 - 2. Tennessee -Dyer, Fayette, Haywood, Lake, Lauderdale, Obion, Shelby, and Tipton;
 - 3. Mississippi - DeSoto and Tunica. ASU graduates and their dependent children (as defined by Internal Revenue Service guidelines) qualify for in-state tuition rates no matter where they reside.
- B. Graduate Assistantships –ASU 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.
- C. Traineeships –Federal nurse traineeships are available as funds are allocated by the Department of Health and Human Services, U.S. Public Health Service Programs. The MSN Program Director has information on this program.
- D. Scholarships –MSN students are eligible for one scholarship(s) offered by the College of Nursing and Health Professions. Notification about scholarships is done through the MSN student listserv and announcements to classes. Scholarship applications are usually filed in Spring Semester of each year.
- E. 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 Program Director.

GENERAL INFORMATION

School Offices

The offices of the Dean of the College of Nursing and Health Professions, the Associate Dean for Nursing, 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.

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 ASTATE computer or word processing class assignment.

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 ASU account. Further information can be obtained by contacting the A-State IT services at 870-972-3933 or by visiting <https://www.astate.edu/dotAsset/e36ea921-1756-442d-bd34-282eaeae891.pdf>. You must have an established an email account before your first class meeting.

Parking

All students, faculty and staff who park a vehicle on the ASTATE campus are required to register the vehicle and display a sticker. Students can register their vehicle at Parking Services, at 2301E Johnson, Suite D, Jonesboro, Arkansas. There is a fee and it is charged to your account at the Finance Office. For additional information call Parking Service at 870-972-2945. Parking Website: <https://www.astate.edu/a/parking/>

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, CD-ROMS, 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 and hold an unencumbered license as an Advanced Practice Registered Nurse in their state of residence where they will be performing their 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 ASU 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 ASU 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 ¼ of the program of study.

DNP FACULTY AND STAFF Information

Faculty & Mentor Members	Role
Dr. Sarah Davidson	Assistant Dean of Nursing Faculty Mentor
Dr. Mark Foster	Graduate Chair Faculty Mentor
Dr. Jessica Camp	Post-masters DNP Program Director Faculty Faculty Mentor
Dr. Christie Black	CRNA DNP Program Director Faculty Faculty Mentor
Dr. L. Todd Hammon	Faculty, Faculty Mentor
Dr. K. Susan Snellgrove	Faculty
Dr. Elizabeth Nix	Faculty
Dr. Christopher Jordan	Faculty Mentor
Dr. Cassandra Massey	Faculty Mentor

Appendix A

**ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS**

STUDENT CONFIDENTIALITY CONTRACT

The confidentiality of patients admitted to contracted clinical agencies of the School of Nursing at Arkansas State University is protected by state and federal laws as well as treatment center policy and ethical consideration. Any student who breaches confidentiality is subject to immediate termination from the clinical course. Such disclosure is also subject to applicable laws and regulations. All information in regard to patients is considered confidential. This includes the following:

- A. The fact that the individual is a patient at a contracted clinical agency.
- B. The patient's name, address, employer, etc.
- C. The nature of the patient's illness or reason for admission to the treatment center.

Students are not allowed to discuss patients with individuals in the community and are not allowed to discuss patients in patient/public areas.

I understand the information presented to me regarding patient confidentiality and acknowledge that I will assume legal responsibility for any breach I may make. I also understand that if I breach confidentiality in any way I will be immediately terminated from my clinical course at Arkansas State University.

DNP Student's name (please print)

DNP Student's signature

Date

****To be signed and returned to the School of Nursing for placement in Student's File*

Appendix B

Booklist

For the entire program:

American Psychological Association. (2020). *Publication manual of the American psychological association (7th ed.)*. American Psychological Association.

Course-specific textbooks:

Summer I

NURS 8113: Theoretical Foundations for DNP

Bradshaw, M., & Vitale, T. (2021). *The DNP Project Workbook: A step-by-step process for success*. Springer. ISBN: 978-0-8261-7432-1(Print); 978-0-8261-7433-8(eBook); DOI: 10.1891/9780826174338

NURS 8123: Leadership, Policy, and Healthcare Systems

Ahmed, S., Andrist, L., Davis, S., & Fuller, V. (2018). *DNP education, practice, and policy: Mastering the dnp essentials for advancing nursing practice (2nd Ed)*. Springer. [MOU2]

Johnson, J.E., & Costa, L.L. (2019). *DNP nurse in executive leadership role*. DEStech. 978-1-60595-492-9

Fall I

NURS 8143: Healthcare Finance in Advanced Nursing

Waxman, K.T. (2018). *Financial and business management for the doctor of nursing practice (2nd Ed)*. Springer.[MOU5]

NURS 8153: Healthcare Informatics in Advanced Nursing

McGonigle, D., & Mastrian, K. G. (2018). *Nursing informatics and the foundation of knowledge (Laureate Education, Inc., custom ed.)*. (4th ed.). Jones and Bartlett Learning.

American Nurses Association. (2015). *Nursing informatics: Scope & standards of practice (2nd ed.)*. Author.

Spring I

NURS 8133: Epidemiology for the DNP

Gordis, D. (2014). *Epidemiology*. (5th ed.) Elsevier. [MOU8]

NURS 8213: Translational Research for DNP I

Melnyk, B., & Fineout-Overholt, E. (2019). *Evidence-based practice in nursing and healthcare (4th ed.)*. Wolters Kluwer.

