



**Master of Science in Nursing (MSN)
Family Nursing Practice (FNP)
Program**

**Student Handbook
Fall 2020**

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WELCOME FROM THE DEAN

Welcome to Campbellsville University School of Nursing! What a tremendous accomplishment to have gained acceptance into this program! You should feel very proud of yourself. You will find your experience here to be challenging, exciting, and highly rewarding. This program will provide the balance of rigor and support needed for success in the healthcare environment by not only providing preparation in content needed for licensure examinations that you will need to pass, we do it in a supportive and relationship-centered space.

Our strong program is guided by our excellent professors. Our faculty is comprised of highly qualified professionals who bring decades of experience as practitioners in their various areas. With their knowledge, they help students make the connection from classroom learning to real-world experiences.

In addition:

CARING Your faculty cares for you and wants you to be the best nurse that you can be. To that end, we will work with you, teaching you the knowledge base and skills that are needed to be top-notch in your field. We hope that through our demonstrated caring, you will come to understand caring as an action to be extended to your fellow classmates, to your patients, to your coworkers, and to all those around you.

COMPETENCE You are being taught by nurses who are competent in both their skills as nurses and as nurse educators. You will leave Campbellsville University with the knowledge, skills, and capacity needed to make you a competent nurse who provides excellent nursing care.

COMPASSION Compassion is the act of caring enough about another's distress be compelled to take action to alleviate that distress. It is not enough *just* to care. As Christ took action when He saw need, we must take action to help those in need. This is the heart of nursing and the base component of servant leadership.

As a student in the program, there are expectations in place to guide you to successful completion of the End of Program Student Learning Outcomes (EPSLOs). Expectations such as coming to class prepared, critically thinking about what you have read, applying the knowledge to coursework and the clinical environment, and interacting with your instructors in the classroom. Visit with the instructor in their offices. Take advantage of practice labs, so you can ask questions before you must demonstrate your learning. Ask questions when expectations are not clear. Develop learning communities and get to know one another.

As a Campbellsville University student, you will establish friendships with classmates and faculty that will continue through your life. After graduation, as alumni, you become a member of a much larger Campbellsville University community with networks all over the world.

Congratulations on this milestone. Please do not hesitate to reach out to me should you have any questions. My door is always open to you!

Sincerely,

Dr. Michele Dickens, Ph.D., MSN, RN

Dean of the School of Nursing, Associate Professor

270-789-5155

FACULTY CONTACT INFORMATION

Students should contact the faculty member assigned to a respective course regarding any questions.

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SECTION I- GENERAL INFORMATION

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED:

EFFECTIVE: January 2018

SUBJECT:

CAMPBELLVILLE UNIVERSITY: HISTORY, MISSION, CORE VALUES, BAPTIST HIGHER EDUCATION VALUES

POLICY: Campbellsville University: History, Mission, Core Values, Baptist Higher Education Values

PURPOSE: A description of Campbellsville University's History, Mission Statement, Core Values and Baptist Higher Education Values

PROCEDURE:

History of Campbellsville University

Campbellsville University is located in South Central Kentucky at 1 University Drive, in Campbellsville, Kentucky. Dr. Michael V. Carter, PhD, is the president and chief executive officer of the university.

Campbellsville University is a Christian institution whose mission is focused on scholarship, leadership, and fellowship. In 1906, the Russell Creek Association of Baptists purchased 10 acres of land, which became the campus of the Russell Creek Academy. Elementary and secondary school classes were offered in September 1907, as was training for teachers. Campbellsville Junior College was established in 1924. Despite the school becoming a college, elementary and secondary school students continued to be educated there until 1941. Campbellsville College began offering a four-year higher education program in 1959. The institution achieved university status in 1996. Today a majority of the students attend classes on the 75-acre campus located in the heart of Campbellsville, Kentucky. The university also offers educational programs in such disparate locales as Louisville, Kentucky, and Recife, Brazil. Campbellsville University has eight academic divisions, each headed by a Dean of the School of Nursing who reports to the Vice President for Academic Affairs. The divisions include: the Colleges of Arts and Sciences; Carver School of Social Work & Counseling; School of Business and Economics; School of Education; School of Music; School of Nursing, School of Theology; and, the College of Graduate and Professional Studies. Campbellsville University is accredited by Southern Association of Colleges and Schools Commission on Colleges (SACSCOC).

Campbellsville University Mission Statement

Mission Statement

Campbellsville University is a comprehensive, Christian institution that offers non-credit technical programs, along with certificates, associates, undergraduate and graduate programs. The university is dedicated to academic excellence solidly grounded in the liberal arts that fosters personal growth, integrity and professional preparation within a caring environment. The university prepares students as Christian servant leaders for life-long learning, continued scholarship by using advanced research to practice at the doctoral level, and active participation in a diverse, global society.

Core Values

- To foster academic excellence through pre-professional certificates, associates, baccalaureate, and graduate programs through traditional, technical, and online systems
- To achieve academic excellence through rigor and relevancy in undergraduate, master's and doctoral level programs
- To provide an environment conducive for student success
- To value diverse perspectives within a Christ-centered community
- To model servant leadership and effective stewardship

A Statement of Baptist Higher Education Values

Campbellsville University is committed to providing a quality educational experience within the Baptist tradition and in keeping with a strong Christian emphasis. Under the Lordship of Christ, the institution affirms historic Baptist principles including: the priesthood of the believer, the authority of Scripture, freedom of conscience, integration of faith and learning, pursuit of truth in an academically challenging environment, student involvement in servant ministry, and affirmation of others in a spirit of grace and love. While the University continues to maintain very close ties to Baptist Churches and bodies, the institution exists to provide Christ-centered higher educational opportunities to a diverse student population. Campbellsville University, while Baptist in affiliation and Christ-based in practice, is neither a church nor an ecclesiastical authority. Since 1906 the institution has existed to provide higher educational opportunities to men and women in a positive and academically challenging Christian environment. In that same spirit, we affirm the challenges and opportunities of Baptist higher education in the 21st Century. **(Approved by Campbellsville University Board of Trustees on October 23, 2001)**

In compliance with *A Statement on Baptist Higher Education Values* as noted above, Campbellsville University affirms the historical religious exemption granted under the Civil Rights Act of 1964, and other applicable federal and state statutes and regulations, as a Christian university in the Baptist tradition, and to develop and implement all policies and procedures relative to employment practices and student and employee behavior to conform with this historical relationship to the Baptist church and the larger Christian community. These policies and procedures will be the basis for the mission and activities of all campus organizations and use of all Campbellsville University facilities.

As God extended His love for all human beings through his Son Jesus Christ and as an institution that affirms the “whosoever will gospel of Jesus Christ” (John 3:16), Campbellsville University extends love for mankind through a commitment to the Great Commission (Matthew 28:16-20; Acts 1:8) and in the spirit of the Great Commandment (Matthew 22:36-40). Therefore, Campbellsville University will implement the development and administration of all policies and procedures in the recognition of the diversity of God’s creation and His infinite grace toward all people.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020; August 2020

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EFFECTIVE: January 2018

SUBJECT:

STUDENT HANDBOOK PURPOSE

POLICY: Student Handbook Purpose

PURPOSE: A description of Campbellsville University's Student Handbook

PROCEDURE:

Student Handbook Purpose

The Student handbook contains information about policies, procedures, and expectations relating to the MSN FNP program. All handbooks and catalogs are accessible via the internet at www.campbellsville.edu and in the MSN FNP Student Resource Room located in the learning management system. If you have questions about the content of this handbook or the MSN FNP program, please direct all inquiries to your faculty member and/or the MSN FNP Program Coordinator.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

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EFFECTIVE: January 2018

SUBJECT:

THE NATIONAL CERTIFICATION EXAMINATION

POLICY: The National Certification Examination

PURPOSE: A description of The National Certification Examination options after successfully completing all of the MSN FNP program requirements.

PROCEDURE:

The National Certification Examination

The program prepares students to meet the educational eligibility requirements to take either of the national certification examinations. FNP certification examinations are offered by the American Academy of Nurse Practitioners (AANP) and the American Nurses Credentialing Center (ANCC). The student is responsible for all costs and fees associated with the FNP certification examination they elect to complete.

DATE: January 2020

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EFFECTIVE: January 2018

SUBJECT:

PROFESSIONAL ACCREDITATION

POLICY: Professional Accreditation

PURPOSE: A description of Campbellsville University's MSN FNP accreditation status.

PROCEDURE:

Professional Accreditation

The FNP track is scheduled for review and pending accreditation by the Accreditation Commission for Education in Nursing (ACEN) national accreditation agency recognized by the U.S. Secretary of Education and the Council on Higher Education Accreditation.

DATE: January 2020

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EFFECTIVE: January 2018

SUBJECT:

VERIFICATION OF RECEIPT OF THE MSN ONLINE STUDENT HANDBOOK

POLICY: Verification of Receipt of the MSN Online Student Handbook

PURPOSE: This statement is used to verify that all students have been in receipt of the MSN Online Student Handbook and have had all questions or concerns addressed.

PROCEDURE:

Verification of Receipt of the MSN Online Student Handbook

The MSN FNP Online Student Handbook will be distributed through the online MSN FNP Student Resource Room. Any questions or concerns that arise when reading the handbook should be submitted to a faculty member in the MSN FNP Program or to the MSN FNP Program Coordinator. Each course the student will post a statement in the designated area of the course room stating that they have read the handbook and all questions have been answered to the student's satisfaction.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: December 2018

SUBJECT:

MSN FNP PROGRAM MISSION STATEMENT, SCHOOL OF NURSING CORE VALUES, END-OF-PROGRAM STUDENT LEARNING OUTCOMES

POLICY: MSN FNP Program Mission Statement, School of Nursing Core Values, End-of-Program Student Learning Outcomes

PURPOSE: A description of the MSN FNP Program Mission Statement, School of Nursing Core Values, and End-of-Program Student Learning Outcomes

PROCEDURE:

MSN FNP Program Mission Statement

This program prepares graduates to provide quality, evidence-based, and holistic primary care to diverse communities and individuals across the lifespan. The master's prepared family nurse practitioner will contribute to excellence in health care by leading change, promoting health, and improving healthcare outcomes. This program shapes advanced practice nurses into Christian servant leaders who excel in clinical practice while supporting a strong ethical and Christian belief foundation in keeping with the mission of Campbellsville University.

School of Nursing Core Values

Competence
Caring
Compassion

MSN FNP End of Program Student Learning Outcomes (EPSLOs)

1. Assimilates scientific findings to guide advanced nursing roles. (I, IV, IX) NONPF #1
2. Integrates organizational and systems leadership principles into practice. (II, IX) NONPF #2
3. Develops quality improvement and research projects to improve health care outcomes. (III, IX) NONPF #3 and #4
4. Facilitates the provision of nursing practice by integrating informatics and technologies. (V, IX) NONPF #5
5. Analyzes local, national, and global health policies and the relationship between policy and practice. (VI, IX) NONPF #6
6. Collaborates with other health professionals using effective communication to optimize health care outcomes. (VII, IX) NONPF #7
7. Values principles of ethics in providing health care across the lifespan. (VIII, IX) NONPF #8

8. Promotes cultural and spiritual sensitivity in providing health care to a diverse population across the lifespan. (VIII, IX) NONPF #9
9. Functions as an independent practitioner using evidence-based practice to promote health and prevent and treat disease for diverse groups across the lifespan. (VIII, IX) NONPF #9

(MSN Essentials)

NONPF Core and Population-Focused Competencies

() MSN Essentials

*These objectives are based on the Core and Population-Focused Nurse Practitioner Competencies developed by the National Organization of Nurse Practitioner Faculties (NONPF) and included in the 2016 Criteria for Evaluation of Nurse Practitioner Programs written by the National Task Force on Quality Nurse Practitioner Education (NTF). This evaluation criteria is endorsed by the Accreditation Commission for Education in Nursing (ACEN).

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SUBJECT:

CAMPBELLSVILLE UNIVERSITY SCHOOL OF NURSING MASTER OF SCIENCE IN NURSING (MSN) FAMILY NURSE PRACTITIONER (FNP) PROGRAM PLAN OF STUDY

POLICY: Campbellsville University School of Nursing Master of Science in Nursing (MSN) Family Nurse Practitioner (FNP) Program Plan of Study

PURPOSE: A description of the MSN FNP Program Plan of Study

PROCEDURE:

Campbellsville University School of Nursing Master of Science in Nursing (MSN) Family Nurse Practitioner (FNP) Plan of Study

| Year One | | | | |
|------------|------------|----------|--------------|---|
| Semester | Bi-Term | Course # | Credit Hours | Course Title |
| Semester 1 | Bi-Term #1 | NUR 500 | 2 | Leadership and Role Development for Advanced Nursing Practice |
| | | NUR 504 | 3 | Healthcare Informatics and Clinical Decision Making |
| | Bi-Term #2 | NUR 506 | 4 | Theory and Research for Evidence-based Practice |
| Semester 2 | Bi-Term #1 | NUR 507 | 2 | Investigative Project |
| | | NUR 501 | 3 | Health Care Delivery and Policy |
| | Bi-Term #2 | NUR 505 | 3 | Advanced Pathophysiology |
| Semester 3 | Bi-Term #1 | NUR 508 | 2 | Health Promotion and Disease Prevention – Population Health |
| | | NUR 503 | 3 | Advanced Pharmacology |
| | Bi-Term #2 | NUR 502 | 3 | Advanced Health Assessment and Diagnostic Reasoning |

| Year Two | | | | |
|---------------------------|------------|----------|--------------|--|
| Semester | Bi-term | Course # | Credit Hours | Course Title |
| Semester 4 | Bi-Term #1 | NUR 509 | 4 | Care of Adults Across the Lifespan I. (includes 60 hrs. of clinical experience) |
| | Bi-Term #2 | NUR 510 | 3 | Care of Adults Across the Lifespan II (includes 120 hrs. of clinical experience) |
| Semester 5 | Bi-Term #1 | NUR 511 | 4 | Care of Women, Children and Adolescents I (includes 60 hrs. of clinical experience) |
| | Bi-Term #2 | NUR 512 | 3 | Care of Women, Children and Adolescents II (includes 120 hrs. of clinical experience) |
| Semester 6 | Bi-Term #1 | NUR 513 | 3 | Synthesis of Advanced Practice Care of Patients in Primary Settings – Practicum I (includes 180 hrs. of clinical experience) |
| | Bi-Term #2 | NUR 514 | 2 | Synthesis of Advanced Practice Care of Patients in Primary Setting – Practicum II (includes 120 hrs. of clinical experience) |
| | | NUR 515 | 1 | Entry into Independent Practice |
| Total Credit Hour 45 hrs. | | | | Total 660 clinical hours (60 clinical hours per 1 credit hour) |

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SUBJECT:

MSN FNP COURSE DESCRIPTIONS

POLICY: MSN FNP Course Descriptions

PURPOSE: A description of the MSN FNP Courses and the number of credit hours designated for each course

PROCEDURE:

FNP Course Descriptions

NUR 500 Leadership and Role Development for Advanced Nursing Practice (2 cr.) This course introduces the student to the history and role development of an advanced practice nurse leader in complex healthcare systems and in today's society. Core leadership competencies will be explored including direct clinical practice, negotiation, collaboration, guidance, advocacy, problem-solving, managing diversity and ethical decision making.

NUR 501 Health Care Delivery and Policy (3 cr.) This course addresses social, cultural, and political perspectives on healthcare. Course material will include policy and advocacy for improving population health, healthcare reform, and global health care delivery. Also included are issues such as availability of and access to health care, actions for dealing with health care dilemmas, federal and state regulatory programs and health care financing.

NUR 502 Advanced Health Assessment and Diagnostic Reasoning (3 cr.) This course builds upon the baccalaureate level of nursing physical assessment knowledge leading to the development of advanced skills in physical, cognitive, nutritional and functional assessments of adults and children to provide culturally sensitive health care. Diagnostic reasoning is used to interpret data obtained from the physical assessment along with incorporation of appropriate diagnostic testing to form differential diagnoses.

NUR 503 Advanced Pharmacology (3 cr.) This course provides advanced knowledge of pharmacokinetics, pharmacodynamics, and pharmacotherapeutics needed in the use of drugs for prevention of chronic illness and treatment of disease processes in individuals across the life span. Emphasis is placed on appropriate drug selection and monitoring, patient education, and potential drug interactions. Students will evaluate pharmacologic interventions with regard to efficacy, safety, cost effectiveness, legalities and ethical use.

NUR 504 Healthcare Informatics and Clinical Decision Making (3 cr.) This course focuses on the use of information technology systems in the delivery of health care. Students will focus on using new and upcoming technology for acquiring, analyzing and organizing data for use in clinical decision making and improving patient care. Topics include the foundations of informatics, information systems and applications, use of technology in evidence-based practice, and patient education and participation.

NUR 505 Advanced Pathophysiology (3 cr.) This course provides nurses with an advanced understanding of the pathologic mechanisms of diseases frequently encountered in the primary care setting across the lifespan. The content is used to support clinical assessment and decision making in

forming diagnoses and treatment plans using evidence-based research findings. Topics include cellular variations, the roles of genetics and genomics, and a systematic physiologic review of disease processes leading to appropriate pharmacologic and nursing interventions.

NUR 506 Theory and Research for Evidence-based Practice (4 cr.) This course links theory, research and practice. The students will critically analyze various multidisciplinary theoretical frameworks and how they can positively impact patient care. This course also examines the process of critically appraising scholarly research and translating this into practice. The research process of identifying problems, data collection and interpretation, and integrating findings into practice are explained.

NUR 507 Investigative Project (2 cr.) This project emphasizes utilization of theory and research to provide evidence-based care for the field of advanced practice nursing. The student will formulate a clinical question and use appropriate research methods of data collection and interpretation culminating in scholarly answers that can be applied to clinical practice to improve the quality of care.

NUR 508 Health Promotion and Disease Prevention – Population Health (2 cr.) The goal of this course is to prepare the student to plan, implement and evaluate health promotion and disease prevention interventions to diverse population groups. Topics covered will be the relationship of public health issues and social problems, considerations for safety, finances, feasibility and effectiveness, community needs assessment, and providing age appropriate primary, secondary and tertiary prevention strategies.

NUR 509 Care of Adults Across the Lifespan I (3 didactic cr. and 1 clinical cr.) Acute and chronic common health problems encountered across the adult lifespan are studied in this first of two sequential courses. Emphasis is placed on detailed history and physical examinations, forming differential diagnoses, interpreting relevant diagnostic tests and forming plans of care including pharmacologic and non-pharmacologic measures. Strategies will be based on evidence-based practice and fall within the scope of practice of a family nurse practitioner (FNP). 60 hrs. of clinical experience under the direct supervision of an approved licensed health care provider allows the student to apply critical thinking skills to the learned concepts in caring for adults and their families in a primary care setting.

NUR 510 Care of Adults Across the Lifespan II (1 didactic cr. and 2 clinical cr.) This course is a continuation of NURS 509 and expands upon the role of an FNP in caring for adults and their families. Students will further develop skills related to health promotion, prevention of illness, and diagnosis and management of common acute and chronic illnesses. 120 hrs. of practical experience with an approved licensed health care provider in a primary care setting is included in this course.

NUR 511 Care of Women, Children and Adolescents I (3 didactic cr. and 1 clinical cr.) This course focuses on the healthcare needs of children, women from child bearing age through the lifespan and their families. Emphasis is placed on age appropriate detailed history and physical examinations, interpretation of relevant data, forming differential diagnoses and creating care strategies that include patient education, treatment, and appropriate follow-up and referral. 60 hrs. of practical experience with an approved licensed health care provider in a primary care setting is included in this course.

NUR 512 Care of Women, Children and Adolescents II (2 didactic cr. and 2 clinical cr.) This course is a continuation of NURS 511 and further expands upon the knowledge base needed for care of children and women from child bearing age through the lifespan. Clinical care increases in complexity as the student directly applies learned didactic content to the actual care of patients and their families

in commonly encountered settings. 120 hrs. of clinical experience with an approved licensed health care provider in a primary care setting is included in this course.

NUR 513 Synthesis of Advanced Practice Care of Patients in Primary Settings I (3 clinical cr.) In this clinical practicum, the advanced practice nursing student will provide comprehensive care to clients and their families across the lifespan. The objective of this course is the integration of theory, knowledge, and skills from previous courses culminating in the effective, safe, culturally sensitive care of clients and their families within the scope of practice of a family nurse practitioner. This 180 hr. clinical practicum will be completed under the supervision of an approved licensed health care provider in a primary care setting.

NUR 514 Synthesis of Advanced Practice Care of Patients in Primary Settings II (2 clinical cr.) The final clinical practicum is the synthesis of all past course content and is the final bridge between formal education and independent practice of the family nurse practitioner. This 120 hr. practicum will be completed under the supervision of an approved licensed health care provider in a primary care setting.

NUR 515 Entry into Independent Practice (1 didactic cr.) This course prepares the graduate nurse practitioner for certification examinations, licensing, prescriptive practices, contract negotiations and practice management specific to their practice location.

SECTION II-ACADEMIC POLICIES AND PROCEDURES

DATE: January 2020

REVIEWED: December 2018, November 2019, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

ADMISSION DEADLINES FOR THE MSN FNP PROGRAM

POLICY: Admission Deadlines for the MSN FNP Program

PURPOSE: A description of the admission deadlines for the MSN FNP Program

PROCEDURE:

Admission Deadlines for the MSN FNP Program

Application deadline for the Fall term will be July 20th.

Application deadline for the Spring term will be December 20th.

Once the application deadline has passed, students will have approximately two weeks to submit all remaining documents. Please note that the criminal background check must be completed prior to the first day of class.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

CAMPBELLVILLE UNIVERSITY'S ONLINE COURSE ATTENDANCE POLICY

POLICY: Campbellsville University's Online Course Attendance Policy

PURPOSE: A description of Campbellsville University's Online course attendance policy.

PROCEDURE:

Campbellsville University's Online Course Attendance Policy

Rationale: To establish expectations of student performance within the MSN Program.

Policy: To be actively engaged in the online classroom and build a learning community students must interact within the classroom and with each other. When this does not occur, learning suffers and learning objectives cannot be met. Therefore the following guidelines will be followed:

Bi-term and 8-week terms: Online student must participate weekly as defined by the professor in the syllabus. After 1 week (12.5%, 1/8th of the scheduled classes) without contact the student will be issued an official warning. After the second week (25%, 1/4th of the scheduled class) without contact the student would fail the course and a WA would be recorded.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

COURSE SUBSTITUTIONS FOR TRANSFERRED CREDITS

POLICY: Course Substitutions for Transferred Credits

PURPOSE: A description of the criteria and process for submitting course substitutions for transferred credits within the MSN Program

PROCEDURE:

Course Substitutions for Transferred Credits

Campbellsville University accepts courses from other accredited colleges and universities based on course equivalency determined by the Office of Student Records. When transferring credits from other schools, the student must request an official transcript from the school(s) to be sent to the Admissions Office. Admissions will then assemble information needed from these records to determine admission to the University. The transcripts will be forwarded to the Office of Student Records to be placed in the student's permanent file.

Once accepted into the School of Nursing a student may request to transfer in graduate credit hours completed within the last seven years. Students may transfer up to a maximum of 6 hours of master's level courses when compatible with this curriculum. Only courses with grades of "B" or better are considered. For consideration of a transfer course, the student must submit the following information to the MSN FNP Program Coordinator.

1. An official transcript of courses completed
2. The course syllabus for the course you have taken previous and are seeking transfer or, if the syllabus is not available the catalog description of the course as printed on the university website or catalog
3. Provide the following information required for the University Transfer Credit form: Student name, student ID, full address and phone number.

In order for the appropriate substitution to be made for required subjects for the MSN program, a **Course Substitution Request** must be completed by the student and the Dean of the School of Nursing/Associate Dean of the School of Nursing. This form will be sent to the appropriate Dean/Chair of the department which offers that course for final approval if needed. Approval will be determined based on a satisfactory comparison of the course with the equivalent course offered at Campbellsville University. Courses must meet the scholastic standards required at Campbellsville University.

It is highly recommended that the student meet with the advisor early in the program to review needed substitutions and comply with this procedure to ensure that requirements are being met timely for graduation.

Due to the nature of the MSN program, a transfer student coming into this program must complete a minimum of 50% of their core nursing coursework at Campbellsville University.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

EVALUATION OF STUDENT PERFORMANCE IN THE MSN FNP PROGRAM

POLICY: Evaluation of Student Performance in the MSN FNP Program

PURPOSE: A description of the evaluation process of students in the MSN FNP Program

PROCEDURE:

Evaluation of Student Performance

Students will be evaluated using varied means throughout the MSN-FNP program. Faculty may elect to use exams, quizzes, discussion board communication, written homework assignment, presentations and other means to assess student progress towards outcomes.

