



**THE UNIVERSITY OF SCRANTON
DEPARTMENT OF NURSING
GRADUATE STUDENT HANDBOOK**

2018-2019 Academic Year

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WELCOME

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 graduate student in the Department of Nursing at The University of Scranton. These policies and procedures are the basis for decision-making with regard to student matters.

Every graduate nursing student is responsible for adhering to the policies and procedures contained in the Department of Nursing **GRADUATE STUDENT HANDBOOK**. Upon admission to the program, the graduate 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 Graduate 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 Graduate Nursing Program, Dr. Mary Jane Hanson.

General policies in this handbook apply to all graduate nursing students. In addition, included are some policies that are specific to certain tracks, these policies are clearly labeled as such. Students are also governed by the policies at the agencies where they receive their clinical education.

PREAMBLE TO THE POLICIES OF THE DEPARTMENT OF NURSING GRADUATE PROGRAM

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.

IMPORTANT PHONE NUMBERS AT A GLANCE

NURSING DEPARTMENT	941-7673
Dr. Mary Jane Hanson, Director, Graduate Nursing Program..... (Email: maryjane.hanson@scranton.edu)	941-4060
Dr. Ann Culp, Nurse Anesthesia Program Administrator..... (Email: ann.culp@scranton.edu)	941-5588
Donna Cochrane-Kalinoski, Administrative Assistant, Graduate Nursing Program	941-6658
(E-mail: donna.cochrane-kalinoski@scranton.edu)	
Jill Lear, Administrative Assistant, Nurse Anesthesia Program	941-5531
(E-mail: jill.lear@scranton.edu)	
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

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 21st 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

Competencies of the Nurse Practitioner

The graduate of the Family Nurse Practitioner program will demonstrate the nine (9) core competencies identified by the National Organization of Nurse Practitioner Faculties (2012), which are outlined below:

1. Scientific Foundation Competencies
2. Leadership Competencies
3. Quality Competencies
4. Practice Inquiry Competencies
5. Technology and Information Literacy Competencies.
6. Policy Competencies
7. Health Delivery System Competencies
8. Ethics Competencies
9. Independent Practice Competencies

Competencies of the Adult-Gerontology Clinical Nurse Specialist

The graduate of the Adult-Gerontology Clinical Nurse Specialist program will demonstrate the core competencies as identified by the National Association of Clinical Nurse Specialists Competency Task Force (2010), which are outlined below:

1. Direct Care Competency
2. Consultation Competency
3. Systems Leadership Competency
4. Collaboration Competency
5. Coaching Competency
6. Research Competency
7. Ethical Decision-Making, Moral Agency and Advocacy Competency

Competencies of the Nurse Anesthetist

The graduate of the Nurse Anesthesia program will demonstrate that she/he has acquired the knowledge, skills, and competencies as identified by the American Association of Nurse Anesthetists (taken from 2004 Standards for Accreditation of Nurse Anesthesia Educational Programs, Revised January 2018), which are outlined below:

1. Patient Safety
 - Be vigilant in the delivery of patient care.
 - Refrain from engaging in extraneous activities that abandon or minimize vigilance while providing direct patient care (e.g., texting, reading, e-mailing, etc.)
 - Protect patients from iatrogenic complications.
 - Participate in the positioning of patients to prevent injury.
 - Conduct a comprehensive and appropriate equipment check.
 - Utilize standard precautions and appropriate infection control measures.

2. Individualized Peri-anesthetic Management
 - Provide care throughout the perianesthetic continuum.
 - Use a variety of current anesthesia techniques, agents, adjunctive drugs, and equipment while providing anesthesia.
 - Administer general anesthesia to patients of all ages and physical conditions for a variety of surgical and medically related procedures.
 - Provide anesthesia services to all patients, including trauma and emergency cases.
 - Administer and manage a variety of regional anesthetics.
 - Function as a resource person for airway and ventilator management of patients.
 - Possess current certification in Cardiopulmonary Resuscitation (CPR)
 - Possess current advanced cardiac life support (ACLS) certification.
 - Possess current pediatric advanced life support (PALS) certification.
 - Deliver culturally competent perianesthetic care throughout the anesthesia experience.
 - Perform a comprehensive history and physical assessment

3. Critical Thinking
 - Apply theory to practice in decision-making and problem solving.
 - Provide nurse anesthesia care based on sound principles and research evidence.
 - Perform a preanesthetic assessment and formulate an anesthesia care plan for patients to whom they are assigned to administer anesthesia.
 - Identify and take appropriate action when confronted with anesthetic equipment- related malfunctions.
 - Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.
 - Calculate, initiate, and manage fluid and blood component therapy.
 - Recognize and appropriately respond to anesthetic complications that occur during the perianesthetic period.
 - Pass the National Certification Examination (NCE) administered by the NBCRNA.

