



## **MSN STUDENT HANDBOOK**

**2014 – 2015**

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This MSN Handbook is one of the documents applicable to students in the MSN program. MSN students are subject to (1) the King University Academic Catalogue, (2) this MSN Handbook, and (3) the King University Student Handbook (Twister)

**KING UNIVERSITY  
SCHOOL OF NURSING  
Professional Pillar Definitions and Scriptures**

**School of Nursing guiding scripture:**

Let the word of Christ dwell in you richly in all wisdom, teaching and admonishing one another in psalms and hymns and spiritual songs, singing with grace in your hearts to the Lord. And whatsoever ye do in word or deed, do all in the name of the Lord Jesus, giving thanks to God and the Father by him.

**Colossians 3: 16-17 King James Version**

**Integrity**

The ability to walk morally upright in all actions and communications.

Let integrity and uprightness preserve me; for I wait on thee.

**Psalms 25:21 King James Version**

**Commitment**

The dedication and service to patients, the profession, collaboration, and continued learning while holding oneself to the highest standards of performance and accountability.

Finally, brethren, whatsoever things are true, whatsoever things are honest, whatsoever things are just, whatsoever things are pure, whatsoever things are lovely, whatsoever things are of good report; if there be any virtue, and if there be any praise, think on these things.

**Philippians 4:8 King James Version**

**Service:**

Committing oneself to assist others to serve others and glorify God

Placing others needs before thy own. Intentional actions that demonstrate a love for others in response to our love for God.

Each one should use whatever gift he has received to serve others, faithfully administering God's grace in its various forms.

**1 Peter 4:10**

**Accountability**

Making a decision based upon a knowledgeable understanding of the circumstances, acting on that decision, supporting the decision with evidence-based rationale and reason, and accepting responsibility for the outcome.

Create in me a clean heart, O God; and renew a right spirit within me.

**Psalms 51:10 King James Version**

**Civility**

A polite, respectful, and purposefully kind verbal and non-verbal interpersonal communications and behaviors.

And as ye would that men should do to you, do ye also to them likewise”.

**Luke 6:31 King James Version**

**Compassion**

The feeling of deep sympathy or sorrow for another who is experiencing perceived or actual challenges or suffering, with the desire to alleviate the suffering.

And be ye kind one to another, tenderhearted, forgiving one another, even as God for Christ's sake hath forgiven you.

**Ephesians 4:32 King James Version**

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## GENERAL INFORMATION

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### MISSION STATEMENT

The MSN graduate nursing program at King University provides professional nurses with academic and nursing practice opportunities to gain the knowledge, skills, and values essential for advanced nursing practice and leadership in healthcare systems. King University's Christian atmosphere enriches graduate programs and instills in every student respect for the integrity and value of every person and a commitment to service.

### VISION STATEMENT

The vision of the School of Nursing is to be the most academically respected, student focused, Christ-centered nursing program in the region. King University graduates will promote nursing science and reflect the Christian value of serving our communities with excellence and compassion.

### KING UNIVERSITY HONOR CODE

The King University Honor Code, text below, applies to all students, including students in the MSN program:

*On my honor, I pledge to abide by the King University policies described in the Student Handbook. I understand that students of King University are to be honest in words and actions, in particular, not to lie, cheat, plagiarize, or steal. I pledge to conduct myself in a manner based on Christian values and to require the same of fellow students. I understand that a violation of this Honor Code may result in my appearance before the Honor Council.*

### PROGRAMS OF STUDY

Program graduates earn the Master of Science in Nursing (MSN) degree. The MSN program is for licensed nurses who already have a baccalaureate degree.

King University's MSN program has developed specialty concentrations in areas of particular need in the local workforce. Specialty concentrations currently available at King University are: Master of Science in Nursing Administration (NA) or combined MSN/MBA, Family Nurse Practitioner (FNP), and Nurse Educator (NE).

Although there are 15 semester hours (s.h.) of "core" courses required of all MSN students, each MSN specialty concentration has different course requirements, clinical/practicum requirements, and curricular variations.

Certification exams are available in each specific specialty concentration offered in the King University MSN program. Educational and experience requirements for taking the certification examinations are different for each specific concentrations. In many states, including

Tennessee and Virginia, certification by a national credentialing body is required for all advanced practice nurses. Graduates of the FNP program will meet eligibility requirements to take either the American Nurses Credentialing Center (ANCC) or the American Academy of Nurse Practitioners (AANP) FNP certification examinations. For FNP students who plan to practice in a state other than Tennessee, it is imperative that students identify the specific state's APN licensure requirements and scope of advanced nursing practice.

The National League for Nursing (NLN) offers a certification examination for nurse educators; however, certification is not required at this time for Nurse Educators to obtain an academic position. Nurse Executives may seek ANCC certification but post-graduate practice and role requirements must be met. It is the student's responsibility to interpret accurately the requirements for writing national certification exams. For example, each student should determine before applying to write the exam whether the number of clinical hours required must be earned while enrolled in graduate study or after graduation. MSN students interested in seeking certification in their area of study after graduation are encouraged to discuss their options with their academic advisor.

### PROGRAM CURRICULUM

The length of the MSN program depends upon the concentration. Nurse education is 39 credits (Attachment H), nursing administration is 35 credits (Attachment F) and FNP is 45 credits (Attachment E). The NA and NE plans of study are part-time and delivered completely online or in the blended bookend format consisting of online courses with face-to-face meetings each semester. The MSN concentrations that are taught as a blended bookend offering require students to be on campus for 2 days each semester. The NA and NE concentrations can be completed in 6 semesters. With a variety of online assignments and activities, students provide each other with mutual academic, emotional, and logistical support. This peer support contributes to collaborative learning, academic success and timely program completion. The resulting camaraderie creates personal ties and professional networks that often continue to be influential for life beyond King University.

The combined Nursing Administration with the MBA (MSN/MBA) is 62 credits (Attachments F & G). The program length of the MSN/MBA program depends on the course load and business specialization elected.

The FNP concentration plan of study is full-time and can be completed in 5 consecutive fifteen-week semesters; this concentration is offered as a classroom program.

For the FNP students, the MSN faculty uses a variety of instructional modalities to meet specific learning needs. Courses are held on a one-day-per-week

schedule of classes (typically from 8:00 a.m. to 4:30 p.m.). This plan allows students to schedule work and family obligations around class time. The transition to advanced practice requires that students master important preclinical sciences (advanced pathophysiology, advanced physical assessment, and advanced pharmacology). Graduate course work, whether online in a discussion board activity or in a classroom discussion, further expands communication, research, and critical thinking skills. Students reflect on previous learning and work-related experiences while integrating new theory and knowledge applicable to nursing practice. As the clinical practicums become more focused, many students find that they need to adjust their personal and work schedules in order to be able to meet their clinical learning objectives.

All MSN students complete clinical practicum hours, although the specific requirements vary by specialty. With faculty guidance and supervision, each student develops a plan to obtain the required clinical/practicum hours at an approved clinical placement site. Clinical/practicum hours are indirectly supervised by faculty members and directly supervised by either a faculty member or a community-based preceptor. Specific schedules and hours will vary to accommodate student and preceptor schedules. As a point of reference, consider that it would take 2 days a week (8 hours a day) during a single 15 week semester to complete 240 hours of direct care, clinical time. To be eligible for certification, the American Nurses Credentialing Center (ANCC) requires that all advance practice students complete a minimum of 500 clinical hours.

In addition to required class hours, online assignments, and clinical/practicum hours, students are expected to devote additional time to their studies. The suggested amount of time for additional studies in a master's program is 1:4; thus each credit would require 4 additional hours of study per week. For example, for Pathophysiology, which is a 3 credit course, the student should expect to spend an additional 12 hours of study time, outside of class time or required online activities, each week.

