



**THE UNIVERSITY OF SCRANTON  
DEPARTMENT OF NURSING**

**DOCTOR OF NURSING PRACTICE  
STUDENT HANDBOOK**

**for**

**Post-Masters DNP Program**

## TABLE OF CONTENTS

WELCOME.....	1
What is the Purpose of the DNP Degree? .....	1
What does it mean to be a doctoral student? .....	2
How long will it take to complete the program? .....	2
When are classes offered? .....	2
What is the Scholarly Project? .....	2
What kind of practicum hours are required? .....	4
IMPORTANT PHONE NUMBERS AT A GLANCE .....	6
DEPARTMENT OF NURSING PROGRAM OVERVIEW .....	7
Mission Statement .....	7
Philosophy .....	7
Baccalaureate Program Outcomes .....	9
Master's Program Outcomes .....	10
Doctor of Nursing Practice (DNP) Program Outcomes .....	11
Doctor of Nursing Practice Curriculum .....	12
Relationship of DNP Program to University Mission and College/Dept Goals .....	13
Glossary of Terms .....	15
APPEAL OF A COURSE GRADE .....	18
ATTENDANCE POLICY FOR CLASS .....	18
BACKGROUND CHECKS AND DRUG TESTING .....	19
CPR CERTIFICATION POLICY .....	19
CONFIDENTIALITY POLICY/ HIPPA .....	20
DNP SCHOLARLY PROJECT GUIDELINES .....	21
DNP STUDENT REPRESENTATION ON DEPARTMENTAL COMMITTEES .....	24
DRESS CODE FOR CLINICAL.....	25
EXPOSURE TO BLOOD AND/OR BODY FLUIDS IN THE CLINICAL SETTING .....	25
GRADING POLICY .....	26
HEALTH AND LIABILITY INSURANCE.....	27
HEALTH REQUIREMENTS.....	27
LICENSURE.....	28
PREGNANT STUDENT'S POLICY.....	28
STUDENT PREGNANCY/HEALTH RELEASE FORM.....	29
PROFESSIONAL NURSING BEHAVIORS POLICY .....	30
PROFESSIONAL NURSING BEHAVIORS EVALUATION FORM.....	31
SIGMA THETA TAU.....	32
SNOW DAYS AT CLINICAL SITES POLICY.....	33
SOCIAL MEDIA POLICY .....	33

STUDENT APPEAL POLICY .....	34
STUDENTS AS LEGAL WITNESSES POLICY .....	34
VERIFICATION OF RECEIPT OF HANDBOOK.....	35
APPENDIX .....	36
Appendix A: Rubric for Grading DNP Scholarly Project Proposal .....	37
Appendix B: Rubric for Grading DNP Scholarly Project Manuscript.....	38
Appendix C: Rubric for Grading Oral Presentation of DNP Scholarly Project .....	39
Appendix D: Rubric for Grading Poster Presentation of DNP Scholarly Project.....	40
Appendix E: Rubric for Grading DNP Clinical Competence Log/Portfolio .....	41

## WELCOME

We are very excited that you have decided to attend the University of Scranton for your Doctor of Nursing Practice (DNP) degree. Our executive leadership / blended program will prepare you for advanced practice at the highest level.

The purpose of this handbook is to provide you with guidelines for policies, procedures and core information that will be needed while you are enrolled as a Doctor of Nursing Practice (DNP) student in the Department of Nursing at The University of Scranton. These policies and procedures are the basis for decision-making regarding student matters.

Every DNP student is responsible for adhering to the policies and procedures contained in the Department of Nursing **DOCTOR OF NURSING PRACTICE STUDENT HANDBOOK**. Upon admission to the program, the DNP student is expected to read and review all policies. In addition, a copy of the Confidentiality Policy, Professional Nursing Behaviors Policy, and Verification of Receipt of the DNP Student Handbook must be signed and returned to the administrative assistant. Should you have any questions regarding these policies, please see the Director of the DNP Program, Dr. Mary Jane Hanson.

General policies in this handbook apply to all DNP students. Students are also governed by the policies at the agencies where they complete their practicum hours.

The educational policies and policies governing admission, advisement and counseling of students can be found in *The University of Scranton Graduate Studies Catalog*. The policies in this handbook apply to students in the Department of Nursing and were approved by the Dean of the Panuska College of Professional Studies.

### **What is the Purpose of the DNP Degree?**

The DNP is a practice doctorate that focuses on providing leadership for evidence-based practice. This requires competence in translating research into practice, evaluating evidence, applying research in decision-making, and implementing viable clinical innovations to change practice. Considerable emphasis is placed on a population perspective, how to obtain assessment data on populations or cohorts, how to use data to make clinical decisions and clinical evaluation. Specifically, the DNP program at the University of Scranton provides doctoral education in a learning environment where ethical leadership, creative problem solving, service to patients and communities, inter-professional teamwork, appreciation of diversity, and commitment to performance excellence are the hallmarks. The emphasis of the DNP program is on preparing local, regional, national, and international nurse leaders who will use their expertise to provide sophisticated care to promote the health of individuals, families, groups, and communities in increasingly complex environments. The student will complete an evidence-based scholarly project with significant potential to positively change health care delivery or improve health care outcomes for patients, families, communities, or populations. The DNP is designed for nurses seeking a terminal degree in nursing practice and offers an alternative to research-focused doctoral programs. DNP-prepared nurses are well-equipped to fully implement the science developed by nurse researchers prepared in PhD, DNS, and other research-focused nursing doctorates.

## **What does it mean to be a doctoral student?**

Doctoral study involves a spirit of inquiry that requires students to be highly motivated, self-directed learners. The DNP program is very demanding and requires individuals to be able to balance many commitments – personal, family, professional – simultaneously.

Study at the DNP level requires more autonomy on the part of the student and is less structured when compared with undergraduate or even master's level study. The relationship between students and faculty is quite different. At the doctoral level, the faculty serve as mentors, facilitating and guiding students through the self-learning process. Thus, in-class face-to-face "lecture" time is significantly less than at the undergraduate or master's level, with the expectation that the DNP student, under the mentorship of the faculty, will spend a significant amount of time reading, studying, researching, and analyzing course content as it applies to practice. Moreover, students are expected to review previously learned material about research methods and statistics to be adequately prepared for coursework. As self-directed learners, DNP students take the initiative to contact professors when additional assistance is needed.

As professional nurses enrolled in doctoral study, it is expected that students assume responsibility for expenses related to doctoral education. For example, costs associated with copying, printing, and poster preparation are the responsibility of the student. Costs may also be incurred when work is accepted for presentation at conferences. Savvy students explore options for reimbursement through scholarships, grants, and work-related opportunities.

## **How long will it take to complete the program?**

The DNP program at The University of Scranton is a 30-credit program that can be completed in 21 months (5 semesters), with entry in fall and graduation two years later in spring. A part-time study option is also available, whereby students may take one course a semester and complete the program in 3-4 years.

## **When are classes offered?**

The program is uniquely offered in an executive leadership format. It is specifically designed to accommodate full-time practice and full-time academic commitment. This hybrid model allows for on campus meetings augmented with online course work. It is the best of both worlds – incorporating the benefits of face-to-face on-campus learning with the flexibility of online learning. Full-time students will take two courses for each of five semesters, meeting 3-4 scheduled weekends per semester. Part-time students take one course per semester. The executive leadership model with planned on-campus meetings allows for increased collaboration among students and regular face-to-face contact between students and professors, thus enriching the academic experience and facilitating direct access to faculty and advisors on a regular basis for guidance and support.

## **What is the Scholarly Project?**

A Scholarly Project is the hallmark of the practice doctorate demonstrating an outcome of the student's educational experience. The scholarly project embraces the synthesis of both coursework and practice application. The outcome of the project is an evidence-based deliverable product reviewed, evaluated and approved by a project team comprised of the faculty mentor/advisor and another professional member with expertise in the content area. Dissemination modes include the final scholarly paper and a scholarly presentation involving a

professional poster and oral presentation. Preparation of a manuscript for consideration for publication in a peer-reviewed journal, while not required, is strongly suggested.

The nature of the scholarly projects will vary. Projects are expected to be clinically focused, evidence-based, and directed toward improving health care outcomes for patients, families, communities, or populations, by using outcome data to support a practice or policy change. Projects will use existing knowledge to positively change health care delivery in a specific practice setting or improve health care outcomes. The intent of the project is not to conduct research or generate new generalizable knowledge and can have no control groups. Projects will use existing data to support practice changes and may be done in partnership with another entity, such as a clinical agency, health department, government agency, or community group. Examples of overall types of scholarly projects include:

- Quality improvement initiatives
- Development of evidence-based practice guidelines or programs
- Policy analysis
- Design and/or evaluation of new models of care
- Design and/or evaluation of health care programs
- Consulting project
- System modifications for quality improvement processes
- Enhancement of leadership skills toward the solution of health care problems
- Analysis of a state or national health care policy with a proposal for a change in the model or implementation of policy
- Implementing the electronic health record into the advanced practice nurse's practice
- Develop and implement information technologies to improve outcomes
- Systematic review with practice recommendations and an outcome product, such as a clinical guideline, toolkit, or grant
- Using DNP Essentials for consensus-building for effective health care policy advocacy.
- Academic practice partnership: collaborating to improve quality
- A comprehensive program needs assessment with program development and evaluation
- The development of an assessment instrument / protocol, or a cost / benefit analysis of program models.