4. **Communication Skills**
Effectively communicate with all individuals influencing patient care.
Utilize appropriate verbal, nonverbal, and written communication in the delivery of perianesthetic care.

5. **Professional Role**
Participate in activities that improve anesthesia care.
Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.
Interact on a professional level with integrity.
Teach others.
Participate in continuing education activities to acquire new knowledge and improve his or her practice.
Demonstrate knowledge of wellness and substance use disorder in the anesthesia profession through completion of content in wellness and substance use disorder

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.

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.

ATTENDANCE POLICY FOR CLINICAL PRACTICUM

Attendance is required. The student must notify university faculty and preceptor/clinical site if absence occurs.

BACKGROUND CHECKS AND DRUG TESTING

Students enrolled in the graduate nursing program are required to submit the following prior to starting the initial clinical rotation. Additional background checks and drug testing maybe required at the discretion of the clinical agency. Students are expected to meet all clinical agency requirements for background checks and drug testing.

- (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. Students will receive instructions upon registration for the initial clinical rotation to register online at CastleBranch, our background screening vendor. 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 can 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 attend clinical 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 the initial clinical experience and continuously throughout the clinical courses, students enrolled in the graduate nursing program must be certified in Cardiopulmonary Resuscitation (CPR) and AED for health care providers by the American Heart Association. All graduate nursing students enrolled in clinical courses must upload a copy of the current CPR certification to CastleBranch. Nurse anesthesia students also need current ACLS and PALS certification.

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

DRESS CODE FOR CLINICAL

Graduate students in the family nurse practitioner and adult-gerontology clinical nurse specialist programs are expected to wear business casual attire in the clinical settings with a clean white lab coat. Business casual attire includes slacks and blouses/shirts, dresses or skirts, all of which should allow for safety and freedom of movement in clinical activities. A University approved name pin is to be worn on the left hand side of the lab coat. Jeans, shorts, provocative attire, sandals, clogs, sneakers and sling backs are not permitted. Nurse anesthesia students are expected to wear appropriate attire as dictated by the agency and University approved name pin during clinical rotations.

Students are expected to be neat, clean and well groomed. Hair should be appropriate in style and color for professional practice. No jewelry is allowed except a wedding band, watch and small pierced earrings (one per ear lobe). Jewelry may not be worn on any other pierced body part. Nails must be neat, trimmed and of appropriate length to allow for patient assessment and care. Body art and tattoos are to be covered.

Exceptions may be made by the Director of the Graduate Program when office/hospital 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 nonintact 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 bloodborne 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 graduate nursing 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

Any student who fails to receive a final grade of B or higher in any of the FNP specialty courses (specifically NURS: 530, 541, 551, 561, and 571) cannot progress in the specialty sequence. The student may make written application to the Director of the Graduate Program to repeat the course when it is next offered. If approved, the student shall also be required to repeat the co-requisite clinical course, regardless of the clinical grade. There is no guarantee that permission will be granted for a student to repeat a course.

Any student who fails to receive a final grade of B or higher in any of the nurse anesthesia specialty courses (all courses in the NA track except for NURS: 591; 593; 594; 595) shall be dismissed from the nurse anesthesia track.

Clinical/Practicum Courses

Students must receive a final grade of Satisfactory (S) in the clinical practicum courses to progress in the program. The grade is based upon both faculty and preceptor evaluation of the student's ability to meet course objectives and demonstrate safe advanced clinical nursing practice. A final grade of Unsatisfactory (U) in a practicum course will result in failure of the course and dismissal from the program.

Unsafe clinical behavior is defined as that which places the patient or staff in either physical or emotional jeopardy. Physical jeopardy is the risk of causing physical harm. Emotional jeopardy means the student creates an environment of anxiety, distress or uneasiness for the patient or family. Unsafe behavior may be a single occurrence of a very serious nature or may be a pattern of behavior involving unacceptable risk.