### **MSN PROGRAM GOALS**

MSN program goals:

1. Provide students with opportunities to enhance personal and professional growth and development guided by Christian principles.
2. Prepare clinician and educator leaders capable of developing and expanding nursing knowledge, skill, and practice competency.
3. Create a learning environment where students demonstrate self-direction and effective interactions with other health professionals, promoting and effecting optimum delivery of health care services.

Encourage students and faculty to participate in the growth of professional nursing and embrace responsibilities incumbent upon professionals in society.

### **EXPECTED STUDENT OUTCOMES: GRADUATE STUDY**

The MSN program courses promote professional growth in clinical experiences planned to meet students' individual and professional goals. Specialty courses share many common objectives enabling all graduates to achieve the following student outcomes:

1. Assimilate concepts from the fields of nursing, basic sciences, psychological studies, population health and management to implement advanced nursing practice within a specialized area.
2. Plan, participate and lead change strategies within a specialized practice arena to improve outcomes, enhance quality and demonstrate cost effectiveness.
3. Apply process improvement principles and employ performance tools to enhance safety and outcomes within a specialized practice area and/or population focus.
4. Identify problems within a practice area and apply appropriate theories and research findings for problem resolution, change management and dissemination of results.
5. Use care delivery technologies and information systems to coordinate care and maximize safety and communication.
6. Participate in advocacy activities and policy development to affect healthcare access, knowledge and delivery.
7. Assume the role of consultant, communicator, educator and collaborator as a member of the interdisciplinary health care team for the coordination and direction of care.
8. Integrate culturally sensitive concepts with a patient/family focus, while demonstrating Christian values in the planning, delivery and evaluation of services for individuals and populations.
9. Incorporate knowledge from advanced nursing and other sciences to deliver nursing interventions that influence the health care outcomes of individuals and populations.

### **OVERVIEW OF THE INDIVIDUAL CONCENTRATIONS**

The MSN curriculum consists of common core, specialty core courses and clinical for each MSN specialty concentration. The coursework for all concentrations are consistent with the American Association of Colleges of Nursing Essentials of Master's Education in Nursing guidelines and are based on educational philosophies, theories and trends, adult learning principles, and curriculum and instructional design theories. All MSN students take 15 s.h. of core courses essential to advanced practice, regardless of specialty concentration. These include Healthcare Informatics, Social, Cultural and Political Perspectives on Healthcare and Delivery Systems, Theoretical Basis of Nursing Practice, Research Designs in Nursing, and Research Seminar. All students,

except those in the Nursing Administration specialty, take clinical core courses, and these include Advanced Physical Assessment, Advanced Pharmacology, and Advanced Pathophysiology.

MSN students who successfully complete the program will develop the knowledge and skills needed to exhibit leadership as nurses in advanced practice capable of making sound clinical decisions and providing competent, culturally sensitive care. Through coursework and individually designed practicum experiences, students will develop the wisdom to objectively analyze the health care work environment. In discussions and through reflective practice, MSN students will be able to articulate the foundational role of Christian ethics in caring practice, sound clinical judgment, and commitment to patient advocacy. All MSN students will participate in a major service learning project during their program of study within their specialty concentration. Service projects will occur during the following concentration-specific courses: Nurse Administrator- NURS 5050, Nurse Practitioner-NURS 5019, Nurse Educator – NURS 5036. Coursework and exposure to emerging technologies will allow MSN students to fully utilize technology in nursing practice. Through didactic content and personal reflection on cultural self-awareness, MSN students will develop the ability to competently assess the health care needs of diverse populations and to promote optimum quality of life. Through interactions with faculty role models and preceptors, MSN students will develop a commitment to shaping the future of nursing in their chosen specialty role.

**Family Nurse Practitioner (FNP)** concentration prepares students to provide direct primary care services to families and individuals across the lifespan. Health promotion, illness prevention, health maintenance, detection of alterations in health status, and restoration of health are essential focus areas. The FNP plan of study is consistent with the National Organization of Nurse Practitioner Faculties (NONPF) guidelines to prepare students to meet entry-level competencies for Nurse Practitioner practice and write for national certification. Coursework requires evaluation and application of evidence based practice strategies and development of needed research skills. Classroom activities facilitate examination of critical content including clinical guidelines, diagnostic reasoning, cultural competence, patient safety, pharmacotherapeutics and documentation. In clinical practicum, students apply this knowledge in a variety of practice settings where primary care is delivered. The student acquires skills that allow for detection and management of acute self-limiting conditions, selected crisis situations, chronic stable conditions, and conditions with multi-system consequences.

**Nursing Administration or Combined MSN/MBA** provides advanced health care and business

study in economics, finance, (employment) law, ethics, and organizational management. Student clinical experiences synthesize nursing and business knowledge in diverse settings. Through application of research process, students develop answers to nursing questions about “best practices.” Graduates are prepared to function as members of interdisciplinary executive teams. Graduates are prepared to function as nurse managers, nurse directors, clinical coordinators, program planners, consultants, or chief nurse executives in hospitals, medical centers, or health science centers. Courses in nursing administration focus on health care policy, delivery systems, resource management, and program evaluation. Business courses provide administrative foundation opportunities for collaboration with students from other disciplines preparing to become competent business managers.

MSN/MBA students should meet with their school of nursing advisor and their school of business advisor to develop a plan of study that will meet all requirements, be consistent with the schedule of course offerings planned by both schools, and account for the individual student’s academic history and goals.

The **Nurse Educator** concentration allows students to prepare for a variety of roles such as nursing faculty, health educators, clinical nursing instructors, and staff development educators. Content includes the use of technology in teaching, classroom assessment, evaluation of education outcomes, and program effectiveness. The nurse educator practicum is individually designed to allow development in the chosen nurse educator role. Experts in nursing education serve as preceptors in academic or healthcare system settings

#### **PRECEPTOR MODEL**

Preceptor mentoring involves expert, practicing clinicians from the community in the teaching of MSN students. Preceptors are essential to provide practical experience to the students during the clinical/practicum courses. Preceptors are community professionals, including nurse clinicians, nurse practitioners, physicians, physician assistants, nurse educators, and nurse leaders who volunteer their expertise and allow MSN students’ access to patients and clinical sites. King University faculty work closely with students and preceptors to help achieve a good match between the needs and goals of the student and the interests and teaching style of the preceptor.

The School of Nursing’s graduate faculty members serve as student advisors, having responsibility to assist in placing, approving, and overseeing student clinical practice. Clinical experiences are dictated by preceptor, faculty work schedules, and clinical facility needs. Because competition for clinical/practicum sites is high and typical graduate students are employed fulltime, students are required to be greatly involved in clinical placement arrangements. Faculty and students work collaboratively to identify preceptors who assist students

to meet expected student outcomes. Due to the number of students seeking clinical placement and the available suitable locations, students may be required to travel a distance for preceptor clinical experiences. See Information and Guidelines for Practicum Courses for Students and Preceptors for additional details regarding clinical practicum experiences for each MSN specialty role.

#### **INCLEMENT WEATHER**

Changes in the schedule and/or cancellation of MSN classes will follow the university policy and decision for such changes due to inclement weather.

**Note:** Be aware of **campus specific differences** in schedule changes and cancellation of classes as announced by King University Campus Security for inclement weather.

As the MSN programs include practicum experiences apart from regularly scheduled **classroom courses**, across a wide geographic area, in the event the university is **not closed**, the MSN student will confer with the clinical faculty of the course regarding attendance during

threatening and inclement weather. Regarding practicum experiences, during times the university **has issued a schedule change or cancellation**, the student will confer with the clinical faculty of the course regarding attendance at a clinical site for independent practicum experiences with a preceptor. It is advised that good judgment be employed in all cases of potentially hazardous travel to clinical sites.