DNP students identify a topic within their practice area or their area of interest at the time of their application or admission to the DNP program. Ideally, during the first semester in NURS 700, students begin exploring concepts related to their inquiries. In the second semester, during NURS 720 students analyze theoretical frameworks and explore the relevance of a framework for their area of interest. Also during the second semester in NURS 730 students learn how to critically analyze and synthesize evidence. They also learn about institutional review boards and how to complete an IRB application. During the final two semesters of the program, in courses NURS 780 & NURS 790, a design appropriate to the purpose of the project will be developed based on the evaluation of the evidence, needs assessment, and overall project goals. The project will be completed. Evaluation of the project and dissemination of findings complete the scholarly project process. Students work closely with their faculty advisor and project team member(s).

## **What kind of practicum hours are required?**

Practicum hours are designed to demonstrate synthesis and application of expanded knowledge acquired within the DNP curriculum. The practicum hours signify the capability of the student to meet the core competencies of the DNP degree as established by the American Association of Colleges of Nursing (AACN). Consistent with *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006), all students will be required to complete a minimum of 1000 clinical hours post baccalaureate degree. The clinical hours are to be related to the scholarly project and /or to advance knowledge in the student's area of specialization. For example, the practicum hours can be demonstrated through a variety of methods including but not limited to

- In-depth work/mentorship with experts from nursing, as well as other disciplines
- Opportunities for meaningful student engagement within practice environments
- An opportunity to build and assimilate knowledge for advanced specialty practice at a high level of complexity
- An opportunity for further synthesis and expansion of learning
- Experience in the context within which the final DNP project is completed
- An opportunity to integrate and synthesize the essentials and specialty requirements necessary to demonstrate competency in an area of specialized nursing practice
- Programmatic efforts to address a clinical practice issue
- Data collection and analysis
- Direct care or practice experiences outside of the job description and responsibilities of the student with goals and learning outcomes

Practicum hours are not substantiated by the students' expertise in the health care system demonstrated prior to the DNP program nor by time spent working on classroom assignments.

The clinical hours that the student completed in the MSN advanced nursing practice program can be counted toward this requirement. All University of Scranton DNP students will complete additional clinical hours to fulfill the 1000-hour total requirement. The number of clinical hours required for each student will be divided between the two DNP Scholarly Project courses (NURS 780; NURS 790). Of note, 125 hours minimum are required in each DNP Scholarly Project course to afford the student the opportunity to apply new knowledge in the clinical setting. Therefore, it is possible that some DNP students will graduate with more than 1000 total clinical hours. Any additional hours above the 125-hour minimum required in NURS 780 and NURS 790 will be dependent upon the student's prior clinical practicum experience at the master's level. DNP students who are not University of Scranton MSN graduates, will be required to present formal evidence from their master's degree program with regard to the number of precepted clinical hours completed.

An affiliation agreement must be in place with all sites where a student will obtain clinical experience, which includes developing and implementing the scholarly project, unless the student is currently an employee at the site. This includes the practice site as well as any ancillary sites a mentor may take the student, such as hospitals, surgery centers, nursing homes, charitable clinics, etc. A student may not go with the mentor to a site where the University does not have an active affiliation agreement. The faculty advisor or DNP program director must approve sites for the student's clinical experience to ensure that the sites are appropriate.

The DNP student will keep a log of the clinical practicum hours during NURS 780 and NURS 790, to demonstrate attainment of the program outcomes related to clinical competence. The DNP Clinical Practicum log will include: a) time frame, b) clinical experience activity, c) related DNP program outcome, d) related DNP Essential, and e) personal reflection.



## IMPORTANT PHONE NUMBERS AT A GLANCE

<b>NURSING DEPARTMENT.....</b>	<b>941-7673</b>
Dr. Catherine Lovecchio, Chairperson.....	941-7673
(E-mail: <a href="mailto:Catherine.lovecchio@scranton.edu">Catherine.lovecchio@scranton.edu</a> )	
Dr. Mary Jane Hanson, Director, Graduate Nursing and DNP Programs..	941-4060
(E-mail: <a href="mailto:maryjane.hanson@scranton.edu">maryjane.hanson@scranton.edu</a> )	
Donna Cochrane-Kalinoski, Administrative Assistant, Graduate Nursing and DNP Programs .....	941-6658
(E-mail: <a href="mailto:donna.cochrane-kalinoski@scranton.edu">donna.cochrane-kalinoski@scranton.edu</a> )	
 FAX – Department of Nursing .....	941-7903
 Bookstore.....	941-7454
Campus Ministry .....	941-7419
Career Services .....	941-7640
Computing Help Desk .....	941-4173
Counseling Center.....	941-7620
Financial Aid Office .....	941-7700
Handicap Coordination.....	941-7580
Royal Card (University ID System) .....	941-6181
Learning Resources Center.....	941-4038
Library .....	941-7451
Parking/Security .....	941-7888
Security – Emergencies.....	941-7777
Student Health Center.....	941-7667
Wellness Center.....	941-4253
Weather information Line .....	941-5999

Handbook reviewed 7/2019

## **DEPARTMENT OF NURSING PROGRAM OVERVIEW**

### Mission Statement

The Mission of the Department of Nursing at The University of Scranton is to prepare nurses grounded in Jesuit ideals, who are committed to excellence in practice for the 21<sup>st</sup> century and have the knowledge and competencies to deliver safe, evidence-based, patient-centered care.

Revised 2013

### Philosophy

The Department of Nursing is an integral part of the J. A. Panuska College of Professional Studies of The University of Scranton and reflects the heritage, mission, values and goals of the University and of the College. The philosophy of the Department of Nursing is based on a holistic view of the person who has inherent worth, dignity and human rights. The individual is recognized as a total entity, with consideration given to the interdependent functioning of the physiological, psychological, cognitive, social, cultural and spiritual domains. Every person is unique and demands the respect of free choice. The person is in constant interaction with a changing environment. The integrity of an individual's potential for growth is maintained through adaptation.

Each person has the right and responsibility to determine and participate in decisions affecting health and deserves access to health care. Health is viewed on a continuum, as a dynamic state of physiological, psychological, sociocultural and developmental adaptation. One's state of health is influenced by genetic endowment, sociocultural background, environmental forces and life style. The primary responsibility for health lies with the individual, and secondly with the family and community.

The professional nurse accepts responsibility and accountability for nursing interventions and their outcomes. Nurses collaborate with members of the interprofessional health team to promote optimal health for individuals, families, communities and populations. The professional nurse responds to the changing needs of individuals, families, communities and populations within society. Professional nursing practice adheres to an established framework of ethical principles, legal regulations and standards of practice to provide high quality, safe and competent care. The professional nurse uses knowledge of the research process and evidence to advance nursing practice. Grounded in faith, evidenced-based practice, and clinical expertise, graduates are prepared to provide leadership in the delivery of safe, comprehensive nursing care.

Learning involves a dynamic interaction between students and faculty. Self-directed learning is expected. The faculty guides, instructs and facilitates student learning by encouraging development of intellectual curiosity, stimulating self-direction and enhancing involvement both in professional activities and service to society. Faculty members serve as role models for the students as educators, leaders, researchers, clinicians and advocates.

Revised 2013

## **Purpose of the Baccalaureate Program in Nursing**

The purpose of the baccalaureate program is to prepare beginning professional nurses, who as generalists possess clinical competence to function in a variety of settings. Patient-centered care, quality and safety, collaboration and teamwork, the use of evidence-based practice, informatics and ethics are emphasized. The program prepares graduates to deliver nursing care to individuals, families, communities and populations, and to participate in the advancement of the nursing profession.

Revised 2013

## **Purpose of the Master's Program in Nursing**

The master's program is designed to prepare nurses for current and emerging roles in health care delivery, who are equipped with advanced nursing knowledge for improving health outcomes. The program prepares graduates with the competencies to engage in higher level nursing practice and leadership in a variety of roles and settings.

Revised 2013

## **Purpose of the Doctor of Nursing Practice (DNP) Program**

The DNP program is designed to prepare graduates for independent practice in advanced nursing practice specialties. The DNP graduate will possess enhanced organizational and leadership skills in health care delivery, expertise in the application of evidence-based practice to improve patient and health care outcomes, and the ability to lead inter-professional teams.