In order to obtain a final grade of Satisfactory (S) in the clinical courses, the student must meet the specific objectives of the course and demonstrate safe advanced clinical nursing practice. This will be determined through faculty and preceptor evaluation of overall performance and weekly logs. Safe clinical practice is defined as:

1. Performs assessments, diagnostic testing, differential diagnoses and therapeutic interventions consistent with generally accepted conventional practice and the Pennsylvania Nurse Practice Act.
2. Takes nursing actions to correct, minimize and/or prevent risk to patient.

The final clinical grade of Satisfactory (S) or Unsatisfactory (U) is given by the faculty member(s) responsible for supervising the student's clinical practicum.

If at any time during the clinical practicum a student demonstrates unsafe clinical behavior, the student is subject to immediate review by the faculty. The outcome of the review may be recommendation of immediate dismissal from the program or recommendation of a remedial plan that would include a behavioral contract, specifying the specific outcomes that the student must achieve to receive a final grade of Satisfactory (S) and, if needed, an alternate clinical placement site with a new preceptor. In the case of the behavioral contract, if the student fails to meet the recommendations set forth, a final grade of Unsatisfactory (U) will be given and the faculty may recommend dismissal from the program.

GRADUATE STUDENT REPRESENTATION ON DEPARTMENTAL COMMITTEES

There is graduate nursing student representation on each of the following departmental committees: Faculty Organization, Graduate Committee, and Resources Committee. Appointments are made during early September of each year. Interested students should contact the Director of the Graduate Program.

HEALTH AND LIABILITY INSURANCE

Students enrolled in the graduate nursing program are expected to have their own health insurance. In addition, while enrolled in the clinical courses, nurse practitioner students are required to have student nurse practitioner liability insurance, nurse anesthesia students must have student nurse anesthesia liability insurance, and adult-gerontology clinical nurse specialist students are required to have professional nurse liability insurance. All graduate nursing students enrolled in clinical courses must upload evidence of their health and liability insurance to their CastleBranch account prior to starting their clinical rotation, and then annually.

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.

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 clinical nursing courses. If the PPD test has converted to positive, a chest x-ray or Quantiferon Gold TB test is required, with follow-up as appropriate. (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 follow-up as appropriate.

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 graduate nursing 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.

NURSING LEARNING LABORATORY POLICY

The Nursing Learning Laboratory is designed for the use of students enrolled in nursing courses. The laboratory contains complicated and expensive equipment. The Director of the Nursing Laboratory is responsible for the security and maintenance of all equipment and supplies for independent assignments, practice or review. In view of this, the following regulations are to be followed:

- 1) The Nursing Laboratory may be used only when the Director of the Nursing Laboratory or designee is present, between 8:30 a.m. and 9:00 p.m. Monday through Thursday and between 8:30 a.m. and 4:30 p.m. on Friday. Weekend hours, when available, are posted each semester.
- 2) The Laboratory will be kept locked when the Director of the Nursing Laboratory or a Lab Instructor is not present.
- 3) No equipment or supplies may be removed from the Nursing Learning Laboratory without permission from the Director of Nursing Laboratory.
- 4) No eating, drinking, or smoking is allowed in the Laboratory.

PREGNANT STUDENT'S POLICY

It is the responsibility of the student to give written notice of her pregnancy to the Director of the Graduate Program when she has written confirmation of the pregnancy. This will only be shared with the clinical faculty responsible for that student.

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

Clinical faculty will not knowingly assign the student to a situation that poses a recognized potential threat to the welfare of the pregnant student or the fetus. The student is responsible for discussing any concerns regarding her assignment with the instructor.

**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

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

The Department of Nursing faculty reviews the progress (academic and clinical) of every nursing student each semester. The purpose and goal of the evaluation process is to review the professional development of students. Each nursing department faculty member (including part-time) will review every student in her/his respective lecture and/or clinical sections 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 and 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 graduate student receive a second unprofessional behavior warning, the student's behavior will be referred to the Graduate Committee for discussion. The Graduate 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 for the day. The student will notify the university faculty and the agency and make rescheduling arrangements as needed in order 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 clinicals, 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 graduate nursing students at The University of Scranton, while assigned to clinical 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.