White, K., Dudley-Brown, S., and Terhaar, M.F. (2021). *Translation of evidence into nursing and health care practice (3rd Ed.)*. Springer.[MOU9]

Summer II

NURS 8314 Introduction to Internship

Moran, K., Burson, R., & Conrad, D. (2019). *The doctor of nursing practice scholarly project: A framework for success*

(3rd ed.). Jones and Bartlett.

Bradshaw, M., & Vitale, T. (2021). *The DNP Project Workbook: A step-by-step process for success*. Springer. ISBN: 978-0-8261-7432-1(Print); 978-0-8261-7433-8(eBook); DOI: 10.1891/9780826174338

NURS 8163: Principles of Healthcare Ethics and Genetics

Kasper, C., Schneidereith, T., & Lashley, F. (2016) *Lashley's Essentials of clinical genetics in nursing practice* (2nd ed.). Springer.

Fall II

NURS 8223: Translational Research for DNP II

Hickey, J., & Brosnan, C. (2016). *Evaluation of Health Care Quality for DNP's* (2nd Ed.). ISBN: 978-0-8261-3157-7 (Print); 978-0-8261-3158-4 (eBook); DOI: 10.1891/9780826131584

Bradshaw, M., & Vitale, T. (2021). *The DNP Project Workbook: A step-by-step process for success*. Springer. ISBN: 978-0-8261-7432-1(Print); 978-0-8261-7433-8(eBook); DOI: 10.1891/9780826174338

NURS 8323: DNP Clinical Internship I

Spring II

NURS 8235: Evidence Based Practice Project

Bloch, J.R., Courtney, M.R., & Clark, M. L. (2016). *Practice-based clinical inquiry in nursing for DNP and PhD research: Looking beyond traditional methods*. Springer Publishing.

NURS 8335: DNP Clinical Internship II

Bradshaw, M., & Vitale, T. (2021). *The DNP Project Workbook: A step-by-step process for success*. Springer. ISBN: 978-0-8261-7432-1(Print); 978-0-8261-7433-8(eBook); DOI: 10.1891/9780826174338

***Supplemental Textbooks (Optional):**

**Supplemental Textbooks (Optional) for NURS 8123:*

Dichson, G.L. and Flynn, L. (2009). *Nursing policy research: Turning evidence based research into health policy*. Springer.

O'Grady, T.P. and Malloch, K. (2015). *Quantum leadership* (4th ed.). Jones & Bartlett.

Mason, D.J., Leavitt, J.K., and Chaffee, M.W. (2012). *Policy and politics in nursing and health care* (6th ed.). Elsevier Saunders.

Goudreau, K.A., & Smolenski, M.C.(2014). *Health policy and advanced practice nursing*. Springer.

Boykins, A., Schoenholer, S., & Valentine, K. (2014). *Health care system transformation for nursing and health care leaders: Implementing a culture of change*. Springer.

Marshall, E.S. (2011). *Transformational leadership in nursing*. Springer.

**Supplemental Textbooks (Optional) for NURS 8143:*

Ahmed, S., Andrist, L., Davis, S., & Fuller, V. (2018). *DNP education, practice, and policy: Mastering the dnp*

essentials for advancing nursing practice (2nd Ed). Springer.

**Supplemental Textbooks (Optional) for NURS 8314:*

Holly, C. (2019). *Scholarly inquiry and the DNP capstone*. Springer.

Appendix C

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.			
II. Poster (Create@state submission)			
Poster is well organized, and demonstrates evidence of substantive scholarly effort and analysis.	NA		
Visual/graphics are used appropriately and add to the understanding	NA		
Includes introduction, purpose/objectives, background, implementation, outcomes, conclusions, and recommendations.	NA		
Describes how framework(s) and model chosen guided the process.	NA		
Discusses finding and impact of project on subject/group/program/organization and policy.	NA		
Describes the extent to which objectives were achieved and any unexpected results.	NA		
Oral Presentation (Create@state delivery)			
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.*

APPENDIX D

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								

APPENDIX E

*The Learning Contract for the DNP Student***Name of clinical instructor:****Name of student:****Period (in time):****Unit/ward and physical address:**

Learning Contract

Learning objectives	Learning resources and strategies	Evidence of accomplishment	Means of validating evidence

*Example of a student's learning contract***Name of clinical instructor:** Dr. Foster**Name of student:** Jessica Camp**Semester/Year:** Fall 2017**Project Name:** Gerontology Clinical Nurse Specialist Competencies

Learning Contract

Learning objectives	Learning resources and strategies	Evidence of accomplishment	Means of validating evidence
Demonstrate advanced levels of systems thinking, and accountability in designing curriculum to include gerontology content to improve patient outcomes.	Discuss competency needs with Gerontology Clinical Nurse Specialist in practice at the Gerontology Clinic. Read gerontology guidelines from USPSTF and Cash & Glass (2016). Observe current CNS Practice in Gerontology clinic. Identify existing role specific competencies from professional organizations.	Identify the protocol for care of geriatric outpatient patient in competency terms. Place appropriate knowledge, skills, or abilities for gerontology care on a competency validation template. Design a workshop/skills fair to meet the competency needs of gerontology Clinical Nurse Specialist in the outpatient setting.	Discuss competency tool, appropriate preceptors, and validation means as well as approach to capture competencies with the Gerontologist and Faculty Project Mentor.

Reviewed by Faculty

Screenshot

on

20