#### **FINANCIAL AID**

A variety of scholarships are available to aid promising students. Check the University website and professional associations for additional information. Help is also available in the financial aid office. Some websites are:

- <http://www.discovernursing.com>;
- <http://www.aacn.nche.edu>; [www.n-e-f.org](http://www.n-e-f.org).
- <http://www.lrp.nih.gov>;
- <http://bhpr.hrsa.gov/nursing/scholarship>;
- <http://www.nsf.gov/dir/index.jsp?org=EHR>;
- <http://www.plu.edu/~nurs/nurse-faculty.html>;

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## PROGRAM POLICIES & PROCEDURES

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### DISCLOSURE STATEMENT

Graduate students must abide by student policies as listed in the King University Academic Catalogue, this MSN Handbook, the King University Student Handbook located in the “Twister” and in the “Information and Guidelines for Practicum courses for Students and Preceptors” (in that order of precedence). The School of Nursing policies are subject to and consistent with King University policies. The University and School of Nursing reserve the right to make changes in course offerings, faculty members, instructors, preceptors, and degree requirements as educational and financial considerations require. Policies introduced during the academic year or that change from written policy in the Nursing MSN Student Handbook will be distributed via email to the **student’s King University email address. King University Faculty and Students are required to use their King University email for all King University business correspondence. This requirement includes electronic correspondence with King University personnel and students. The use of personal or work email accounts for University related business is not permitted. Students should check their King University email daily for updates and/or announcements and respond to all emails within 48 hours.**

### TRANSFER OF CREDITS

Upon acceptance to the King University MSN program, students can request that completed graduate coursework from another institution be considered for transfer credit. Up to six (6) hours may be transferred in to the King University MSN program from regionally accredited institutions offering the graduate degree. To be considered for transfer credits, a course must have been taken for graduate credit and must carry a grade of “B” or better. Courses graded as “pass/fail” cannot transfer. The student must submit a completed “Authorized for Prior Graduate Work” form (available at the Office Records and Registration) and a course syllabus, which must show evidence that the completed course content and scope can be considered current and equivalent to the King University course, to the Office of Records and Registration. The faculty currently teaching the King University course will evaluate the course and make a recommendation to the Dean of Nursing regarding the course equivalency. The Dean of the School of Nursing must approve all transfer credit to the MSN program and the decision of the Dean will be final.

### HEALTH RECORDS AND CERTIFICATIONS

Special health requirements are applicable for all nursing students and include Hepatitis B immunization (or signed declination), health history, physical exam

immunization records and annual high-risk TB screening, skin test or chest x-ray may be required prior to clinical enrollment. An influenza vaccine or drug screen may also be required for clinical placement as relevant to hospital or clinic policy. MSN students must maintain current BCLS (CPR) certification and submit proof to the SON office. All nursing students must clear a criminal background check before admission to the clinical settings utilized by King University. The Criminal Background Check policy is located in Attachment D.

Patient safety requires health care providers maintain good health: therefore, graduate students who work full-time in a clinical facility may submit copies of personal health records providing the record meets requirements showing evidence of satisfactory physical and mental health, including evidence of immunizations. The Dean of Nursing has final authority regarding acceptance of alternative health records. Nursing students must comply with any special requirements mandated by individual clinical agencies prior to the start of the clinical experience. All clinical requirements, and associated costs, are the responsibility of the individual student.

All students are required to maintain clinical practice liability insurance. This insurance is purchased through the University, and is included in the fees charged to MSN students. Insurance independently maintained by the MSN student is optional, but will not replace the insurance purchased through the University.

### LICENSURE REQUIREMENTS

- All graduate students must hold a current, active, unencumbered license to practice as a registered nurse in Tennessee or another state that participates in the Nurse Licensure Compact agreement and any non-compact state in which the student is performing clinical requirements. Proof of current licensure must be submitted to the SON.
- All applicants and continuing students may not be on probation and must report any past or current discipline taken by a State Board of Nursing by means of a scheduled meeting with the Dean of the School of Nursing.

*Primary state of residence is defined by the Compact as “the state of a person’s declared fixed permanent and principal home or domicile for legal purposes.” The Nurse Licensure Compact authorizes Registered Nurses licensed and residing in a compact state to practice in other compact states without the necessity of obtaining an additional license. The Nurse Licensure Compact facilitates nursing practice among the compact states by requiring the nurse to maintain a license in his/her primary state of residence that grants “multi-state privilege” to*

*practice in other compact states. However, this privilege requires that the nurse practice according to the laws and regulations of each state in which the nurse practices or provides care (i.e., the state in which the patient is located at the time care is rendered), either physically or electronically. Nursing practice is not limited to patient care, and includes all nursing practice as defined by each compact state's practice laws.*  
(State TN, Dept. Health, Health Related Boards JH/G5086005/BN)

#### **MATRICULATION, CONTINUOUS ENROLLMENT, AND LEAVES OF ABSENCE**

Matriculation occurs after students meet admission criteria and begin the first semester at King University. To maintain matriculation, students must be continuously enrolled, unless a Leave of Absence has been granted by the Dean of Academic Affairs—of the University.

A **Leave of Absence** may be granted for one semester at the discretion of the Dean of Nursing and the Dean of Academic Affairs. A letter requesting such a leave should be addressed to the Dean of Nursing. A course “Withdrawal Form” must be completed for each course the student is enrolled in at the time of leave request. A leave of absence does not waive any outstanding financial obligations to the University nor extend time limits allowed for degree completion. A student who fails to register for classes following a Leave of Absence will be administratively withdrawn from the University and required to re-apply to the program. Readmission will be granted on a space-available basis only.

#### **TIME LIMITS**

Students must complete all degree requirements within **six (6) years** from time of entry. No additional time is given to students during a Leave of Absence.

#### **PROGRESSION IN THE MSN PROGRAM/DISMISSAL FROM THE MSN PROGRAM**

All MSN students must maintain a cumulative GPA of 3.0 or better throughout the program of study. A grade of B- or higher is required in all MSN clinical nursing courses and a grade of C+ or higher is required in all MSN non-clinical nursing courses. The grade point average will only reflect grades received in course work completed at King University.

If more than two grades of 2.3 (C+) or lower are earned, even if the student maintains a 3.0 GPA, the student will be dismissed from the program. A grade of C+ or lower is a failing grade for MSN clinical/practicum courses. A failed course must be repeated; a student is only allowed to repeat ONE course during the MSN program.

Progression may be denied for reasons such as inability to demonstrate professional judgment, inability to demonstrate knowledge, values or necessary skills.

Unsafe practice, unethical professional practice, or attitudes incompatible with professional performance are sufficient to warrant dismissal. Students who fail to submit assignments in a timely manner, who fail to demonstrate competency in clinical settings, fail to accept responsibility, frequent class absences, canceling of scheduled days with a preceptor or tardiness may be dismissed. Students who do not abide by online requirements may be dismissed. These examples are not intended to be a comprehensive listing of all reasons a student may be denied progression in the MSN program.

The School of Nursing reserves the right to counsel or dismiss any student who does not satisfy requirements of scholarship, health, or personal suitability for advanced practice nursing. Students unable to continue in the program are those who do not meet the School of Nursing's performance standards for progression or who are deemed unsuitable for personal/professional reasons. Expected student behaviors are based on standards from the American Nurses' Association Code for Nurses. Examples of nursing activities reflecting expected personal/professional behaviors (not inclusive) include: demonstrates personal responsibility, accountability, integrity, and honesty; demonstrates respect for faculty and clients and their rights; avoids behavior inconsistent with professional standards, such as chemical dependency and abuse or engaging in or supporting criminal behavior.

Violations of local, state, and federal laws and/or violation of the King University Honor Code, or the campus policies it upholds, will be referred to the appropriate law enforcement agency and/or Student Affairs Office. The King University Student Handbook, King University Catalogue, and this MSN Handbook contain information pertaining to campus policies.