STUDENTS ENROLLED IN CLINICAL ROTATION POLICY

It is each student's responsibility in the FNP and CNS tracks to complete a "Graduate Student Preceptor Request Form," for each preceptor every semester that she/he is in clinical. Students are to consult with the Director of the Graduate Program or Clinical Coordinator to discuss appropriate preceptor selection. Blank forms are available in a file behind the student mailboxes or electronically on the department website. The completed form should be returned to the administrative assistant for the graduate nursing program at least one month prior to the beginning of the semester to allow adequate time for mailing contracts and obtaining signatures. The signed contract must be returned by the preceptor before the clinical rotation can begin. **IT IS THE STUDENT'S RESPONSIBILITY TO VERIFY THAT THE SIGNED CONTRACT HAS BEEN RETURNED BEFORE BEGINNING THE CLINICAL ROTATION.** This can be done by checking with the administrative assistant for the graduate nursing program.

VERIFICATION OF RECEIPT OF HANDBOOK

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

Student name printed

Student Signature

Date

FNP and CNS students return form to Donna Cochrane-Kalinoski, Dept. of Nursing,
Administrative Assistant Graduate Program, Room #349 McGurrin Hall.

NA students return form to Jill Lear, Dept. of Nursing, Administrative Assistant Nurse Anesthesia
Program, Room #219A McGurrin Hall

Thank you.

7/2018

APPENDIX

(General Information)

APPENDIX
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**University of Scranton
Department of Nursing
Graduate Program**

Guidelines for Independent Study - Nursing 583

To fulfill the requirement for an Independent Study (N583), students choose one of the following options: a clinical practicum in a specialized setting or self-designed course of study focusing on one or more of the advanced practice nursing roles; the completion of a research project; an elective with faculty approval; or a thesis.

Should the student choose a clinical practicum or self-designed course of study (clinical, research, educational or administrative), the student must submit a brief overview of what she/he expects to accomplish for the proposed number of credits. This overview is to be attached to the Reader Request Form and submitted to the Director of the Graduate Program after obtaining the approval and signature of the Course Instructor (University faculty member supervising the Independent Study).

This brief overview should include:

1. Title - Specific to the Project (maximum 30 characters; 4-8 words)
2. Objectives - Five (5) to ten (10) measurable objectives that the student expects to meet at the end of the Independent Study.
3. Specific Learning Experiences - Methods that will be utilized to meet the Objectives (e.g., Practical Experience, Literature Review, Conference Attended, Experts Interviewed, Participation in Research).
4. Methods of Evaluation - Specific ways in which the student's performance will be evaluated (e.g., Weekly Journals, Final Paper, Development of Teaching Tool/Patient Handouts, Presentation, Clinical Performance Evaluation Tool). Provide percentages to each of the evaluating areas appropriate to the weight of the area (e.g., Journals: 10%; Presentation: 20%; Clinical Performance 70%).

General Information:

Clinical hours are scaled based on 125 hours per credit. Fewer hours are needed when utilizing other learning experiences. Exact time allotments should be negotiated with individual faculty member.

The request for an Independent Study should be submitted to the Director of the Graduate Program during the pre-registration period OR no less than two weeks prior to the beginning of the semester in which the study is to take place.

An Independent study can be taken for up to 6 credits. Credit allotment is to be consistent with work load, and determined in conjunction with the faculty member supervising the study.

OVERVIEW OF GRADUATE NURSING PROGRAM SPECIALIZATIONS

FAMILY NURSE PRACTITIONER SPECIALIZATION

Nurse practitioners (NPs) are registered nurses who have advanced education and clinical training in a health care specialty area. NPs practice under the rules and regulations of the Nurse Practice Act of the state in which they work. Many NPs also hold national certification in their specialty area. In Pennsylvania (PA), the NP is certified as a Certified Registered Nurse Practitioner (CRNP) by the PA State Board of Nursing. National certification is also required to practice as an NP in PA.

Family nurse practitioners (FNP) are prepared to provide advanced nursing practice for individuals and families across the life span. Specifically, the FNP is educationally prepared to assess, diagnose and treat common acute and chronic disorders, and to provide health promotion and disease prevention interventions and counseling. NP practice includes independent and interdependent decision making and direct accountability for clinical judgment.

The University of Scranton's FNP track is a Master of Science in Nursing (MSN) degree program designed to prepare registered nurses to deliver primary health care to families in a variety of community and out-patient settings. To complement the FNP role, students also receive course work in research, evidence-based practice, systems leadership, health policy, and health care financing.