Faculty will adopt specific rubrics that will be used in each course, so that students are being evaluated in a similar manner from one course to another. Those rubrics are listed in each course and in the syllabus for the course.

Students are evaluated on the Student Learning Outcomes that are linked to every course through the course objectives and the learning strategies devised to meet those objectives.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

FINAL GRADE CALCULATION FOR THE MSN FNP PROGRAM

POLICY: Final Grade Calculation for the MSN FNP Program

PURPOSE: A description of the process for final grade calculation and methods of evaluation for the MSN FNP Program

PROCEDURE:

Final Grade Calculation for the MSN FNP Program

Calculation of Final Grade

Student's final grades in each course of the MSN program at Campbellsville University are calculated based on one thousand possible points. Total course points will be tallied. The points will then be converted into a percentage score and the one-time rounding is applied at this point in the calculation of the final grade. When rounding, a percentage point of 0.5 or higher will round to the next whole number. A percentage of 0.4 will be dropped and the whole grade will stand as is.

Using the points achieved in the example below, the total point accumulation is 854.9. The final grade then becomes $854.9/1000$ or 85.49%. The grade is then rounded from the tenths position only and the 0.49% is dropped and the final grade is 85% which equates to a "B".

Methods of Evaluation (Hypothetical Example)

| Assessment | Opportunities | Point Value Each | Points | Percentages |
|--|----------------------|-------------------------|---------------|--------------------|
| Shadow Health Weekly Assignments | 10 | See below | 120 Points | 12% of grade |
| Introduction to Shadow Health (Mandatory) | 1 | 0 pts | 0 Points | 0% |
| Shadow Health DCE/Focused Exams | 6 | 20 pts | 120 Points | 12% of grade |
| Shadow Health Concept Labs (Mandatory) | 0 | 0 pts | 0 Points | 0 % of grade |
| Weekly Discussion Boards | 8 | 10 pts | 80 Points | 8% of grade |
| Exams (80 Questions at 2.5 points each) | 4 | 200 pts | 800 Points | 80% of grade |
| Total | | | 1000 Points | 100% |

Grade Conversion

| | |
|---|--------------|
| A | 90- |
| B | 80-89% |
| C | 70-79% |
| D | 60-69% |
| F | <u>≤</u> 59% |

Instructors will post students' grades in Moodle within one week of the assignment. Students have one week beyond posting to make an appointment with Faculty to dispute their grade.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

TESTING ENVIRONMENT FOR PROCTORED EXAMS USING REMOTE PROCTOR NOW (RPNOW)

POLICY: Testing Environment for Proctored Exams Using Remote Proctor Now (RPNow)

PURPOSE: To establish guidelines for the testing environment for proctored exams using Remote Proctor Now (RPNow) in the MSN FNP Program

PROCEDURE:

Testing Environment for Proctored Exams Using Remote Proctor Now (RPNow)

The RPNow system is a remote proctoring system that will be used with online examinations as instructed by faculty to ensure student identification and promote integrity with examinations.

- Students are required to establish identity following the procedures outlined in the RPNow instructions. These instructions are found in the student orientation room, resources room and individual course rooms (when applicable).
- Students are responsible for self-testing the functionality of the system well in advance of all Remote Proctored exams in their courses, so that any troubleshooting that is required can be accomplished. Check with your Exam Sponsor/Faculty member for available Practice Exams.

Test Environment Requirements: The online testing environment should mimic the 'in class' testing environment, and must conform to the following:

Testing Area:

- Sit at a clean desk or clean table (not on a bed or couch)
- Lighting in the room must be bright enough to be considered "daylight" quality. Overhead lighting is preferred; however, if overhead is not possible, the source of light should not be behind the student causing shadows or glares in the webcam.
- Be sure the desk or table is cleared of all other materials. This means the removal of all books, papers, notebooks, calculators, etc. Only your electronic device and ID are appropriate items to have on your workspace unless specifically permitted in posted guidelines for that particular examination.
- No writing visible on desk or on walls
- The following should not be used during your exam unless specifically allowed for that examination:
 - Excel
 - Word
 - PowerPoint
 - Textbooks
 - Websites

- Calculators
- Pen and/or Paper
- Close all other programs and/or windows on the testing computer prior to logging into the proctored test environment
- Do not have a radio or the television playing in the background
- Do not talk to anyone else--No communicating with others by any means
- The testing environment should be a private area in which you are alone in a room, no individuals shall be permitted in your testing area.

Behavior:

- Dress as if in a public setting
- You must not leave the room during the testing period at any time, unless specifically permitted in posted guidelines for that particular examination. You must not take the computer into another room to finish testing (exam must be completed in the same room the “Exam Environment View” is completed in)
- No use of headsets, ear plugs, or similar audio devices are permitted
- Do not use a phone for any reason. The only exception is to contact support or your instructor in the event of a technical issue

Policy Violation Consequences:

- If you are flagged for cheating, you will be contacted directly by Campbellsville University faculty and subject to penalties as articulated in the School Conduct Policy.
- For all other violations you may be notified by Software Secure on behalf of university faculty. This notification will be delivered by email after reviews are complete.
- The intent of these warnings is to allow you the chance to modify your behavior to comply with this policy before punitive action is required
As outlined in CU’s policy, repeat offences will be subject to review and may result in a failing grade or expulsion.

For support, please go to: <http://clientportal.softwaresecure.com>.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: December 2018

SUBJECT:

IDENTIFICATION OF ACADEMICALLY AT-RISK STUDENTS WITHIN THE MSN FNP PROGRAM

POLICY: Identification of Academically At-Risk Students within the MSN FNP Program

PURPOSE: A description of the process for identifying academically at-risk students within the MSN FNP Program

PROCEDURE:

Identification of Academically At-Risk Students

Instructors will monitor the progress of students through each class, using formative and summative means to identify learning issues. When students are unsuccessful in their clinical performance or on tests used to assess learning in the classroom, instructors will counsel these individuals to determine factors that may impact learning. These factors may include study habits, work schedules, family obligations, testing issues such as anxiety, etc. The nursing instructor will help the student to identify potential barriers to learning and will advise that student accordingly.

Campbellsville University provides counseling services that can assist the student with such issues and with striking a balance between school, work and issues as those noted above. As deemed appropriate by the instructor, the student may be referred to the Office of Counseling Services by completing a referral form and contacting this office for an appointment.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: December 2018

SUBJECT:

LATE ASSIGNMENTS

POLICY: Late Assignments

PURPOSE: A description of the process for submitting and grading late assignments in the MSN FNP Program

PROCEDURE:

Late Assignments

Students may turn in assignments that earn credit up to 48 hours late. After 48 hours assignments shall not be accepted. The following percentage reduction will occur with all late assignments:

24 hours late = 20% reduction off possible grade 48 hours

late = 30% reduction off of possible grade

Example

| | |
|-------------------------|-----------------|
| Assignment | Worth 25 points |
| Turned in 24 hours late | 5 points |
| New possible score | 20 points |

| | |
|-------------------------|-----------------|
| Assignment | Worth 25 points |
| Turned in 48 hours late | 7.5 points |
| New possible score | 17.5 |

DATE: January 2020

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REVISED: December, 2019, January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

MSN FNP COURSE PROGRESSION

POLICY: MSN FNP Program Course Progression

PURPOSE: A description of the course progression for the MSN FNP Program

PROCEDURE:

MSN FNP Course Progression

1. The student must follow the prescribed course progression listed in the program. In order to progress through the MSN Program, the student must meet certain guidelines.
2. It is preferred that the student earn a B or higher in each course. However, if a grade of “C” is earned in one course, the student will be placed on academic probation and required to complete a Plan 4 Success (P4S) as outlined below. This plan must be submitted to the Program Coordinator to be placed in the student’s file.
3. After a grade of “C” is earned in two courses, the student is ineligible for readmission and must follow the judicial process for academic appeals.

If a grade of “D” or below is earned in a course, the student will receive an academic failure and will not be eligible for readmission.

Plan 4 Success (P4S):

This document will outline the students’ plan for success moving forward in the MSN Program. The P4S is a place for the student to share strategies that they plan to implement in order to help them be successful throughout the remainder of the program.

The student should ensure that strategies are appropriate, clearly stated, and well defined. Additionally, the student should ensure their strategies facilitates the utilization of critical thinking. Also, in development of the P4S the student should reflect upon and include any relevant obstacles and/or challenges that may have contributed to academic failure, and their intended plan to overcome identified obstacles and/or challenges.

This document is the student’s opportunity to speak to faculty, through their writing, and share why they need to continue in the program and what they plan to do to be successful moving forward. Students should be realistic in the strategies that they are planning to implement.

For example:

- Monday through Friday- wake up early at 5am and study 2 hours prior to work (this time will be uninterrupted at home in my office)
- Omit Saturday shopping trip with friends until all assignments are completed for the week
- Answer all objectives for each assigned chapter by Thursday of each week

Students may choose to format the P4S in a variety of different formats- bulleted list of strategies describe strategies in a narrative format, or design or develop a chart or calendar. Faculty encourage

the students to be as creative as they would like, while also including the specified elements mentioned above.

Faculty has adopted a course order for progression that will help to guide students through the program. This order is suggested to ensure success of students based on recommendations of the accrediting body and on identified characteristics of the courses. Please see attached Curriculum Requirements and Progression.

Year 1

| Semester 1 | | | Semester 2 | | | Semester 3 | | |
|---|---|---|------------------------------------|---------------------------------|--------------------------|--|-------------------------|---|
| 1 st Bi-term | 2 nd Bi-term | | 1 st Bi-term | 2 nd Bi-Term | | 1 st Bi-term | 2 nd Bi-term | |
| NUR 500 | NUR 504 | NUR 506 | NUR 507 | NUR 501 | NUR 505 | NUR 508 | NUR 503 | NUR 502 |
| Leadership and Role Development for Advanced Nursing Practice | Healthcare Informatics and Clinical Decision Making | Theory and Research for Evidence Based Practice | Investigative Project | Health Care Delivery and Policy | Advanced Pathophysiology | Health Promotion and Disease Prevention– Population Health | Advanced Pharmacology | Advanced Health Assessment and Diagnostic Reasoning |
| 2.0 Credit Hours | 3.0 Credit Hours | 4.0 Credit Hours | 2.0 Credit Hours | 3.0 Credit Hours | 3.0 Credit Hours | 2.0 Credit Hours | 3.0 Credit Hours | 3.0 Credit Hours |
| 9 Credit Hours 0 Clinical Hours | | | 8 Credit Hours 0 Clinical Hours | | | 8 Credit Hours 0 Clinical Hours | | |

Year 2

| Semester 1 | | Semester 2 | | Semester 3 | | |
|---|--|--|---|--|--|---------------------------------|
| 1 st Bi-term | 2 nd Bi-term | 1 st Bi-term | 2 nd Bi-Term | 1 st Bi-term | 2 nd Bi-term | |
| NUR 509 | NUR 510 | NUR 511 | NUR 512 | NUR 513 | NUR 514 | NUR 515 |
| Care of Adults Across the Lifespan I. (60 hour clinical experience) | Care of Adults Across the Lifespan II (120 hour clinical experience) | Care of Women, Children and Adolescents I (includes 60 hour clinical experience) | Care of Women, Children and Adolescents II (120 hour clinical experience) | Synthesis of Advanced Practice Care of Patients in Primary Settings – Practicum I (180 hour clinical experience) | Synthesis of Advanced Practice Care of Patients in Primary Setting – Practicum II (120 hour clinical experience) | Entry into Independent Practice |
| 3.0 Credit Hours 1.0 Clinical Hour | 1.0 Credit Hour 2.0 Clinical Hours | 3.0 Credit Hours 1.0 Clinical Hour | 1.0 Credit Hour 2.0 Clinical Hours | 3.0 Clinical Hours | 2.0 Clinical Hours | 1.0 Credit Hour |
| 4 Credit Hours 3.0 Clinical Hours | | 4 Credit Hours 3 Clinical Hours | | 1 Credit Hour 5 Clinical Hours | | |

34 Didactic Hours; 11 Clinical Hours (660 clock hours) Total Program Length- 45 Hours

| Prerequisite course(s): | Must be completed prior to: |
|--|-----------------------------|
| -BSN from a regionally accredited U.S. college or university -Cumulative collegiate GPA of 3.0 or higher -Unencumbered current U.S. Registered Nurse (RN) License -2000 Patient Care Hours -Criminal Background Check -Other required documents (outlined in the student handbook policy, Admission Criteria for the MSN FNP Program) | Admission to program |
| None | NUR 500 |
| None | NUR 504 |
| None | NUR 506 |
| NUR 506 | NUR 507 |
| None | NUR 501 |
| None | NUR 505 |
| None | NUR 508 |
| None | NUR 503 |

| | |
|---|------------------|
| None | NUR 502 |
| NUR 500; NUR 501; NUR 502; NUR 503; NUR 504; NUR 505; NUR 506; NUR 507; NUR 508 | NUR 509 |
| NUR 500; NUR 501; NUR 502; NUR 503; NUR 504; NUR 505; NUR 506; NUR 507; NUR 508; NUR 509 | NUR 510 |
| NUR 500; NUR 501; NUR 502; NUR 503; NUR 504; NUR 505; NUR 506; NUR 507; NUR 508; NUR 509; NUR 510 | NUR 511 |
| NUR 500; NUR 501; NUR 502; NUR 503; NUR 504; NUR 505; NUR 506; NUR 507; NUR 508; NUR 509; NUR 510; NUR 511 | NUR 512 |
| NUR 500; NUR 501; NUR 502; NUR 503; NUR 504; NUR 505; NUR 506; NUR 507; NUR 508; NUR 509; NUR 510; NUR 511; NUR 512 | NUR 513 |
| NUR 500; NUR 501; NUR 502; NUR 503; NUR 504; NUR 505; NUR 506; NUR 507; NUR 508; NUR 509; NUR 510; NUR 511; NUR 512; NUR 513 | NUR 514; NUR 515 |

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

READMISSION TO THE MSN FNP PROGRAM

POLICY: Readmission to the MSN FNP Program

PURPOSE: A description of the process for readmission into the MSN FNP Program

PROCEDURE:

Readmission to the MSN FNP Program

After an academic failure (Grade of “D” or below) in a MSN FNP nursing course or other factors which necessitate a lapse in the program, students may wish to be considered for readmission to the Program, one time. This policy outlines the process for potential readmission to the program. Readmission to the program is not guaranteed.

After a Grade of “C” in two courses or a grade of “D” in one course, students are ineligible for readmission and must follow the judicial process for academic appeals.

If a student must withdraw from the program due to unforeseen circumstances such as illness or catastrophic event, readmission will be considered on a case-by-case basis. Criteria for consideration include the following:

1. Email the MSN FNP Program Coordinator to express interest in applying for readmission.
2. Submission of a letter for readmission addressed to the MSN FNP Program Coordinator.
3. Completion of the Plan 4 Success (P4S).
4. Readmission Interview with faculty and/or administration.
5. Compliance with current standards for admission.
6. Available space within the semester required.

**Available Space- Priority will be given to those students who are maintaining passing grades in the program or have met requirements for admission to the program, and so remain in good academic standing. In the event that more students request readmission than space allows, preference will be given to students with the highest cumulative GPA. Students will be ranked according to cumulative GPA and will be accepted from highest to lowest based on seat availability.*

Procedure for Readmission to the MSN FNP Program

To assist in student success at Campbellsville University, the faculty of the MSN FNP Program have implemented a process for readmission that is outlined below. Any student whom is unsuccessful in any course within the program must complete all components of this process in order to be considered for readmission.

1. Email MSN FNP Program Coordinator

Send an email to the MSN FNP Program Coordinator to express interest in applying for readmission. This email needs to include the students name, course number/name, instructor's name, current

semester, and a request for readmission. The MSN FNP Program Coordinator will verify receipt and schedule a readmission interview date and time.

2. Letter for Readmission

Submission of a typed letter addressed to the MSN FNP Program Coordinator. Letters requesting re-admission should contain:

1. Course and semester to which the student is requesting re-admission.
2. A clearly outlined typed Plan for Success (P4S) upon their return to the program. The plan reflects the students critical thinking by explaining and addressing their rationale for academic failure.
 - a) Identifies objective factors contributing to academic failure (external).
 - b) Identifies subjective factors contributing to academic failure (internal).
3. Factors or circumstances that contributed to academic failure. Demonstrates accountability, responsibility, ownership and has a solution.
4. Grammatically correct (spelling, logical flow, etc.). This letter must be typed, written in a professional manner, minimum of one page in length. Students should complete a spell check and ensure all errors have been corrected prior to submission.

The letter for readmission must be submitted via email to the MSN FNP Program Coordinator five business days prior to the scheduled readmission interview.

3. Plan 4 Success:

This document will outline the students' plan for success moving forward in the MSN FNP Program. The P4S is a place for the student to share strategies that they plan to implement in order to help them be successful throughout the remainder of the program.

The student should ensure that strategies are appropriate, clearly stated, and well defined. Additionally, the student should ensure their strategies facilitate the utilization of critical thinking. Also, in development of the P4S the student should reflect upon and include any relevant obstacles and/or challenges that may have contributed to academic failure, and their intended plan to overcome identified obstacles and/or challenges.

This document is the student's opportunity to speak to faculty, through their writing, and share why they need to continue in the program and what they plan to do to be successful moving forward. Students should be realistic in the strategies that they are planning to implement.

For example:

- Monday through Friday- wake up early at 5am and study 2 hours prior to work (this time will be uninterrupted at home in my office)
- Omit Saturday shopping trip with friends until all assignments are completed for the week
- Answer all objectives for each assigned chapter by Thursday of each week

Students may choose to format the P4S in a variety of different formats- bulleted list of strategies describe strategies in a narrative format, or design or develop a chart or calendar. Faculty encourage the students to be as creative as they would like, while also including the specified elements mentioned above.

The P4S must be submitted via email to the MSN FNP Program Coordinator five business days prior to the scheduled readmission interview.

4. Readmission Interview

Students will have an interview with selected faculty and/or administration via Zoom. The interview will be an opportunity for students to share about circumstances leading to their course failure, provide insight as to barriers or challenges that occurred during the semester, and to verbalize items included in their letter as well as the plan for success, should they be given the opportunity of readmission.

The student is expected to be dressed professionally (business attire) and connect to the interview session on time. The interview environment should be quiet, well lit and free of any noise or distractions. Faculty will be asking questions pertaining to information contained within the readmission rubric, letter for readmission, and P4S. Students should reference the readmission grading rubric as faculty will be scoring students based on the criteria contained within.

5. Faculty Evaluation of Student

Faculty will score the student without collaboration in an effort to maintain objectivity in scoring for each criterion. The MSN FNP Program Coordinator will tally the scores to determine an average score for the students. Students must score 80% or higher to be eligible for readmission into the MSN FNP Program.

**Available Space- Priority will be given to those students who are maintaining passing grades in the program or have met requirements for admission to the program, and so remain in good academic standing. In the event that more students request readmission than space allows, preference will be given to students with the highest cumulative GPA. Students will be ranked according to cumulative GPA and will be accepted from highest to lowest based on seat availability.*

6. Readmission Decision

Within five business days of the readmission interview, the MSN FNP Program Coordinator will communicate with the students to share the results of the readmission evaluation. This communication will take place via email. Once an offer for readmission has been extended, students will have two business days to accept their readmission offer. If a student fails to accept the readmission offer within the designated timeframe, it will be recognized that the student has forfeited their readmission opportunity, and the available seat will be offered to the next qualified student.

MSN FNP Readmission Grading Rubric

| | | | | | | | |
|--|------------------------|---------------------------|---------------------------|---------------------------|---------------------------|--------------------------------|--------------|
| Student Name: _____ | Date: ____/____/____ | | | | | Faculty Member Initials: _____ | |
| 5 Elements with Criteria | 5 | 4 | 3 | 2 | 1 | 0 | Score |
| Letter 1-Contains all requirements (Readmission Policy). 2-Reflects critical thinking a. Identifies objective factors contributing to academic failure (external). b. Identifies subjective factors contributing to academic failure (internal). 3-Demonstrates accountability, responsibility, ownership. 4-Grammatically correct (spelling, logical flow, etc.). 5-Contains Course Number/Name to which the student is requesting readmission. | All Criteria Met | 4 of 5 Criteria Met | 3 or 5 Criteria Met | 2 of 5 Criteria Met | 1 of 5 Criteria Met | None Present. | ____ / 5 |
| Professionalism 1-Clean, well groomed, with business attire. 2-Maintains a quiet, well lit, noise and distraction free environment. 3-Make-up/jewelry, minimal- meets P & P. 4-Arrives on time. 5-Exhibits pro-active behaviors r/t re-Admission procedure. | All Criteria Met | 4 of 5 Criteria Met | 3 or 5 Criteria Met | 2 of 5 Criteria Met | 1 of 5 Criteria Met | None Present. | ____ / 5 |
| Presentation Verbal Communication 1-Grammar appropriate, professional. 2-Conversation reflects P4S and letter. Non-Verbal Communication 1-Maintains appropriate eye contact. 2-Body language, tone of voice, expressions demonstrate respect. 3-Prepared for interview. | All Criteria Met | 4 of 5 Criteria Met | 3 or 5 Criteria Met | 2 of 5 Criteria Met | 1 of 5 Criteria Met | None Present. | ____ / 5 |
| Plan for Success (P4S) 1-Strategies are appropriate. 2-Strategies clearly stated and well defined. 3-Strategies demonstrate critical thinking/insight. 4-Addresses identified factors contributing to academic failure. 5-Implementation of P4S (appropriate timeframe identified) | All Criteria Met | 4 of 5 Criteria Met | 3 or 5 Criteria Met | 2 of 5 Criteria Met | 1 of 5 Criteria Met | None Present. | ____ / 5 |

| Performance History in the MSN FNP Program | All Criteria Met | 4 of 5 Criteria Met | 3 or 5 Criteria Met | 2 of 5 Criteria Met | 1 of 5 Criteria Met | None Present. | ____ / 5 |
|--|------------------------|---------------------------|---------------------------|---------------------------|---------------------------|------------------|----------|
| 1-Clinical performance and evaluation. | | | | | | | |
| 2-Organization and time management | | | | | | | |
| 3-Attendance, punctuality, work ethic. | | | | | | | |
| 4-Attention to details and planning. | | | | | | | |
| 5-Castle Branch Criterion is current (License, Insurance, Immunizations, etc.) | | | | | | | |
| Comments: | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| Re-Admit: ____ Yes ____ No | | GPA: ____ | | *Rubric Scored: ____ % | | | |

DATE: January 2020
REVIEWED: December 2018, January 2019, January 2020, August 2020
REVISED: January 2020, August 2020
EFFECTIVE: December 2018
SUBJECT:

WITHDRAWAL FROM THE MSN FNP PROGRAM
POLICY: Withdrawal from the MSN FNP Program
PURPOSE: A description of the process for withdrawing from the MSN FNP Program
PROCEDURE:
Withdrawal from the MSN FNP Program

Students in the MSN FNP Program may have to withdraw from the program for personal reasons, academic reasons, health issues, and/or other factors.

The student is encouraged to discuss possible alternatives to withdrawal with his/her faculty advisor. When no other alternative seems viable to the student, the School of Nursing follows the same policy outlined in the *Campbellsville University Student Handbook* under —Refund and Withdrawal Policy.

Please also refer to the Online Policy and Procedure Leave of Absence policy.

The student is advised that if s/he chooses to leave unofficially—that is, without approval of the Vice President of Academic Affairs and the completion of withdrawal forms, s/he forfeits all rights to any reduction in his/her account and will receive an "F" in all applicable courses. To alleviate this situation, the student must follow the guidelines as stated in the *Campbellsville University Student Handbook*. Students who have financial aid should check the *Federal Student Financial Aid Handbook* to identify policy guidelines regarding this aid.

Students in the MSN FNP Program choosing to withdraw from a course with plan to apply for readmission, will need to email the MSN FNP Program Coordinator. Students may reenter the program after discussing progression with the MSN FNP Program Coordinator. Abandoning coursework without prior approval as noted above could subject the student to a reduction in GPA that might prove insurmountable or dismissible from the program.

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

MEDICAL/MENTAL HEALTH/PERSONAL LEAVE OF ABSENCE FROM THE MSN FNP PROGRAM

POLICY: Medical/Mental Health/Personal Leave of Absence from the MSN FNP Program

PURPOSE: A description of the process from taking a medical/mental health/personal leave of absence from the MSN FNP Program

PROCEDURE:

Medical/Mental Health/Personal Leave of Absence

A student may request a leave of absence from the MSN Program due to a medical or mental health issue which impacts the student's ability to participate in the program. The request for the leave of absence must be submitted in writing by the student to the MSN FNP Program Coordinator and shall include a written certification from an appropriate and qualified health care provider stating (1) the basis for the leave of absence; and (2) the time period during which the student will be unable to participate in the program due to the medical or mental health issue. Students must cooperate fully with the University and provide all requested documentation and information so that the University can make a timely and informed decision regarding whether to grant the student's request for a leave of absence from the program.