#### **READMISSION**

Readmission is not automatic. Students seeking readmission must submit an **Application for Readmission** to the King University Admissions Office. Successful applicants for readmission must be competitive with the current new applicant pool. There must be space available in the courses and/or clinical placements needed by the applicant. The MSN Nursing Admissions Committee will evaluate both the application and the school's ability to accommodate the readmission of the applicant.

#### **DISMISSAL FROM THE UNIVERSITY**

Enrollment termination and dismissal from the University can occur for several reasons. Most commonly, students are dismissed for failure to maintain overall GPA, for failing to maintain at least minimum grades for practicum experiences, for frequent absences or tardiness to class or clinical, failing to meet online requirements, or failing to adhere to professional conduct codes. A student may be dismissed for failing to complete

the degree within time limit and for reasons specified in other applicable University or program policies, regulations, and requirements for the school of nursing. Students may appeal decisions through the student academic appeals process. The student should complete the "Withdrawal" form and follow procedure as outlined on the form when leaving King University.

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## GRADING SYSTEM & COURSE GRADES

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The school of nursing calculates grades as A, A-, B+, B, B-, C+, C, C-, D, or F. MSN nursing majors must earn a **B- or higher** in all NURS courses and maintain an overall GPA of **3.0/4.0 scale**. (In the MSN program a grade of C or below is failing in a non-clinical course; C+ or below is failing in a clinical course.) Final course grade calculations are NOT rounded up.

The numerical values for the school of nursing grade scale are:

4.0 =	A =	95 – 100
3.7 =	A- =	90 – 94
3.3 =	B+ =	88 – 89
3.0 =	B =	85 – 87
2.7 =	B- =	80 – 84
2.3 =	C+ =	78 – 79
2.0 =	C =	75 – 77
1.7 =	C- =	70 – 74
1.0 =	D =	65 – 69
0.0 =	F =	64 or below

### INCOMPLETE GRADES

Course work that is incomplete is assigned a grade of “I”. Incomplete can mean the student did not have enough time to complete the assignment due to unforeseen life events or the faculty member or preceptor believes the course work is not appropriate for doctoral-level work. Incomplete grades must receive approval from the course faculty and the Registrar. To remove the “I” from the student’s record, the student is expected to sign a contract (available in the Office of Registration and Records) with the course faculty and/or preceptor clearly indicating the reason for the incomplete grade, the steps to be taken to meet the course requirements and the date for completion of the work. Copies of the contract should be forwarded to the student’s advisor and the Dean of the School of Nursing. Contracts are a binding agreement between the faculty member, preceptor and student.

According to King University policy, any grade of “I” must be completed within six weeks from the date the course ends. Incomplete grades that are not resolved by the end of the six weeks after the last day of the course in which it was assigned will automatically be assigned the grade of “F”.

*Note: Until an incomplete grade is removed, it is calculated as an “F” in the semester grade point average. This will sometimes cause a student to be suspended, placed on academic probation, or dismissed. This could also impact financial aid or scholarship assistance. At the time the incomplete grade is removed the academic standards committee will reevaluate the student’s status.*

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# PROFESSIONALISM

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## GRADUATE STUDENT RIGHTS & RESPONSIBILITIES

MSN students are expected to exhibit initiative and to be responsible for planning and executing graduate study. Students must clearly identify their personal and professional goals for clinical experience and work collaboratively with faculty to identify preceptors and clinical settings. Final arrangements for preceptors/clinical settings are coordinated with the student's academic advisor, and are subject to faculty approval. Students are expected to exhibit professional demeanor at all times and to adhere to the code of academic integrity.

## ACADEMIC INTEGRITY

Academic integrity mandates students follow a strict code of professionalism meaning that work submitted, in written or other form, is the product of the student's own efforts. Students must adhere to standards and norms of scholarly writing and research, including the distinction between academic honesty and plagiarism. Cheating, plagiarism, forgery or other forms of academic misconduct are not tolerated. Each student has the responsibility to ensure that personal study and participation in the academic process is honestly conducted so that the student's integrity is not questioned. Faculty members will conduct courses that foster academic integrity. Additional information on the King University Honor Code is in the *Twister*; students are responsible for reading these documents in their entirety.

For course work, unless specifically exempted, examinations, quizzes, skills lab practice, case studies, research projects, papers, projects, and other assignments must be the work of the individual student. Source citation is mandatory when using ideas, data, or wording of others. In research or course assignments, any alteration, fabrication of clinical data, falsification of student logs or otherwise inaccurately reporting participation in assignments are examples of academic misconduct. Any alteration or fabrication of experimental data is considered academic misconduct in research. Intentionally aiding another student in such activities is a violation of the professional conduct code.

Faculty reserves the right to specify administration of exams and quizzes. Faculty may specify where students sit during an exam. Faculty may limit time for online exams or quizzes. Faculty may give "open book" or "take home" exams, administer exams in class or laboratory or exams may be posted electronically on Blackboard. In such instances, faculty should clearly define the rules applicable to such exams. Unauthorized communication or use of unauthorized materials during exams constitutes academic misconduct and is considered an Honor Code violation. Students are encouraged to cooperate and assist in prevention of cheating and

plagiarism by reporting misconduct. Condoning such activity is equally damaging to the School and students, and is a violation of the Honor Code. Cheating and/or plagiarism will result in disciplinary action as deemed appropriate, including academic sanctions imposed by faculty, suspension, and/or expulsion from the MSN program. All Honor Code violations will be reported to the Office of Dean of Students. Additional information is available in the Student Handbook.

## STANDARDS OF PRACTICE AND NURSING CODE OF ETHICS

Academic ethos calls faculty and students to treat all members of the learning community with respect. Toward this end faculty and students promote academic discourse and free exchange of ideas by listening with civil attention to all individuals. In the practice setting, students will practice safely and competently promoting quality care and best practice. Students will collaborate with others for improvement of care and advancement of professional practice. Students demonstrate commitment to ethical and professional practice by basing care and actions on current national standards and guidelines. Standards and guidelines students should be familiar with include: The American Association of Colleges of Nursing's The Essentials of Masters Education (AACN, 2013); The American Nurses Association's Scope and Standards of Practice; The Code of Ethics with Interpretive Statements; The Scope and Standards of Practice for Nurse Administrators; and the National League for Nursing's Scope and Practice for Academic Nurse Educators. FNP practice integrates standards from the Criteria for Evaluation of Nurse Practitioner Programs (NTE 2008); Core Competencies for Nurse Practitioners (NONPF, April, 2011); The Consensus Model for APRN Regulation; Tennessee Law Regulating the Practice of Nursing (2010, Rev.) and The Rules of Tennessee Board of Nursing for Advanced Practice Nurses and Certificates of Fitness to Prescribe (June 2010, Rev.).

## ATTENDANCE AND PUNCTUALITY

Course enrollment symbolizes intent to attend class and clinical experiences. Attendance and tardy policies are specified in syllabi and discussed by course faculty at the beginning of each course. Attendance at all orientation and bookend sessions is mandatory. Students with illness, injury, or other condition temporarily affecting their ability to function effectively in didactic and or clinical areas must contact their instructor and clinical preceptor immediately. Timely notification facilitates alternative planning to meet clinical and educational objectives, if possible. Students must be punctual. Tardiness adversely affects the educational experience and is disruptive and disrespectful to other students and faculty. Absence from and lateness to class

and/or clinical experiences does not release students from responsibility for all work. Excessive absences or tardy behavior from regularly scheduled classes or clinical experiences will jeopardize student grades and may result in course failure and/or administrative withdrawal from the MSN program. Likewise, failing to adhere to participation schedules/deadlines in online courses can result in course failure or dismissal from the program. Non-participation in an online course for one week is considered equivalent to an absence.

#### **GUIDELINES FOR CELL PHONE USE**

Cell phones and beepers are not generally allowed in class or clinical settings. Students must be courteous and respectful of faculty and other students in class by turning off cell phones or beepers. If students need to be available for personal or work-related emergencies, place the phone on “vibrate” and sit near the door for easy exit to return a call. Notify the instructor prior to class if you need to accept calls. Instructors may seize phones and or ask students to leave class if students violate cell phone policy.