Approved 2014

## **Baccalaureate Program Outcomes**

**Upon completion of the baccalaureate program the graduate is prepared to:**

1. Integrate a personal philosophy for nursing practice and service to others, based on the uniqueness, worth, dignity and diversity of human beings.
2. Synthesize leadership concepts, quality improvement and patient safety in the provision of safe, evidence-based, patient-centered care.
3. Integrate scientific evidence into the planning, implementation and evaluation of professional nursing practice.
4. Utilize information management and apply patient care technologies effectively in the delivery of safe, high-quality nursing care.
5. Articulate an understanding of healthcare systems, regulations, policies, scope of practice and patient's rights.
6. Apply interprofessional communication and collaboration to deliver safe, evidence-based, patient-centered care.
7. Synthesize evidence-based practices to promote health and prevent disease in individuals, families, communities and populations across the lifespan.
8. Demonstrate responsible and accountable professional behavior that reflects standards of nursing practice.
9. Engage in critical thinking, ethical reasoning and lifelong learning to support excellence in professional nursing practice.

Revised 2013

## Master's Program Outcomes

Upon completion of the master's program the graduate is prepared to:

1. Integrate knowledge from nursing and other disciplines to provide evidence-based care to diverse populations at an advanced practice level.
2. Apply leadership skills that emphasize ethical principles and critical-decision making to promote quality and safety in master's level nursing practice.
3. Articulate the process of quality improvement and apply quality and safety principles within an organization.
4. Incorporate research outcomes within the clinical setting to resolve practice problems and disseminate results.
5. Utilize informatics and patient-care technologies to deliver nursing care at an advanced practice level.
6. Employ advocacy strategies to promote health and improve health care.
7. Establish interprofessional relationships to mobilize resources and coordinate quality health care.
8. Engage in master's level nursing practice in accordance with applicable specialty nursing standards, integrating concepts of patient-centered and culturally appropriate clinical prevention and population health activities.
9. Demonstrate master's level knowledge and competencies in nursing and relevant sciences to influence healthcare outcomes for individuals and populations.
10. Articulate a commitment for continuous professional development and service to others based on Jesuit values.

Revised 2013

## **Doctor of Nursing Practice (DNP) Program Outcomes**

Upon completion of the DNP program the graduate is prepared to:

1. Incorporate science-based theories from nursing and other disciplines to develop, implement, and evaluate practice approaches that improve health care.
2. Utilize organizational and systems leadership to promote quality, cost effectiveness, and patient safety in the delivery of health care.
3. Demonstrate leadership in the application and critical evaluation of evidence-based practice to improve patient and health care outcomes.
4. Apply information systems/technology to monitor and improve patient care and health care delivery systems.
5. Consistent with Jesuit values, advocate for health care policies that comply with ethical principles and address health disparities and vulnerable populations.
6. Organize and lead inter-professional teams to improve patient and population health outcomes.
7. Analyze epidemiological, biostatistical, and environmental data to develop, implement, and evaluate clinical prevention and population health initiatives.
8. Function independently in an advanced nursing practice role to improve patient outcomes in a specialty area of practice.
9. Engage in lifelong learning and service to others.

Approved 2014

## Doctor of Nursing Practice Curriculum

The DNP program is a 30 credit program, with 10 courses of three credits each. Students are admitted as a cohort in fall semesters only. All students are expected to take six credits (2 courses) per semester for five semesters, with graduation in May, 21 months after admission. The courses are expected to be taken sequentially.

Courses	(all 3 credit courses for a total of 30 credits)	DNP Essential
<b>Semester I: Fall</b>		
NURS 700	Epidemiology and Biostatistics	VII
NURS 710	Information Systems and Health Care Technology	IV
<b>Semester II: Spring</b>		
NURS 720	Advanced Scientific Inquiry	I
NURS 730	Translating Evidence into Practice	III
<b>Semester III: Summer</b>		
NURS 740	Health Care Management for Advanced Practice Nurses	II
NURS 750	Promoting Health in Vulnerable Populations	VII & VIII
<b>Semester IV: Fall</b>		
NURS 760	Advanced Health Care Policy	V
NURS 780	DNP Scholarly Project I	VIII
<b>Semester V: Spring</b>		
NURS 770	Professional Leadership and Organizational Change	II & VI
NURS 790	DNP Scholarly Project II	VIII

## Relationship of DNP Program to University Mission and College/Dept Goals

The DNP program is consistent with the University’s strategy to add new innovative graduate options that are in character with our mission and responsive to the market. Below is a table that further identifies how the DNP program compares with the University, PCPS, and the Department of Nursing mission and goals.

**Comparison of the Mission of the University of Scranton, Panuska College of Professional Studies (PCPS), and the Department of Nursing’s DNP Program**

University of Scranton	PCPS	Department of Nursing	Congruency
<p>"...The University is a community dedicated to the freedom of inquiry and personal development fundamental to the growth in wisdom and integrity of all who share its life." (University Mission)</p> <p>"...We will provide a superior, transformational learning experience, preparing students who.....will “set the world on fire.” (University Vision)</p>	<p>"PCPS upholds the highest academic and professional development standards in preparing....students for successful professional careers in allied health and education." (Mission PCPS)</p>	<p>" The Mission of the Department of Nursing at The University of Scranton is to prepare nurses grounded in Jesuit ideals, who are committed to excellence in practice for the 21<sup>st</sup> century and have the knowledge and competencies to deliver safe, evidence-based, patient-centered care." (Mission DON)</p> <p>“The doctor of nursing practice (DNP) program is designed to prepare graduates for independent practice in advanced nursing practice specialties. The DNP graduate will possess enhanced organizational and leadership skills in health care delivery, expertise in the application of evidence-based practice to improve patient and health care outcomes, and the ability to lead inter-professional teams.” (DNP Program Purpose)</p>	<p>The University, PCPS, and the Department of Nursing are committed to excellence in preparing professionals for practice in the 21<sup>st</sup> century.</p> <p>The DNP program will prepare advanced practice nurses who are equipped with the knowledge to significantly improve and transform health care and in turn “promote ..... the well-being of humankind.” (Magis – University of Scranton.)</p>



University of Scranton	PCPS	Department of Nursing	Congruency
<p>"Promotes a respect for knowledge and a lifelong commitment to learning, discernment and ethical decision making." (University Characteristics)</p>	<p>"Our emphasis is on intellectual inquiry and clinical practice devoted to lifelong development ....." (Mission PCPS)</p>	<p>"The need and ability to learn continue throughout life.....The faculty guides, instructs and facilitates student learning by encouraging development of intellectual curiosity, stimulating self-direction and enhancing involvement both in professional activities and service to society." (DON philosophy)</p> <p>Engage in lifelong learning and service to others. (DNP Program Student Learning Outcome #9)</p>	<p>The University and the Department of Nursing are committed to academic excellence and life-long learning.</p> <p>Consistent with the DNP program outcomes, "We will be distinctive in the formation of students in the Ignation tradition, emphasizing discernment, excellence and service." (Cura Personalis-University of Scranton)</p>
<p>"Educate men and women for others who are committed to the service of faith and promotion of justice." (University Characteristics)</p>	<p>"...a focus on ...teaching for social justice... [is] embedded in our PCPS curriculum" (Mission PCPS)</p>	<p>"Nurses collaborate with members of the inter-professional health team to promote optimal health for individuals, families, communities and populations. The professional nurse responds to the changing needs of individuals, families, communities and populations within society...". (DON philosophy)</p> <p>Consistent with Jesuit values, advocate for health care policies that comply with ethical principles and address health disparities and vulnerable populations. (DNP Program Student Learning Outcome #5)</p>	<p>The University, PCPS, and the Department of Nursing emphasize responsibility to society.</p> <p>The DNP program will prepare advanced practice nurses who will be responsive to the needs of society in keeping with our Catholic and Jesuit identify.</p>

## Glossary of Terms

Accountability - ultimate responsibility of own actions.

Adaptation - as a process, it is a patient's response to a changing internal and external environment.

as a state, it is the result of a patient's response to an altered internal and/or external environment.

Advocate - one who acts in the interest of the health care consumer.

Alteration in Health Pattern - change in any dimension of one or more health patterns.

Altered State of Health - a condition that changes one's usual position on the wellness-illness continuum.

Benchmark - a standard set in the Assessment Plan for measuring the outcome criteria or expected results of the nursing program.

Care-giver - one who implements the nursing process in directing and providing the care of the patient.

Clinical Associate - a representative of a clinical agency who serves as a clinical resource person for a student.

Clinical Competence - the student's ability to demonstrate complex decision making abilities, technical nursing skill and competence in communication.