The Dean of the School of Nursing/Associate Dean of the School of Nursing, along with the Program Coordinator, Clinical Coordinator and faculty are responsible for reviewing the student requests for leaves of absence and determining whether such requests shall be granted or denied.

If the student's request for a leave of absence is granted, the student will be eligible for readmission to the program under the following conditions:

- The student must request readmission into the program in writing to the Academic Standards Committee.
- The student must provide written documentation from an appropriate and qualified health care provider stating that the student is cleared to return to the program.
- A determination is made by the University that there is space availability for the student to reenter the program in the requested semester. If space for students is limited, preference will be given to the student with the highest course average and demonstrated satisfactory clinical performance at the time of the leave of absence.

The Dean of the School of Nursing/Associate Dean of the School of Nursing, along with the Program Coordinator, Clinical Coordinator and faculty, may establish conditions for readmission to the program, including but not limited to, any of the following:

- Mandatory Study Hours
- Mandatory Plan for Success
- Compliance with initial admission requirements

Students will be required to sign a written agreement acknowledging their expressed agreement to the conditions of readmission. Failure to comply with these conditions will result in the student's forfeiture of readmission to the MSN FNP Program.

All students are subject to the guidelines set forth in the MSN FNP Program's Progression Policy and Readmission Policy, which allow readmission to the program a single time during the student's participation in the program.

DATE: January 2020

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EFFECTIVE: December 2018

SUBJECT:

MSN FNP GRADUATION REQUIREMENTS

POLICY: MSN FNP Graduation Requirements

PURPOSE: A description of the graduation requirements for the MSN FNP Program

PROCEDURE:

MSN FNP Graduation Requirements

In order to fulfill the requirements for MSN graduation, the student must comply with the following:

- Successful completion of 45 credit hours in the MSN FNP Program as outlined in the curriculum plan
- Satisfactory completion of End of Program Student Learning Outcomes as evidenced by acceptable completion of coursework
- Payment of all applicable tuition and fees

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: December 2018

SUBJECT:

MSN FNP WEEKLY DEVOTIONAL

POLICY: MSN FNP Weekly Devotionals

PURPOSE: A description of weekly devotionals in the online courses within the MSN FNP Program

PROCEDURE:

MSN FNP Weekly Devotionals

In an effort to uphold the mission of the University and the MSN program, one day per week a Christian Devotional shall be delivered in the course room.

- The instructor of the course may allow students to participate but shall not require it.
- In the event that students participate in the weekly devotional, the instructor shall have the lead role.
- The weekly devotional should consist of at least five minutes.
- Online courses will have one or more required threads directly related to Christian principles or Christian Servant Leadership.
- Relevant readings from the Bible and/or Christian Devotionals are acceptable means for delivering the weekly devotional.

SECTION III- STUDENT SERVICES

DATE: January 2020

REVIEWED: December 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: December 2018

SUBJECT:

TECHNOLOGY REQUIREMENTS

POLICY: Technology Requirements

PURPOSE: A description of the technology requirements for the MSN FNP Program

PROCEDURE:

Technology Requirements

As a distance learning program, CU relies on technology, which is why it is so important for students to have the right equipment to ensure their success. CU requires that all students own a laptop, a mobile device, and have a reliable Broadband internet connection. Although it is suggested that students obtain the highest quality products available to them, the following are the minimum technology requirements for the program:

Scanning Requirement:

Due to the nature of distance learning it is often necessary for students to submit signed documents, hand-written pages, or a digital copy of a paper certificate. In order to accommodate these needs the University recommends that each student either 1) become proficient in the use of a digital camera (the one in a current iPhone is acceptable) to appropriately digitize paper documents or 2) have ready access to a digital scanner for digitization. A scanner or printer with an integrated scanner may offer a better quality and an easier to implement solution than trying to utilize a camera as a scanner. In either case, the resulting file must be completely legible, submitted as a low to medium resolution JPG file, and typically smaller than 1MB per page.

| Platform | Information |
|----------------------------|---|
| Operating System: | Windows Vista, 7, 8, 10 Mac OS X 10.6 or higher |
| Browser: | Internet Explorer 9, Firefox 14, Google Chrome 20, Safari 5, Opera 9 |
| Internet Access: | Wi-Fi, Cable, DSL, Dial-Up (may have slow load times) |
| PDF Viewing: | Adobe Acrobat Reader, MacOS Preview, Browser Extensions |
| Browser Plug-in Extension: | Adobe Flash Player |

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

STUDENT SERVICES FOR DISTANCE EDUCATION STUDENTS

POLICY: Student Services for Distance Education Students

PURPOSE: To ensure that students in distance education courses have the same accessibility to student services as those who are attending classes on campus

PROCEDURE:

Student Services for Distance Education Students

Students will be oriented to the methods to access services that are available to the online community and will have written information related to services as outlined in this handbook. Advisors will deliver this information to students via the *Campbellsville University MSN FNP Program Student Handbook* with additional information regarding these services can be located in the *Campbellsville University Student Handbook*. Students may contact these services directly or may ask their advisor for assistance with accessing needed services.

See listing of services on the following pages. Please see listings for:

Academic Support Services

Business Office Services

Bookstore

Email Communications

Financial Aid Services

Learning Management System: Moodle

Library Services

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

BADGETT ACADEMIC SUPPORT CENTER: ACCESSIBILITY FOR ONLINE STUDENTS

POLICY: Badgett Academic Support Center: Accessibility for Online Students

PURPOSE: To provide online students with the process for obtaining academic support services through the Badgett Academic Support Center

PROCEDURE:

Badgett Academic Support Center: Accessibility for Online Students

Online students have academic support resources available to them in the distance setting. Students can access these services by contacting the Badgett Academic Support Center directly by phone or by online request for services. Beginning in the fall, 2013, the BASC began sponsoring online tutoring services for students enrolled in distance education courses at Campbellsville University. Students should contact the center by one of the methods below:

- 1) Call (270) 789-5195 to sign up for tutoring sessions, or
- 2) Go to www.campbellsville.edu, click on “Academics” then “Academic Affairs” then “Tutoring and Writing Center”.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

CAMPBELLVILLE UNIVERSITY BOOKSTORE: ACCESSIBILITY FOR ONLINE STUDENTS

POLICY: Campbellsville University Bookstore: Accessibility for Online Students

PURPOSE: To provide online students with the process for ordering books through Barnes and Noble on the Campbellsville University campus. Students can order and have the books shipped to them either through use of a credit or debit card or through designated authorization from financial aid if the student qualifies for such aid. Students can access the Bookstore from the Quick Links button on the Campbellsville University website and from the Moodle homepage.

PROCEDURE:

Campbellsville University Bookstore: Accessibility for Online Students

Students can use the online ordering system offered through Barnes and Noble on the CU website. The Bookstore can ship textbooks and other needed supplies to the student's home address if the student chooses this option. Payment can be processed (1) through a debit or credit card in the online order system or (2) through authorization from financial aid, when the student qualifies for such aid.

(1) **Paying with a debit/credit card**—After enrolling for courses and identifying the course specific information, the student can go to the bookstore link on the Campbellsville University homepage. At this location, the student can follow the prompts and utilize the dropdown boxes to identify: the term, the department, the course, and the section for each course. This will look as noted below:

For NUR 500-01 Leadership and Role Development for Advance Nursing Practice the student would enter:

| | | | |
|-----------|-----|-----|----|
| Fall 2019 | NUR | 500 | 01 |
|-----------|-----|-----|----|

The student will then click "GO." The next page offers the option to enter multiple courses. Student may enter all courses for that given term. Click "Find materials for course(s)." This will take the student to a page, which lists course requirements and a price range for each. By clicking on the price range, students will receive a menu listing the formats in which this text is available and will have the option to choose the format and price that is suitable to his needs. The student will then be prompted to add this item to the cart. The student will be given information about availability and other options if indicated. After finalizing the selection process, the student will be taken to "Checkout" where he can enter his payment and shipping information. The student can either establish an account or use the guest

checkout. If the student opts to do so, he may pick up his selection(s) at the bookstore or may pay to have items shipped to his home.

(2) Ordering with financial aid—Students who qualify for financial aid resources can use the bookstore site to identify textbook needs. These students will email their order to books@campbellsville.edu. Send a detailed email including **name**, **student ID number**, **shipping address**, and **phone number** with a **listing of courses**. (It is not necessary to list the textbooks; these will be identified by the bookstore from lists provided by faculty.) Financial aid will provide verification of the student's eligibility for such resources. The student will receive a confirmation email and the books will be shipped within one to two days depending on availability. Shipping charges will be applied to the order.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

CAMPBELLSVILLE UNIVERSITY BUSINESS OFFICE: ACCESSIBILITY FOR ONLINE STUDENTS

POLICY: Campbellsville University Business Office: Accessibility for Online Students

PURPOSE: To provide online students with access to Business Office services.

PROCEDURE:

Campbellsville University Business Office: Accessibility for Online Students

The Business Office at Campbellsville University is available Monday through Friday from 8:00 a.m. to 5:00 p.m., excluding university holidays. Someone is available during these hours to discuss student accounts and to assist students with setting up payment schedules and other mechanisms.

Students may contact:

The Business office at (270) 789-5203 for additional information about payment plans.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

EMAIL COMMUNICATION: ACCESSIBILITY FOR ONLINE STUDENTS

POLICY: Email Communication: Accessibility for Online Students

PURPOSE: Students enrolled in distance education course must use their student email accounts when communicating with faculty and staff at Campbellsville University. This system helps to ensure that official communications are sent only to the student. It is important that students never share login information for email accounts to ensure privacy and confidentiality in communications.

PROCEDURE:

Email Communications: Accessibility for Online Students

Upon registering for courses at Campbellsville University for the first time, the student will receive an email directing them to set up his university email account. The following information will be addressed to the student:

SET-UP EMAIL ACCOUNT: Once you have registered for your courses, you can set up your Campbellsville University email account. Follow the steps below:

1. Go to www.campbellsville.edu
2. Click on TigerNet link towards the top of the page
3. Enter your student ID number and your pin; click Login
4. Click on the Home tab
5. On the left side of the welcome page you will see several bullets – Click on Student Email Account Information line. Repeat on the next page.
6. On the window telling you “Your Report Has Been Generated” click the link to view your report.
7. Follow all steps and a .pdf document will pop up containing your login information and directions on how and where to set up your email account. If the .pdf document happens to be blank, you will have to contact Information Technology (270-789-5012), so they can generate your login information.
8. Note:

- Your student email account will be auto-generated at approximately 7:00 a.m. on the morning after you enter courses in TigerNet for the first time. Please allow for this process to complete before you contact IT for assistance.
- If the .pdf document is blank, you will have to contact Information Technology (270-789-5012) for assistance. When contacting IT please be prepared to give your Student ID Number and a contact number where you can be reached.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

USE OF EMAIL AS OFFICIAL CORRESPONDENCE WITH STUDENTS

POLICY: Use of Email as Official Correspondence with Students

PURPOSE: A description of the process for using email as the official correspondence within the MSN FNP Program

PROCEDURE:

Use of Email as Official Correspondence with Students

Campbellsville University provides each student with his/her own email account at the time of enrollment. This email serves as the official correspondence between Faculty and Students.

It is the responsibility of the student to check his/her account twice daily and to utilize the account for correspondence with Faculty and Staff. The Faculty and Staff will neither recognize nor respond to any email received from any other account.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

FINANCIAL AID SERVICES: ACCESSIBILITY FOR ONLINE STUDENTS

POLICY: Financial Aid Services: Accessibility for Online Students

PURPOSE: Students enrolled in distance education courses may require assistance of the Financial Aid Office. Information is available about potential sources of financing for school related expenses.

PROCEDURE:

Financial Aid Services: Accessibility for Online Students

The Office of Financial Aid at Campbellsville University is available to students Monday through Friday 8:00 a.m. to 5:00 p.m., excluding university holidays. Distance Education students have a financial aid counselor assigned who will help them to file the FAFSA and will inform them about potential sources of financial aid. For additional information, contact

Contact the Financial Aid Department at (270) 789-5354.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

LIBRARY SERVICES: ACCESSIBILITY FOR ONLINE STUDENTS

POLICY: Library Services: Accessibility for Online Students

PURPOSE: Students enrolled in distance education courses for the MSN Program will have need for access to library resources. Montgomery Library provides resources for the online student to ensure adequate accessibility to these services.

PROCEDURE:

Library Services: Accessibility for Online Students

Student can access much needed resources by going to the Campbellsville University website and utilizing digital resources. Off-campus patrons can access the library's databases through our proxy server. The proxy server is password protected, but the password is available to students, staff, and faculty through the library tab in TigerNet and on the library resources page on the Moodle platform provided by Learning House for all of Campbellsville University's online programs.

Access library resources by the following steps:

1. Log-in to the Campbellsville University **Tigernet** account.
2. Enter your student ID and PIN (Personal Identification Number).
3. Click on the **Library** tab found at the top of the page.
4. Click on the icon **Library Username and Password** found on the far-left side of the page.
5. Library Username and Password for the current academic year can be found in **bold red letters**.
6. Now return to the Montgomery Library webpage at www.campbellsville.edu/library and click on **Databases A-Z**, then **Off-campus Access** to enter the username and password. After entering them, be sure to click **Submit**.

Database tutorials for some commonly used databases can also be accessed from your TigerNet's Library page.

Students can also access media through the **Interlibrary Loan** system (ILL). Follow these steps listed below. ILL is a service that allows borrowing of materials from other libraries. This gives you access to materials that the Montgomery Library does not own, such as articles from our databases that do not contain the full text.

1. Download an Interlibrary Loan Request Form using this link: [ILLForm.pdf](#)
2. Fill it out as completely as you can

3. Turn in the form to the Library main desk, or Regina Thompson. Because we require a signature for our records, we do not allow ILL requests by phone or by e-mail. However, you can fax it in to 270-789-5363.

You will receive a call when your request comes in, so be sure to provide contact information!

POLICY QUESTIONS & ANSWERS

Who is allowed to place an ILL request?

- Only current Faculty, Staff and Students

What about Alumni or Community Borrowers?

- You'll need to borrow from the Taylor County Public Library. Don't worry! They handle ILL all the time, including borrowing from us! We can help you out with getting proper citation information, but the request must go through Taylor County Public Library.

When will I get my requests?

- The official answer is "allow 2 weeks", but requests can come in earlier or later. To a great extent, it depends on the workload of the *lending* library.

Is it free?

- Often it will be free, but there sometimes can be charges. Here's how we determine charges:
- We pass on *all* charges from the *lending* library. We have reciprocal borrowing with some libraries -- we don't charge them, and they don't charge us. If the library is out of our region, we may have to pay a fee just for borrowing. Occasionally the lending library will bill us for their postage in sending the item to us.
- Each semester, we give you a certain number of requests free of any Montgomery Library charges, even though we pay for quite a lot. We pay for postage to return items to the lending library, fees to use the automated ILL network, and fees for search time. Once you exceed your free requests, we usually have to start charging you for our postage at least. Here is the number of free requests by patron type:

Faculty/Staff: Ten books and ten journal articles per semester

Graduate Students: Eight books and twelve journal articles per semester.

Undergraduate students: Five books and six journal articles per semester

What problems could come up?

- **Copyright rules on single journal titles:** Copyright guidelines are structured to encourage subscription or purchase of titles that are used repeatedly. Most institutions will only fill three articles from the same journal title. So if you are very dependent on one specialized journal, or want to see a whole "special issue", you can run out of allowable requests very quickly. You may need to investigate the purchase of back journal issues, or subscription.
- **Recent publications dates:** Many libraries don't lend items that are less than one-year old; although, we always ask anyway!

- **Dissertations:** Most libraries don't lend dissertations. While we can try, most dissertations are usually *purchased* through [UMI Dissertation Publishing](#). They typically cost about \$40 and come shrink-wrapped, delivered to you directly.

If the student has further questions related to accessibility of library resources, they can contact the Circulation Desk at 270-789-5024.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

LEARNING MANAGEMENT SYSTEM: ACCESSIBILITY FOR ONLINE STUDENTS

POLICY: Learning Management System: Accessibility for Online Students

PURPOSE: Students must utilize the Learning Management System to access course information and to interact in the online classroom. Some students may require additional information regarding the use of this medium and are directed to the Moodle Student Tutorials to prepare for coursework.

PROCEDURE:

Learning Management System: Accessibility for Online Students

The learning management system used by Campbellsville University School of Nursing is *Learning House* with their *Moodle* system. Students have access to a tutorial that will teach them the basics of using this system by going to <http://cu.learninghouse.com/> or <http://online.campbellsville.edu/>. Here students can click on Moodle Student Tutorial, which will guide them to the tutorial information. Moodle also provides a Help Center that is available 24 hours/day, seven days/week. Information related to the Help Center is available at the same site. Students can also access individual help in specific areas of concern by clicking on “Getting Started” on this page. Also found on this page are connections to the virtual library system and the bookstore.

Beginning in the fall of 2015, students will be enrolled in CU 99- Online Orientation, when they enroll in courses. This course is a four module, self-paced course that covers a variety of technology related topics, including the student email accounts, the online learning environment, and the student information system. The content of this course is based on the topics our students frequently request help with and provides a reference students will always have access to, in addition to the 24-hr. support offered through The Learning House.

Students are encouraged to go to this website and familiarize themselves with the materials found there prior to the beginning of course work. If students have questions about accessibility and use of the learning management system, they should contact the instructor for the assigned course prior to the class start date and get help so that they can be ready to start with the rest of the class.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

DISABILITY SERVICES

POLICY: Disability Services

PURPOSE: Students may suffer from disabilities, which may require special accommodations in order to participate in classroom activities. Campbellsville University makes reasonable accommodations as noted in the policy below.

PROCEDURE:

Disability Services

Campbellsville University is committed to reasonable accommodations for students who have documented physical and learning disabilities, as well as medical and emotional conditions. The School of Nursing abides by the University policy and follows the same procedure as outlined in the *Campbellsville University Student Handbook*, which is in compliance with the Rehabilitation and Americans with Disabilities Act.

Students must obtain documentation of the disability or condition to establish eligibility for disability services. Documentation must be from a licensed professional and current in terms of assessment (within the last 3 years). This documentation should be taken to the Coordinator of Disability Services. The Coordinator will then send verification of needed accommodations to the Dean of the School of Nursing. Information regarding a student's disability is considered confidential and will not be released to anyone without written permission of the student. However, if the student does not give permission to notify faculty, the University will not be able to provide accommodations.

Student may contact the Coordinator of Disability Services at (270) 789-5192.

SECTION IV- STUDENT AND FACULTY EXPECTATION POLICIES

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

FACULTY ACCESSIBILITY

POLICY: Faculty Accessibility

PURPOSE: To ensure that students have reasonable access to faculty in the online setting.

PROCEDURE:

Faculty Accessibility

In an online setting, office hours are managed somewhat differently than in the face-to-face setting. Faculty will arrange office hours in the online setting that may be a specific time when students can access the faculty member either in the chat room of the learning management system (Moodle) or by phone.

Students can have access to faculty at any given hour through email. Students can expect a response to their email communications within twenty-four hours, except on weekends and holidays, when the response time may be up to 48 hours.

Some of the faculty members in the online program at Campbellsville University School of Nursing are fulltime employees of the University and maintain office hours at the Bennett-Smith Nursing Building on main campus. These hours will be posted in their Faculty Profile and in the syllabus for their classes. Students may also make appointments to meet with faculty to ensure availability.

Telephone communications can sometimes be an alternative solution to discuss any questions or concerns that students may have. Faculty phone numbers are listed in the Faculty Profile, in the University's phone directory online, and in the syllabus for each course. If additional interaction is required for the distance student, faculty and student can arrange for time in the chat room in the learning management system (Moodle).

Students are encouraged to maintain open communication with all faculty members. Faculty will be interacting through discussion boards and other means throughout the course. Students should become familiar with the instructors and establish regular communication, so that when a need arises, communication will already be in place and contact will be seamless.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

METHODS OF EVALUATION OF STUDENT PERFORMANCE

POLICY: Evaluation of Student Performance

PURPOSE: To ensure that there are a variety of quantitative and qualitative assessments of student performance.

PROCEDURE:

Evaluation of Student Performance

Students will be evaluated using varied means throughout the MSN Program. Faculty may elect to use exams, quizzes, discussion board communications, written homework assignments, presentations and other means to assess student progress toward outcomes.

Faculty will adopt specific rubrics that will be used in each course, so that students are being evaluated in a similar manner from one course to another. Those rubrics are listed in each course and in the syllabus for the course.

Students are evaluated on the End of Program Student Learning Outcomes that are linked to every course through the course objectives and the learning strategies devised to meet those objectives.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

APA REQUIREMENTS

POLICY: APA Requirements

PURPOSE: In preparation for further pursuits in higher education, the faculty adopts the APA format which is currently acceptable style for formal writings in nursing education.

PROCEDURE:

APA Requirements

All formal writing assignments for the MSN FNP Program will use APA format. Students can receive assistance in following this format by contacting their instructors or using the following resources:

- American Psychological Association. 2020. *Publication Manual of the American Psychological Association*, 7th ed. American Psychological Association.
- APA Style Tutorial can be accessed at: <https://apastyle.apa.org/blog/basics-7e-tutorial>
- Purdue Online Writing Lab: <http://owl.english.purdue.edu/owl/resource/560/01/>

Effective January 1, 2020, APA will now be graded through a deduction of points for errors and omissions within formal papers written in the MSN FNP Program. Faculty has determined that students should be able to receive all points for content and thought processes independent of the APA formatting; but after that determination, points will be deducted from the total score attained on the paper for mechanical errors such as spelling, grammar, and APA formatting throughout the document.

Each formal paper within the program is evaluated using a rubric. The rubric will now reflect 100% of the grade assigned to content and thought processes demonstrated in the paper. Then, up to 30% of the final grade for each paper may be deducted for errors, based on the evaluation rubric for the paper.

Faculty has provided a checklist for students, so that they can be fully aware of the items which will be assessed in each paper. By following this checklist, students can avoid the loss of points related to APA errors and omissions. Please see the attached checklist to follow this policy.

Campbellsville University School of Nursing
Exemplar: APA Checklist for APA Manual 7th ed.
Student Paper Guidelines

Students should use this checklist as a means of identifying and eliminating APA errors or omissions from the paper before submitting for a grade.

Please note that after the content of written assignments are graded then a similar rubric to the one shown below will be used to evaluate the APA requirements of the assignment. Up to 30% of the total points for the assignment can be deducted for errors in APA. The rubric shown below is based on a 50-point assignment. Students are advised and recommended to use the APA Checklist prior to submission of any written work.