#### **EXAMS AND QUIZZES**

Students do not have an automatic right to “make-up” missed exams or quizzes. Students are expected to verify dates for exams and quizzes listed in the course syllabus or topical outline recognizing changes may be announced in class during a time when students were absent or not fully aware of announcements. Students must ask another student to collect handouts or other information in missed classes. Instructors are not responsible for repeating class material to absent or late students. Students are responsible for contacting the instructor prior to an absence to discuss options, if any, for make-up work. Each course instructor includes specific expectations in course syllabi. Students are required to know and follow course syllabi guidelines. Students are expected to check their King University e-mail and their online blackboard course daily for announcements. .

#### **LOST OR LATE ASSIGNMENTS**

Students are responsible for submitting papers, projects, assignments, and reports by specified dates. Faculty is not obligated to extend deadlines or accept late papers. It is the student’s responsibility to ensure all work submitted has been duly received by the instructor. Papers submitted electronically, left under the office door or with someone else **may not be considered “received”** by the instructor. No one but the student is responsible for submitting the paper. A prudent student keeps a copy of all work submitted including a back-up copy of electronic papers in case of computer crash. If in doubt the assignment has been received, always verify with the instructor. There are no excuses for late assignments. Computer, printer, disc, or any other outside force problem is NOT an excuse for late assignments. Late

assignments will have a minimum of 10% deducted from the total score. Most faculty members award a grade of zero for any late assignment.

#### **GRADING DISPUTES**

Students reasonably expect fairness in grading, explanation of how course components are graded, and understanding of how grades are determined. Faculty members determine which course components are graded and the weight of each assignment in determining the final grade. Faculty members assign grades using the school of nursing’s grading scale. Individual assignment grade calculations are carried out to the .00 place and final course grade calculations are NOT rounded up. Faculty members provide course syllabi that specify grading components. If a student believes a grade was not fairly assigned, the student may appeal. Students must first schedule an appointment/online discussion with the course faculty member, bring the assignment in question to the faculty’s attention, and request an explanation of how the grade was determined. If an agreeable decision cannot be reached between faculty and student, the student may appeal to the Program/Concentration Coordinator. If an agreeable decision cannot be reached, the student may appeal to the Dean of the School of Nursing. If no resolution is reached after discussing the issue with the Dean, the student may then submit a written petition to the Academic Standards Committee. The complete Academic Appeals policy is located in the King University Catalogue and should be consulted for information as to process and procedure. Contact the Office of Academic Affairs for questions regarding process and procedure.

#### **ACADEMIC ADVISING**

Graduate students are assigned a graduate faculty academic advisor after formal acceptance into the graduate program. Faculty advisors will be listed on the Student Portal. Students are encouraged to contact their advisor to discuss specific questions related to role choice or clinical requirements.

Academic advising activities can include guidance in scheduling plans, discussion and clarification regarding school policies and procedures, preceptor selection and clinical placement arrangements, development of research projects, and evaluation in achieving course and program outcomes. Each student is advised to anticipate counseling needs and should schedule regular appointments throughout the semester.

#### **CHANGE IN CONCENTRATION POLICY**

Students desiring change from one MSN specialty concentration to another must request the change in writing to the Dean of the School of Nursing. The student must inform their current nursing advisor about the request for change and interview with the Program/Concentration Coordinator faculty member responsible for the new concentration.

- Advisors are strongly encouraged to counsel students as quickly as possible when a concentration change is requested.
- Students are permitted to change concentrations only if there is space available in the new concentration course of study.
- Students are permitted to change concentrations only if in good standing in original course of study.
- Students may not change clinical concentrations after completion of the first semester.
- Students must understand that change in concentration may result in interruption of program progression.
- Students are responsible for meeting all course work in the new concentration; changing concentration may mean courses completed may not be transferable.

**NOTE: A change in concentration to the FNP is not allowed.**

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# CLINICAL/PRACTICUM REQUIREMENTS

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Clinical/practicum experience is a core component of graduate nursing programs and concentrations. The MSN program requires students complete a minimum clinical component, with clinical hour requirements determined by the student's specialty concentration. Students, in consultation with their faculty advisor, complete a plan identifying how they intend to meet required clinical hours. The following responsibilities are expected of faculty, student, and preceptor:

## CLINICAL FACULTY RESPONSIBILITY

1. Assist students in developing goals and objectives for clinical experiences.
2. Work in partnership with students identifying a clinical site and preceptor appropriate for the planned experience. Although consideration will be given to students' geographical preferences, faculty will approve the final clinical assignments based on the availability of the preceptors, the match between the characteristics and student learning needs, and the focus of the semester.
3. Review all course and clinical requirements with student.
4. Verify completion of all documents related to preceptorship, including preceptor request, preceptor profile, curriculum vitae, and clinical contract.
5. Develop and maintain relationships with preceptors and clinical sites.
6. Assist student throughout clinical experience to ensure appropriate learning.
7. Visit clinical sites as necessary. Participate in student evaluation with preceptor; faculty maintains responsibility for student evaluation.
8. Determine degree to which student has achieved course objectives and completed course requirements. The clinical faculty assigns final grade.
9. Send letters of appreciation and verification of precepting hours to clinical preceptors.

## STUDENT RESPONSIBILITY

1. Discuss clinical placement with faculty. Students should recommend potential sites and request preceptors who could meet their educational needs. Preparation in advanced practice roles may require that students be prepared to commute to clinical sites that can offer the needed clinical learning experience.
2. Provide faculty and SON staff with the Clinical Site Request form with potential preceptor's name, CV, credentials, address, telephone number, and fax number. Facility contact for

student placement, including phone number and email should be included. All forms should be submitted by the fifth week of the semester preceding the requested clinical.

3. Develop goals and objectives for clinical experiences.
4. Coordinate clinical experiences to accommodate preceptor's availability and schedule.
5. Provide clinical faculty with clinical hours schedule.
6. Maintain on-going communication with faculty member regarding clinical experiences.
7. Maintain accurate clinical logs.
8. Complete scheduled periodic self-assessments.
9. Be on time, communicate with your preceptor regarding any unavoidable absences or changes to your schedule.
10. Coordinate personal and work schedules to allow successful completion of required clinical hours.
11. Adhere to "dress code" that meets guidelines of clinical setting.
12. Provide health information to the school of nursing Administrative Assistant as requested.
13. Wear King University student name badge only when participating in or involved in experiences related to graduate student role.
14. Agree to be responsible for any and all individual costs related to clinical experiences.
15. Submit of all required clinical paperwork each semester based on specialty concentration and course.

## PRECEPTOR RESPONSIBILITY

1. Serve as primary preceptor to assist students in planning appropriate experiences to meet educational needs and certification requirements.
2. Orient students to clinical site. Clearly identify specific service and personal expectations.
3. Encourage other health care professionals to make students feel a part of the team.
4. Collaborate with faculty to provide information for formative and summative evaluations of student performance within the semester using school of nursing tools.
5. Maintain contact with clinical faculty to communicate issues of concern or failure to maintain professional standards.
6. Notify clinical faculty of any student unprofessional behavior, failure to progress in clinical setting, complaints against student or any concerns with student performance.
7. Mentor student by encouraging "best practice."
8. Assist students to identify with role expectations as FNP, Educator or Nurse Manager/Administrator

9. Provide a variety of patient cases and adequate patient volume.
10. Challenge student with deliberate and thoughtful questions.
11. Provide clinical experiences appropriate for level of education.
12. Provide written and verbal feedback to student in a constructive and timely manner.
13. Sign student's clinical hours tracking log each day student is present.
14. Be available, on site, for assistance during all patient care activities.
15. Share learning resources (texts, computers and available educational programs) to increase student knowledge, skill, and growth.
16. Integrate advanced practice nursing theory into rotation experiences. Students should provide care for patients at increasing complex levels and expectations.