Each student is required to complete a clinical practicum. Faculty will assign the student to a clinical setting and preceptor. During the clinical practicum, the student will provide advanced nursing care for individuals across the life span using obstetric/gynecological (women's health), pediatric (children's health), adult and geriatric primary care diagnostic and management skills, under the guidance and supervision of licensed physicians, certified NPs, and certified nurse midwives. All preceptors must have a minimum of one year of clinical experience. Each credit of clinical equals 125 clock hours per semester, so that total clinical practicum for the FNP program is 875 hours.

The FNP track is offered as a 36-credit master's degree program for baccalaureate prepared nurses, and as a 27-credit certificate option for nurses already holding a master's degree in advanced practice nursing and who wish to become FNPs. Graduates will be able to function as FNPs in a variety of settings such as primary care offices, clinics, private practices, schools, health departments, chronic and long-term care facilities and home care agencies. Graduates of the program are eligible for certification as an FNP in PA through the PA State Board of Nursing and nationally through the American Nurses' Credentialing Center and the American Academy of Nurse Practitioners.

ADULT-GERONTOLOGY CLINICAL NURSE SPECIALIST SPECIALIZATION

The Adult -Gerontology (AG) Clinical Nurse Specialist (CNS) specialization prepares clinical nurse specialists who possess advanced competencies in nursing practice and strategies for improving the quality of patient care among adult and geriatric patients. The specialization is offered as a master's degree program for baccalaureate prepared nurses. The curriculum emphasizes the development of adult-gerontology nursing clinical expertise based on an in-depth understanding of nursing practice and theory. In addition, courses specific to the role of the CNS are incorporated into the curriculum.

Each student is required to complete a clinical practicum. Faculty will assign the student to a clinical setting and preceptor. The preceptor(s) must be a master's prepared nurse or licensed physician with at least one year of clinical experience. Each credit of clinical equals 125 clock hours per semester, so that total clinical practicum time for the AG program is 500 hours.

Graduates of the program are eligible for national certification as a Clinical Nurse Specialist in Adult -Gerontology through the American Nurses Credentialing Center and for state certification through the PA State Board of Nursing.

NURSE ANESTHESIA SPECIALIZATION

The Nurse Anesthesia specialization is a full-time, rigorous, and comprehensive 28-month program that prepares registered nurses to become Certified Registered Nurse Anesthetists (CRNAs). Students are given the opportunity to integrate classroom content with direct application of advanced techniques in the provision of anesthesia care to patients in all risk categories throughout the lifespan.

The Nurse Anesthesia Program is based on a continuum of perioperative anesthesia care. This care includes preoperative assessment, formulating an anesthesia management plan, the administration of anesthetic agents and adjunct therapeutics, and the provision of appropriate consultation during the postoperative recovery period.

Nurse anesthesia practice requires substantial specialized knowledge, judgment, and advanced nursing competencies, all of which are based on biological, physiological, pharmacological, and the psychosocial sciences. Nurse anesthetists function as the patients' advocate, acting on behalf of the patient to maintain their psycho-physiological integrity throughout the anesthetic procedure and during recovery from anesthesia. The competencies required of nurse anesthetists make them aptly qualified to institute and/or participate in emergency life-support activities wherever they may occur.

A concentrated program of theory and clinical study prepares the student to be a qualified professional, practicing in an advanced nursing specialty providing anesthesia services in a variety of settings as a member of a multi-disciplinary health care team. The curriculum includes study in research methodology, biophysical sciences, pharmacology, principles of anesthesia, and professional role issues. Graduates are capable of exercising independent judgment within their scope of competence, critical thinking, and accept the responsibility for rendering professional services and the evaluation of the probable effect of those services upon the patient.

The Nurse Anesthesia Program is offered as a 68-credit master's degree program for baccalaureate prepared nurses, and as a 56 credit certificate option for nurses already holding a master's degree in advanced practice nursing and who wish to become Certified Registered Nurse Anesthetist (CRNAs). Graduates of the program are eligible for national certification as a CRNA from the National Board of Certification and Recertification for Nurse Anesthetists.

DESCRIPTION OF UNIVERSITY FACULTY ROLE FOR GRADUATE PROGRAM CLINICAL COMPONENT

The University faculty assumes overall responsibility for theory and clinical courses. Faculty will develop the course syllabus, identify the content to be included in the course, select the methods that will be used to evaluate student learning, and assign the course grade. The faculty works closely with students and preceptors to assist students in achieving the course objectives.