Sample Rubric

| <i>If the assignment is worth 50 pts.</i> | A | B | C | D | F |
|---|---|---|--|---|---|
| Deducted for APA Errors or Omissions | -0 | -4 for each of the following | -8 for each of the following | -12 for each of the following | -15 for each of the following |
| <i>Grammar and spelling are correct and acceptable.</i> | 0-2 grammatical and/or spelling errors noted. | 3-5 grammatical and/or spelling errors noted. | 6-10 grammatical and/or spelling errors noted. | 11-20 grammatical and/or spelling errors noted. | >20 grammatical and/or spelling errors noted. |
| APA format is correct and acceptable according to the APA Checklist items (Exemplar). | All items are met from Exemplar | <u>One</u> of the items in Exemplar is missing or listed incorrectly. | <u>2-3</u> items in Exemplar are missing or listed incorrectly | <u>4-5</u> items in Exemplar are missing or listed incorrectly. | <u>>5</u> items in Exemplar are missing or listed incorrectly. |

Campbellsville University School of Nursing
Exemplar: APA Checklist for APA Manual 7th ed.
Student Paper Guidelines

Students should use this checklist as a means of identifying and eliminating APA errors or omissions from the paper before submitting for a grade.

| Title Page (APA Manual, 7th ed., Page 31-37) | |
|--|--|
| <input type="checkbox"/> | No running head The running head is no longer required for student papers, unless requested by instructor. |
| <input type="checkbox"/> | Page numbers Page number “1” is flush right, top of page. Use the “insert page number” feature in Word (from the “insert” ribbon) to input the page number on the title page with a right-justified tab at the far right margin. |
| <input type="checkbox"/> | Title: Focused and succinct, include essential terms Title case: first letter of first and any major words capitalized (four letters or greater), double spaced, and centered in the upper half of the page (3-4 lines down from the top margin). Times New Roman 12 pt. font, bold: no use of italics, underlining, abbreviations, or abnormal font size. If title is longer than one line, the main title and subtitle can be separated on double-spaced lines. (Note: title also appears at the top of the first page of text.) |
| <input type="checkbox"/> | Author/Student name Name is double spaced under the title. It is not bold, underlined, or an abnormal font, and does not include credentials. |
| <input type="checkbox"/> | Institutional affiliation The institutional affiliation is double spaced under student’s name. It is not bold, underlined, abbreviated, or an abnormal font. (Example-- School of Nursing: Campbellsville University) |
| <input type="checkbox"/> | Name of the Course The course number and course name are double-spaced under the institutional affiliation. (Example-- NUR 370-01: Community Health Nursing I) |
| <input type="checkbox"/> | Instructor Name of Instructor with appropriate prefix is double-spaced under name of course. (Example—Dr. Beverly Rowland) |
| <input type="checkbox"/> | Due Date The date that the paper is due in the course syllabus/Moodle assignment date is double-spaced under instructor name. (Example—October 8, 2020) |

General Formatting (APA Manual, 7th ed., p. 43-46)

| | |
|--------------------------|--|
| <input type="checkbox"/> | Order of Pages The order sequence of the paper is: (Use page breaks to ensure separation of different parts of the paper) <ul style="list-style-type: none">• Title Page• Abstract (if required, start on new page after title page, with no indentation)• Text (start on new page after abstract or title page)• References (start on new page after the text)• Tables (start on new page after the body of the text)• Figures (start on new page after the tables)• Appendices (start on new page after the figures) |
| <input type="checkbox"/> | Page numbers Use automatic page-numbering to insert page numbers in the top, right-hand corner of pages. |
| <input type="checkbox"/> | Font Preferred font for all nursing papers is Times New Roman, 12-pt. |
| <input type="checkbox"/> | Special Characters Special characters, when used, should be typed in using special characters functions of word-processing program. |
| <input type="checkbox"/> | Spacing Entire document is double-spaced only; do not add extra lines before or after headings, even if the heading falls at the end of a page. |
| <input type="checkbox"/> | Margins Margins are 1 inch on all sides, top, and bottom. |
| <input type="checkbox"/> | Paragraph Alignment Align all text to the left, leaving the right margin uneven, do not manually divide words at the end of a line and do not use the hyphenation function to break words at the end of a line. Only one space is now used between sentences. |
| <input type="checkbox"/> | Paragraph Indentation Indent the first line of every paragraph 0.5 in., with all other lines left-justified. For consistency, use the paragraph formatting function of the word-processing program. |
| <input type="checkbox"/> | Heading levels are consistent with APA 7 th ed. heading style (see page 62 of the APA Manual) if headings are used. I have included level one and two headings in my paper if headings are used. |
| <input type="checkbox"/> | Paper Length The length of student papers is determined by the assignment guidelines. If a paper exceeds the target length, shorten it by stating points concisely and eliminating repetition. |

Organization (APA Manual, 7th ed., p. 47-49)

☐ Introduction

The title serves as the heading for this section of the paper, and the first paragraphs of the paper are understood to be introductory. Do not use a separate heading for the introduction. If sections are used within the introduction, those sections would have Level 2 headings, as noted in Heading Levels below:

☐ Heading Levels

There are five possible heading levels, but the length and complexity of the paper determine how many headings are needed. Typically, three levels are used:

| Level | Format |
|-------|---|
| 1 | Centered, Bold, Title Case Heading Text begins as a new paragraph. |
| 2 | Flush Left, Bold, Title Case Heading Text begins as a new paragraph. |
| 3 | <i>Flush Left, Bold, Italic, Title Case Heading</i> Text begins as a new paragraph. |

If additional headings are used, please refer to page 48 in the APA Manual for guidance.

Mechanics of Style (APA Manual, 7th ed., p. 111-127, 153-191)

☐ Pronouns

☐ Use “third-person” vs. “first-person,” when writing a formal paper. Seventh edition now allows use of “first-person” (I, we, etc.) when describing the work that you did as a part of your research and when expressing your own views. Do not use “we” if you do not have coauthors.

☐ Do not use “we” to refer to people in general. (Called the editorial “we.”)

☐ May now use a singular form of “they” to refer to someone whose gender is not known or is irrelevant to the context of the usage. Example given:
“Each participant turned in their questionnaire.” (As opposed to saying, “his or her” questionnaire.)
Do not use “he” or “she” alone as a generic third-person pronoun—either match the gender of the person being described or use “they.”

☐ Use proper form of “who” or “whom” according to rules noted on page 122.

☐ Punctuation

| | |
|--------------------------|---|
| <input type="checkbox"/> | <p>Insert one space after the following:</p> <ul style="list-style-type: none"> • Periods or other punctuation marks at the end of a sentence • Commas, colons, semicolons • Periods that separate parts of a reference list entry • Periods following initials in names <p>Do not insert a space in the following cases:</p> <ul style="list-style-type: none"> • After internal periods in abbreviations (a.m., i.e., U.S.) • After periods in identity-concealing labels for study participants (E.I.M.) • Around colons in ratios (1:4) |
| <input type="checkbox"/> | <p>Spelling</p> <p>Spelling should conform to the <i>Merriam Webster.com Dictionary</i>. Utilize spell check within the word processing program to check spelling within the document. Read the paper carefully to catch any typos, left out words, punctuation issues, etc.</p> |
| <input type="checkbox"/> | <p>Contractions</p> <p>Do not use contractions—shortened forms of one or two words with apostrophes used in place of missing letters.</p> |
| <input type="checkbox"/> | <p>Slang</p> <p>Do not use slang or colloquialisms—informal expressions used in everyday speech or writing. Use precise scholarly language.</p> |
| <input type="checkbox"/> | <p>Numbers (Pages 178-181)</p> <p>Numbers that should be expressed in numerals:</p> <ul style="list-style-type: none"> • Numbers 10 and above (200 participants, 10th grade students, 105 stimulus words) • Numbers that immediately precede a unit of measurement (5 mg, 10.5 cm) • Numbers that represent statistical/mathematical functions, fractional or decimal quantities, percentages, ratios, percentiles or quartiles. (5%, 5th percentile, ratio of 16:1, 0.33 of the sample) • Numbers that represent time, dates, ages, scores and points on a scale, sums of money, and numerals as numerals (5 days, 8 months, 2 years old, 1 hr 34 min, ages 65-70 years) • Numbers that denote a specific place in a numbered series and parts of books and tables (Year 1, Grade 4, Item 5, Table 2, Figure 5, Chapter 1) |
| <input type="checkbox"/> | <p>Numbers that should be expressed in words:</p> <ul style="list-style-type: none"> • Zero through nine (except as described above) • Any numbers that begin a sentence, title or heading (when possible reword the sentence to avoid beginning with a number) • Common fractions (one fifth of the class, two-thirds majority) • Universally accepted usage (Twelve Apostles, Five Pillars of Islam) |
| | <p>Combination of words/numerals: Use a combination of numerals and words to express back-to-back numerical modifiers</p> |

| | |
|---|---|
| <input type="checkbox"/> | (2 two-way interactions, ten 7-point scales) |
| <input type="checkbox"/> | Decimals Use a zero before the decimal point in numbers that are less than one, when the statistic can exceed 1 ($t(20) = 0.86$, $F(1, 27) = 0.57$, 0.48 cm) |
| <input type="checkbox"/> | Roman Numerals If Roman numerals are part of the established terminology, do not change them to Arabic numerals ("Type II error," not "Type 2 error") |
| In-Text Citations (APA Manual, 7th ed., p. 253-278) | |
| <input type="checkbox"/> | Each source cited in text must also appear in the reference list. |
| <input type="checkbox"/> | All citations must have two parts: (Author, date), or in the narrative citation: Author (date). If no date available, use (n.d.) |
| <input type="checkbox"/> | Paraphrased in-text citations include the author and the date. and specific part of the source (page #, paragraph # or section title) (see APA 7 th , Sections 8.23-8.24, p. 269-270). |
| <input type="checkbox"/> | Direct quotes should be avoided, but are occasionally necessary for specific statistical data. |
| <input type="checkbox"/> | Short quotations (< 40 words) are enclosed in "double quotation marks." Direct quotations include the author and the date, and specific part of the source (page #, paragraph # or section title). The in-text parenthetical citation comes before the ending punctuation (see APA 7 th , Section 8.26, p. 271-272). |
| <input type="checkbox"/> | Block quotations (\geq 40 words) are shown as an indented block quote with no additional beginning paragraph indenting. Direct quotations include the author and the date, and specific part of the source (page #, paragraph # or section title). The parenthetical citation comes before the punctuation (see APA 7 th , Section 8.27, p. 272-273). |
| <input type="checkbox"/> | Basic In-Text Citation Styles can be found in a table on p. 266. Review for accuracy in listing in-text citations. Double-space the entire block quotation, with no extra space before or after it. |
| References (APA Manual, 7th ed., p. 281-307) | |
| <input type="checkbox"/> | The page title "References" is centered one inch from the top of the page and starts a new page. Times New Roman 12-point font is used, without attributes such as bolding, italics, or underlining. |
| <input type="checkbox"/> | All sources listed in the References have at least one corresponding in-text citation. |
| <input type="checkbox"/> | References are listed in alphabetical order, according to the first word of the reference. |
| <input type="checkbox"/> | All references are listed in the following order: (See tables on pages 283-284) Author, I. (Date). Title in lower case except for Proper Nouns; unless a book, then appropriate caps. Source. |

| | |
|--|---|
| | <p>Answers the following questions:</p> <p>Author: Who is responsible for this work [individual, group, organization—ex., Centers for Disease Control (CDC)]</p> <p>Date: When was this work published? [year only]</p> <p>Title: What is this work called? [No italics or quotation marks for journal articles, edited book chapters; for books, reports, webpages, websites, italicize the title and use sentence case]</p> <p>Source: Where can I retrieve this work? [Journal, publisher, web URL, DOI, etc.] [Note: The location of the publisher is no longer required for the source.]</p> |
| <input type="checkbox"/> | All lines are double-spaced, both within and between each entry, and for each entry the hanging indent is used. (see APA 7 th , Section 9.43, p. 303) |
| <input type="checkbox"/> | <p>For electronic articles, a DOI is used at the end, if available. I have included the URL if a DOI is unavailable.</p> <p>Use the hyperlink format of the DOI (not necessary to include the words “Retrieved from” before a DOI or URL.</p> <p>http://dx.doi.org/10.xxx/xxx.xxxx</p> |
| <input type="checkbox"/> | Only initials are used for first and/or second names of authors. There is one space between initials’ e.g., Lewis, C. S. |
| <input type="checkbox"/> | If there are multiple authors, they are listed in the order they appear on the original source. Authors in the references are separated by commas (even for two authors) and an ampersand is used before the last one. Up to 20 authors are able to be listed in the reference page with the citation. |
| <input type="checkbox"/> | Titles of journals are given in italics, as are volume numbers. |
| <input type="checkbox"/> | Titles of journal articles and websites are in lower case except for the first word, the first word after a colon, and any proper nouns. |
| <input type="checkbox"/> | Issue numbers are enclosed (when needed) in parentheses and not formatted with italics. |
| <input type="checkbox"/> | Write the page range for the article after a comma and the issue number. Separate page numbers with a dash, followed by a period. Separate discontinuous page numbers by commas. (Example, 39-47, 50.) |
| General Editing and Grammar for Student Use | |
| <input type="checkbox"/> | I have used the <i>Exemplar APA Checklist</i> to find and eliminate errors before submission. |
| <input type="checkbox"/> | I have used spell check and grammar check in my word processing program and corrected, if needed, any noted mistakes. |
| <input type="checkbox"/> | I have read through my paper (even aloud) to determine flow and find any spelling errors that might not be found with spell check, e.g. using <i>their</i> when it should be <i>there</i> . |
| <input type="checkbox"/> | I have verified that all track changes and other electronic formatting software comments have been removed before submission. |

Reference:

American Psychological Association. (2020). *Publication Manual of the American Psychological Association: The Official Guide to APA Style, 7th ed.* American Psychological Association.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

GRADING SCALE

POLICY: Grading Scale

PURPOSE: To define the system of grading adopted by the MSN FNP Program

PROCEDURE: Grading Scale

The MSN FNP Program uses a 1000-point system for grading in each course. This ensures that students are familiar with the grading requirements from one course to another. Points will be distributed according to each instructor's required assignments for a given course. Grading will be performed according to the following scale:

GRADING SCALE

A=900-1000

B=800-899 C=700-799 D=600-699 F=599

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

NETIQUETTE GUIDELINES

POLICY: Netiquette Guidelines

PURPOSE: To ensure acceptable communication and to promote a collegial environment in the online learning community.

PROCEDURE:

Netiquette Guidelines

In an online course, nearly all of the communication occurs on the Internet; therefore, it is important to establish some guidelines for communication that will help to promote a satisfactory online learning community.

1. Imagine your message on a billboard. Anything you send can be forwarded, saved and printed by people it was never intended for. Never send anything that will reflect badly on you or anyone else. *In the MSN courses, discussions may involve sensitive patient or employment-related information. Make sure that all private information is de-identified before posting.
2. Remember that emails/discussions in the learning management system are recorded for educational purposes. Emails sent from your workplace/school can be monitored by people besides the sender and reader, and are technically company/school property.
3. Avoid offensive comments. Anything obscene, libelous, offensive or racist does not belong in an electronic communication such as email or discussion board, even as a joke.
4. Keep your message Cool. Email messages can easily be misinterpreted because we do not have the tone of voice or body language to give us further cues. Using multiple exclamation points, emoticons, and words in all capital letters can be interpreted as emotional language.
5. Be careful about forwarding messages. If you are not sure if the original sender would want to forward the message, do not do it.
6. Do not expect an answer right away. Email messages may be delivered quickly, but your recipient may not read it right away.
7. Do not sacrifice accuracy for efficiency. Do not send sloppy, unedited email. Experts say that for every grammar mistake in an email, there is an average of three spelling mistakes. While the odd spelling mistake is overlooked, when your readers have to break communication to decipher a word or message, at best, you will look sloppy, if not illiterate. At worst, they may stop reading.
8. Include the message thread. Keep the original message for a record of your conversation. However, when sending a new message to the same person, start a new thread with a new subject line.

9. Do not type in all CAPS. It is perceived as YELLING. However, do not write with only small letters, as this is perceived as being lazy, because it makes it more difficult for people to read.
10. Write clear, organized messages, with a subject line that gives enough information for the reader to file it and find it later.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

DISRUPTION OF INTERNET SERVICES

POLICY: Disruption of Internet Services

PURPOSE: To establish a means for students to notify faculty of disruption of services and to make up lost work during such times.

PROCEDURE:

Disruption of Internet Services

In order to participate in online courses, the student must have access to Internet Services. In the unlikely event that Internet Services are disrupted by a weather event or outage of services beyond the student's control, the student should contact the instructor, either by phone or in person to explain the absence from coursework and make arrangements for making up the work. At the earliest possible convenience, it is anticipated that the student will make up any missed work according to a schedule determined with the instructor.

Most disruptions should be of a temporary nature and not cause a serious difficulty for the student. Faculty will make every reasonable attempt to work with the student to enable an opportunity to make up lost work. However, it may become necessary for the student to seek alternative sites for Internet use, such as the library or a campus computer lab. If the disruption is extended, it may become necessary for the student to take an "incomplete" in the course. See policy regarding "Incomplete" in the *Campbellsville University Student Handbook*.

DATE: January 2020

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REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

ACADEMIC HONESTY

POLICY: Academic Honesty

PURPOSE: To ensure academic honesty and integrity within the MSN program.

PROCEDURE:

Academic Honesty

Campbellsville University is a community of shared academic values, foremost of which is a strong commitment to intellectual honesty, honorable conduct, and respect for others. In order to meet these values, students at Campbellsville University are expected to adhere to the highest standards of academic integrity. By honoring and enforcing this Academic Integrity Policy, the university community affirms that it DOES NOT tolerate academic dishonesty.

The MSN FNP Program strives to preserve for all its students an environment that is conducive to academic honesty. Pursuant to this is the belief that all members of the academic community will be individually responsible for promoting academic honesty. In addition, because the public has a high degree of trust in health care providers, and because the MSN FNP Program educates future health care providers, students are expected to behave in an ethical manner in all activities and phases of the educational process. Both faculty and students are expected to uphold the code of ethics specific to their professional discipline.

Knowledge of violations of academic honesty is to be reported to faculty. In all cases where a question of an academic dishonesty exists, the faculty is responsible for reviewing the circumstances surrounding the questionable behavior. Subsequent action, if any, shall be in accordance with established policies and procedures.

Examples of academic dishonesty include, but are not limited to, sharing your work with others, failing to appropriately cite references-plagiarism, violating academic policies and procedures within the program, misconduct, cheating, or concealing cases of academic dishonesty.

Definitions

Plagiarism: Copying from another source or individual without attribution; copying large sections or large percentages of a paper from another source or individual.

Cheating: Utilizing source materials or notes, including electronic sources, for closed book tests or assignments; working with other students on individual tests or assignments.

Consequences

Students who commit any act of academic dishonesty may receive from the instructor a failing grade in that portion of the course work in which the act is detected or a failing grade in a course without the possibility of withdrawal. A student who believes a faculty member has dealt unfairly with them in a case involving academic dishonesty, misconduct or any other academic infraction of program policies or procedures may appeal the decision/s with the Program Coordinator

through the formal complaint procedure found in the MSN FNP Student Handbook. If the student wishes to appeal any decision made by the Program Coordinator, they may appeal to the Dean of the School of Nursing followed by an appeal to the Academic Council by writing a letter to Academic Affairs if the issue continues to be unresolved.

The consequences for plagiarism or other acts of academic dishonesty include:

- Report of plagiarism made to Program Coordinator
- A grade of F on the assignment
- A grade of F for the course

Repeated acts of academic dishonesty can result in suspension or expulsion from the University. Students in online courses should not collaborate on assignments (including quizzes) unless instructed to do so by the instructor. If you are approached/contacted by another student with a request or offer to collaborate or “help”, inform them that this is not allowed in the course and contact your instructor to report the incident.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

CODE OF CONDUCT

POLICY: Code of Conduct

PURPOSE: To define the expectations of behaviors while in the MSN program.

PROCEDURE:

Code of Conduct

Be aware that any misconduct such as cheating, plagiarism or other acts requiring disciplinary action are addressed in the *Campbellsville University Student Handbook*. Due to the dire consequences dishonesty may have in the nursing profession, each student is to assume accountability for professional conduct and appropriate moral and ethical behaviors, which include truthfulness, confidentiality and awareness of clients' rights. A breach of this professional conduct will result in the student facing disciplinary sanctions as outlined in the *Campbellsville University Student Handbook*.

The faculty reminds students that this is an educational program which prepares the student to be a liberally-educated professional nurse. The same responsible and accountable behaviors are expected of students that will be expected upon completion of the MSN FNP Program and employment in health care agencies. It is the expectation of the School of Nursing that students will be responsible adults and display appropriate professional conduct among faculty, students, and the healthcare community. Finally, as members of the Campbellsville University community, students are expected to uphold the mission and objectives of the University.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

COMPLAINTS

POLICY: Complaints

PURPOSE: To define a complaint and the process necessary to file a grievance. A complaint is defined as an expression of dissatisfaction related to a policy, procedure, consequence, action, statement or other inequality in treatment or discriminatory acts.

PROCEDURE:

Complaints

The following steps will be initiated in processing a complaint:

- All complaints must be recorded on the appropriate form and signed and dated by the individual making the complaint. The complaint forms are available in the Nursing Office or can be downloaded from this document (see form to follow this policy).
- If a parent or other concerned person wishes to address concerns related to a student, the student must give written consent or accompany them in person. Federal law prohibits faculty and administration from speaking with a parent or concerned person without student consent.
- All complaints involving faculty or staff will be addressed by the complainant at the level in the institution where the concerns lie before moving up the chain of command.
- All complaints will be routed through the Program Coordinator.
- The Program Coordinator or their designee will give written acknowledgment of the complaint, within ten (10) working days.
- The complaint will be processed in the following manor:
- The student should meet with the party involved and discuss the concern.
- A complaint form is located in the MSN Student Resource room and may be submitted via email to the Program Coordinator. A repository for anonymous complaints is located on main campus in the School of Nursing in a black mail box labeled 'MSN Program' in the hallway next to the Dean's office.
- All written complaints will be maintained by the Program Coordinator in a secure file within SharePoint. This file can only be accessed by the Program Coordinator or the Dean of the School of Nursing.
- Complaints will normally be processed within two weeks. If additional time is needed to process the complaint, the complainant will be notified
- If the complainant is not satisfied with results obtained through the process outlined above, they may ask for review by the Dean of the School of Nursing.
- If the matter is not resolved in this manner, the grievance should be forwarded to the Vice President of Academic Affairs for further consideration.
- All students have a right to due process which is handled through the Judicial Process as outlined in the *Campbellsville University Student Handbook*. Please refer to this

document for further information.

Note: At any point in the complaint process, resolution of the complaint will terminate the process. A written record of the actions taken will be maintained. It is understood that all supportive information and the release of information must be submitted with a complaint.

**Campbellsville University
School of Nursing
Complaint Form**

Name: _____

Phone: _____

Email: _____

Does this complaint directly involve another person (student, faculty, staff or administrator)?

Have you attempted to resolve this matter with the person directly involved?

If so, explain:

Nature of Complaint:

Outcomes (if any) that you would hope to see regarding this complaint

Signature_____

Date_____

Note: *The Complaint Form must be completed in its entirety in order for the complaint to be processed.*

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

CONFIDENTIALITY OF INFORMATION

POLICY: Confidentiality of Information

PURPOSE: To define confidentiality in nursing applications.

PROCEDURE:

Confidentiality of Information

Professional nurses understand the value of confidentiality in the workplace. Students in this program will adhere to confidentiality as though in the workplace. Discussions in the classroom are designed to derive benefit from student experiences and, as such, may entail information of a confidential nature. This policy serves as a reminder to use caution to de-identify any information that is discussed in the virtual classroom. Revealing patient-related information could result in expulsion of the student. When in the practicum setting, students must adhere to the confidentiality policies of that agency/facility.

Confidentiality Reminders:

1. Patient information should only be discussed with other members of the health care team who have a need-to-know. Do not discuss patient information with anyone else, including fellow employees and your family members.
2. Do not tell unauthorized persons that you saw or have knowledge of a patient being seen as an inpatient/outpatient, unless the patient authorizes you to do so (Example: telling a church pastor or family that a patient is hospitalized.) Authorized persons are those members of the health care team who have a legitimate need-to-know.
3. Do not access any information (Example: looking in a neighbor's medical record) unless authorized in your job duties. Do not access more information that is necessary to perform your job.
4. Speak quietly and discreetly so patients, visitors, and others will not overhear your telephone or other conversation with or about patients.
5. If you have a question regarding which family members of a patient you are authorized to speak with concerning a patient's medical information, ask the patient or your supervisor.
6. Before answering questions concerning a patient over the phone, verify with whom you are speaking, to determine whether they are authorized to receive the information.
7. Do not leave papers containing patient information (Example: O.R. schedules, test results, open charts) in open view of unauthorized persons. Likewise, turn your computer screen away from open view and/or use screen saver or fade to dim.

8. Do not discard papers containing patient information in the trashcan. Have them shredded or hand-shred them in small pieces before discarding them.
9. When copying documents containing patient information, make sure that any defective copies are destroyed.
10. Ask visitors to step out of a patient's room when conversations take place regarding medical treatment, diagnosis, etc, unless the patient authorizes the visitor to be present. Speak softly if there is a roommate, to protect the patient's privacy as much as possible.
11. When your duties require you to handle confidential information of your friends or acquaintances, if possible, ask for reassignment to protect that person's privacy as much as possible.
12. In faxing patient information to authorized facilities, verify that the recipient is attending the fax machine, especially if their machine is shared by other persons or departments. Use caution in dialing fax numbers. Always use a fax cover sheet with confidentially statement when faxing documents.
13. Intentional or unintentional breaching confidentiality could result in clinical failure at the instructor's discretion.
14. Do not use the intercom system about confidential information regarding a patient.
15. Do not transfer calls from your area to the room of a secured patient.
16. Refer media inquiries regarding patient information to the instructor or clinical preceptor.
17. When making a phone call to relay patient or other confidential information, if the party is not home, do not leave detailed information on answering machines or with another person answering the phone. Simply state your name, number, and ask that the intended person return your call.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

SOCIAL NETWORKING, PROFESSIONALISM & HIPAA VIOLATIONS

POLICY: Social Networking, Professionalism & HIPAA Violations

PURPOSE: To describe expectations related to social networking, professional and confidentiality.

PROCEDURE:

Social Networking, Professionalism & HIPAA Violations

Social networking sites can and do have educational and marketing purposes. However, some students lose their inhibitions and have a false sense of security and privacy regarding posts, blogs, videos, and pictures they apply to a personal site. Numerous employers are looking at perspective employee's social networking sites and are using unprofessional content posted to make decisions to hire or set a resume/application aside.