#### **DRESS CODE**

The **dress code** for clinical experience is typically dictated by the clinical facility. In addition to the clinical facility dress code, MSN students are required to wear King University graduate student identification and a white lab coat. Attention to image, hair, jewelry, and hygiene must be consistent with policies of the clinical facility.

#### **INJURIES & BLOOD & BODY FLUID EXPOSURE**

Students must practice proper procedure for the use of **standard precautions** to prevent exposure to pathogens. Students should print a copy of the "Blood and Body Fluid Emergency Procedure" (Attachment B) and "Incident, Injury & Pathogen Exposure Report" (Attachment C). If injured in any way during a clinical experience, the student should contact the preceptor immediately and follow the clinical facility's protocol regarding injuries. If procedure for care involves emergency services or treatment, students assume full responsibility for the costs associated with the care required. Students must contact their clinical or course faculty as soon as possible after the incident occurred.

If a needle stick, sharps injury or blood and body fluid (BBF) exposure occurs, the student should refer to the Emergency Procedure along with the "Incident, Injury & Pathogen Exposure Report." Follow the procedure outlined, complete the report and notify the faculty as soon as possible.

#### **EVALUATIONS**

Clinical evaluation is conducted during and at the end of a designated learning experience. Clinical evaluation is conducted collaboratively between faculty, preceptor and student providing feedback to each other.

The preceptor identifies competencies achieved by the student while the student comments on preceptor mentoring and satisfaction with the learning experiences. Students must maintain a clinical log of hours for certifying bodies. Preceptors must verify all logs and documentation. Faculty members maintain ultimate responsibility for student evaluation and must be an active participant in the process. Course faculty members assign all final grades.

#### **EVALUATION FORMS**

MSN clinical evaluation forms are a record required of preceptor student evaluation. Evaluation forms are reviewed by student and preceptor before clinical experiences begin. Students and faculty members can introduce evaluation forms during negotiation for clinical placement to help clarify expectations. Clinical evaluation facilitates preceptor feedback and it serves as a guide for identifying which goals and objectives have been met. Students request the preceptor complete an evaluation form at each clinical experience. A summative evaluation should be completed at the end of each semester. Completed forms should be forwarded to the student's clinical or course faculty and weighted in the final semester grade.

Refer to the "Information and Guidelines for Practicum courses for Students and Preceptors" for specific details of practicum experiences and forms for each MSN specialty concentration.

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# GRADUATION REQUIREMENTS

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**GRADUATION REQUIREMENTS INCLUDE:**

1. Completion of all required courses with a minimum cumulative GPA of 3.0 on a 4.0 scale.
2. Complete clinical practica with a minimum number of hours as determined for the specialty. Students are responsible for knowing specific criteria required by certifying boards in their chosen area of specialization during their education program. The school of nursing is not responsible for clinical clock hours not achieved during the academic year when opportunity exists but students fail to schedule sufficient hours to meet graduation requirements.
3. Complete NURS 5990 Final Comprehensive Competency Demonstration

**COMPREHENSIVE ASSESSMENT – MAJOR FIELD**

**NURS 5990 Final Comprehensive Competency Demonstration .....0 s.h.**

Graduate level nursing at the master’s level requires a final competency demonstration. Final comprehensive competency demonstration in the MSN program consists of the graduating student’s ability to meet the expected outcomes as set forth by the American Association of Colleges of Nursing (AACN) Essentials of Masters Education in Nursing. These Essentials are core for all master’s programs in nursing, and delineate the outcomes expected of all graduates of master’s nursing programs. Completion of a final competency portfolio, which encompasses the core knowledge and skills outlined in the AACN Essentials document serves as demonstration of the MSN student’s mastery of the required competencies. The final competency portfolio is guided by and evaluated against a rubric. Students are required to pass according to the minimum requirement of the School of Nursing. Any student who does not meet the requirement (pass) of their comprehensive assessment of their major field will not graduate until the requirement is met. Pass/fail

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# MSN PORTFOLIO GUIDELINES

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## INTRODUCTION

The process of portfolio development begins in the Health Care Informatics 5014 course, and continues throughout the program of study.

Portfolios are a “purposeful collection of students’ work reflecting their efforts and progress toward learning outcomes” (NONPF, 2007, p. 3). “Supervised clinical experiences will be verified and documented. One example of such documentation is the use of a professional portfolio. This portfolio may also provide a foundation or template for the graduate’s future professional career trajectory and experiences”, (AACN, 2011, p.30). Portfolios are required to assess the development of skills, knowledge and behaviors required as final competency for graduate nursing education. Each student is responsible for creating a portfolio reflective of his/her accomplishments. Multiple opportunities for both the acquisition of advanced knowledge, skills and behaviors for clinical practice are the foundations of advanced practice in each specialty graduate nursing tract. In collaboration with the student, faculty will evaluate the portfolio as the student progresses through the program. The student will include documents as outlined in the MSN Portfolio Guidelines.

The assignments included in the portfolio guidelines are based on the AACN Essentials of Master’s Education in Nursing, 2011. For those students who are pursuing a post-MSN FNP Certificate, the portfolio will be based on NONPF’s Nurse Practitioner Core Competencies, 2012 and the Population-focused Nurse Practitioner Competencies, 2013. Supporting documentation includes but is not limited to the meeting of course objective as outlined in each of the respective syllabi. The content of each portfolio will vary somewhat because each student will be developing it in a variety of contexts, and within a discrete specialty tract. Additionally, each student has a wide variety of clinical/teaching experiences. Portfolios should reflect the nurse practitioner’s, the nurse educator’s, and the nurse administrator’s ability to practice in areas that are population-based, client/student centered, research-driven, technologically inclusive and culturally responsive. Portfolios also need to indicate that nurse practitioners, nurse educators and nurse administrators are sensitive to diverse populations, especially with regard to gender, race, and culture, and are developmentally appropriate. Evidence of the ability to create a supportive environment reflecting high expectations for client’s care/performance and outcomes should be demonstrated.

However, if portfolios are to be assessed consistently, they will need to contain some common items that are universal to all MSN graduate study tracts and post-MSN FNP certificate tracks. For example, all portfolios should contain at the beginning, a table of contents and a personal statement of philosophy of nursing education. Final portfolios will be reviewed and evaluated by faculty. Examples of supporting documentation may include:

- Case studies
- Presentations
- SOAP notes
- Group projects and papers
- Professional CV
- Clinical practice logs
- Evidence of interactions with clients/patients, families, and members of interdisciplinary health care team
- Journaling/ reflections
- Data tools/exercises in financial management and budgeting/staffing
- Letters to policy makers
- Concept maps

Specific activities should be completed outside of classroom requirements and added to the portfolio to demonstrate you have met all of the MSN graduate outcomes for King University. Examples of evidence of competency in each of the respective outcome areas include the following (**reflective of AACN 2011 Essentials of Master’s in Nursing Education or NONPF’s Nurse Practitioner Core Competencies, 2012 and the Population-focused Nurse Practitioner Competencies, 2013**).

## PORTFOLIO EVALUATION AND SUBMISSION PROCESS

The MSN student’s faculty advisor is responsible for collecting and evaluating the final competency portfolio prior to completion of the last course of the MSN program of study. It is expected that throughout the program, the faculty advisor maintain communication with the student and verify that the final competency portfolio is progressing and is congruent with the guidelines and expectations.

Final competency portfolios are to be submitted during the 12th week of the final semester of the program. The faculty advisor is responsible for setting the specific due date during the 12<sup>th</sup> week of the final semester and evaluating the portfolio according to the approved evaluation methodology.