Students are assigned by faculty to a specific clinical site based on such variables as educational opportunity, student background and location. The faculty member will communicate with the preceptor/clinical faculty through written communication, phone conversations, meetings and/or site visits with regard to the student's course objectives and progress. The frequency of contact will vary according to the needs of the student, the clinical site and the specialty. All FNP and CNS students are visited and observed by a University faculty member a minimum of one time per semester at each clinical site. All NA clinical sites are visited a minimum of one time per year.

Formal evaluation is done each semester by the preceptor/clinical faculty, student and University faculty member. Faculty in the FNP and CNS tracks will also meet with the student on a weekly basis to discuss the clinical practicum and review informal as well as formal preceptor evaluations and student self-evaluations. Faculty in the NA track review weekly student evaluations completed by the preceptor/clinical faculty and meet with the student when indicated.

DESCRIPTION OF PRECEPTOR ROLE FOR GRADUATE PROGRAM CLINICAL COMPONENT

Formal arrangements are made between The University of Scranton and the preceptors/clinical faculty. An agreement specifying the exact arrangements is sent to each preceptor or preceptor organization/hospital.

Preceptors serve as clinical faculty/instructors, supervisors and evaluators of students. Course work provides students with the knowledge and principles required to graduate as safe practitioners. Preceptors continue that instruction as the student initially observes, then gradually becomes responsible for providing the direct care that forms the basis for advanced practice nursing.

The role of the preceptor includes:

- Orienting the student to the clinical site
- Facilitating a mutually respectful environment for learning
- Being an expert role model
- Providing evidence-based learning experiences
- Observing and reviewing clinical management and advanced practice nursing skills
- Providing on-going feedback and evaluation to the student
- Directing the student to resources and readings

The preceptor is expected to provide written evaluation of the student's progress throughout each semester, utilizing evaluation tools provided by the University faculty. Ongoing and immediate informal feedback of student performance is helpful in addressing student strengths and weaknesses in decision making and skill development. If the preceptor has concerns about a student's performance or conduct at the clinical site, the preceptor should contact the program director, the student's faculty instructor, or the chairperson of the Department of Nursing.

Communication is vital, and preceptors are encouraged to maintain active communication with either the graduate program director or the student's faculty instructor should questions or concerns arise. Although not a requirement, preceptors are encouraged to give their input on course content, learning activities and other aspects of instruction. Preceptors are also welcomed to attend on-campus student conferences and serve as guest lecturers.

DESCRIPTION OF STUDENT ROLE FOR GRADUATE PROGRAM CLINICAL COMPONENT

It is the student's responsibility to be aware of her/his own unique learning needs and to make them known to faculty and preceptors. Students are responsible for providing their own transportation to the clinical site, and they are responsible for contacting both the preceptor site and the faculty member in the event of illness/problems that prevent them from attending their assigned clinical day. Students are also expected to complete formal self-evaluations of their clinical performance each semester. In addition, students are responsible for keeping track of all their clinical experiences and must complete clinical logs for review by their assigned faculty member/seminar leader.

Student maintenance of proper communication with both the University and the clinical faculty is critical to maximize the clinical experience. Students are to take the initiative to discuss with the preceptor and faculty any problems that are related to the clinical site.

Specifically, for the CNS track: Students are responsible, under the supervision of preceptors and faculty, for developing clinical expertise in adult health nursing and skills consistent with advanced practice nursing. The skills for the clinical nurse specialist include developing competencies in such roles as teacher, consultant, advocate, leader/manager, change agent and expert clinician. Students are expected to participate in preceptor selection and negotiate their schedules with the preceptors to fulfill course time and experience requirements.

Specifically for the FNP track: In the initial clinical course students are expected to become oriented to the clinical setting, focus on refining health assessment skills and conducting comprehensive histories and physicals, and providing health promotion counseling. In subsequent clinical courses in the FNP track students are responsible, under the supervision of preceptors and faculty, for assessing patient's needs, establishing a plan of care, and implementing and evaluating that plan of care. Students are expected to participate in preceptor selection and negotiate their schedules with the preceptors to fulfill course time and experience requirements.

Specifically for the NA track: Students are responsible, under the supervision of preceptors/clinical faculty to acquire knowledge, skills and competencies in patient safety, perianesthetic management, critical thinking, communication, and the competencies needed to fulfill their professional responsibility as identified by the 2004 *Standards for Accreditation of Nurse Anesthesia Educational Programs*, Revised January 2018.