Campbellsville University is a Christian based university and the profession of Nursing is seen as a caring and professional career. Therefore, unprofessional behavior and breaches of client confidentiality can be disastrous for the student, the university, and the profession of Nursing. Examples of social networking sites include but are not limited to Facebook, Twitter, MySpace, Instagram and You Tube. Forms of communication include but are not limited to pictures, video, blogs, and postings.

Therefore, in accordance with Campbellsville University School of Nursing's mission and the American Nurses Association (ANA) Code of Ethics for Nurses, any student found to be acting in an unprofessional manner or breaching the Health Insurance Portability and Accountability Act (HIPAA) in social networking sites may be subject to disciplinary action up to and including dismissal from Campbellsville University School of Nursing.

Examples of unprofessional behavior include written languages of profanity, degrading/negative comments regarding clients or others, posting of sexual activities, nude/semi-nude provocative photos, and postings regarding abuse of alcohol and/or drugs and any dialogue that could be considered harmful to the University's students, faculty, staff, or agencies associated with the University.

It is the duty of the student (s) to report any act of unprofessional behavior or breaches in patient confidentiality to any faculty or the Program Coordinator. While enrolled in the MSN Program, students will maintain professional boundaries/relationships with faculty/staff via social networks.

In addition, some nursing faculty may have a professional Facebook page, twitter account, and/or other social media sites that allows for professional networking with students, alumni, and professional organizations. If the faculty member chooses to have a social media site, the faculty

member will be responsible for the content and management of the site. These sites can have many benefits to the student and faculty such as connecting with enrolled students and alumni; posting upcoming events; sharing of ideas and professional images; and links that are beneficial to the learning process.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

STUDENT RESPONSIBILITIES

POLICY: Student Responsibilities

PURPOSE: To describe the expectations and responsibilities of student within the MSN FNP Program.

PROCEDURE:

Student Responsibilities

Students are expected to be self-motivated and responsible for their own learning. The nursing profession requires intensive training and preparation, as well as life-long learning. Students will be responsible for maintaining their assignments and for preparation for all didactic and clinical learning experiences.

It is the responsibility of the student to keep up with the required clinical hours and to submit documentation as indicated by the clinical faculty.

Students are also responsible for upholding their financial responsibilities to the University. This includes compliance with any regulations or requirements associated with financial aid. Students can refer to that section in the *Campbellsville University Student Handbook* for more information related to this subject.

Students are responsible to ensure that their learning environment is free from distractions. This includes being accountable for all outside tasks that may interfere with the academic environment: financial responsibilities, child care or elder care (if applicable), work obligations, etc. The student should ensure that these duties are met, so that s/he can focus all efforts on study.

As students of Campbellsville University, individuals are responsible to conduct themselves in a manner that is consistent with the Christian values upheld by this institution. Whether on campus or on field trips with University groups, students are expected to maintain the Campbellsville Philosophy of Behavior as outlined in the *Campbellsville University Student Handbook*.

Upon graduation, students must comply with licensure requirements as noted in the policy on Eligibility for Licensure.

DATE: January 2020

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REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

APPROXIMATE COSTS OF THE MSN FNP PROGRAM

POLICY: Approximate Costs of the MSN FNP Program

PURPOSE: To outline the approximate costs related to all aspects of the MSN FNP Program.

PROCEDURE:

Approximate Costs of MSN FNP Program

Aside from the costs of tuition and books, there are certain costs inherent in nursing that are not usual and expected costs associated with other programs on campus. The School of Nursing tries to anticipate these costs and to alert the nursing student of changes as they occur.

APPROXIMATE COST OF THE MSN PROGRAM

| FEE | 1ST SEMESTER | 2ND SEMESTER | 3RD SEMESTER | 4TH SEMESTER | 5TH SEMESTER | 6TH SEMESTER | Refund Policy |
|---|---------------------------------------|------------------------------------|-----------------------------------|------------------------------------|-----------------------------------|-----------------------------------|------------------------------|
| TUITION | \$5,031.00 | \$4,472.00 | \$4,472.00 | \$3,913.00 | \$3,913.00 | \$3,354.00 | See CU Student Handbook S |
| ROOM/BOARD | N/A | N/A | N/A | N/A | N/A | N/A | Student Purchase |
| TECHNOLOGY FEE | \$150.00 | \$150.00 | \$150.00 | \$150.00 | \$150.00 | \$150.00 | Non-Refundable |
| STUDENT ACTIVITY FEE | N/A | N/A | N/A | N/A | N/A | N/A | Non- Refundable |
| BOOKS | VARIES BY COURSE | VARIES BY COURSE | VARIES BY COURSE | VARIES BY COURSE | VARIES BY COURSE | VARIES BY COURSE | Visit Bookstore |
| * COURSE FEE | N/A | N/A | N/A | N/A | N/A | N/A | Non- Refundable |
| BACKGROUND/ IMMUNIZATION TRACKER | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | Non- Refundable |
| DRUG SCREEN | N/A | N/A | N/A | \$59.00 | N/A | N/A | Non- Refundable |
| WHITE LAB COAT | COST VARIES | N/A | N/A | N/A | N/A | N/A | Personal purchase |
| WATCH WITH SECOND HAND | COST VARIES | N/A | N/A | N/A | N/A | N/A | Student Purchase |
| IMMUNIZATIONS/ CPR/TB | COST VARIES DEPENDING ON SOURCE | RENEWAL FEES VARY | RENEWAL FEES VARY | RENEWAL FEES VARY | RENEWAL FEES VARY | RENEWAL FEES VARY | Student Purchase |
| LAPTOP | COST VARIES | N/A | N/A | N/A | N/A | N/A | Student Purchase |
| PERSONAL HEALTH INSURANCE | COST VARIES DEPENDING ON SOURCE | RENEWAL FEES VARY | RENEWAL FEES VARY | RENEWAL FEES VARY | RENEWAL FEES VARY | RENEWAL FEES VARY | Student Purchase |
| PROFESSIONAL LIABILITY INSURANCE | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | INCLUDED IN COST OF TUITION | N/A |
| GRADUATION FEE | N/A | N/A | N/A | N/A | N/A | \$100.00 | Non- Refundable |
| CLINICAL PARKING/ NAME TAG FEES | VARIES BY SITE | VARIES BY SITE | VARIES BY SITE | VARIES BY SITE | VARIES BY SITE | VARIES BY SITE | Student Purchase |

| | | | | | | | |
|-----------------------|-----|-----|-----|-----|-----|---|------------------|
| LICENSURE/ BOARD EXAM | N/A | N/A | N/A | N/A | N/A | Approximate \$350.00 for the examination; APRN License Application- \$165.00 | Student Purchase |
|-----------------------|-----|-----|-----|-----|-----|---|------------------|

Course fees are refundable according to the policy stated in the Campbellsville University Student Handbook.

Each student must provide their own supplies and provide transportation to and from clinical sites.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

DISMISSAL FROM THE MSN FNP PROGRAM

POLICY: Dismissal from the MSN FNP Program

PURPOSE: To describe the process and rationale for MSN FNP Program dismissal

PROCEDURE:

Dismissal from the MSN FNP Program

Students may be dismissed from the MSN FNP program when they have failed to achieve clinical and/or academic standards that are established and in place for each class. The syllabus for each class and each clinical segment ascertains the objectives for that class and specific criteria that must be met to remain in good academic standing. Students will be counseled by instructors and advisors about their individual progress throughout the semester and advised accordingly. When all efforts to fulfill the requirements of the MSN FNP program have failed and the student is in jeopardy of failure, the student may be advised to withdraw to avoid receiving a failing grade that will further endanger their overall grade point average.

Students may also be dismissed from the MSN FNP program for violations of the University Philosophy of Behavior in accordance with the *Campbellsville University Student Handbook*.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: January 2018

SUBJECT:

EDUCATIONAL RESOURCES

POLICY: Educational Resources

PURPOSE: To outline the process for using available resources within the MSN FNP Program

PROCEDURE:

Educational Resources

A limited selection of videos, textbooks, review books and other materials are maintained in the School of Nursing building. Educational resources such as videos, review books, and other materials may be borrowed at the instructor's discretion. All resources must be returned as specified by the instructor. Unreturned or damaged resources will result in an "Academic Hold" until the item is returned or replaced.

DATE: January 2020

REVIEWED: February 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: February 2018

SUBJECT:

MSN FNP PROGRAM ADMISSION CHECKLIST

POLICY: MSN FNP Program Admission Checklist

PURPOSE: To briefly outline admission requirements for the MSN FNP Program

PROCEDURE:

MSN FNP Program Admission Checklist

Applicants Name: _____

☐ **Application to the University and the School of Nursing:**

The applicant must complete **one** application for admission to Campbellsville University. This application is available online at www.campbellsville.edu.

☐ **Official Transcripts**

Provide one official copy of all transcripts from each college or university that you have attended previously. Once you apply, you will receive a copy of our official transcript request form from your Enrollment Counselor.

☐ **Degree Requirements**

Completion of a BSN degree from a regionally accredited U.S. college or university.

☐ **GPA Requirements**

Cumulative collegiate GPA of 3.0 or higher on a 4.0 scale

☐ **Licensure Information**

A copy of a current, valid, unencumbered RN license, or listing on a state licensing board website must be submitted. All licenses will be verified before admission into the program and every semester as long as the student is in the program. List your Registered Nurse license, expiration date, and state board granting the license on the application.

☐ **Patient Care Hours**

Currently working as a registered nurse (RN) and have at least 2,000 patient care hours within the last two years. These patient care hours must be documented. Examples of documentation could be pay stubs or a letter from the candidate's employer/HR department. No volunteer or non-paid hours will count towards the 2,000 patient care hours.

☐ **Curriculum Vitae (CV)**

Your CV should include:

☐ Educational background including institutions, degree(s) awarded, degree(s) in progress, dates of degree(s) awarded, and/or anticipated date of receiving degree(s)

☐ Relevant employment history, including:

Job title (including unit), job description, and relevant duties performed

Employment dates of each position

☐ Community service or volunteer experience

☐ Any awards, publications, presentations, and memberships

☐ Evidence of leadership and career progression

☐ **Professional Goals Essay**

You must submit a 500-word essay discussing the following:

- Your career goals
- How your specific clinical experiences have prepared you for the Family Nurse Practitioner role
- Why Campbellsville University is the best fit for you and how the program will assist you in reaching your professional and educational goals
- The applicant's essay will be assessed on the ability to exhibit scholarly graduate-level writing.

| Professional Goals Essay Rubric | | | |
|----------------------------------|------------------------|-------------------------------|------------------------|
| | Fully Addressed (2) | Minimally Addressed (1) | Did Not Address (0) |
| Career Goals | | | |
| Preparedness for the FNP Role | | | |
| Why CU? | | | |
| Scholarly Writing Ability | | | |
| Total | | | |

Applicants scoring 6 or greater and meeting all other admission criteria will be granted acceptance into the MSN FNP Program.

Score: _____

☐ Letters of Recommendation (See attached form- located at the end of this policy)

Three letters of recommendation are required, and all must be completed within one year of the date of submission. Applicants will instruct the chosen individuals to complete and submit the standardized reference form. These forms may be obtained from the enrollment counselor.

The following are acceptable individuals for the 3 letters of reference:

1. ☐ A current clinical supervisor, nurse, manager, or other health care provider who has direct knowledge of your skills in the clinical setting and how those skills will translate into the Family Nurse Practitioner role.
2. ☐ A professor, faculty member, Dean of the School of Nursing, or academic advisor who can provide a meaningful assessment of your academic record. If you have been out of school for five years or more, a nurse educator or clinical instructor can provide the academic recommendation.
3. ☐ A practicing clinical nurse professional or APRN who has served as a mentor and can address your abilities as a nurse and your potential to become a Family Nurse Practitioner.

Professional Letter of Reference Rubric

| Personal | Outstanding (4) | Above Average (3) | Average (2) | Below Average (1) | Not Observed (N) |
|---|----------------------------|----------------------------------|------------------------|----------------------------------|---------------------------------|
| Sensitivity to Change Alert to and considerate of needs of clients and colleagues | | | | | |
| Dependability Quality of being trustworthy and reliable | | | | | |
| Open Mindedness Receptiveness to new ideas | | | | | |
| Assertiveness Quality of being self-assured and confident without being aggressive | | | | | |
| Self-Confidence Feeling of trust in one's abilities, qualities, and judgment | | | | | |
| Integrity Quality of being honest and having strong moral principles; moral uprightness | | | | | |
| Flexibility Willingness to change or compromise | | | | | |
| Tolerance of Ambiguity Functions without rigidly defined, externally imposed structure | | | | | |
| Total Score | | | | | |

| Professional | Outstanding (4) | Above Average (3) | Average (3) | Below Average (2) | Not Observed (N) |
|---|----------------------------|----------------------------------|------------------------|----------------------------------|---------------------------------|
| Problem-Solving Ability Uses a systematic approach to identify and solve problems | | | | | |
| Accountability Accepts responsibility for own decisions and actions | | | | | |
| Leadership Potential Able to motivate and direct others | | | | | |
| Decision Making Ability Considers alternatives and take appropriate actions | | | | | |
| Self-Directness Plans and executes actions independently | | | | | |
| Understands Limitations Sets self-expectations congruent with own capabilities | | | | | |
| Seeks Help Appropriately When situation exceeds capabilities | | | | | |
| Communication with Others Establishes ideas succinctly and logically in writing and when speaking | | | | | |
| Total Score | | | | | |

Applicants scoring an average of 2.5 or greater on all professional letter of reference and meeting all other admission criteria will be granted acceptance into the MSN FNP Program.

Average Score: _____

☐ **Student Waiver for Letters of Recommendation**

The Family Education Rights and Privacy Act of 1974 and its amendment's guarantee students access to their educational records. Students however are entitled to waive their rights to access concerning recommendations. The applicant must sign the waiver statement indicating their wishes regarding this recommendation.

☐Technical and Performance Standards

Upon admission, all students must verify in writing that they are able to meet technical and performance standards with or without accommodation. A copy of this document is located at the end of this policy and should be completed and returned with the other required admission documentation.

☐Background Check

All applicants will be required to complete a background check as the final step in the admissions process. Applicants will be admitted pending the successful completion of the background check. The background check must be completed after the admissions decision is made and will be repeated at the beginning of the 2nd year of instruction. Applicants with felony convictions will not be admitted. This will be submitted to an online depository.

SECTION V- CLINICAL POLICIES AND PROCEDURES

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

CLINICAL REQUIREMENTS

POLICY: Clinical Requirements

PURPOSE: The School of Nursing recognizes that students in the MSN FNP Program will have extensive practical experience as a family nurse practitioner. This policy is to outline the clinical requirements associated with the MSN FNP Program.

PROCEDURE:

Clinical Requirements

Students will be required to fulfill clinical hours in the following courses: NUR 509, NUR 510, NUR 511, NUR 512, NUR 513, and NUR 514. Optional clinical hours may be obtained in or after completion of NUR 502. The specific details of the clinical will be defined for students in those courses. As with other clinical settings, the School of Nursing must comply with specified requirements inherent in those facilities. Requirements may vary depending on the selection of a site for the clinical.

All students entering the MSN FNP Program will be required to show evidence of meeting the Immunization Requirements and CPR Certification prior to enrollment(see Immunization Requirements policy) Students will also be required to complete one initial criminal background check upon admission to the program and again prior to beginning the clinical rotation for presentation to facilities that participate in the clinical. Students will have malpractice coverage through Nurses Service Organization (NSO) of 2,000,000 per occurrence and 5,000,000 aggregate. This policy will be purchased as a group by the University and the expense charged to the student as a course fee. If the student chooses to obtain their own policy, the coverage must be equal to or greater than the university provided coverage.

Campbellsville University School of Nursing will use an online repository for maintaining electronic files of immunization records, tuberculosis screening, CPR certification, HIPAA and OSHA training and proof of professional liability insurance. Upon entry to the semester of these experiences, students will receive instructions directing them on how to access the online repository system and about submitting the required documentation. Files can be scanned/uploaded and sent via email, faxed to the company or mailed via the postal system. Students will be required to pay for this service and this company will maintain files throughout their program.

Drug and alcohol screening are required prior to the initiation of the first clinical rotation and annually thereafter. See the following Drug and Alcohol Screening policy. to

Students must have the physical ability to participate in the activities/duties of the clinical setting. For this reason, students who undergo a major/extended illness or surgery that may impair their physical capability in the clinical setting must provide documentation of a medical release before entering the clinical phase of coursework. Examples of these conditions include, but are not limited to: contagious illness, soft tissue/ bone trauma, surgical procedure, cardiac or pulmonary disease processes, childbirth, etc. Students must be cleared by a medical provider to function without restriction in the clinical setting following any serious health condition. This requirement promotes both patient and student safety and therefore is highly important.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT: Drug and Alcohol Screening

POLICY:

DRUG AND ALCOHOL SCREENING

PURPOSE: Guidelines for Drug and Alcohol Screening at the School of Nursing

PROCEDURE: Drug and Alcohol Testing/Drug –Free Environment

Because students in the Nursing Program will be working in health care settings, it is imperative for the safety and well-being of patients, other students, health care workers, faculty members and others that students are not acting in an impaired state as a result of the use of drugs or alcohol. Therefore, as a condition of admission and continuance in the Nursing Program, students are required to submit to drug and alcohol testing prior to the beginning of the first clinical rotation and any other time as required for a clinical placement. Further, students may also be tested where there is a reasonable suspicion that they may be impaired or otherwise under the influence of drugs or alcohol. Finally, students are subject to random drug and alcohol testing to be conducted at the discretion of the University.

Refusal to submit to a required drug and alcohol test is grounds for non-admittance or dismissal from the Nursing Program. Further, providing false information as part of a drug and alcohol test or attempting to manipulate the testing results through sample adulteration or other means is grounds for non-admittance or dismissal from the Nursing Program.

The drug and alcohol testing of applicants and students in the Nursing Program will be conducted by an independent agency which is contracted by the University. Specific questions related to testing procedures and challenges to testing results should be directed to the agency conducting the testing. The cost of testing is determined by the independent agency which conducts the testing and payment of that cost will be the sole responsibility of the applicant or student, except that the University will pay for random testing.

A positive drug or alcohol test may result in an applicant being denied admission into the Nursing Program; a student being denied placement at a clinical site; a student being required to successfully complete a drug or alcohol rehabilitation program (which is approved by the Dean of the School of Nursing) and meet other required conditions to be eligible to continue in the program or be considered for re-enrollment; and enrollment; and/or expulsion from the Nursing Program. The Dean of the School of Nursing shall make the final decision regarding appropriate action to be taken against an applicant or student as a result of a positive drug and alcohol test. The University partners with various health care entities to provide clinical experiences for students as part of the educational requirements of the Nursing Program. Students must consent to the University sharing the results of any drug and alcohol testing with health care entities where the student may be placed to complete a clinical experience. These health care entities may deny clinical access to students on the basis of the results of their drug and alcohol tests. When a student is denied clinical access under these circumstances, the student will be unable to complete the required clinical component of the nursing course, which will result in a

failing grade for the nursing course and may result in the student not being able to complete the Nursing Program. Students will not be entitled to any reimbursement of tuition, fees or other costs if they are unable to complete the Nursing Program as a consequence of their drug and alcohol test results.

Students are required to notify their nursing/clinical faculty member advisor of the use of any prescribed medication which may interfere with their ability to care for patients or otherwise participate in a clinical placement.

The following conduct is also prohibited by students in the Nursing Program and will result in any of the disciplinary actions described above related to positive drug and alcohol tests:

- Use, possession or distribution of illegal substances or substances not used in accordance with the applicable prescription.
- Reporting to class, clinical placement or other student activity while in an impaired state due to drug or alcohol use.

Applicants and students must immediately notify the Dean of the School of Nursing if they are the subject of any campus, criminal or other investigation related to the use, possession or distribution of alcohol or drugs or if they are charged with or convicted of a drug or alcohol-related offense. The Dean will determine what action, if any, should be taken with regard to the student based upon these issues.

Students are subject to the other policies of the University related to discipline for the use, possession and/or distribution of drugs or alcohol.

Procedure for dealing with apparent substance abuse in the clinical setting:

In the event that a student appears to be impaired in the clinical setting, the preceptor or faculty should withhold the clinical assignment from the student. The preceptor should contact the clinical faculty; if unable to reach the clinical faculty for any reason, the preceptor will contact the Clinical Coordinator. Information related to the circumstances will be communicated to the Dean of the School of Nursing to assess the factors involved and develop a plan. Upon determination that the student is not capable of taking an assignment, the preceptor will notify the student's emergency contact to come to the site. The preceptor will then inform the student that he or she is being dismissed from clinical for the day, and that the emergency contact has been notified to take them home. If a student is impaired, they must be transported and will not be allowed to drive away from the clinical setting. The student will be asked to report to the School of Nursing and will be counseled by the Dean of the School of Nursing or a designate. (If the clinical is scheduled outside of normal office hours, the student will be advised to report to the Dean of the School of Nursing at the next scheduled office time.) The Dean of the School of Nursing will then send the student for testing as appropriate. Depending on the results of the testing, further action will be determined for possible clinical make-up or other action by the Dean of the School of Nursing. The preceptor will receive official correspondence related to outcomes as they apply to further clinical participation.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

IMMUNIZATION/CERTIFICATION/APPLICABLE SCREENINGS REQUIREMENTS

POLICY: Immunization, Background Check, CPR and Insurance Requirements

PURPOSE: The nature of nursing education includes a clinical component that will be conducted in facilities with patients and other health care workers. This entails the necessity of certain precautions to ensure safety of students and of others in the clinical setting. Campbellsville University will maintain records of necessary documents for the clinical site.

PROCEDURE: Immunization/Certification/Applicable Screenings requirements

Campbellsville University School of Nursing will use an online repository for maintaining electronic files of immunization records, background check, professional liability insurance and CPR certification. Upon admission to the program, students will be directed to the MSN FNP Student Resource Room for further information on the process of accessing the online repository. Files can be scanned/uploaded and sent via email, faxed to the company or mailed via the postal system. The company will conduct a background check that will be available to potential clinical sites. Students will not be required to pay for this service and this company will maintain files throughout their program. Liability insurance will be secured through the university insurance provider and included in the student's course fees or obtained privately by the student at the student's expense.

Immunizations:

The following immunizations are required for all students involved in clinical activities in academic MSN FNP Program. These requirements have been established to help protect health care providers and their patients during encounters with one another in clinical settings. We suggest that the only exclusion to these requirements be for medical contraindications. Documentation of the medical contraindication must be submitted for the student's file.

Each student must show evidence that he or she has completed the following:

1. PPD and TB Assessment Form **Initial admission:** Applicant must provide proof of two-step tuberculin skin test (TST) or blood testing on the school provided form only (follows policy). Screening is to be completed within three months of date of the application.

****It is recommended to allow 14 – days between, but not to exceed 21 days from the 1st administration until the 2nd administration of TST skin test to avoid false results.***

Screening annually thereafter, or by request of clinical experience while enrolled in program: Students must provide proof of a 1-step tuberculin skin test or blood testing on the screening tool provided (follows policy). Clinical affiliates may require a screening performed within a specified time frame prior to the beginning of the clinical experience. Students are to

comply with the request of the facility upon notification to be eligible to attend the clinical experience.

If a lapse occurs: A lapse is defined as one calendar year plus one minute past last documented results. Students will not attend clinical assignments during a lapse in documented coverage. Students allowing a lapse in testing are required to provide proof of newly repeated 2-step tuberculin skin test or blood testing on the school provided form prior to returning to any clinical experience.

For example: Prior tuberculin skin test: 2nd step administered on 2/28/19 08:55am, student must have completed the annual tuberculin skin test or blood testing with documentation on school provided form no later than 2/28/20 08:56 am in order to show no lapse in coverage which would require a repeated two step skin test or blood testing.

Positive reactors: If you are a positive reactor, you will be directed to consult and work with a Healthcare provider until you are able to submit a subsequent screening form documenting the appropriate line item to show “the individual can be considered free of tuberculosis in a communicable form.” (For example, your provider may order a chest x-ray, medical treatment or blood testing or other as indicated in order to be able to complete the documentation to show you are free of communicable disease on the school provided form).

Lake Cumberland District Health Department (June 2020r, Nov. 2019). Personal phone/email conferences with Harrison, M., RN, Nurse Supervisor Taylor County Health Department. “tb3reportoftbscreening1(1).docx” (November 2019). Retrieved from <https://chfs.ky.gov/agencies/dph/dpqi/hcab/Pages/ccsguide.aspx>

2. Proof of two **MMR’s** (documented after age of 12 months) or proof of immunity (titer results) for Rubella, Mumps, and Measles or physician diagnosed case of mumps, indicating date of diagnosis.