Upon submission of the final competency portfolio, the graduating student will submit it to his/her faculty advisor by the specified date. The advisor will evaluate the portfolio according to the Guidelines and Grading Rubric for the MSN Portfolio or the Post-MSN FNP Certificate Portfolio (Appendices A1 & A2) and will communicate findings and outcomes to

the student. Additionally, the faculty advisor will submit a signed copy of the scored rubric containing the student's name to School of Nursing Administrative Assistant prior to the registrar's final grade submission deadline date/time.

Faculty advisors are encouraged to call upon other faculty members for assistance with final competency portfolio evaluation when the number of graduating advisees is large, or at any time assistance is desired.

In the event that a student does not achieve a passing score upon initial evaluation, a second evaluation by an alternate faculty member will be completed. If a passing score is not achieved upon the second review by an alternate faculty member, the student will meet with his/her faculty advisor to discuss the deficiencies identified by the faculty reviewers and constructive feedback will be provided. The student will be given the opportunity to correct deficiencies and re-submit within 3 business days.

**Submitting your Portfolio:**

The student will begin to develop the portfolio during NURS 5014 Informatics Course. Post-MSN FNP Certificate students, who have previously met the Informatics requirement, will need to meet with their advisor prior to midterm of their first semester to discuss development of their portfolio. Development of the online portfolio will be completed using a website builder of the student's choice. Students will submit the completed portfolio to their faculty advisor during the 12<sup>th</sup> week of the final semester (exact date TBA). Students will supply the faculty advisor the web link or access information for the portfolio. Wix is a web site builder that is easy to use, has multiple templates and offers password protection of the portfolio so that only those who have the password may have access to the information. This and additional information is explained in more detail on [www.wix.com](http://www.wix.com) Please discuss the chosen web site builder with the instructor of your Informatics course or faculty advisor *prior* to developing your portfolio.

Content Links	Description of Section	Item(s) to include
<b>Title Page/Home Page</b>	This will be your home page of your website	You should include your name, and then have links to the areas listed in <b>Bold</b> print in the first column.
<b>Philosophy of Professional Advanced Nursing Practice</b>	Defines individual values and beliefs; how values and beliefs influence your role as an advanced practice nurse – needs to be a clearly written self-reflection showing your commitment to nursing	Narrative description of your personal philosophy of Professional Advanced Nursing Practice
<b>Career Development:</b>	This section is to showcase what you have accomplished in your nursing career and to show personal and professional growth in the profession.	<p><u>REQUIRED:</u></p> <ol style="list-style-type: none"> <li>1. License</li> <li>2. Certifications</li> <li>3. CV/Resumé</li> <li>4. Transcripts/Degrees (official undergraduate, unofficial graduate up until current)</li> </ol> <p><u>TWO OF THE FOLLOWING</u></p> <ol style="list-style-type: none"> <li>5. Professional Memberships</li> <li>6. Excellence in Clinical Practice Exemplars</li> <li>7. Awards</li> <li>8. Publications/presentations</li> <li>9. Performance Evaluations</li> <li>10. Continuing Education</li> <li>11. Committee Involvement</li> </ol> <p style="text-align: right;"><i>All are not required but highly suggested Additional items may be added</i></p>

***Evidence of The Essentials of Master's Education in Nursing\****  
***OR***  
***Evidence of Nurse Practitioner Core Competencies\****

For each area provide a detailed summary of how you have met the competencies for each individual Essential. Include examples for each Essential. (quizzes, discussions, presentations, practicum experiences, etc.)

<p><b>I. Background for Practice from Sciences and Humanities/ Scientific Foundations</b></p>	<p>Integrates scientific findings from nursing, humanities, biopsychosocial fields, genetics, public health, quality improvement, health economics, translational science and organizational sciences for the continual improvement of nursing care. Knowledge from information sciences, health communication and health literacy are used to provide care management and coordination to multiple populations. Critically analyzes data and evidence for improving advanced nursing practice.</p>	<p>The following instructions are for <b>each</b> MSN Essential Competency Area.</p> <p>1) Narrative reflection of how you achieved competency in the specific area. Narrative shows commitment to learning and evidence of growth in competency area throughout MSN curriculum.</p>
<p><b>II. Organizational and Systems Leadership</b></p>	<p>Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills emphasize ethical and critical decision making. Graduate will be able to initiate and maintain effective working relationships using respectful communication and collaboration within interprofessional teams, demonstrating skills in care coordination, delegation, and initiating conflict resolution in multiple and varied settings. Essential leadership skills: communication, collaboration, negotiation, delegation, coordination. Uses critical thinking and reflective thinking while advocating for improved access, quality and cost-effective health care.</p>	<p>2) Include self-assessment of strengths and weaknesses in competency area and how specific competency has facilitated your growth professionally.</p> <p>3) Provide assignments and activities that you have completed during your program of study that serve as examples of achieving this competency. You will need to provide <u>at least 4 examples</u> that show continued growth and achievement in competency area.</p> <p>(Refer to specific assignments by Title and place in order they are referenced in your narrative)</p>
<p><b>III. Quality Improvement and Safety</b></p>	<p>Recognize, analyze, and apply the methods, tools, performance measures, and standards needed to improve quality and safety across the care continuum in diverse settings. Demonstrates knowledge of potential and actual impacts of national patient safety resources, initiatives, and regulations. Uses evidence to continuously improve the quality of clinical practice. Evaluates factors that influence cost, quality and safety of healthcare and organizational structures.</p>	
<p><b>IV. Translating and Integrating Scholarship into Practice/ Practice Inquiry</b></p>	<p>Examines policies and seeks evidence for every aspect of practice. Applies research within practice settings to resolve practice problems and work as a change agent; Applies ethically sound principles to decision-making. Generates knowledge from practice to improve patient outcomes and translates new knowledge into practice. Leads practice inquiry, analyzes clinical guidelines and disseminates evidence from inquiry to diverse audiences. Utilizes evidence-based research in practice.</p>	
<p><b>V. Informatics and Healthcare Technologies/ Information Literacy</b></p>	<p>Uses patient-care technologies to deliver and enhance care. Uses communication technologies to integrate and coordinate care. Data management to analyze and improve outcomes of care. Health information management for evidence-based care and health education. Facilitates the use of electronic health records. Ethically manages data, information, knowledge and technology to communicate effectively with the healthcare team, patients and caregivers.</p>	

	Demonstrates information literacy skills in complex decision making. Uses technology systems that capture data on variables for the evaluation of nursing care.	
<b>VI. Health Policy and Advocacy</b>	Demonstrates skills to promote health, help shape the health delivery system, and advance values through policy processes and advocacy. Use political competence to improve health outcomes of populations and improve the quality of the healthcare delivery system. Understand the principles of healthcare economics, payment methods and the relationship between policy and health economics. Demonstrate understanding of the interdependence of policy and practice. Advocates for ethical policies that promote access, equity, quality and cost. Demonstrates knowledge of HIPAA, CMS, TJC, documentation, coding/reimbursement and other policies that affect health care.	
<b>VII. (MSN) Interprofessional Collaboration for Improving Patient and Population Health Outcomes</b>	Demonstrates work as a member and leader of interprofessional teams; communicates, collaborates and consults with other health professionals to manage and coordinate care across systems and environments.	
<b>VII. (Post- MSN) Health Care Delivery</b>	Applies knowledge of organizational practices and complex systems to improve health care delivery. Effects health care change by negotiating, consensus-building and partnering. Minimizes risk to patients and providers at individual and systems levels. Facilitates the development of health care systems that address the needs of culturally diverse populations. Evaluates the impact of health care delivery on patients, providers and other stakeholders. Analyzes organizational structure and function to improve the delivery of care. Collaborates in planning for transitions across the continuum of care	
<b>VIII. (MSN) Clinical Prevention and Population Health for Improving Health</b>	Applies and integrates broad, organizational, client-centered and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care to individuals, families, and populations. Designs and delivers clinical prevention interventions and population-based care that promote health and reduce risk of or prevention of disease.	
<b>VIII. (Post-MSN) Ethics</b>	Integrates ethical principles in decision making Evaluates ethical consequences of decisions. Applies ethically sound solutions to complex issues. Examples: Understands provider/patient boundaries, duty to report, confidentiality, privacy, APRN Scope of Practice, Code of Ethics for Nurses, do no harm, patient rights, prescribing laws, etc	
<b>IX. (MSN) Master's-Level Nursing Practice</b>	Describe evolution into Masters-level Nursing Practice Role: MSN practice includes any form of nursing intervention that positively influences healthcare outcomes for a variety of individuals,	1. Compose a narrative summary of your journey to a Masters-level practicing nurse which shows a deeper understanding of the nursing profession. Include in the summary a