CLINICAL GUIDELINES POLICIES FOR NURSE ANESTHESIA STUDENTS

Clinical Experience

All clinical experiences are to be documented in the clinical experience record (Medatrax) within 48 hours of the clinical day when the experiences took place. It is acknowledged that emergencies may alter the clinical day in a student nurse anesthetist's experience and may fragment the time spent in a clinical case. Although a student may not be able to participate in all aspects of the anesthesia care, she/he must participate in a substantial amount and/or critical portions of the case to be included in the clinical record. In order to clarify the standard for counting clinical experiences please refer to the COA Statement below:

“Counting clinical experiences -Students can only take credit for a case where they personally provide anesthesia for critical portions of the case. A student may only count a procedure (e.g., central venous catheter placement, regional block, etc.) that he or she actually performs. Students cannot take credit for an anesthetic case if they are not personally involved with the management of the anesthetic or only observe another anesthesia provider manage a patient's anesthetic care. Two learners should not be assigned to the same case, except when the case provides learning opportunities for 2 students, and 2 anesthesia providers are necessary due to the acuity of the case. The program will need to justify any deviation from this requirement.” COA Guidelines for Counting Clinical Experiences, October 15th, 2015, p.2,3

If there is any question about the amount of clinical that can be credited, please discuss this with your clinical course faculty.

Required Clinical Cases

Students are required to:

- Complete 650 clinical cases. This exceeds the 600 minimum required cases as designated by the NBCRNA National Certification Examination.
- Complete 2000 clinical hours. This is the minimum required number of clinical hours by the NBCRNA.
- Keep an electronic case log. The program uses “Medatrax” for students’ electronic records. Students will be oriented to the “Medatrax” program.
- Log clinical cases, hours, procedures, medications administered and other required elements, within 48 hours of the clinical day.

Evaluation and Guidelines for Clinical Performance

Students are expected to:

- Demonstrate professional behavior.
- Demonstrate competencies of nurse anesthetist as outlined above
- Meet clinical course objectives.
- Arrive in the Anesthesia Department at least 1 to 1 ½ hours prior to the start of assigned cases.
- Complete a long round and a case card per clinical day. (All Clinical Courses)
- Complete Prodigy clinical review assignments, APEX workbooks and exams. (Clinical Residencies)
- Report to the clinical site coordinator prior to leaving the facility. If not available, report to the clinical instructor for that day.

- Participate in a call experience.
- ⁽⁺⁾ Have a 10 hour rest period between scheduled clinical duty periods (i.e., assigned continuous clinical hours).
- At no time may a student provide direct patient care for a period longer than 16 continuous hours.
- Not be employed as nurse anesthetists by title or function until after graduation.

Each student shall evaluate his/her own daily performance on the Daily Evaluation Form. Each day must be accounted for with an individual form. In addition, clinical performance will be evaluated daily by the clinical preceptor. The student will be afforded the opportunity to discuss the evaluation with the clinical preceptor as well as the faculty member for the clinical course. The student must make an appointment with the faculty member for the clinical course to discuss any written evaluations that contain deficiencies or issues of concern within 24 hours.

It is the student's responsibility to ensure that the Daily Evaluation Forms are submitted to the Administrative Assistant for the Nurse Anesthesia Program by 3PM Friday of the following week. Exception: for students at Lehigh Valley Clinical Site, the Daily Evaluation Forms will be mailed. A Professional Nursing Behavior Form will be filed for any student failing to submit the Daily Evaluation Forms in a timely manner.

Outside employment is strongly discouraged throughout the nurse anesthesia program.

*2004 Standards for Accreditation of Nurse Anesthesia Educational Programs

*Revised January 2018

⁽⁺⁾ Glossary: Reasonable Time Commitment

Clinical Course Evaluations

Written clinical evaluations are conducted at the end of each clinical course. The evaluations will be completed by the faculty member for the clinical course and reviewed with the student. The clinical guidelines will determine if the student has met the expected objectives for the course. Deficiencies in any of the course objectives may result in dismissal.

Supervision Guidelines for Clinical Experience

The program restricts clinical supervision of students in anesthetizing and non-anesthetizing areas to CRNAs and/or anesthesiologists with institutional staff privileges who are immediately available in clinical areas. Instruction by graduate registered nurse anesthetists or physician residents is never appropriate if they act as the sole agents responsible for the student.