Common Health Problem - the most frequently occurring alterations in health of a particular population based on mortality and morbidity of that population.

Community - social groups of people with common characteristics, locations or interests, living together within a larger society.

Competencies - the content and learning experiences designed to facilitate student achievement of the objectives of the program.

Discipline (of Nursing) - a field of study in which there is a focus on the practice of the discipline as well as the generation of new knowledge to be applied in the practice.

Environment - all internal and external factors, i.e., physiological, sociocultural, psychological and developmental, with which the individual, family, community and group interacts.

Evaluation Plan - an ordered set of activities designed to monitor the effectiveness, the efficiency, and the quality of attainment toward meeting the goals of the program. The plan includes evaluation of all elements necessary for the conduct of the program, i.e., faculty, students, curriculum, resources and outcomes.

Expected Results - the attainment of nursing knowledge, clinical competence, service to others and program satisfaction, which stem from the mission statement of the University and philosophy and purpose of the Department of Nursing.

Faculty - the collective group (body) of professional persons responsible and accountable for the attainment of goals of the program.

Faculty member - the individual professional person.

Family - a social system comprised of two or more interdependent persons, which remains united over time and serves as a mediator between needs of its members and the forces, demands and obligations of society.

First Professional Degree - academic preparation in a senior college or university preparing the student for professional generalist practice in nursing (baccalaureate and generic masters in nursing)

Goal - a desired outcome of the program in general, rather than the more specific outcome of instructional process.

Governance - the government of an institution that includes the shared responsibility for general education and administrative policy, long-range planning, allocation of resources and determinations of faculty status.

Group - a collection of individuals who interact with each other.

Health - a dynamic state of physiological and psychological adaptation that constitutes a patient's well-being. The state of health, at any given point in time throughout the life cycle, is relative to the patient's adaptation.

Health Care - services provided, which enhance the well-being of individuals, families, communities and groups.

Health Care Recipient - recipients (individuals, families, communities and groups) of professional nursing care regardless of the state of health.

Health Pattern - a complex of human behaviors forming consistent and/or characteristic forms of adaptation to the environment occurring in sequence across time. Behaviors refer to developmental, physiological, psychological and sociocultural dimensions of human functioning.

Health Promotion - activities directed toward developing the resources of patients that maintain or enhance well-being.

Holistic - recognition of the individual as a total entity; considering the interdependent functioning of the affective physiological, psychological, cognitive, social and spiritual domains.

Knowledge - the student's ability to demonstrate a grasp of theoretical concepts necessary for competent nursing practice.

Leader - one who influences others in a specific direction through the judicious use of one's knowledge, ability and power.

Leadership - the activities of coordination, collaboration and consultation utilized in the interactive processes to provide nursing care.

Learning Experience - a planned activity of the curriculum that is used by students to achieve objectives.

Manager - one responsible for the direction and delivery of nursing care to patients.

Mission - the services that the program in nursing and/or the parent institution is chartered to provide as defined by its governing body.

Nursing - the diagnosis and treatment of human responses to actual or potential health problems.

Optimal Health - achievement of adaptation relative to a patient's potential.

Organizing Framework - basic components that unify the curriculum into a functional whole.

Performance Measures - tools used to evaluate the expected results of the program.

Person - a holistic being that reflects developmental, physiological, psychological and sociocultural dimensions, who is simultaneously an individual, a family member, part of a constantly changing society and an actual or potential recipient of health care.

Program - the educational and/or administrative unit (i.e. department, school, division) that provides planned studies in nursing leading to the first or second professional degrees.

Program satisfaction - the program has met the expectations of the senior level student and its graduates.

Service - activities serving the university, profession, community and/or department.

Sociocultural - factors that divide people into groups within the community, such as ethnicity, religion, social class, occupation, place of residence, language, education, sex, race, age and political orientation.

Teacher - one who directs and guides the learning process.

Vulnerable Populations - rural residents, the economically disadvantaged, racial and ethnic minorities, the uninsured and underinsured, those with low income, children, the elderly, women, the homeless, those with human immunodeficiency virus (HIV) and other chronic health conditions, and those lacking a usual source of health care due to race, ethnicity, age, gender, income, insurance coverage (or lack thereof), housing, poverty, inadequate education, and geographic location.

Wellness - an integrated state of optimal function with diverse developmental, physiological, psychological and sociocultural dimensions that are manifested by adaptation to the impact of complex individual and environmental factors.

## **APPEAL OF A COURSE GRADE**

Students who wish to appeal a final grade in a course must make a written appeal to the instructor within five (5) business days of the date the course grade becomes available to the student from the University, explaining why the grade should be changed. If the instructor agrees that a change of grade is warranted, the student will be notified in writing and a Change of Grade form will be completed and submitted to the Dean. If the instructor finds that the grade is correct as originally submitted, the student will be notified in writing, specifically addressing the student's reason for the appeal. The instructor's response must take place within five (5) business days of the receipt of the appeal from the student. If the student is not satisfied with the written response of the instructor, the student has the right to appeal in writing to the Chairperson of the Department of Nursing within five (5) business days of the instructor's response, providing a complete explanation of the appeal and supporting documentation. The Chairperson will attempt to facilitate a reasonable solution at the department level and will make written recommendation to both the student and faculty member within five (5) business days of receiving the appeal. If the matter is not resolved at the department level, the student, within five (5) business days of the Chairperson review, may request in writing that the Dean review the matter. The request to the Dean shall include complete documentation explaining why the student believes the grade should be changed and any responses the student received from the instructor and Chairperson. The Dean will conduct a review and provide a written decision to the student and faculty member within ten (10) business days of receiving the written appeal. The Dean's decision is final.

Adopted May 2012

## **ATTENDANCE POLICY FOR CLASS**

Regular class attendance is expected. It is the responsibility of the student to report absences from class to the individual faculty member prior to the scheduled class. The student is responsible for the material covered in class when not in attendance.

## **BACKGROUND CHECKS AND DRUG TESTING**

Students enrolled in the DNP program are required to submit the following prior to starting the practicum hours at affiliating agencies:

- (1) Pennsylvania Child Abuse Background Check (Act 34)
- (2) Pennsylvania Criminal Background Check (Act 169)
- (3) FBI Background Check through the Department of Human Services
- (4) Drug Testing is required by clinical agencies and students will be tested annually, at their own expense while enrolled in clinical courses.

This information is required by the Department of Nursing on behalf of the clinical agencies where the practicum experiences will occur. Instructions on how to meet these requirements will be given to the student upon registration for NURS 780. We use a background screening vendor, CastleBranch, to gather all required information. Further instructions on obtaining background checks will be provided to the student from CastleBranch. The results of some background checks are mailed to the student's residence and need to be uploaded to CastleBranch by the student before the deadline. The student and the program director and administrative assistants are able to view results on CastleBranch's secure website. Background check results may be shared with clinical agencies upon request. A positive background check may prohibit a student from participating in the clinical requirements of the course.

Drug Testing is required by clinical agencies and students will be tested annually, and more often if required by the clinical agencies, while enrolled in clinical courses. Drug testing is coordinated through CastleBranch. Students will register and pay for the drug test at CastleBranch. CastleBranch provides information on obtaining the drug test and automatically posts the results to the student's account to be viewed by the student and program director and administrative assistants. A positive drug test may prohibit the student from participating in the clinical requirements for the course.

A student **WILL NOT** be allowed to engage in practicum hours without obtaining and submitting the required background checks and drug tests by the due date. This information may be shared with the clinical agencies upon their request.

Students should be aware that Pennsylvania law prohibits licensure or certification of individuals convicted of felonies related to controlled substances, and may prohibit licensure if there is a conviction for a felonious act.

## **CPR CERTIFICATION POLICY**

Prior to NURS 780 and continuously through NURS 790, students enrolled in the DNP program must be certified in Cardiopulmonary Resuscitation (CPR) and AED for health care providers by the American Heart Association. All DNP students enrolled must upload a copy of the current CPR certification to CastleBranch.

## **CONFIDENTIALITY POLICY/ HIPAA**

HIPAA stands for “Health Insurance Portability and Accountability Act.” Although this legislative act includes a wide subject range relating to health insurance, a main focus of this legislative act is the protection, security, and privacy of patients’ medical records. The University of Scranton has a legal and ethical responsibility to safeguard the privacy of patients and to protect the confidentiality of their health and social information.

Confidentiality of patient information and patient records is of utmost priority in any healthcare setting/agency. While participating in clinical education experiences, students will have access to information that must remain confidential. Patients have the right to privacy and confidentiality of their medical information.

No patient information may be disclosed (verbally or in writing) to unauthorized persons such as friends, family, or other patients.

Any request by the patient to release medical information must be handled by the appropriate agency representative. No student will accept responsibility to release patient information.