- If you were born before 1950, no proof is necessary.
- If you were born between 1951-1956, you will need to show proof of one.
- If you were born 1957 and after, you will need to show proof of two.
- MMR vaccinations can be given to adults.

3. **Diphtheria, Tetanus-(Td):** Proof of primary series with adequate schedule of boosters with the most recent within 10 years. Booster status must be kept current.

4. **Varicella: (Chicken Pox)** Antibody titer or vaccination.

5. **Pertussis: (Whooping Cough)** Proof of immunization. Pertussis is the —P in DPT shot. You will need to show proof of this vaccination as a child. Pertussis is not given to adults, so if you cannot find proof, a titer will be required.

6. **Polio:** Proof of primary series with adequate boosters using licensed vaccine.

7. **Hepatitis B Vaccine:** Three (3) injection series and positive antibody titer. Student may attend clinicals if they are in the process of receiving the immunization series. If the initial antibody titer is negative, the student will be instructed to visit their health care provider to initiate

an additional immunization series. If the student has completed two immunization series and still has a negative antibody titer, a letter from the provider will be required to verify a non-responder status. The student may attend clinicals if they are within the immunization process.

8. Influenza Vaccine: Required to have each fall of the year.

9. Communicable Disease Exposure: Following exposure to a communicable disease, such as TB, Varicella, Mumps, Measles, Meningitis, Pertussis, etc, the student shall immediately report the occurrence verbally to the clinical preceptor and a supervising employee. The student shall follow the agency policy concerning exposure to a communicable disease.

CPR Certification

Two-year CPR certification from the American Heart Association is required.

*These immunizations and CPR certification are required by one or more Clinical Facilities used by all nursing programs at Campbellsville University.

Professional Liability Insurance

The University will obtain professional liability insurance for each student through Nursing Service Organization (NSO) annually for a nominal fee. Each student is required to have a professional liability insurance policy during the clinical component of the program. This policy will be specific for a nurse practitioner student and include claim limits of \$5,000,000 aggregate and \$2,000,000 per claim. This policy will be specific to the area of family practice.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020, August 2020

EFFECTIVE: January 2018

SUBJECT:

CRIMINAL BACKGROUND CHECK AND OTHER APPLICABLE SCREENINGS

POLICY: Criminal Background Check and Other Applicable Screenings

PURPOSE: Incoming students must submit to a criminal background check and other applicable screenings prior to starting courses in the Nursing Program. A student's conditional acceptance into the Nursing Program may be revoked based upon the results of the criminal background check/applicable screenings where the results reveal information which indicates unfitness for the study and/or practice of nursing.

PROCEDURE:

Criminal Background Check and Other Applicable Screenings

Current students in the Nursing Program are also required to submit to criminal background checks and other applicable screenings by a vendor that is approved by the University prior to the beginning of each semester. A student may be dismissed from the Nursing Program where the background check/applicable screenings reveals information which indicates unfitness for the study and /or practice of nursing.

Failure to provide truthful information as part of a criminal background check or other screening may result in dismissal from the Nursing Program or other appropriate sanction.

Students are required to immediately report (within 48 hours) any arrests and/or convictions which occur while the student is enrolled in the Nursing Program to the Dean of the School of Nursing. Failure to timely report this information can result in the student's dismissal from the Nursing Program or other appropriate sanction.

The University partners with various healthcare entities to provide clinical experiences for students as part of the educational requirements of the Nursing Program. Students must consent to the University sharing the results of any criminal background check or other related screening with healthcare entities where the student may be placed to complete a clinical experience. These healthcare entities may deny clinical access to students on the basis of the results of their criminal background checks or other screening. When a student is denied clinical access under these circumstances, the student will be unable to complete the required clinical component of the nursing course, which will result in a failing grade for the nursing course and may result in the student not being able to complete the Nursing Program. Students will not be entitled to any reimbursement of tuition, fees or other costs if they are unable to complete the Nursing Program as a consequence of their criminal background/applicable screening results.

Students (incoming and current) are responsible for paying the cost of any required criminal background checks or other applicable screenings.

Students are also advised that the Kentucky Board of Nursing requires applicants for licensure to report criminal convictions and to submit to a criminal background check. Further, persons licensed or credentialed through the Kentucky Board of Nursing must report criminal convictions to the Board. Students are provided with a brochure from the Board of Nursing entitled "Mandatory Reporting of Criminal Convictions" and should consult the Board of Nursing for additional information.

Deniker, S. (November 2019). Personal & Email Communications with Steptoe & Johnson

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: May 2018

SUBJECT:

CLINICAL DRESS CODE

POLICY: Clinical Dress Code

PURPOSE: When the student participates in any clinical associated with the MSN FNP program, questions may arise related to dress for those experiences. This policy delineates guidelines for professional dress in the clinical setting.

PROCEDURE:

Clinical Dress Code

The student is expected to dress professionally in accordance with the assigned setting. For many areas, this will require business casual and a lab coat of the student's choosing. The lab coat may not be labeled or marked in any manner (for example, with the name or logo of an employing hospital). Shoes will be clean and neat and fulfill the requirements of the clinical setting. Again, no reference to a workplace or affiliation with another entity will be allowed.

Additional guidelines that may help are listed below:

1. Earrings- one per ear, post only
2. Piercings—ear lobe only, no nose, tongue, or facial piercings, no visible piercings.
3. Tattoos-no visible tattoos, any tattoos must be covered.
4. Hair must be clean and neat, a naturally appearing color
5. Nails-short, clean. Nail polish can be used if light neutral color, no black or unusual color. No artificial nails.
6. Make-up—daywear
7. Jewelry-watch with a second hand, one ring or one wedding band may be worn. No bracelets or anklets. Religious necklaces may be worn.
8. Personal hygiene-no gum chewing in patient areas. At all times student must be clean, neat and appropriately groomed while in clinical area. There are no exceptions to this policy. Beards and mustaches must be neatly trimmed.
9. Name Tag-Upon admission to the MSN FNP Program, students will be issued a name tag with the school logo and information that identifies them as students of Campbellsville University. This will be mailed to each student's home address. The student should maintain this name tag and wear it for all related clinical rotations to identify them as a student of Campbellsville University.
10. The student will be issued a cloth patch with the CU logo that should be affixed to the lab coat on the right upper chest area.
11. Business Casual Clothing should be worn under the white lab coat and name tag. If appropriate to wear nursing scrubs this is permissible. Further information will be outlined in your course syllabus.
12. There is no smoking allowed at any clinical setting by a Campbellsville University nursing student or faculty member.

If there are questions about the expected dress, the student should consult with the instructor for that class and seek additional guidance as indicated.

DATE: January 2020

REVIEWED: January 2018, January 2019, January 2020, August 2020

REVISED: January 2020

EFFECTIVE: February 2018

SUBJECT:

ATTENDANCE AT CLINICAL EXPERIENCES

POLICY: Attendance at Clinical Experiences

PURPOSE: To establish expectations of student performance within the MSN FNP Program.

PROCEDURE:

Attendance at Clinical Experiences

In order to obtain the necessary clinical experience to practice as an entry level FNP, the student must complete all of the clinical hour requirements in the program. When this does not occur, learning suffers and learning objectives cannot be met. Therefore, the following guidelines will be followed:

- You are expected to be punctual at the clinical site at the day and time decided upon by you and your preceptor.
- You should obtain a phone number and discuss the procedure of notifying the preceptor and faculty advisor for unexpected absences.
- In the case of an illness, injury, or family emergency that prevents you from attending, you must notify your preceptor and also your faculty advisor as soon as possible.
- A plan to make up any missed clinical hours must be presented to your faculty advisor and agreed upon by your preceptor.
- Failure to notify the preceptor as negotiated, prior to the beginning of the scheduled clinical day, is unprofessional, unacceptable and may place you and the clinical placement in jeopardy.
- In the event that you are unable to complete the required clinical hours in the designated period of time for that course, an extension will only be granted by agreement with the preceptor, clinical agency, faculty, and university. An incomplete will be issued in the course until the required clinical hours have been completed.

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020

EFFECTIVE: June 2020

SUBJECT:

ALTERNATIVES FOR CLINICAL HOUR COMPLETION

POLICY: Alternatives for Clinical Hour Completion

PURPOSE: Circumstances, either global or personal, may interfere with a student obtaining the required number of clinical hours in courses with a clinical component within a designated time frame. The same circumstances may limit the availability of face-to-face clinical sites. This program has developed guidelines to permit some flexibility in completing clinical hours while adhering to the minimum 500-hour face to face requirement mandated by NP certification organizations. This program requires 660 total clinical hours which potentially allows 160 hours for clinical simulation if needed. If simulation is used, it will be divided evenly between the adult, pediatric and women's health populations to support the end of program student learning outcomes. In fairness for all students, if simulation is offered, it will be completed by all of the students. This sim time will be deducted from the required 660 hours but not to exceed 160 hours.

PROCEDURE:

Alternatives for Clinical Hour Completion

The following options will be considered on a case by case basis.

1. Students who are currently enrolled in or have completed NUR 502 Advanced Health Assessment and Diagnostic Reasoning, may complete 30 clinical hours with the focus being history taking, physical assessment, and beginning diagnostic reasoning. The objectives of the clinical rotation will be included in a syllabus addendum to this course. Clinical sites appropriate for the rotation include outpatient family, adult, women's health, specialty practices and inpatient facilities. Clinical sites not appropriate for this experience are urgent care facilities, emergency rooms or any other environment that does not allow time for the intended focus. The clinical site must be approved by faculty.
2. If a student is unable to obtain the 60 clinical hour requirement in NUR 509 Care of Adults Across the Lifespan I and receives a grade of B or better in the didactic portion of the course, they may receive an incomplete in the course and finish the remaining clinical hours in NUR 510 Care of Adults Across the Lifespan II. These hours must be completed by the end of the bi-term that includes NUR 510 to receive credit for both courses. These courses will now be considered co-requisites rather than NUR 509 being a prerequisite to NUR 510.
3. If a student is unable to obtain the 60 clinical hour requirement in NUR 511 Care of Women, Children and Adolescents I and receives a grade of B or better in the didactic portion of the course, they may receive an incomplete in the course and finish the remaining clinical hours in NUR 512 Care of Women, Children and Adolescents II. These hours must be completed by the end of the bi-term that includes NUR 512 to receive credit for both courses. These courses will now be considered co-requisites rather than NUR 511 being a prerequisite to NUR 512.

- 4.** If a student obtains more than the 60-hour clinical requirement in NUR 509, the additional hours may be carried over into NUR 510 and be used as a portion of the 120 hour requirement for this course. The student may not be in the clinical setting more than 12 hours in a 24-hour period.
- 5.** If a student can obtain more than the 60-hour clinical requirement in NUR 511, the additional hours may be carried over into NUR 512 as long as the ratios of pediatric to women's health hours per course are maintained. The additional hours may be used as a portion of the 120-hour requirement for this course. The student may not be in the clinical setting more than 12 hours in a 24-hour period.
- 6.** Even with the above alternatives the student is still unable to fulfill the clinical requirements in either 509, 510, 511, or 512, consideration will be given to allowing them to complete the hour deficiencies in the last two bi-terms of the program which include the following courses: Synthesis of Advanced Practice Care of Patients in Primary Settings – Practicum I and II. These practicum experiences already include 180 and 120 hours of clinical experience respectively. This decision will be made by faculty on an individual basis and will consider the student's time availability and other commitments and the student's success in the didactic portions of the program to that point.

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020, August 2020

EFFECTIVE: June 2020

SUBJECT:

GRADING SYSTEM FOR THE CLINICAL EXPERIENCE

POLICY: Grading System for the Clinical Experience

PURPOSE: The clinical experiences within each course will be included in the overall assessment of the student in achieving course objectives and end of program student learning outcomes.

PROCEDURE: **Grading System for the Clinical Experience**

The faculty will issue a grade of Pass/Fail based on personal observations during site visits, student evaluations with input from the clinical preceptor, and quality of student assignments based on standardized grading rubrics. A successful clinical component will include attainment of all of the learning objectives for that course satisfactory to the student's expected level of competence and completion of all required documentation including but not limited to clinical logs, skills checklists, SOAP notes, and history and physical notes. Weekly discussion posts or other assignments may also be required at the discretion of faculty.

DATE: June 2020
REVIEWED: June 2020, August 2020
REVISED: June 2020, August 2020
EFFECTIVE: June 2020
SUBJECT:

CLINICAL PRECEPTOR REQUIREMENTS

POLICY: Clinical Preceptor Requirements

PURPOSE: The School of Nursing shall utilize Clinical Preceptors as needed to accomplish the mission and objectives of the MSN Program.

PROCEDURE:

Clinical Preceptor Requirements

Clinical Preceptors will be selected and appointed based on the following criteria. The Clinical Preceptor must be a nurse practitioner, physician assistant, medical doctor, doctor of osteopathy, or nurse midwife who is board certified in their field of practice. The Clinical Preceptor must be licensed in the state of the clinical experience. The preceptor must have at least one year of clinical experience in their field of practice as a board-certified provider. The Clinical Preceptor cannot be a Medical resident. The Clinical Preceptor will have at least master's degree preparation. An NP preceptor must hold a graduate degree in nursing and must have graduated from an accredited school of nursing.

Clinical Preceptors shall submit the following information:

- CV/Resume
- Professional License Information
- Proof of National Board Certification
- Documentation of specialty certifications
- Provide current contact information to faculty

Orientation to Role

Members of the School of Nursing Faculty will orient the Clinical Preceptors to their assigned role. Orientation will include clinical expectations, discussion of learning objectives for the specified teaching segment/preceptorship, review of skills and policies specific to Campbellsville University School of Nursing. This orientation process may take place in person, through paper deliverables, or by any electronic means.

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EFFECTIVE: June 2020

SUBJECT:

PRECEPTOR AND CLINICAL SITE SELECTION

POLICY: Preceptor and Clinical Site Selection

PURPOSE: Appropriate preceptors and clinical sites will be used by students to support the attainment of the knowledge and skills necessary to meet the end of program learning outcomes and practice as independent, entry level nurse practitioners.

PROCEDURE:

Preceptor and Clinical Site Selection

Since this is a distance learning program, students are encouraged to begin thinking about appropriate preceptors and clinical sites upon acceptance into the program. The process of acceptance of preceptors by faculty and the university can be a lengthy one and faculty want to avoid any last-minute complications if at all possible. The faculty of the School of Nursing will also have preceptor and clinical site suggestions for students in an area within traveling distance of Campbellsville University's physical campus. Campbellsville University already has agreements in place with some individuals or institutions that will facilitate the acceptance process.

A preceptor is an expert or specialist that guides the nurse practitioner student by directing the clinical experience, being an effective role model, and fostering confidence and independence in a real world clinical setting. See previous policy for the requirements to be a preceptor. Over the course of the program, the student must have some clinical experiences with an APRN preceptor preferably with expertise in the population-focus area of practice.

Here are some things to consider when selecting a preceptor:

- The preceptor should be a role model and promote professional and clinical competence in the graduate nursing role.
- The preceptor should be willing to offer constructive criticism both verbally to the student and in the form of appropriate evaluation forms that will be provided by the program.
- The preceptor should be willing to work closely with the university faculty in student evaluations and fostering student growth.
- The preceptor should not be related to you, associated with you in a close social setting, or be responsible for evaluating your work performance in your current employment position since this could hinder effective teaching, critiques, and enforcement of expectations.
- The preceptor should make available patient medical records to be used during clinical practice hours.

Here are some things to consider when selecting a clinical site:

- The clinical site must offer experience in the population focus that is being studied in a particular course.
- The clinical site must offer hours that are amicable to your schedule
- The clinical site must be a reasonable commuting distance from your home.
- The clinical site must welcome students and foster a learning environment.

Other important considerations:

- You may not choose to do clinical hours in more than three locations per course.
- You must spend at least 4 hours in the clinical setting to be able to count the hours, and no more than 12 hours per 24 hours.
- You may not start clinical hours until the corresponding course has started.
- Any carry over of clinical hours will be approved by faculty on a case-by-case basis considering unforeseen personal or global events affecting the availability of clinical sites.
- You may not be paid for your clinical hours or count clinical hours as occurring during your scheduled employment times.
- There are limits to clinical hours at particular sites which are listed separately later in this document.
- You must adhere to the clinical sites' requirements for immunizations, safety training, HIPAA training, etc.

The following are examples of appropriate clinical sites and required clinical hours for the various classes.

| Course | Hours | Skills Needed | Acceptable Settings | Unacceptable Settings |
|---------|------------------|--|--|---|
| NUR 502 | 30 (optional) | Must be able to perform: Adult health histories Head-to-toe physical exams Formulate differential diagnoses | Primary care clinical settings seeing both male and female adult patients Examples: Family practice Internal Medicine Long term care facilities Rural clinics NP based home health Veteran's administration Some inpatient hospital settings and specialty areas if adequate time for history and physical exam. | Intensive Care OB/GYN Pediatrics Mental Health Urgent care Emergency Departments |

| | | | | |
|--|-----------|---|---|---|
| Hours accrued in specialty areas in NUR 502 will not count as specialty hours used later in the program. For example: If you spend 30 hours in a cardiology practice for NUR 502, you may spend an additional 40 hours in the same specialty in NUR 513 or 514 | | | | |
| NUR 509 NUR 510 | 60 120 | Must be able to perform: <ul style="list-style-type: none"> • Adult health histories • Head-to-toe physical exams • Formulate differential diagnoses • Formulate plan of care | Primary care clinical settings seeing both male and female adult patients Examples: <ul style="list-style-type: none"> • Family practice • Internal Medicine • Long term care facilities • Rural clinics • NP based home health • Veteran's administration • Also acceptable with certain limitations: • Urgent Care/Retail Health • ER | Intensive Care Inpatient hospital care OB/GYN Pediatrics Mental Health Specialties Palliative Care *Most Specialties |

*Hour limitations for NUR 509, 510. You are not required to complete hours in the settings listed below, but if you elect to do so, the hour limitations will be strictly enforced.
Emergency Department and Urgent Care/Retail Health: maximum of 90 hours.

Examples: CVS, Kroger, Walmart, Fast Pace.

| Course | Hours | Skills needed | Acceptable Settings | Unacceptable Settings |
|---------|-------|--|---|---|
| NUR 511 | 60 | Must be able to perform: Complete women's health history Head-to-toe prenatal and postpartum physical exams Well woman exam Formulate differential diagnoses Formulate plan of care | OB/GYN *Family Practice (seeing only women's health patients) Health Department Planned Parenthood | High risk OB care. Any specialties Inpatient care Acute care Emergency room |

*If you choose a family care setting for women's health, you can only count ½ hour per patient seen. For example, if you see 10 women's health patients, you may only count 5 hours of clinical time.

| Course | Hours | Skills needed | Acceptable Settings | Unacceptable Settings |
|---------|--------------------------------------|--|---|--|
| NUR 512 | 120 (pediatrics age 18 and under) | Must be able to perform: <ul style="list-style-type: none"> • Complete pediatric health history • Complete pediatric physical exam • Formulate differential diagnoses • Formulate plan of care | Pediatric primary care practice *Family Practice (seeing only pediatric patients ages 18 and under) **Pediatric urgent care or ER | Inpatient Acute care Any specialties |

*If you choose a family care setting for pediatrics, you can only count ½ hour for every pediatric patient that you see. For example, if you see 10 pediatric patients in one day, you may only count this for 5 clinical hours.

** Pediatric Urgent Care/ER hours are limited to a maximum of 60 hours.

| Course | Hours | Skills Needed | Acceptable Settings | Unacceptable Settings |
|--------------------|------------|---|--|---|
| NUR 513 NUR 514 | 180 120 | Must be able to perform: <ul style="list-style-type: none"> • Complete adult health histories and head-to-toe adult physical exams • Complete pediatric health history and physical exam • Complete women's health history and well woman exam • Health history and head-to-toe prenatal and postpartum physical exams • Problem focused history and exam in all age groups. • Formulate differential diagnoses | Primary care clinical settings seeing both male and female adult patients Examples: <ul style="list-style-type: none"> • Family practice • Internal Medicine • Long term care facilities • Rural clinics • NP based home health • Veteran's administration • Primary care pediatric settings | Inpatient Acute care Some specialties High risk OB |

| | | | | |
|--|--|--|--|--|
| | | <ul style="list-style-type: none"> • Formulate plan of care • Implement plan of care | Also acceptable with certain limitations: <ul style="list-style-type: none"> • Urgent Care/Retail Health • ER • Specialties | |
|--|--|--|--|--|

Hour limitations for NUR 513 and 514. These classes combine for a total of 300 clinical hours. At least 170 hours must be spent caring for adult patients including women's health and at least 90 hours must be spent caring for pediatric patients. The remaining 40 hours you may spend as you choose with either pediatrics, adults, women's health or prenatal or postpartum patients. You may also use these 40 hours in a specialty area.

Specialty: maximum of 40 hours. Examples: cardiology, dermatology, pulmonology, oncology, nephrology, dermatology, palliative care.

The most efficient setting to meet the above requirements is a Family Practice Setting.

Only hours spent with your preceptor providing direct patient care may be counted as clinical hours. Any online activities, conferences or other indirect instruction or activities cannot be counted.

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SUBJECT:

PROCEDURE FOR SECURING CLINICAL SITES AND PRECEPTORS FOR MSN FNP STUDENTS

POLICY: Procedure for Securing Clinical Sites and Preceptors for MSN FNP Students

PURPOSE: Securing appropriate clinical sites and preceptors for MSN students is an integral part of providing an effective learning environment and preparing the students to enter into independent practice as family nurse practitioners. Certain steps must be followed for the processes of requests for clinical sites and preceptors by students, approval of the sites and preceptors by faculty and procurement of agreements between all parties.

PROCEDURE:

Procedure for Securing Clinical Sites and Preceptors for MSN FNP Students

Prior to requesting a preceptor or clinical site placement, the student will refer to the Preceptor and Clinical Site Selection policy for assistance in selecting the appropriate site and preceptor for the patient population in the upcoming course. Acceptable options are listed in chart format for each of the courses that have clinical content. The student is responsible for approaching a representative of the clinical site and/or preceptor to request placement for a pre-determined number of clinical hours. In the event that the student is unable to secure a site or preceptor, it is the responsibility of the MSN FNP program faculty to assist the student in finding placement.

The student will then follow the procedures for ***Steps for Requesting and Securing a Preceptor and Clinical Site*** outlined in the MSN Student Resource Room in Moodle. Requests for preceptors and clinical sites will be made through Typhon after all required documentation has been uploaded by the student. Required documents include preceptor CV, proof of licensure, and proof of board certification. Additional documentation consists of a signed Conflict of Interest Statement, Clinical Affiliation Agreement (CAA) and Student-Preceptor-Faculty Agreement. Document templates can be accessed through the Typhon Main Menu under Program Documents/Templates and are also available in the Student Resource Room. The student will be notified by email about the status of both preceptor and clinical site approvals within 10 business days. Sites and preceptors should be requested no later than 16 weeks prior to the start of the clinical rotation. Once the site and preceptor have been approved, the student is required to enter the information with corresponding dates in the My Schedule section in Typhon.

Any delay in these procedures as outlined above could result in the student being unable to begin the clinical rotation and potentially cause a delay in progressing through the program.

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SUBJECT:

RESPONSIBILITIES OF FACULTY, PRECEPTOR, AND STUDENTS IN THE CLINICAL SETTING

POLICY: Responsibilities of Faculty, Preceptor, and Students in the Clinical Setting

PURPOSE: Faculty, Preceptors and Students have distinct responsibilities that together support that the student has a valuable clinical experience and is successful in meeting the course and end of program learning outcomes.

PROCEDURE:

Responsibilities of Faculty, Preceptor, and Students in the Clinical Setting

Prior to the start of a clinical rotation, the clinical faculty, the student and the preceptor attest that they have read and understand the responsibilities of each party. This is documented by signatures on the Student – Faculty – Preceptor Agreement and housed in Typhon.

Student Responsibilities in the Clinical Setting

- Adhere to all policies and procedures for Campbellsville University, the School of Nursing, and the practicum facility including HIPAA and OSHA training.
- Respect patients and families with regard to privacy and cultural variances.
- Exhibit professional behaviors and appearance at all times.
- Provide the preceptor with contact information and obtaining contact information from the preceptor.
- Notify the preceptor of sickness or other life event that would prevent the student from attending a scheduled clinical day.
- Distribute, complete and return to the University all required documentation from preceptors and clinical sites.
- Discuss with preceptor course objectives and personal goals for the clinical experience.
- Share with preceptor the need for exposure to skills or certain clinical scenarios to enhance the individual clinical experience and asking questions as needed.
- Schedule clinical hours in consideration of the preceptor's schedule and available hours at the clinical site.
- Remind preceptor of the need for student evaluations mid-way through and at the end of each clinical rotation.
- Provide the required documentation of clinical hours and case logs as required in each course.
- Evaluate the preceptor and clinical site at the end of each clinical rotation.
- Facilitate scheduling of faculty virtual visits with preceptor and student at least two times in each clinical rotation to evaluate progress in the clinical setting.
- Communicate with preceptor any concerns about or barriers to an effective learning environment.