The clinical supervision ratio of students to instructors must be coordinated to insure patient safety by taking into consideration the student's knowledge and ability, the physical status of the patient, the complexity of the anesthetic and/or surgical procedure, and the experience of the instructor.

Clinical Deficiencies Procedure

Clinical and/or professional deficiencies will be handled using the following methods:

1. Counseling
2. Probation
3. Dismissal

1. Counseling

At any time, the faculty member for the course will clearly inform the student of his/her deficiencies in writing. The student is required to sign the Counseling Form indicating that the student is aware of deficiency(ies) and has been provided an opportunity for explanation. Student signature does not mean that the student agrees or disagrees with the statement, rather it signifies that the information has been disseminated to the student.

The student will be counseled by the faculty. The student will be advised of the deficiency and the necessary steps to correct the problem. A written plan of action for improvement will be formulated based on the deficiencies noted and/or incident. Investigation may result in probation instead of counseling if warranted.

2. Probation

The faculty may place a student on probation or recommend dismissal from the program if an error of commission or omission jeopardizes the safety and/or welfare of the patient or is deemed to be a breach of professional behavior.

Probationary days will be determined based on the incident for a minimum of three clinical days but may not exceed 15 clinical days.

Clinical will be completed under the direction of the faculty member for the course or designee during the probationary period.

A student on probation will have a weekly performance review with the faculty member for the course. If progress at the end of the probation is satisfactory, the student will return to regular clinical status. A recommendation for dismissal may be made by the faculty member for the course if progress is not satisfactory.

A maximum of two probationary periods for two different occurrences will be allowed in the program. A probationary occurrence that has been repeated will result in recommendation for dismissal.

A student on probation may be removed from clinical at the discretion of the faculty in consultation with the program administrator and chairperson of the Department of Nursing.

3. Dismissal

Once the recommendation for dismissal has been made by the faculty member for the course, the student will not be able to participate in clinical. Recommendation for

dismissal will be sent to the nurse anesthesia program administrator and the chairperson of the Department of Nursing. The chairperson, with faculty and student input, will make a recommendation regarding dismissal to the Dean. The decision by the Dean is final. The student will be notified by letter.

Clinical Evaluation Records

Copies of correspondence about students with the Council on Accreditation (COA), end-of-semester evaluations and any supporting documentation, and a copy of the Transcript of Student Record for the National Certification Examination (NCE) submitted to the COA will be maintained in a secured area for a period of five years following graduation or program separation.

Prevention of Medication Errors Policy

If a medication error occurs, a student will receive a Professional Nursing Behavior Form, and be counseled, put on probation or recommended for dismissal from the nurse anesthesia program based on the severity of the occurrence.

All medications prepared by students must be labeled with the name, strength, date and student's initials.

Preoperative care plan should include discussion of specific dosages (ex: milligrams or micrograms not mL's) of drugs to be utilized. The student should notify the CRNA and/or MDA which drug is being administered to the patient using specific amounts (ex: milligrams or micrograms not mL's). The time and specific amount of the medication must be recorded on the Anesthesia Record.

SELF-EVALUATION EXAMINATION POLICY

The nurse anesthesia student will be required to complete the Self-Evaluation Examination (SEE) administered by the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) twice during the program - during the fourth semester at the beginning of the second year and during the final semester of the program. The SEE must be taken by October 31st during the fourth semester and by October 5th of the last semester of the program.

Students taking the SEE during the beginning of the second year are expected to achieve a score that is within 20 points of the average for 1st Year in Program in EACH of the following categories:

- Basic Sciences
- Equipment, Instrumentation, and Technology
- Basic Principles of Anesthesia
- Advanced Principles of Anesthesia

The SEE taken during the final semester of the program will serve as the comprehensive examination and the capstone experience for the nurse anesthesia program. All nurse anesthesia students are expected to achieve an overall score that is within 10 points of the average score for 2nd Year in Program on this examination. Consistent with The University of Scranton comprehensive examination policy students will be allowed to repeat the examination one time to reach the required score at their own cost. Students failing the SEE examination capstone experience twice are subject to dismissal.

*Average SEE examination scores are published by the NBCRNA in the Summary of NCE and SEE Performance and Clinical Experience Fiscal Year Data

*Average score data are obtained from the previous fiscal year (September – August)