Students will not discuss patient information in public areas of an agency or outside of the agency. These areas may include offices, if discussions in the office may be overheard by other patients.

Students will not leave medical charts in unrestricted areas of the agency.

Under no condition may samples of documentation containing any identifying information, such as evaluations, discharge summaries, results of diagnostic tests or letters to physicians be removed from the premises of the healthcare facility/agency.

The student’s obligation to keep information confidential continues outside of work hours and after the clinical experience concludes.

Any activity which is in violation of this agreement will be reported to the appropriate clinical and academic supervisor.

By signing this document, I understand and agree that I have read and will comply with all of the terms of the above policy. I am aware that my individual clinical site will have a Confidentiality Policy and I agree to honor its terms.

\_\_\_\_\_  
Student name (please print clearly)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## **DNP SCHOLARLY PROJECT GUIDELINES**

### Overview

Students begin the process of the project in the first course and continue with development, implementation and then finally evaluation throughout the program, with a presentation of the project given during the last semester. The student is expected to progress as indicated below toward project completion.

<b>COURSE</b>	<b>ACTIVITY</b>
<b>At Application/Admission</b>	Student identifies a project topic within her/his practice area or area of interest
<b>NURS 700: Epidemiology and Biostatistics Fall – 1<sup>st</sup> year</b>	Student begins to explore the project topic and related concepts
<b>NURS 720: Advanced Scientific Inquiry Spring – 1<sup>st</sup> year</b>	Student learns how to analyze theoretical frameworks and explore the relevance of a framework for their area of interest.
<b>NURS 730: Translating Evidence into Practice Spring – 1<sup>st</sup> year</b>	Student learn how to critically analyze and synthesize evidence. They also complete “CITI” training and learn about institutional review boards and how to complete an IRB application.
<b>NURS 780: DNP Scholarly Project I Fall – 2<sup>nd</sup> year</b>	Student completes and successfully presents the scholarly project proposal
<b>NURS 790: DNP Scholarly Project II Spring - 2<sup>nd</sup> year</b>	Student completes and evaluates the scholarly project.  Student completes and successfully presents and defends scholarly project final manuscript, oral, and poster presentation

### Scholarly Project Team

Each student shall have a faculty advisor for the scholarly project. The faculty advisor will hold doctoral preparation at either the PhD, EdD, or DNP level. Generally, the faculty advisor will be the instructor of record for the student when enrolled in NURS 780 and NURS 790. The faculty advisor will serve as the team leader of the Scholarly Project Team and will



work with the student to select a minimum of one other team member, usually a professional from outside the University with expertise in the content area of the project.

The Scholarly Project Team is responsible for guiding the student in the development of the scholarly project; critiquing the readiness of the project proposal for presentation; mentoring the student during the implementation and evaluation phases of the project and evaluating the student's performance on both the proposal and final project presentation.

### DNP Scholarly Project Proposal

The project proposal will be satisfactorily completed during NURS 780. The student is expected to collaborate with the team leader on the development of the written proposal. Contact with team members regarding expectations throughout the process is encouraged. Students should expect to complete multiple revisions of the written proposal before achieving final approval from the team leader and members. The DNP student must successfully complete the proposal to meet course requirements for NURS 780 and progress in the program.

The scholarly project proposal should be written in APA format, double-spaced, using size 11 font (Times New Roman or Arial) and 1" margins. The length of the proposal will vary, but usually is 20-30 pages excluding reference pages. The paper should be written in the third person and the methodology section in the future tense. The title page must include the name of the scholarly project, the student's name and University of Scranton Department of Nursing. The organization and content of the proposal will vary according to the project and recommendations of the team leader and committee member(s). The following components of the proposal are expected:

#### **I. Introduction**

- Introduction to problem "Why this project and why now"
- Statement of the clinical problem
- Purpose/specific aim(s) and/or objectives
- Background (what led to the problem) of problem of interest
- Significance (why is it important) of problem
- Impact of project on system or population

#### **II. Review of the Literature / Conceptual and/or Theoretical Framework**

- Synthesis of body of evidence related to problem (appraisal of literature, other sources of data) including overall strengths, weaknesses, gaps, limitations
- Concepts and definitions used in project
- Application of a theoretical and/or conceptual framework for project

#### **III. Project Design / Intervention**

- Describe the project
- Setting and Participants
- Project design / Intervention
- Plan for analysis
- Resources needed

#### **IV. References**

#### **V. Appendices**

The grade for the project proposal will be based on a rubric (see Appendix A). The rubric will be completed by the team leader after consultation with team member(s). A grade of satisfactory in all areas of the rubric is required to obtain a “Satisfactory” for the proposal.

### DNP Final Project Manuscript, Poster, and Oral Presentation

The DNP student must successfully complete and defend the final scholarly project manuscript, poster, and oral presentation to obtain a grade of “Satisfactory” for NURS 790. In order to graduate in May, the manuscript must be completed and accepted by the project team at least 2 weeks before the end of the spring semester. Students should expect to write and edit multiple revisions of the final manuscript, and therefore should submit a first draft no later than April 1 to meet graduation deadlines.

The oral presentation will be scheduled during the final 2 weeks of the spring semester. All doctoral students in NURS 790 are required to attend the oral presentations of their classmates. This is a time of celebration and family and friends of the DNP students are also welcome, as are other students and members of the University community. The student will prepare approximately 10-12 PowerPoint slides to support the oral presentation, which should last no more than 20 minutes, with an additional 5 minutes for questions. Two copies of the PowerPoint slides, 4 slides per page, must be submitted to the faculty advisor. No other handouts are required. Business attire is expected for the oral presentation.

A 42” x 48” professionally printed poster that would be acceptable for presentation at a national nursing conference must also be on display during the oral presentation. It is recommended that students use a professional business to print the poster. The poster should include the title of the project, your name and credentials, significance of the problem; review and synthesis of the literature; methodology/implementation of practice change; project results/findings; discussion and conclusions.

The scholarly project final manuscript should be written in APA format, double-spaced, using size 11 font (Times New Roman or Arial) and 1” margins. The paper should be written in the third person and the project design, results and discussions sections are to be in the past tense. The title page must include the name of the scholarly project, the student’s name and University of Scranton Department of Nursing. A one page abstract and table of contents must be included. The following components of the manuscript are expected:

#### **I. Introduction**

- Statement of the problem “Why this project and why now”
- Purpose/specific aim(s) and/or objectives
- Background (what led to the problem) of problem of interest
- Significance (why is it important) of problem
- Impact of project on system or population

#### **II. Review of the Literature / Conceptual and/or Theoretical Framework**

- Synthesis of body of evidence related to problem (appraisal of literature, other sources of data) including overall strengths, weaknesses, gaps, limitations
- Concepts and definitions used in project
- Application of a theoretical and/or conceptual framework for project

#### **III. Project Design / Intervention**

- Describe how the project was done
- Setting and Participants

Project design or Intervention  
Resources utilized

#### **IV. Project Results / Findings**

Analysis  
Results of intervention  
Tables, charts, bar graphs, etc., included as appropriate

#### **V. Discussion**

Explanation of the findings  
Evaluation of the applicability of the theoretical or conceptual framework  
Discuss impact of results on practice including sustainability  
Discuss overall strengths and limitations of project (Evaluation)  
Discuss lessons learned during the project  
Future implications for practice

#### **VI. References**

#### **VII. Appendices**

The grade for the final project manuscript will be based on the attached rubric (see Appendix B). The rubric will be completed by the team leader after consultation with team member(s). A grade of satisfactory in all areas of the rubric is required to obtain a "Satisfactory" for the final project manuscript.

The grade for the oral presentation will be based on the attached rubric (see Appendix C). The rubric will be completed by the team leader after consultation with team member(s). A grade of satisfactory in all areas of the rubric is required to obtain a "Satisfactory" for the oral presentation.

The grade for the poster will be based on the attached rubric (see Appendix D). The rubric will be completed by the team leader after consultation with team member(s). A grade of satisfactory in all areas of the rubric is required to obtain a "Satisfactory" for the poster.

\*\*\*Note: The team leader may request the student to perform a self-evaluation of the written manuscript using the appropriate grading rubric at any point in the preparation of the final paper.

### **DNP STUDENT REPRESENTATION ON DEPARTMENTAL COMMITTEES**

There is a DNP student representative on the Faculty Organization and the DNP Committee. Appointments are made during early September of each year. Interested students should contact the Director of the DNP Program.

## **DRESS CODE FOR CLINICAL**

DNP students are expected to dress professional and appropriately for the clinical setting. Jeans, shorts, provocative attire, sandals, clogs, sneakers and sling backs are not permitted.

Students are expected to be neat, clean, and well groomed. Hair should be appropriate in style and color for professional practice. Excessive jewelry is prohibited. Nails must be neat, trimmed, and of appropriate length to allow for professional practice. Excessive body art and tattoos are to be covered. No piercings other than conservative earrings in ears.