- Communicate with faculty any concerns or barriers that were not resolved after conferring with the preceptor.
- Comply with all clinical site policies.
- Document in the electronic health system under the supervision and guidance of the preceptor.
- Refrain from performing any technique or procedure for which the student has not been adequately trained.

Faculty Responsibilities in the Clinical Setting

- Ensure that each preceptor meets selection criteria as listed in the Campbellsville University MSN Practicum Handbook policy.
- Maintain respectful interaction with preceptor and student regardless of cultural or personality differences.
- Initiates and maintains contact with preceptor.
- Provide preceptor with documentation identifying and describing the requirements of the course.
- Provide preceptor with criteria for student evaluation and the number of direct clinical hours needed for that rotation.
- Annual review including preceptor credentials and student evaluations of preceptors.
- Attend one or more virtual site visits with preceptor and student for each clinical rotation.
- Evaluate student's success in meeting the objectives in the clinical setting with the input of the preceptor.
- Provide contact information including email addresses, office phone numbers, personal cell phone, emergency contact and best times to call.
- Support students and preceptors in conflict resolution and prevention strategies.
- Provides guidelines for reporting student or patient care incidents.
- Provides access to preceptor to address urgent issues.
- Work with the Clinical Coordinator to arrange for practicum placement consistent with program outcomes and student learning objectives.
- Provide remediation or correction plans for the student as needed.
- Support preceptor and provide resources and accommodations for the practicum experience.
- Evaluate case logs and other clinical documentation requirements.
- Analyze results of the preceptor survey and make needed changes to the selection of preceptors based on the findings.

• Preceptor's Responsibility in the Clinical Setting

• *Logistics and Arrangements*

- Notify appropriate individual (office manager, practice coordinator, etc.) of request for precepting
- Arrange for student orientation, including computer access
- Arrange clinical schedule with student (days, hours)
- Inform and prepare staff for student arrival and participation

- Inform student of practice epidemiology (common concerns and conditions seen in the practice)
- Assist with student access to patient health records
- Ensure examination space for patient encounters
- Assist the student in learning the consultation and referral process in the clinical setting
- Be aware of information in the legal affiliation agreement with the student's program
- Review personal and course/clinical objectives with student

- ***Preceptor Requirements***

- Provide appropriate documents to program, such as
- CV/resume
- Professional license information
- Documentation of specialty certifications
- Provide current contact information to faculty

- ***Communication***

- Discuss any problems with student and faculty
- Enable student documentation of patient care consistent with the requirements of the clinical site. (If students have limited access to EHR, student can document on a form that may assist with preceptor's own computer charting)
- Be available onsite when student is present

- ***Patient Encounters***

- Facilitate access to a variety of patients as students increase their clinical skills
- Validate student findings and provide feedback regarding their accuracy and significance
- Discuss and approve the plan of management with the student including diagnostic, therapeutic and follow-up plans

- ***Evaluation***

- Provide formative and summative evaluation to document student's performance, consistent with student's agreement and personal objectives and course objectives.
- Confer with faculty advisor and student a minimum of two times per experience to discuss student's progress and learning needs

Student-Preceptor-Faculty Agreement

The nurse practitioner student enrolled in the Master of Science in Nursing Family Nurse Practitioner program will commit an average of _____ hours weekly participating in clinically sanctioned activities. The student will share in the evaluation of the preceptor and course content.

The preceptor will serve as a role model and will provide adequate opportunities for practice and success. The preceptor will provide support, encouragement, and professional feedback in difficult and complex situations. The preceptor will share various tools and references which will assist the student in the role transition to nurse practitioner.

The preceptor agrees to review the student's weekly activity log and provide supervision and guidance to facilitate the student's goals and expectations for the clinical experience. The preceptor also agrees to collaborate with the student and professor in an ongoing evaluation of the students needs and clinical experiences.

The student agrees that all information concerning the involved agency, patients, or School/College of Nursing will be kept confidential. The student also agrees that the preceptor will provide a summative evaluation of the student's activities, professionalism, goal attainment, etc.

STUDENT

NAME (Please Print)

Student's Signature

Date

PRECEPTOR

NAME & TITLE (Please Print)

Preceptor's Signature

Date

AGENCY

FACULTY

NAME & TITLE (Please Print)

Faculty Signature

Date

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020, August 2020

EFFECTIVE: June 2020

SUBJECT:

CONFLICT OF INTEREST

POLICY: Conflict of Interest

PURPOSE: Preceptor and student should have a relationship that is conducive to an optimal learning experience.

PROCEDURE:

Conflict of Interest

Students who select their own preceptors should provide the program with documentation that a conflict of interest does not exist. Conflicts of interest include but are not limited to personal or social relationships and the preceptor having an authoritative position over the student in a setting other than in the clinical rotation. (See the following Conflict of Interest Statement).



**MSN FNP Program
Conflict of Interest Statement**

I have secured _____ as my clinical preceptor for NUR
_____.

The following signatures verify that there is no personal, social, or professional relationship with this preceptor that is inappropriate and would be an impediment to learning.

Student name (print) Student signature and date

Preceptor name (print) Preceptor signature and date

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SUBJECT:

INDIVIDUAL STUDENT CLINICAL LEARNING OBJECTIVES

POLICY: Individual Student Clinical Learning Objectives

PURPOSE: Course and personal objectives guide the learning experience and clarify direction for both the learner and the preceptor.

PROCEDURE:

Individual Student Clinical Learning Objectives

The student shall construct student-specific learning objectives in addition to the course objectives for the clinical experience. The student will reflect and develop individual learning objectives that will meet and facilitate learning needs (e.g. assessment of abnormal heart sounds, skills acquisition, clinical use of the microscope, suturing, etc.) that are not explicit in the course or clinical objectives. The student should also provide a copy of the course objectives and evaluation criteria & forms if the preceptor has not received them.

Guidelines for developing individual learning objectives include the following:

- The student will write specific clinical objectives according to individual learning needs.
- The faculty member will discuss and approve the objectives before the student presents them to the preceptor.
- Examples of clinical objectives include gaining expertise in psychomotor skills, diagnostic reasoning, diagnostic labeling, interventions, documentation, and evaluation methods.
- Specific clinical objectives must have a consensus of approval among faculty, preceptor, and student.
- Clinical objectives should reflect the level of competency the student would like to achieve at the end of the clinical, e.g., minimal competency, proficient, etc.
- Clinical objectives should be congruent and complement the course objectives.
- A method for evaluation of individual objectives should include a method for evaluation that is measurable.
- Specific clinical objectives should be sufficiently limited in number so that appropriate attention can be directed toward each.

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SUBJECT:

PREPARATION FOR THE CLINICAL EXPERIENCE AND GETTING STARTED

POLICY: Preparation for the Clinical Experience and Getting Started

PURPOSE: The clinical experience extends the learning environment of the classroom to integrate and synthesize theoretical concepts with clinical practice. Students should be prepared prior to the start of the experience to maximize learning during the rotation.

PROCEDURE:

Preparation for the Clinical Experience and Getting Started

Students should prepare for the clinical experience by developing individual learning objectives, as previously discussed. Students should prepare for clinical by reading course texts and professional journals and using other audiovisual and electronic learning aids. Students are expected to be self-motivated and responsible for preparation for the clinical experience.

The preceptor should discuss the specific patient population and the most common clinical problems to expect in the clinical site. The preceptor may recommend materials and topics for review prior to the first clinical day. The student should review the common clinical problems relevant to the clinical site population. Follow-up reading of current reference material following the clinical day provides the student with the opportunity to increase the breadth of scientific and clinical knowledge from that gained in the clinical arena.

Students must bring their clinical diagnostic equipment (e.g. stethoscope, pen light, etc.). Otoscopes and ophthalmoscopes are generally available in treatment areas but ask your preceptor if there are any specific things you need to bring. Electronic resources, such as a smart phone or a tablet, can provide applications appropriate to the clinical experience and be valuable to student learning. It may be beneficial to have discussions with other students who have had the same or similar placements.

On the first clinical day, the preceptor will introduce the student to the clinical site, confidentiality and personnel policies, and to other members of the staff and provider team. The role of the student and the length of clinical placement will be relayed to the staff. Preceptor and student will discuss computer access, the procedure for the preceptor cosigning documents, eating and parking arrangements, and communication with other disciplines.

The student should with the preceptor personal learning objectives and priorities as discussed previously. The student should learn something about the preceptor, when possible, to acknowledge the preceptor's background and broaden the educational experience. The preceptor will allow the student one day to "shadow" them to understand the particular style and pace of the clinical environment.

Each agency may require the student to complete the agency's HIPAA guide before beginning the clinical. The student must comply with HIPAA regulations regarding the protection of the privacy of all health information of patients encountered in the clinical site. All assignments must be submitted without any identifying data.

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SUBJECT:

CLINICAL DOCUMENTATION

POLICY: Clinical Documentation

PURPOSE: The clinical experience extends the learning environment of the classroom to integrate and synthesize theoretical concepts with clinical practice. Students should be prepared prior to the start of the experience to maximize learning during the rotation.

PROCEDURE:

Clinical Documentation

Clinical Hour Time Logs

Documentation of clinical hours will be addressed in each individual course syllabus. It is the student's responsibility to maintain the clinical hour time log and obtain the preceptor's signature at the designated time during the semester/clinical that validates the completion of the clinical hours. Students should seek faculty counsel on recording the hours for each age population seen (e.g. pediatrics, OB/GYN, adult medicine if in a clinical site with multiple population foci. Maintaining separate clinical hours for each population provides clarity for documentation that can be provided to the certification bodies when applying for certification. This will be clarified in each individual course.

Clinical Case Logs

The student will be required to keep electronic clinical case logs then faculty for each course will give direction in the clinical course syllabus on:
data to be included, e.g. number and type of patients seen, clinical problems evaluated, procedures performed, immunizations, medications prescribed, etc.
the frequency for submitting the log.
having the log approved or returning it to the student for revisions.

Patient Records

In accordance with the provisions of HIPAA, all information relating to individual patients must be removed when the patient's case presentation is documented in clinical logs, history and physicals, case studies, etc.

With the advent of the electronic health record (EHR), many practices and agencies/institutions use EHRs. The student will need to identify the processes for obtaining access, documentation, and preceptor review and signature. Many different EHR programs are currently in use, and the experience of using one provides the opportunity to learn the benefits of the EHR and how best to document patient care and evaluate patient outcomes.

Patient documentation requirements will vary in the clinical setting and are up to the preceptor's discretion. These may include:

1. Documentation in the patient's electronic medical record which is then reviewed, edited and signed by the preceptor.
2. Written documentation in a teaching file separate from the actual patient medical record.
3. Collaborative documentation between student and preceptor either in a written or electronic medical record.
4. The student may also be asked by the course faculty to submit copies of the full documentation from some patient encounters. This will ensure that the ability to document correctly is assessed. The number of these documentations will be left to the discretion of the course instructor.

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SUBJECT:

FACULTY COMMUNICATION/SITE VISITS

POLICY: Faculty Communication/Site Visits

PURPOSE: Student evaluation is the responsibility of the NP faculty with input from the preceptor. Direct clinical observation of student performance is essential by both the faculty member and the clinical preceptor. Clinical observation by faculty may be accomplished using direct and/or indirect evaluation methods such as student-faculty conferences, computer simulation, videotaped sessions, clinical simulations, or other appropriate telecommunication technologies.

PROCEDURE:

Faculty Communication/Site Visits

The clinical faculty will make at least one virtual site visit for each student during each clinical rotation. This visit should occur within weeks 5 or 6 of the clinical rotation. Scheduling will be facilitated by the student after obtaining both faculty and preceptor availability. The visit should include an actual patient encounter. The faculty or student will obtain verbal permission from the patient in the exam room before the visit continues. The visit will be conducted using Zoom virtual meeting room. The student may use a tablet or cell phone for the encounter but the student and patient must be visible to the clinical faculty throughout the exam. The faculty should have a time to converse alone with the preceptor, either after the patient encounter or at another pre-designated time, for a report on the student's progress and additional needs. The student will then be included in a conversation with faculty for further discussion about progress and goals for the remaining clinical time. A second visit may be indicated based on the progress of the student at the time of the first visit or if any new issues with clinical performance arise. Instructions for the use of Zoom are in the Student Handbook and Resource Room. It is the student's responsibility to coordinate the schedules of all parties when arranging the visits and conferences. Faculty should be prepared to speak with the preceptor for a few minutes after the exam or at other pre-determined time.

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SUBJECT:

CLINICAL EVALUATION

POLICY: Clinical Evaluation

PURPOSE: Advanced practice nurses must perform competently, appropriately interact with patients and various professionals, and adapt to ever-changing health care systems. Evaluation of outcomes need to reflect these expectations. Measurement of the quality of the student's performance in the clinical setting is assessing attainment of educational competencies and learning outcomes. Evaluation provides opportunities to identify students' strengths and weaknesses and to provide experiences to enable students to successfully achieve educational competencies. In addition to student evaluation, the evaluation process includes appropriateness of clinical sites, quality of teaching/learning strategies, preceptor involvement, performance of faculty member(s), and the effectiveness of the overall educational program.

PROCEDURE:

Clinical Evaluation

Faculty evaluation of the student's overall success in the clinical setting may be measured by some or all of the following.

| Learning Activities and Evaluations for Clinical Components of Course | | | |
|---|------------------------------------|--|---|
| Pass/Fail | | | |
| Item | Opportunities | Grading Method | Expected Level of Achievement |
| SOAP Notes | 8 (one per week) | Rubric | 4 or 5 in all areas |
| H&P Notes | 4 (one every other week) | Rubric | 5 (competent) in all areas |
| Case log completion | Varies depending on patient volume | Verify that are areas are correct and completed | All areas completed |
| Completion of required clinical hours. | 2 (middle and end of term) | Review time log verification by preceptor in Typhon. | All time logs verified |
| Mid-term Checkpoint | 1 | Review of Mid-term Evaluation by Preceptor and Student Self-evaluation | Level 2 or higher in all competency areas; 3-4 goals identified for remainder of rotation |
| Faculty Site Visit | 1 (or more if needed) | Rubric | Good or Excellent on all rubric components |

| | | | |
|---|----------------------------|-------------------------------------|---|
| | | | (lower scores will require an additional site visit) |
| <i>Preceptor Evaluation of Student</i> | 2 (middle and end of term) | Rubric | Completed – see Mid-term Checkpoint above and Faculty Final Evaluation Below |
| <i>Student Self-Evaluation</i> | 2 (middle and end of term) | Rubric | Completed – see Mid-term Checkpoint above and Faculty Final Evaluation Below |
| <i>Student Reflection</i> | 1 | Meets word and content requirements | Completed |

| | | | |
|--|-----------------|---|---|
| <i>Faculty Final Evaluation</i> | 1 (end of term) | Rubric with consideration of Site Visit Evaluation by Faculty, Preceptor and Student Self-Evaluations | NUR 509, 510, 511, and 512 – No more than one level 2 in each of the competency areas; NUR 513 & 514 – Level 3 or above in all competency areas. |
| <i>Student Evaluations of Preceptor and Clinical Site</i> | 1 (end of term) | None | Completed |

Students will be evaluated by faculty after the site visit and again at the end of the course. Preceptors will evaluate students at the midpoint and the end of the rotation. A scoring rubric will be used to evaluate student performance in various competencies and identify any areas needing improvement. If any area is found to be unsatisfactory at the time of the midterm evaluation, the student will be counseled and a plan will be determined by student, clinical faculty and preceptor to correct any deficiencies. Failure to achieve any of the critical elements mentioned above at mid-term or final evaluation can result in immediate clinical failure. Clinical failure will result in course failure as well. Evaluations by preceptor and faculty and student self-evaluation are listed below.

Performance in an unsafe manner may result in dismissal from the program at any point. Preventable injury of client or other person may also result in dismissal.

Faculty Clinical Site Visit Evaluation of Student

Current Term:

Name and Location of Clinic:

Course:

Preceptor:

| | Excellent | Good | Fair | |
|-------------------------------------|--|--|--|--|
| Chief Complaint | Consistently presents patient's age, gender, and CC. | Sometimes omits patient's age, gender or CC. | Frequently omits patient's age, gender or CC. | Consistently omits patient's age, gender or CC. |
| Differentials | Consistently states appropriate differentials for the CC. | Sometimes omits some appropriate differentials. | Frequently omits appropriate differentials. | Consistently omits appropriate differentials. |
| Subjective | Consistently presents concise, organized, HPIs. Includes key ROS, PMH, FH and SH. No objective findings included in the history. | Objective data reported to preceptor are sometimes disorganized. Most abnormal exam findings are identified. | Objective data reported to preceptor are frequently disorganized. Critical abnormal exam findings are not identified. | Objective data reported to preceptor are frequently disorganized. Critical abnormal exam findings are not identified. |
| Assessment | Assessments are consistently accurate and show clear understanding of the patient's disease state(s) and current condition(s). Logically refutes the remaining differentials. | Assessments are sometimes inaccurate based on the subjective and/or objective data obtained. Differential diagnoses are sometimes not supported or refuted. | Assessments are frequently inaccurate based on the subjective and/or objective data obtained. Differential diagnoses are not supported or refuted. | Assessments are frequently inaccurate based on the subjective and/or objective data obtained. Differential diagnoses are not supported or refuted. |
| Diagnostic Studies | Diagnostic studies are consistently pertinent to either rule in or rule out differential dx without being excessive. | Diagnostic studies are sometimes not pertinent to either rule in or rule out differential dx or are sometimes excessive | Diagnostic studies are frequently not pertinent to either rule in or rule out differential dx or are frequently excessive. | Diagnostic studies are frequently not pertinent to either rule in or rule out differential dx or are frequently excessive. |
| Plan | Plans are consistently appropriate and accurate for the diagnosis. Are individualized and supported by current evidence-based guidelines. Consistently includes pertinent health education, health promotion/disease prevention and appropriate f/u. | Plans are usually appropriate for the diagnosis but are sometimes "generic" and not well individualized to the patient. Are usually supported by current evidence-based guidelines. Sometimes omits pertinent health education, health promotion/disease prevention and appropriate f/u. | Plans are frequently not appropriate for the diagnosis or are too excessive. Are sometimes not supported by evidence-based guidelines. Frequently omits pertinent health education, health promotion/disease prevention and appropriate f/u. | Plans are frequently not appropriate for the diagnosis or are too excessive. Are sometimes not supported by evidence-based guidelines. Frequently omits pertinent health education, health promotion/disease prevention and appropriate f/u. |
| Interpersonal Communications | Consistently relates well to patients. Demonstrates sensitivity to the patients' culture, age, gender and socioeconomic status. | Usually relates well to patients. Sometimes insensitive to the patients' culture, age, gender and socioeconomic status. | Frequently has difficulty relating to patients. Frequently insensitive to the patients' culture, age, gender and socioeconomic status. | Consistently has difficulty relating to patients. Frequently insensitive to the patients' culture, age, gender and socioeconomic status. |
| Professionalism | Consistently professional in attire and in communication with preceptor & staff. Recognizes areas that need improvement and accepts constructive criticism. | Usually professional in attire and in communication with preceptor & staff. Usually recognizes areas that need improvement & accepts constructive criticism. | Frequently unprofessional in attire and in communication with preceptor & staff. Does not recognize areas that need improvement nor accepts constructive criticism. | Consistently unprofessional in attire and in communication with preceptor & staff. Does not recognize areas that need improvement nor accepts constructive criticism. |

Pass: Yes _____ No _____
 Observed Strengths:

Suggested Areas for Improvement:

Remediation Plan if Needed:

Clinical Faculty Signature

Date:

Student Designed Remediation Plan

Student's name: _____ Date: _____

Course Faculty involved with this Learning Plan: _____

Briefly state the problem:

What do I need to accomplish?

Steps to resolution - how will I accomplish these objectives?

What resources will I need?

How will I demonstrate that I have reached my objectives?

What constitutes satisfactory performance for me?

What constitutes unsatisfactory performance for me?

Date for review of progress _____

Date for completion of the Learning Plan _____

Student Signature _____ Date _____

Addition Site Visit Required: Yes _____ No _____

Faculty Reviewer Signature _____ Date _____

Preceptor Evaluation of Student, Student Self-Evaluation and Faculty Evaluation of Student

Student's Name: _____

of Hours Completed: _____

Preceptor's Name: _____

Course Title & #: _____

| COMPETENCY AREA: Professionalism | Strongly Agree | Agree | Disagree | Strongly Disagree | Does Not Apply |
|--|----------------------------|-------------------|--------------------------|------------------------------|----------------|
| 1. The student presents cases in an organized manner. | | | | | |
| 2. The student maintains confidentiality and adheres to HIPAA. | | | | | |
| 3. The student performs appropriate examinations on the patient. | | | | | |
| 4. The student analyzes and interprets problems correctly. | | | | | |
| 5. The student incorporates patient/family cultural preference, beliefs, and traditions into the management plan. | | | | | |
| 6. The student demonstrates appropriate clinical judgement. | | | | | |
| 7. The student demonstrates efficient use of time. | | | | | |
| 8. The student assumes responsibility. | | | | | |
| 9. The student has strong oral presentation skills. | | | | | |
| 10. The student exercises sound judgement. | | | | | |
| 11. The student pays attention to detail. | | | | | |
| 12. The student has a strong work ethic. | | | | | |
| 13. The student demonstrates critical thinking in planning for the optimal patient outcome. | | | | | |
| 14. The student's appearance, demeanor, and reliability is appropriate. | | | | | |
| 15. The student responds well to constructive criticism and feedback. | | | | | |
| 16. The student establishes general patient acceptance/rapport. | | | | | |
| 17. The student provides the patient with empathy and support. | | | | | |
| COMPETENCY AREA: Scientific Foundation | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |
| 1. Critically analyzes data and evidence for improving advanced nursing practice. | | | | | |
| 2. Integrates knowledge from the humanities and sciences within the context of nursing science. | | | | | |
| 3. Translates research and other forms of knowledge to improve practice processes and outcomes. | | | | | |
| 4. Develops new practice approaches based on the integration of research, theory, and practice knowledge. | | | | | |
| COMPETENCY AREA: Leadership | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |
| 1. Assumes complex and advanced leadership roles to initiate and guide change. | | | | | |
| 2. Provides leadership to foster collaboration with multiple stakeholders (e.g., patients, community, integrated health care teams, and policy makers) to improve health care. | | | | | |
| 3. Demonstrates leadership that uses critical and reflective thinking. | | | | | |

| | | | | | |
|---|---------------------------------------|--------------------------|---------------------------------|-------------------------------------|-----------------------|
| 4. Advocates for improved access, quality, and cost effective health care. | | | | | |
| 5. Advances practice through the development and implementation of innovations incorporating principles of change. | | | | | |
| 6. Communicates practice knowledge effectively both orally and in writing. | | | | | |
| 7. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus. | | | | | |
| COMPETENCY AREA: Quality | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |
| 1. Uses best available evidence to continuously improve quality of clinical practice. | | | | | |
| 2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care. | | | | | |
| 3. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact quality of health care. | | | | | |
| 4. Applies skills in peer review to promote a culture of excellence. | | | | | |
| 5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality. | | | | | |
| COMPETENCY AREA: Practice Inquiry | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |
| 1. Provides leadership in the translation of new knowledge into practice. | | | | | |
| 2. Generates knowledge from clinical practice to improve practice and patient outcomes. | | | | | |
| 3. Applies clinical investigative skills to improve health outcomes. | | | | | |
| 4. Leads practice inquiry, individually or in partnership with others. | | | | | |
| 5. Disseminates evidence from inquiry to diverse audiences using multiple modalities. | | | | | |
| 6. Analyzes clinical guidelines for individualized application into practice. | | | | | |
| COMPETENCY AREA: Technology and Information Literacy | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |
| 1. Integrates appropriate technologies for knowledge management to improve health care. | | | | | |
| 2. Translates technical and scientific health information appropriate for various users' needs. | | | | | |
| 2a. Assesses the patient's and caregiver's educational needs to provide effective, personalized health care. | | | | | |
| 2b. Coaches the patient and caregiver for positive behavioral change. | | | | | |
| 3. Demonstrates information literacy skills in complex decision making. | | | | | |
| 4. Contributes to the design of clinical information systems that promote safe, quality, and cost effective care. | | | | | |
| 5. Uses technology systems that capture data on variables for the evaluation of nursing care. | | | | | |
| COMPETENCY AREA: Policy | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |
| 1. Demonstrates an understanding of the interdependence of policy and practice. | | | | | |
| 2. Advocates for ethical policies that promote access, equity, quality, and cost. | | | | | |
| 3. Analyzes ethical, legal, and social factors influencing policy development. | | | | | |
| 4. Contributes in the development of health policy. | | | | | |
| 5. Analyzes the implications of health policy across disciplines. | | | | | |
| 6. Evaluates the impact of globalization on health care policy development. | | | | | |
| COMPETENCY AREA: Health Delivery Systems | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |

| | | | | | |
|--|---|--------------------------|---------------------------------|-------------------------------------|-----------------------|
| 1. Applies knowledge of organizational practices and complex systems to improve health care delivery. | | | | | |
| 2. Effects health care change using broad based skills including negotiating, consensus-building, and partnering. | | | | | |
| 3. Minimizes risk to patient and providers at the individual and systems level. | | | | | |
| 4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders. | | | | | |
| 5. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment. | | | | | |
| 6. Analyzes organizational structure, functions, and resources to improve the delivery of care. | | | | | |
| 7. Collaborates in planning for transitions across the continuum of care. | | | | | |
| COMPETENCY AREA: Ethics | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |
| 1. Integrates ethical principles in decision making. | | | | | |
| 2. Evaluates the ethical consequences of decisions. | | | | | |
| 3. Applies ethically sound solutions to complex issues related to individuals, populations, and systems of care. | | | | | |
| COMPETENCY AREA: Independent Practice | CONSISTENT & Self directed | Fairly Consistent | MODERATE guidance needed | Considerable Guidance Needed | Does Not Apply |
| 1. Functions as a licensed independent practitioner. | | | | | |
| 2. Demonstrates the highest level of accountability for professional practice/ | | | | | |
| 3. Practices independently managing previously diagnosed and undiagnosed patients. | | | | | |
| 3a. Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative and end of life care. | | | | | |
| 3b. Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings. | | | | | |
| 3c. Employs screening and diagnostic strategies in the development of diagnoses. | | | | | |
| 3d. Prescribes medications within the scope of practice. | | | | | |
| 3e. Manages the health/illness status of patients and families over time. | | | | | |
| 4. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision making. | | | | | |
| 4a. Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration. | | | | | |
| 4b. Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect. | | | | | |
| 4c. Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care. | | | | | |
| 4d. Preserves the patient's control over decision making by negotiating a mutually acceptable plan of care. | | | | | |
| Student Strengths: | Areas for development/improvement: | | | | |
| | | | | | |

Preceptor's Signature/Date : _____

Student Signature/Date: _____

DATE: June 2020
REVIEWED: June 2020, August 2020
REVISED: June 2020, August 2020
EFFECTIVE: June 2020
SUBJECT:

EVALUATION OF THE PRECEPTOR & CLINICAL SITE BY STUDENT AND FACULTY

POLICY: Evaluation of the Preceptor & Clinical Site by Student and Faculty

PURPOSE: Outlines the process of evaluating the preceptor and clinical site and rationale for conducting such evaluations.