Exceptions may be made by the Director of the DNP Program when institutional policy differs from the above.

## **EXPOSURE TO BLOOD AND/OR BODY FLUIDS IN THE CLINICAL SETTING**

The purpose of this policy is to provide a protocol for action when a student is exposed to bodily fluids in the clinical laboratory setting. The Centers for Disease Control and Prevention (CDC) definition of occupational exposure is used as the basis for this policy and is defined as:

a percutaneous injury (e.g., a needle stick or cut with a sharp object), or contact of mucous membranes, or non-intact skin (e.g. when the exposed skin is chapped, abraded, or afflicted with dermatitis) or when contact with intact skin is prolonged or involving an extensive area with blood, tissues, or other body fluids to which universal precautions apply, including: a) semen, vaginal secretions, or other body fluids contaminated with visible blood, because these substances have been implicated in the transmission of HIV infection;... b) cerebral spinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, and amniotic fluid, because the risk of transmission of HIV from these fluids has not been determined...; and c) laboratory specimens that contain HIV (e.g., suspensions of concentrated virus) (CDC, 1998). For human bites, the clinical evaluation must include the possibility that both the person bitten and the person, who inflicted the bite, were both exposed to blood-borne pathogens (CDC, 6/29/01).

### **Student Responsibility**

It is the responsibility of the student to immediately report the exposure incident to her/his preceptor and faculty course instructor, as certain interventions are most effective when initiated promptly. In addition, the student is expected to report the exposure incident according to the clinical agency's policy, and to seek access to post exposure evaluation and treatment as per the agency's policy when appropriate (e.g. hospital setting, agency's policy may include emergency treatment in the ER). If an exposure occurs in a clinical setting where facilities are not available for the prompt evaluation and treatment of an exposure, it is the student's responsibility to access the nearest facility equipped to evaluate and treat an exposure (e.g. the closest emergency department).

### **Evaluation of the Exposure**

The exposure should be evaluated for potential to transmit hepatitis B, hepatitis C, and HIV based on the type of body substance, and the route and severity of the exposure by the

designated person (emergency room physician/infectious disease physician) at the clinical agency or other facility to which the student was sent for evaluation and treatment.

### **Testing**

All testing should be based on the initial risk evaluation by an agency representative of the exposure and the student's immunity status. It is recommended that hepatitis B and hepatitis C virus testing be performed as indicated by the clinical agency where the exposure occurred, or the other designated facility where the student was evaluated and treated, or at a laboratory of the student's choice. It is recommended that HIV testing of the student be performed at a location where the results of testing will remain confidential between the student and the testing site. It is the student's right to choose the testing site. Testing for HIV and hepatitis B and C infection should be done at the time of exposure and for specific intervals thereafter, as recommended by the CDC. This testing is at the expense of the student.

### **Record Keeping**

Information about the exposure incident will be kept in a secure locked file in the Department of Nursing. The results of HIV testing will not be reported to, nor kept by the University. It is recommended that all HIV testing results remain the confidential property of the student.

## **GRADING POLICY**

### Didactic/Theory Courses

The grading policy for DNP studies at The University of Scranton is as follows:

<u>Letter Grade</u>		<u>Percentage</u>		<u>Quality Points</u>
A	=	100 - 96	-	4.0
A-	=	95 - 92	-	3.67
B+	=	91 - 89	-	3.33
B	=	88 - 86	-	3.0
B-	=	85 - 83	-	2.67
C+	=	82 - 80	-	2.33
C	=	79 - 77	-	2.0
F	=	≤ 76	-	0

### Scholarly Project Courses: NURS 780 & NURS 790

Students must receive a final grade of Satisfactory (S) in NURS 780 & NURS 790 to progress in the program and graduate. The grade is based upon successful completion of course objectives, clinical hours, and the scholarly project. A final grade of Unsatisfactory (U) in NURS 780 or NURS 790 will result in failure of the course and may result in dismissal from the program.

## HEALTH AND LIABILITY INSURANCE

Students enrolled in the DNP program are expected to have their own health insurance. In addition, while enrolled in the practicum courses, DNP students must carry professional liability insurance. All DNP students enrolled in practicum courses utilizing affiliating agencies must upload evidence of their health and liability insurance to their CastleBranch account prior to starting their practicum hours.

## HEALTH REQUIREMENTS

The health requirements for the Department of Nursing are to assure that the student:

- 1) maintains that level of health necessary to complete the course of studies and ultimately to perform the duties of a professional advanced practice nurse.
- 2) is free of any illness or disease that may endanger the health and welfare of themselves and others.

Students enrolled in affiliating agencies for their practicum courses must abide by the following regulations. The pre-clinical physical examination shall include a complete physical examination administered by a certified nurse practitioner or physician with verified evidence of the following: current negative tuberculin skin test (PPD) within previous 12 months (if the PPD test is positive or the student has a history of a positive PPD, a chest x-ray or Quantiferon Gold TB test is required); immunization for diphtheria, tetanus, and pertussis within the previous ten years; immunization for measles, mumps, rubella, and varicella **OR** documented laboratory immunity. Influenza vaccine is required each year for the current flu season. The deadline date to receive the influenza vaccine is October 15. In addition, students are required to submit proof of Hepatitis B immunization or sign a declination form.

Subsequently, a PPD skin test must be administered every 12 months while the student is in the practicum nursing courses. If the PPD test has converted to positive, a chest x-ray or Quantiferon Gold TB test is required with appropriate follow-up. (Note: The PPD can be obtained at Student Health Services, which has a facility in the Roche Wellness Center at 1130 Mulberry Street.)

Students with a history of a positive PPD test must complete a "Tuberculosis Symptom Screening Questionnaire" annually. If there are any positive findings on the questionnaire a repeat chest x-ray or Quantiferon Gold TB test is required with appropriate follow-up.

The student must upload their health record, which includes all of the above mentioned requirements, to their CastleBranch account. It is the responsibility of the student to keep their account up-to-date. The student **WILL NOT** be able to attend clinical if all appropriate completed physical exam, diagnostic studies and immunizations, and documented health insurance and liability coverage are not uploaded to their CastleBranch account for viewing by the program director or administrative assistants by the due date. Health documents may be provided to clinical agencies upon request. In the event that specific agencies have further requirements, it is expected that students will meet the agency's requirements.

## **LICENSURE**

All DNP students enrolled in clinical courses must upload a copy of their Pennsylvania professional nurse license to their CastleBranch account prior to starting the clinical rotation. Students completing their clinical rotation in another state need to meet with the Director regarding appropriate professional nurse licensure. If the professional nurse license expires during the student's enrollment, the student must upload the renewed license. If the professional nurse license is revoked or suspended, the student may be dismissed from the program. In addition, the post master's student must submit evidence of graduate preparation or certification in an advanced nursing practice specialty.

## **PREGNANT STUDENT'S POLICY**

For DNP students approaching or in their clinical courses, it is the responsibility of the student to give written notice of her pregnancy to the Director of the DNP Program when she has written confirmation of the pregnancy.

The pregnant DNP student will sign a "Student Pregnancy Health Release Form" to continue in the clinical portion of the program. The pregnant DNP student must obtain written consent from her physician or nurse midwife regarding her participation in the clinical portion of the DNP program.

**The University of Scranton  
Department of Nursing**

**STUDENT PREGNANCY/HEALTH RELEASE FORM**

I, \_\_\_\_\_, release the University of Scranton from any liability related to health consequences to myself or the fetus as a result of my clinical experiences.

I have presented written consent from my physician/midwife regarding my participation in the nursing program. (attach consent from physician/midwife)

I have presented written confidential confirmation of my pregnancy to the Department of Nursing. (attach confirmation from physician/midwife)

I understand that the clinical faculty will not knowingly assign me to a situation that poses a recognized potential threat to the welfare of myself or the fetus. I understand that it is my responsibility to discuss any concerns regarding my clinical assignment with my instructor.

I understand that I must follow all mandated universal precautions.

I understand that pregnancy-related injuries sustained from improper body mechanics will not be the responsibility of the University of Scranton.

I understand the above restrictions and responsibilities that have been placed upon me. I accept responsibility for complying with them.

\_\_\_\_\_  
Student/Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student (Printed Name)

Reviewed & Approved  
9/22/95 Faculty Organization  
11/16/95 University Attorney



## **PROFESSIONAL NURSING BEHAVIORS POLICY**

DNP nursing students are expected to consistently demonstrate the professional nursing behaviors listed below. Failure to do so may result in dismissal from the doctoral nursing program.

- ❖ Ethical behavior according to the American Nurses Association Code of Ethics for Nurses, and also for nurse anesthesia students the AANA Code of Ethics for Certified Registered Nurse Anesthetists.
- ❖ Maintenance of a safe environment for the patient in the clinical setting.
- ❖ Punctuality for lecture, classroom, and clinical laboratories.
- ❖ Consistent preparation for lecture, classroom, and clinical laboratories.
- ❖ Completion of assignments within allotted parameters.
- ❖ Positive relationships with peers, faculty, patients, and staff.
- ❖ Compliance with the clinical dress code.
- ❖ Acceptance and incorporation of faculty feedback.
- ❖ Adherence to policies and standards established in The University of Scranton's student handbooks.
- ❖ Respect for peers, faculty, patients and staff.

Each nursing department faculty member (including part-time) will review every student in her/his respective lecture and/or scholarly project courses each semester. If there is a concern raised regarding a student, the faculty member will complete the Professional Nursing Behaviors Evaluation Form. This form will be submitted to the Program Director or Department Chairperson. At that time the Program Director, Department Chairperson or designee will meet with the student and develop a plan for remediation. Should a DNP student receive a second unprofessional behavior warning, the student's behavior will be referred to the DNP Committee for discussion. The DNP Committee will make a recommendation to the Department Chairperson who will contact the Dean regarding further action, which may include dismissal from the graduate nursing program.

I have received a copy and understand this policy.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
PRINT STUDENT NAME

Adopted April 2006

**PROFESSIONAL NURSING BEHAVIORS EVALUATION FORM**

Student: \_\_\_\_\_

Faculty: \_\_\_\_\_ Course/Program: \_\_\_\_\_

Semester/Year: Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

Nursing Behaviors	Areas of Concern
Ethical behavior according to the American Nurses Association Code of Ethics for Nurses, and also for nurse anesthesia students the AANA Code of Ethics for Certified Registered Nurse Anesthetists	
Maintenance of a safe environment for the patient in the clinical setting	
Punctuality for lecture, classroom and clinical laboratories	
Consistent preparation for lecture, classroom and clinical laboratories	
Completion of assignments within allotted parameters	
Positive relationships with peers, faculty, patients and staff	
Compliance with the clinical dress code	
Acceptance and incorporation of faculty feedback	
Adherence to policies and standards established in The University of Scranton's student handbooks.	
Respect for peers, faculty, patients and staff	

Comments:

Date: \_\_\_\_\_ Faculty Signature \_\_\_\_\_

## **SIGMA THETA TAU** **IOTA OMEGA CHAPTER**

### **I. Objectives and Purpose**

Joining an honor society signifies one's commitment to excellence in his or her chosen profession and acknowledges the individual's achievements-whether academic or professional. The specific purposes of the Honor Society of Nursing, Sigma Theta Tau International membership is to:

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

More details about specific qualifications for membership can be found in the Sigma Theta Tau International bylaws.

### **II. Qualification**

There are two entry levels into membership within Sigma Theta Tau International; academic and professional. Each chapter makes a professional judgment about candidates' membership eligibility based on documentation received from the candidate.

The academic qualification is based on the grades a student receives during initial or graduate nursing preparation. Even though schools in different countries assign grades in various methods, it is possible for any honor society to establish a system in which students with high academic achievement can be considered for admission.

The second route to qualify for admission is through one's professional achievement. Accomplishments are seen in areas such as research, publication, leadership, clinical practice and education. Nurses qualify for entry into the Honor Society of Nursing, Sigma Theta Tau International because they are recognized for their contribution to nursing by providing leadership to peers, encouraging achievement in others, having contributed to research that will have an impact on health care and patient care, and/or having developed an innovative practice or method of caring for patients or managing a department.

### **III. Criteria for Graduate Students**

- 1) Must have completed  $\frac{1}{4}$  of the nursing curriculum;
- 2) Must have at least a GPA of 3.5 (based on a 4.0 scale);
- 3) Must meet the expectation of academic integrity.

### **IV. Application**

Graduate students who meet the criteria for induction should contact the Faculty Counselor at the beginning of September regarding application.

## **SNOW DAYS AT CLINICAL SITES POLICY**

If, in the judgment of the student, the weather would impede safe travel to an agency in which a clinical practicum is scheduled, the student may cancel the clinical practicum. The student will notify the agency and make rescheduling arrangements as needed to meet course objectives.

## **SOCIAL MEDIA POLICY**

Social media is defined as mechanisms for communication designed to be disseminated through social interaction, created using easily accessible and scalable publishing techniques. Social media is commonly thought of as a group of Internet-based applications that allow for the creation and exchange of user generated content. Examples include but are not limited to LinkedIn, Wikipedia, Flickr, blogs, podcasts, RSS feeds, Twitter, Facebook, YouTube, and MySpace. In addition to the following guidelines, students are expected to adhere to the American Nurses Association Code of Ethics and the National Council of State Boards of Nursing's Guide to the Use of Social Media, while engaging in the use of social media. Students must represent the University of Scranton and the Department of Nursing in a fair, accurate and legal manner while protecting the brand and reputation of the University.

\*\* Students may use social media to discuss, among other things, other students. But they are restricted as Nursing students from doing so when it would reveal information that is otherwise confidential to the Program.

\*\* Students may not post confidential or proprietary information about the University, staff, students, clinical facilities, patients, or others with whom students have contact in the role of a University student.

\*\* Students must be mindful of copyright and fair use and must not violate intellectual property rights.

\*\* No University or Department marks, such as logos and graphics may be used on personal social media sites.

\*\* During clinical, use of PDAs and other devices employed for social media will be used only as authorized by faculty and in accordance with agency policies.

\*\* No personal phone conversations or texting are allowed at any time while in patient areas or in the classroom.

\*\* Use of computers (PDAs, Notebooks, etc.) during class shall be restricted to note taking and classroom activities.

\*\* Students may not record (audio or video) professors, guest speakers, or fellow students for personal or social media use without the expressed permission of the faculty, guest, or fellow student.

\*\* Students may not photograph or record patients nor may students post or otherwise transcribe or transfer any recordings of patients, whether legitimate or not, via social networking.

\*\* Students may not post or share clinical or class materials developed by Department faculty or staff without express written permission.

Violation of the Social Media Policy will result in disciplinary action in accordance with the Department's Professional Behaviors Policy, up to and including dismissal from the Program.

### **STUDENT APPEAL POLICY**

(Note: The Department of Nursing Appeal of a Course Grade Policy and The University of Scranton Academic Code of Honesty and Sexual Harassment policies should be followed when applicable.)

A student who has a grievance should first appeal the matter to the faculty member involved. The student has the right to appeal to the faculty member's chairperson, who will make a recommendation to his or her dean. The student may request the Dean to review the matter.

### **STUDENTS AS LEGAL WITNESSES POLICY**

To avoid unnecessary legal entanglements and involvement in situations that are possibly beyond the student's competence, the DNP nursing students at The University of Scranton, while assigned to affiliating agencies as part of course requirements, are prohibited: 1) to solicit signatures of patients and/or family members on consent forms, 2) to sign as a witness or to witness the signing of consent forms or any other legal documents including wills/contracts, etc.

This policy does not prohibit the student from asking the patient's consent to invasive procedures that the student is to perform as part of his/her assignment.

**VERIFICATION OF RECEIPT OF HANDBOOK**

I have read and understand the contents of The Doctor of Nursing Practice Student Handbook,  
Department of Nursing, The University of Scranton.

---

Student name printed

---

Student Signature

---

Date

Please return this form to Donna Cochrane-Kalinoski, Dept. of Nursing, Administrative Assistant  
Graduate Program

Thank you.

7/2019

## **APPENDIX**

**Appendix A: Rubric for Grading DNP Scholarly Project Proposal**

<b>PERFORMANCE AREA</b>	<b><u>SATISFACTORY</u> MEETS EXPECTATIONS</b>	<b><u>UNSATISFACTORY</u> FAILS TO MEET EXPECTATIONS</b>
<b>Overall Proposal</b>	Clear, organized proposal. Follows directions/guidelines.	Proposal lacks good organization. Fails to follow directions/guidelines.
<b>Introduction</b>	Problem statement clearly identified, including background and significance.	Poorly articulated problem statement, background, and/or significance.
<b>Review of Literature/ Conceptual and/or Theoretical Framework</b>	Clear presentation of synthesis of body of evidence related to problem, including overall strengths, weaknesses, gaps, and limitations. Well-articulated application of a theoretical or conceptual framework for project.	Literature review fails to support project or is poorly presented. Theoretical or conceptual framework absent or poorly articulated.
<b>Proposed Methodology/ Project Design/ Intervention</b>	Project design/Intervention, data collection tools, including a discussion of their validity and reliability and plan for data analysis well-stated.	Lack of clarity in project design/Intervention, data collection tools, including a discussion of their validity and reliability and/or plan for data analysis.
<b>APA Format</b>	Paper and citations adhere to APA format with only minor or random errors. Appropriate and sufficient references.	Lack of adherence to APA format or with multiple errors. Few or no citations.
<b>Writing Scholarship</b>	Professional written communication with correct grammar.	Frequent errors in written communication or grammar.