PROCEDURE:

Evaluation of the Preceptor & Clinical Site by Student and Faculty

Following the clinical rotation, the student should provide feedback to the preceptor on the quality of the learning experience, including the effectiveness of the preceptor's teaching and mentoring. In addition, students should provide the faculty with feedback on the effectiveness of the preceptor in supporting learning outcomes as well as the clinical site for facilitating learning (e.g. exam rooms available for student patient encounters). These surveys will be administered through Typhon and are included below. The faculty will evaluate the clinical site at the end of each rotation to guide use of the site in the future. This evaluation will be housed in Typhon.

Student Evaluation of Clinical Site

Student Evaluation of Clinical Site

Clinical Site _____

Preceptor _____

Term _____

| | Strongly Agree | Agree | Disagree | Strongly Disagree |
|--|----------------|-------|----------|-------------------|
| Orientation to the site included a tour of the facility and introductions to key people. | | | | |
| Physical facilities were adequate. | | | | |
| The site is receptive to student participation in patient care. | | | | |
| The site provided a balance of learning experiences. | | | | |
| The staff of the site were accepting of me as a student. | | | | |
| The quality of patients seen and scheduled was appropriate. | | | | |
| The clinical site was professional in appearance including cleanliness. | | | | |
| The clinical site provided adequate supervision for student learning and safety. | | | | |
| This site provided a variety of learning experiences. | | | | |

Please list and detail the clinical site's strengths:

Please list and detail the clinical site's weaknesses:

I would recommend this site to other students.

Yes _____ No _____

Student's signature _____ Date _____

Additional Comments

Student Evaluation of Preceptor

Student Evaluation of Preceptor

Clinical Site _____

Preceptor _____

Term _____

| | Strongly Agree | Agree | Disagree | Strongly Disagree |
|--|----------------|-------|----------|-------------------|
| 1. My preceptor was available for consultation | | | | |
| 2. My preceptor facilitated access to information and resources. | | | | |
| 3. My preceptor provided constructive and timely feedback. | | | | |
| 4. My preceptor provided opportunities for management of patient care appropriate to my level of experience. | | | | |
| 5. My preceptor encouraged problem solving through meaningful questioning | | | | |
| 6. My preceptor's ability as an educator helped me apply my skills as a student of this program | | | | |
| 7. My preceptor was a role model in utilizing evidence in choosing interventions for best practice. | | | | |
| 8. My preceptor discussed his/her expectations of me for this clinical rotation. | | | | |
| 9. My preceptor reviewed my documentation. | | | | |
| 10. My preceptor was respectful of me and my time. | | | | |
| 11. My preceptor interacted in a professional manner with me. | | | | |

Please list and detail the preceptor's strengths:

Please list and detail the preceptor's weaknesses:

I would recommend this preceptor to other students.

_____ Yes _____ No

Student's Signature _____ Date _____

Student's Name (Print) _____

Additional Comments:

DATE: June 2020
REVIEWED: June 2020, August 2020
REVISED: June 2020, August 2020
EFFECTIVE: June 2020
SUBJECT:

EVALUATION AND SELECTION OF CLINICAL SITES FOR THE MSN FNP PROGRAM

POLICY: Evaluation and Selection of Clinical Sites for the MSN FNP Program

PURPOSE: To ensure that clinical sites meet the needs of the students and support course and end of program learning outcomes.

PROCEDURE:

Evaluation and Selection of Clinical Sites for the MSN FNP Program

The Clinical Coordinator or the Clinical Education Coordinator in conjunction with the dean and other faculty will review potential clinical facilities to determine suitability for student learning needs. Annual evaluation of these clinical sites ensures that the sites continue to meet the selection criteria on an ongoing basis and allows for discussion of any alterations or new needs when contracts are reviewed for renewal. To ensure that those facilities provide the optimum learning experience for students to be able to achieve the student learning outcomes and meet the need for School of Nursing program outcomes, facilities shall meet the following selection criteria:

- 1) Patient volume at the proposed site is adequate to ensure sufficient numbers and types of patients to acquire the skills required to meet core curriculum guidelines, program goals and practice.
- 2) The proposed clinical site shall have adequate space available for students, including adequate conference rooms, areas for documentation, and break space as needed.
- 3) Clinical site has adequate resources available on site, including:
 - Access to personal protective equipment (unless students are notified to supply their own prior to the clinical experience);
 - Clearly written, accessible policies and procedures;
 - Licensed staff in adequate numbers who retain ultimate responsibility for client population;
 - Medical record system access as necessary for completion of learning outcomes;
- 4) Clinical site will collaborate with program to ensure appropriate orientation process is provided to introduce faculty and students to facility, department rules and policies, procedures for handling emergency codes, any variations in dress code, educational opportunities, etc.
- 5) Clinical site mission and philosophy are compatible with the objectives and learning needs of students within the program.
- 6) Clinical site agrees to communicate regularly with Clinical Coordinator to discuss any problems or potential risks that could affect student-learning outcomes.

7) Clinical site remains in good standing with accrediting body/Medicare-Medicaid certification of compliance.

Clinical faculty will evaluate the clinical site after each site visit using an evaluation form in Typhon. Any concerns or deficiencies will be discussed with the Clinical Coordinator and depending upon the gravity of the situation, addressed immediately or annually in the February staff meeting.

Each site will be reviewed annually by the Clinical Coordinator using the following checklist. These reviews will be housed in Typhon in the documents section for each clinical site.

Faculty Evaluation of Clinical Site

Location of site: Urban _____ Rural _____

Name of faculty completing report: _____ Date _____

Name of preceptor _____

| | Yes | No | N/A |
|--|-----|----|-----|
| Does the site have a dedicated work area for the students? | | | |
| Does the site present any safety concerns for the student? | | | |
| Do students have access to patient records either paper or electronic including lab and x-ray reports? | | | |
| Does the site provide opportunities for the students to assume increasing levels of independence based on their performance? | | | |
| Does the site advocate for ethical policies that promote access, equity, quality, and cost? | | | |
| Does the site have a sufficient number of patient available to meet student learning objectives? | | | |
| Is the site staff supportive of the student's learning in the clinical setting? | | | |
| Is the philosophy of the clinic/site to provide health promotion and disease prevention? | | | |
| Is philosophy of the clinic/site to provide disease diagnosis and management? | | | |
| Are community resources, other agencies, and professional disciplines involved with client welfare? | | | |
| Are students allowed to select clients according to their needs? | | | |
| Are students given the opportunity to follow-up with clients and/or problems of interest? | | | |
| Are the types of clients varied as to age, type of problem, etc.? | | | |
| Is adequate time given to see clients? | | | |

Comments

Practice site type: (circle one)

Physician owned clinic
Company or industrial clinic
Neighborhood health clinic
Urgent care setting

Nurse Practitioner owned clinic
School clinic
Inpatient hospital setting
Other

What is the primary population focus of this site? (circle one)

Family

Adult/Gerontological

Pediatrics

Women's Health

Urgent Care

Specialty Area

Other

List ways this agency provides good clinical experience for students.

List areas in which this agency needs improvement in order to provide optimal student learning.

Identify the practicum level of the student most appropriate for placement at this practice facility.

I would recommend this clinical site for other students.

Yes _____ No _____



MSN FNP Clinical Site Annual Evaluation

_____ Clinical Site remains in good standing with accrediting body/Medicare-Medicaid certificate of compliance.

Comments:

_____ Clinical Affiliation Agreement is current.

Comments:

_____ The clinical site is compliant with items 1-6 in the attached policy.

Comments:

_____ Faculty site visit evaluations reviewed and approved with no action taken.

Comments:

_____ Student clinical site evaluations reviewed and approved with no action taken.

Comments:

I approve this clinical site for students in the CU MSN FNP Program:

_____yes

_____yes with conditions

_____no

Please explain if 'yes with conditions' or 'no' response.

Signature of Reviewer:

Date:

Title of Reviewer

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020

EFFECTIVE: June 2020

SUBJECT:

COURSE EVALUATION

POLICY: Course Evaluation

PURPOSE: Outline the process and rationale for students completing course evaluations at the end of each course.

PROCEDURE:

Course Evaluation

The student is required to complete an evaluation at the end of each course that assesses the student's opinion of the course as a whole and the university faculty. This will be administered via student e-mail through Class Climate and the results distributed to the course faculty.

DATE: June 2020
REVIEWED: June 2020, August 2020
REVISED: June 2020, August 2020
EFFECTIVE: June 2020
SUBJECT:

CONFLICT RESOLUTION IN THE CLINICAL SETTING

POLICY: Conflict Resolution in the Clinical Setting

PURPOSE: Outlines the process and procedure to managing conflict in the clinical setting.

PROCEDURE:

Conflict Resolution in the Clinical Setting

Any event of conflict in the clinical setting should be reported to the preceptor in a professional manner. This should be done privately and should not be discussed with any of the clinical site staff or other students. The conflict should be explained in detail along with possible resolution options. Any preceptor/student conflicts that have the potential for an adverse effect on the clinical experience should be discussed with the faculty as soon as possible. See the previous policy for filing, processing and resolution of a complaint.

DATE: June 2020
REVIEWED: June 2020, August 2020
REVISED: June 2020, August 2020
EFFECTIVE: June 2020
SUBJECT:

RISK MANAGEMENT AND INCIDENT REPORTING PROCEDURES

POLICY: Risk Management and Incident Reporting Procedures

PURPOSE: Any incidents or adverse events occurring in the clinical setting should be reported promptly, correctly and to the appropriate faculty and administrators to support the safety of all involved parties.

PROCEDURE:

Risk Management and Incident Reporting Procedures

Any incident occurring in the clinical setting should be brought to the attention of the preceptor and clinical faculty immediately. If the clinical faculty is not available, the Clinical Coordinator should be contacted. The student should not discuss the incident with anyone except the preceptor prior to having spoken with the clinical faculty unless required by legal authorities. After discussion with the clinical faculty, the student is to schedule a meeting with the Clinical Coordinator within 24 hours of the event. If the Clinical Coordinator is not available, the student or preceptor should contact the Program Coordinator. The student or preceptor should not write any description of the incident or refer to the incident in an email, forum or social media post. The student should complete the Incident Report Form located below.

Clinical Incident Report Form

1. Use this form to report any unexpected patient incidents related to patient care or treatment, even if there is no adverse patient outcome (this includes errors, safety hazards, injuries and sentinel events).
2. This form is to be completed by CAMPBELLSVILLE UNIVERSITY students in addition to any reporting requirements of the facility/hospital.
3. Notify your clinical faculty & complete this form w/in 48 hours of the incident
4. After completion, keep a copy for your records and return the original to the Clinical Coordinator or Program Coordinator at CAMPBELLSVILLE UNIVERSITY via US mail at the following address:

Campbellsville University School of Nursing
1 University Drive, UPO 800
Campbellsville, KY 42718

Student Name _____ Clinical Course _____

Incident Date _____ Incident Time _____

Site Name: _____

Address: _____

Dept/Unit: _____

Identification of Person(s) Potentially Affected by the Incident

Name _____ Role _____

Name _____ Role _____

Name _____ Role _____

Witnesses, Including Onsite Staff

Name _____ Role _____

Name _____ Role _____

Name _____ Role _____

Factually describe the incident. (Include only information that is in the chart; no subjective statements). Use additional paper as needed, but be succinct.

DATE: June 2020
REVIEWED: June 2020, August 2020
REVISED: June 2020
EFFECTIVE: June 2020
SUBJECT:

PRECEPTOR RECOGNITION/THANK YOU CERTIFICATE

POLICY: Preceptor Recognition/Thanks You Certificate

PURPOSE: Outlines the process of expressing gratitude to the preceptors for the MSN FNP Program

PROCEDURE:

Preceptor Recognition/Thank You Certificate

A letter of appreciation, including the number of clinical hours spent precepting and comments relating to the value of the preceptor's contributions to the student's learning, will be drafted by the university and delivered to the preceptor in a timely manner after the end of the clinical rotation. This will provide documentation for certification requirements. It is recommended that the student express their appreciation for the preceptor's efforts with a hand written thank you note.

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020, August 2020

EFFECTIVE: June 2020

SUBJECT:

BLOODBORNE PATHOGENS POLICY

POLICY: Bloodborne Pathogens Policy

PURPOSE: Faculty and students of the School of Nursing at Campbellsville University must seek appropriate treatment, follow-up, and counseling after exposure to blood or body fluids to prevent and/or treat illness or injury.

PROCEDURE:

Bloodborne Pathogens Policy

An exposure is defined as:

- A needle or other puncture wound from a source presumed to be contaminated with blood and/or body fluids.
- Direct contact of non-intact skin (open lesion, chapped, or abraded skin) with blood or body fluids
- Mucous membrane contact from a known source of blood or body fluids (a splash in the eye, mouth, or any other mucous membrane lining).

In the event that a student or faculty member is exposed to a bloodborne pathogen during a scheduled clinical experience the agency's exposure policy shall be followed. The student/faculty will, at a minimum:

- Initiate immediate treatment by:
- Cleaning the wound/skin area with soap and water.
- Flushing mucous membranes with tap water or saline.
- Serious injuries requiring suturing or physician intervention should be promptly evaluated according to agency's direction or according to insurance requirement of the faculty/student.
- Notify the appropriate agency representative.

Faculty will report the exposure to the appropriate supervisors and assist the student in completing any required agency documentation.

The exposed individual is responsible for any costs related to testing and treatment of self and testing of the source.

- In the event that a student or faculty member is exposed to a bloodborne pathogen during a scheduled clinical experience while **NOT** in a traditional clinical setting (i.e. community-based experiences such as school health or community screening) the following procedure should be followed:
- Provide immediate first aid treatment as described above.
- Proceed to closest emergency facility to initiate post-exposure screening, treatment and counseling.

- The faculty/student is encouraged to seek post-exposure treatment per the Centers for Disease Control (CDC) Guidelines.

The exposed individual is responsible for costs related to testing and treatment of self and testing of the source.

Following exposure, nursing faculty should:

- Complete the *Exposure Incident Report* (see below) and submit copies to the School of Nursing Dean and Clinical Coordinator for review or follow-up.

While it is an individual decision whether to comply with the recommended post-exposure screening, treatment, counseling, or follow-up, the student/faculty should be offered available resources such as the Local Health Department.

Additional information on “Occupational Exposure to Bloodborne Pathogens” is available from the OSHA website, www.osha.gov

Exposure Report Form

Instructions

Please provide all requested information. Submit copies of this form to the Dean of the School of Nursing copied to the Clinical Coordinator within 24 hours of the incident.

Part I • General Information

Name of Exposed Individual (print)

Date of Birth

Address

City

State

Zip

Part II • Description of Incident

Date of Incident

Time (AM or PM)

Clinical Location (i.e., name of agency/facility as well as department or area where incident happened)

Location of body affected

Route of Exposure (puncture, needle stick, splash, etc.)

Substance or Type of Body Fluid Exposure

Provide a detailed description of exposure incident as follows:

Explain how the exposure occurred and what part of the body was affected. Include specific location of injury on body, type and amount of fluid, depth of injury if percutaneous, volume of fluid if skin or mucous membrane, and condition of injured skin (chapped, abraded, intact)

[illegible]

Part III * Post-Exposure and Follow-Up Examination

I, _____, was involved in an exposure incident as defined by OSHA. A copy of the Incident Report is attached.

Please place your initials in spaces provided below to acknowledge your understanding.

_____ I understand that the purpose of post-exposure is to assure my full understanding of whether or not I have been exposed to or been infected with an infectious disease as a result of this incident.

_____ I understand it is my responsibility to seek emergency medical attention according to CDC guidelines. I elect to implement the following process below for treatment:

☐ My own personal physician,

Name – Address – Phone Number

☐ Emergency

Department: _____

Name of Facility

☐ Other (Specify):

☐ I, of my own free will and volition, have elected not to have a medical evaluation (must be signed by a witness)

Name (print)

Signature

Date

Street Address with City, State, and Zip Code

Witness Name (print)

Witness Signature

Date

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020

EFFECTIVE: June 2020

SUBJECT:

CLINICAL SETTING STUDENT PERSONAL SAFETY

POLICY: Clinical Setting Student Personal Safety

PURPOSE: Outlines the potential hazards that may exist in a clinical setting to ensure students are aware of their surroundings.

PROCEDURE:

Clinical Setting Student Personal Safety

Students should recognize that with any clinical setting potential hazards may exist. Students must be aware of the environment surrounding the clinical setting and take adequate precautions to ensure personal safety. Students are asked to observe safety regulations in transportation to and from the clinical site. Also, students must be observant when walking to and from the buildings and parking areas and be vigilant for signs of danger that may exist. Students are encouraged to be aware of and to utilize facility safety and security resources as needed. Being in the clinical setting inherently exposes students to the risk of exposures to communicable and infectious diseases.

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020

EFFECTIVE: June 2020

SUBJECT:

CONFIDENTIALITY

POLICY: Confidentiality

PURPOSE: Outlines the process of maintaining confidentiality in the clinical setting.

PROCEDURE:

Confidentiality

Students must maintain patient confidentiality at all times. "Patient confidentiality" means that students and faculty/staff are not permitted to discuss patient information outside of the learning environment. Discussion in the learning setting should be limited to items pertaining to patient care. No patient-related documents are permitted outside the learning environment. Students must observe agency/facility policies regarding destruction of any forms used for educational purposes.

Patient Confidentiality Reminders:

- Patient information should only be discussed with other members of the health care team who have a "need-to-know." Do not discuss patient information with anyone else, including fellow employees and your family members.
- Do not tell unauthorized persons that you saw or have knowledge of a patient being seen as an outpatient, unless the patient authorizes you to do so (Example: telling a church pastor or family that a patient is hospitalized.) Authorized persons are those members of the health care team who have a legitimate "need-to-know."
- Do not access any information (Example: looking in a neighbor's medical record) unless authorized in your clinical duties. Do not access more information that is necessary to perform your role in the clinical setting.
- Speak quietly and discreetly so patients, visitors, and others will not overhear your telephone or other conversation with or about patients.
- If you have a question regarding which family members of a patient you are authorized to speak with concerning a patient's medical information, ask the patient or your preceptor.
- Before answering questions concerning a patient over the phone, verify with whom you are speaking, to determine whether they are authorized to receive the information.
- Do not leave papers containing patient information (Example: O.R. schedules, test results, open charts) in open view of unauthorized persons. Likewise, turn your computer screen away from open view and/or use screen saver or fade to dim.

- Do not discard papers containing patient information in the trashcan. Have them shredded or hand-shred them in small pieces before discarding them.
- When copying documents containing patient information, make sure that any defective copies are destroyed.
- Ask visitors to step out of a patient's room when conversations take place regarding medical treatment, diagnosis, etc., unless the patient authorizes the visitor to be present. Speak softly to protect the patient's privacy as much as possible.
- In faxing patient information to authorized facilities, verify that the recipient is attending the fax machine, especially if their machine is shared by other persons or departments. Use caution in dialing fax numbers. Always use a fax cover sheet with confidentially statement when faxing documents.
- Intentional or unintentional breaching confidentiality could result in clinical failure at the faculty's discretion.
- When making a phone call to relay patient or other confidential information, if the party is not home, do not leave detailed information on answering machines or with another person answering the phone. Simply state your name, number, and ask that the intended person return your call.
- Consult with your preceptor regarding any exceptions to these rules.

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020, August 2020

EFFECTIVE: June 2020

SUBJECT:

MANDATORY STUDENT PERSONAL HEALTH INSURANCE

POLICY: Mandatory Student Personal Health Insurance

PURPOSE: Outlines the process of maintaining and verifying personal health insurance for the MSN FNP Program

PROCEDURE:

Mandatory Student Personal Health Insurance

Campbellsville University is very concerned about the health and well-being of all students. Students must have personal health insurance prior to entry into the program and while enrolled in each 8-week course. This insurance is required by some/all of our clinical agencies and is needed to defray the cost of hospital and medical care for any illness or injury that might be sustained while in this program and the substantial monetary liability that the student might incur as a result of failure to have such insurance. This mandatory health insurance policy requires students to maintain insurance coverage as a condition of their enrollment. Each student must be enrolled in and maintain a Health Insurance policy each semester.

Prior to admission to the program and annually, each student must provide Castle Branch with a Certificate of Coverage from their Insurance Company. In the event that such coverage lapse, is terminated or changes the student will notify the Secretary immediately. If found that the student is not covered, the student may be terminated from the program.

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020

EFFECTIVE: June 2020

SUBJECT:

MEDICAL RELEASE AFTER ILLNESS

POLICY: Medical Release After Illness

PURPOSE: Outlines the process of returning to the clinical setting after a medical illness.

PROCEDURE:

Medical Release after Illness

Students performing in clinical rotations with Campbellsville University School of Nursing must demonstrate sufficient physical and emotional health to participate in the clinical setting.

The clinical health care facilities utilized by Campbellsville University School of Nursing require all health care providers to provide documentation of a medical release after experiencing a serious health condition. This requirement must be met prior to rendering patient care again. Examples of these conditions include, but are not limited to: contagious illness, soft tissue/ bone trauma, surgical procedure, cardiac or pulmonary disease processes, childbirth, etc. Students must be cleared by a medical provider to function without restriction in the clinical setting following any serious health condition. This requirement promotes both patient and student safety and therefore is highly important.

DATE: June 2020

REVIEWED: June 2020, August 2020

REVISED: June 2020, August 2020

EFFECTIVE: June 2020

SUBJECT:

NAME TAGS

POLICY: Name Tags

PURPOSE: Outlines the process of obtaining the MSN FNP Student name tag

PROCEDURE:

Name Tags

Students are expected to wear their Campbellsville University School of Nursing name tags when they are in the clinical setting. Wearing the name tag is a matter of professionalism and is required in health care facilities to identify the student as such.

Prior to the beginning of the clinical experience, the student will be asked to supply the preferred name to be placed on the name tag and the administrative assistant will order name tags for all students.

Replacements for lost name tags or for name changes will be ordered at additional cost to the student. The School of Nursing office should be contacted in the event of a lost name tag.