**Comments:**

DNP Student: \_\_\_\_\_

Date: \_\_\_\_\_

Team Leader: \_\_\_\_\_



**Appendix B: Rubric for Grading DNP Scholarly Project Manuscript**

<b>PERFORMANCE AREA</b>	<b><u>SATISFACTORY</u> MEETS EXPECTATIONS</b>	<b><u>UNSATISFACTORY</u> FAILS TO MEET EXPECTATIONS</b>
<b>Overall Manuscript</b>	Clear, organized manuscript. Follows directions/guidelines.	Manuscript lacks good organization. Fails to follow directions/guidelines.
<b>Introduction</b>	Problem statement clearly identified, including background and significance.	Poorly articulated problem statement, background, and/or significance.
<b>Review of Literature/ Conceptual and/or Theoretical Framework</b>	Clear presentation of synthesis of body of evidence related to problem, including overall strengths, weaknesses, gaps, and limitations. Well-articulated application of a theoretical or conceptual framework for project.	Literature review fails to support project or is poorly presented. Theoretical or conceptual framework absent or poorly articulated.
<b>Methodology/ Project Design/ Intervention</b>	Project design/intervention, data collection tools, and plan for data analysis are well-stated and appropriate for the project.	Lack of clarity or inappropriate presentation of project design/intervention, data collection tools, and/or plan for data analysis.
<b>Project Results/ Findings</b>	Scientifically accurate discussion of data analysis and results.	Data analysis lacks evidence of sound scientific reasoning.
<b>Discussion</b>	Clear detailed explanation of the findings related to the framework. Well-articulated evaluation of the project. Strengths and limitations identified. Impact of results on practice well-defined.	Discussion and/or evaluation is superficial or lacks strong evidence of relationship with the framework and practice. Strengths and limitations absent or minimally addressed.
<b>APA Format</b>	Paper and citations adhere to APA format with only minor or random errors. Appropriate and sufficient references.	Lack of adherence to APA format or with multiple errors. Few or no citations.
<b>Writing Scholarship</b>	Professional written communication with correct grammar.	Frequent errors in written communication or grammar.

**Comments:**

DNP Student: \_\_\_\_\_

Date: \_\_\_\_\_

Project Team Leader: \_\_\_\_\_

**Appendix C: Rubric for Grading Oral Presentation of DNP Scholarly Project**

<b>PERFORMANCE AREA</b>	<b><u>SATISFACTORY</u> MEETS EXPECTATIONS</b>	<b><u>UNSATISFACTORY</u> FAILS TO MEET EXPECTATIONS</b>
<b>Overall Presentation</b>	Clear, organized presentation. Adheres to the time limit. Follows directions/guidelines.	Presentation lacks good organization. Fails to adhere to time limits and/or follow directions/guidelines.
<b>Introduction</b>	Problem statement clearly identified, including background and significance.	Poorly articulated problem statement, background, and/or significance.
<b>Review of Literature/ Conceptual and/or Theoretical Framework</b>	Clear presentation of synthesis of body of evidence related to problem, including overall strengths, weaknesses, gaps, and limitations. Well-articulated application of a theoretical or conceptual framework for project.	Literature review fails to support project or is poorly presented. Theoretical or conceptual framework absent or poorly articulated.
<b>Methodology/ Project Design/ Intervention</b>	Project design/intervention, data collection tools, and plan for data analysis are well-stated and appropriate for the project.	Lack of clarity or inappropriate presentation of project design/intervention, data collection tools, and/or plan for data analysis.
<b>Project Results/ Findings</b>	Scientifically accurate discussion of data analysis and results.	Data analysis lacks evidence of sound scientific reasoning.
<b>Discussion</b>	Clear detailed explanation of the findings related to the framework. Well-articulated evaluation of the project. Strengths and limitations identified. Impact of results on practice well-defined.	Discussion and/or evaluation is superficial or lacks strong evidence of relationship with the framework and practice. Strengths and limitations absent or minimally addressed.
<b>Slides</b>	Slides are clear, succinct and demonstrate professional quality.	Slides are inconsistent in clarity or quality.
<b>Oral Presentation</b>	Presenter has professional appearance and demeanor, is well-prepared and answers questions skillfully.	Presenter poorly prepared, lacks professional appearance and/or demeanor.

**Comments:**

DNP Student: \_\_\_\_\_

Date: \_\_\_\_\_

Project Team Leader: \_\_\_\_\_

**Appendix D: Rubric for Grading Poster Presentation of DNP Scholarly Project**

<b>PERFORMANCE AREA</b>	<b><u>SATISFACTORY</u> MEETS EXPECTATIONS</b>	<b><u>UNSATISFACTORY</u> FAILS TO MEET EXPECTATIONS</b>
<b>Overall Presentation</b>	Clear, organized poster. Flows between topic areas. Professional printing source used. Follows guidelines.	Poster lacks good organization, is homemade or hastily assembled, and/or fails to comply with guidelines.
<b>Introduction</b>	Problem statement clearly identified, including some supporting background and significance.	Poorly articulated problem statement, background, and/or significance.
<b>Review of Literature/ Conceptual and/or Theoretical Framework</b>	Succinct presentation of synthesis of body of evidence related to problem. Identification of a theoretical or conceptual framework.	Unclear presentation of body of evidence. Failure to appropriately identify a theoretical or conceptual framework.
<b>Methodology/ Project Design/ Intervention</b>	Project design/intervention, data collection tools, and plan for data analysis are clearly presented.	Lack of clarity or inappropriate presentation of project design/intervention, data collection tools, and/or plan for data analysis.
<b>Project Results/ Findings</b>	Scientifically accurate and logical presentation of data analysis and results.	Data analysis difficult to understand or scientifically incorrect.
<b>Discussion</b>	Clear explanation of the findings. Well-articulated evaluation of the project. Strengths and limitations identified. Impact of results on practice noted.	Presentation of findings lacks clarity. Strengths and limitations absent or minimally addressed. Poorly articulated impact of result on practice.
<b>Aesthetics</b>	Poster is visually appealing. Colors are complementary and font is readable. Effective use of tables and graphs when indicated.	Poster is boring, colors and font make it difficult to read, and/or ineffective use of tables and graphs.
<b>Oral Presentation</b>	Presenter has professional appearance and demeanor, is well-prepared and answers questions skillfully.	Presenter poorly prepared, lacks professional appearance and/or demeanor.

**Comments:**

DNP Student: \_\_\_\_\_

Date: \_\_\_\_\_

Project Team Leader: \_\_\_\_\_

**Appendix E: Rubric for Grading DNP Clinical Competence Log/Portfolio**

<b>PERFORMANCE AREA</b>	<b><u>SATISFACTORY</u> MEETS EXPECTATIONS</b>	<b><u>UNSATISFACTORY</u> FAILS TO MEET EXPECTATIONS</b>
<b>Professionalism</b>	Was present and on time. Consistently prepared and functioned in a professional manner. Open to learning experiences provided. Showed initiative and creativity. Selected and completed clinical and scholarly activities as agreed upon.	Did not consistently demonstrate professional behavior in manner, attitude, quality or quantity of work completed. Lacked enthusiasm and creativity. Failed to complete clinical and/or scholarly activities as agreed upon.
<b>Organizational and Systems Leadership</b>	Demonstrated leadership in the application and critical evaluation of evidence-based practice to improve patient and health care outcomes.	Failed to demonstrate leadership in the application and critical evaluation of evidence-based practice to improve patient and health care outcomes.
<b>Information Systems and Patient Care Technology</b>	Applied information systems and/or patient care technology as appropriate to monitor and improve patient care and health care delivery systems.	Failed to demonstrate knowledge or application of information systems and/or patient care technology to improve health care delivery systems.
<b>Inter-professional Collaboration</b>	Prepared to play a central role in establishing inter-professional teams, participating in the work of the team, and assuming leadership of the team when appropriate.	Lack of clarity or inappropriate presentation of project design/intervention, data collection tools, and/or plan for data analysis.
<b>Independent Functioning in an Advanced Practice Nursing Role</b>	Demonstrated refined assessment skills and based practice on the application of biophysical, psychosocial, behavioral, sociopolitical, cultural, economic, and nursing science as appropriate in the area of specialization.	Failed to demonstrate refined assessment skills or base practice on the application of biophysical, psychosocial, behavioral, sociopolitical, cultural, economic, and nursing science as appropriate in the area of specialization.

**Comments:**

DNP Student: \_\_\_\_\_

Date: \_\_\_\_\_

Preceptor: \_\_\_\_\_

Course Faculty: \_\_\_\_\_