	<p>populations, or systems; Utilizes expanded critical thinking and clinical reasoning skills to make appropriate clinical decisions; Demonstrates highest level of professional accountability in decisions based on ethical, professional and Christian standards.</p>	<p>reflection on your education and practices throughout the MSN program and include a plan of lifelong learning and professional development.</p> <p>2. Provide at least 4 examples or descriptions of how you have demonstrated the highest level of accountability for professional practice in your chosen MSN role (FNP, Administrator, Educator)</p>
<p><b>IX. (Post- MSN) Independent Practice</b></p>	<p>1. Describe evolution into Advanced Practice Nursing Role (a paper of your own journey to an advanced practicing nurse to show a deeper understanding of the nursing profession based on reflective practices and a plan of lifelong learning and professional development)</p> <p>2. Demonstrates the highest level of accountability for professional practice evidenced by functioning as an independent practitioner while providing patient-centered care. Provides the full spectrum of health care services to patients across the lifespan to include: health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative care, end of life care, management of acute and chronic disorders, assessment, screening and diagnostic strategies in the development of diagnoses, prescribing of medications, development and evaluation of treatment plans.</p>	<p>1. Compose a narrative summary of your journey to an Advanced Practice Nurse which shows a deeper understanding of the nursing profession. Include in the summary a reflection on your education and practices throughout the post-MSN FNP certificate program and include a plan of lifelong learning and professional development.</p> <p>2. Provide at least 4 examples or descriptions of how you have demonstrated the highest level of accountability for professional practice in the APRN role</p>
<p><b>Fulfillment of the King University Mission &amp; Core Values:</b></p>	<p>King's mission is to build meaningful lives of achievement and cultural transformation in Christ. King's Core Values are Christian faith, scholarship, service, and career</p> <p>Refer to the full Mission and Vision of King University in the Academic Catalogue at <a href="http://students.king.edu/academic-catalog/">http://students.king.edu/academic-catalog/</a> this section will assist with completing this section</p>	<p>1. Describe how your MSN education has prepared you to become competent in your chosen MSN role. Include the importance of the Core Values of Christian faith, scholarship, service and career and how these values will lead you to a life of achievement and cultural transformation.</p> <p>2. Provide evidence of completion of a Service Learning Project. Include a summary of the project and how the project supported the community, enriched your learning and provided you with insight into the core value of service.</p>
<p><b>The following areas will be included in the grading of your portfolio in addition to the actual content:</b></p> <p><b>Appearance/Organization:</b></p> <ol style="list-style-type: none"> <li>1. Home Page with links to all content areas</li> <li>2. Professional</li> <li>3. Organized</li> <li>4. Ease of Navigation</li> <li>5. Neat</li> </ol> <p><b>Mechanics:</b> Punctuation, capitalization, spelling, sentence structure, and word usage.</p>		

APA format – margins, titles, references

**Commitment to the Profession**

**Quality of examples provided**

**Quality of Narrative Reflection and Self- assessment of Competencies**

If at any time you have questions or concerns regarding your portfolio or appropriate content contact your faculty advisor.

**Attachment A1**  
**KING UNIVERSITY – School of Nursing**  
**MSN Portfolio Guidelines and Grading Rubric**

<b>Essential Element</b>	<b>Meets or Exceeds Expectations</b>	<b>Does Not Meet Expectations</b>	<b>Total Points</b>
<p><b>Philosophy of Professional Masters Level Nursing Practice</b>            (Defines individual values and beliefs; how values and beliefs influence your role as an advanced practice nurse)</p>	<input type="checkbox"/> Clearly written; excellent reflection and commitment (3)	<input type="checkbox"/> No philosophy of nursing practice included (0)  <input type="checkbox"/> Philosophy of nursing does not exemplify masters level nursing practice (1)	
<p><b>Career Development:</b>  <u>Required:</u>            12. License            13. Certifications            14. CV/Resumé            15. Transcripts/Degrees            (official undergraduate, unofficial graduate up until current)</p> <p><u>Two of the following from the last 3 years:</u>            16. Professional Memberships            17. Excellence in Clinical Practice Exemplars            18. Awards            19. Publications/presentations            20. Performance Evaluations            21. Continuing Education            22. Committee Involvement</p> <p style="text-align: center;"><i>All are not required but highly suggested            Additional items may be added</i></p>	<input type="checkbox"/> Includes all required components (5)  <input type="checkbox"/> Includes 2 or more additional components (2)	<input type="checkbox"/> Deficient in one or more required Components (0)  <input type="checkbox"/> Deficient in 1 of the additional components (1)  <input type="checkbox"/> Deficient in 2 of the additional components (0)	
<p><i>Evidence of The Essentials of Master’s Education in Nursing*</i></p> <p>For each area provide a detailed summary of how you have met the competencies for each individual Essential. Include examples for each Essential. (quizzes, discussions, presentations, practicum experiences, service, etc.)</p>			
<p><b>I. Background for Practice from Sciences and Humanities</b>             (Integrates scientific findings from nursing, humanities, biopsychosocial fields, genetics, public health, quality improvement, health economics, translational science and organizational sciences for the continual improvement of nursing care. Knowledge from information sciences, health communication and health literacy are used to provide care management and coordination to multiple populations.)</p>	<input type="checkbox"/> Detailed narrative summary; clearly written; shows commitment to learning, <u>evidence of growth</u> in science and humanities (2) <input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in science and humanities (2) <input type="checkbox"/> Exemplars representative of continued growth and achievement (2) <input type="checkbox"/> ≥ 4 examples of competency in science and	<input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in science and humanities (1) <input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in the sciences and humanities (0) <input type="checkbox"/> Exemplars do not show growth in science and humanities (0) <input type="checkbox"/> 3 examples of competency in science and humanities are provided (1) <input type="checkbox"/> < 3 examples of competency in science and humanities are provided (0)	

	humanities are provided; (2)		
<p><b>II. Organizational and Systems Leadership</b></p> <p>(Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills emphasize ethical and critical decision making. Graduate will be able to initiate and maintain effective working relationships using respectful communication and collaboration within interprofessional teams, demonstrating skills in care coordination, delegation, and initiating conflict resolution in multiple and varied settings. Essential leadership skills: communication, collaboration, negotiation, delegation, coordination)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth</u> in organizational and systems leadership (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in organizational and systems leadership (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement in organizational and systems leadership (2)</li> <li><input type="checkbox"/> <math>\geq 4</math> examples of competency in organizational and systems leadership (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in organizational and systems leadership (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in the organizational and systems leadership (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in organizational and systems leadership (0)</li> <li><input type="checkbox"/> 3 examples of competency in organizational and systems leadership are provided (1)</li> <li><input type="checkbox"/> <math>&lt; 3</math> examples of competency in organizational and systems leadership are provided (0)</li> </ul>	
<p><b>III. Quality Improvement and Safety</b></p> <p>(Recognize, analyze, and apply the methods, tools, performance measures, and standards needed to improve quality and safety across the care continuum in diverse settings. Demonstrate knowledge of potential and actual impacts of national patient safety resources, initiatives, and regulations.)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth</u> in quality improvement and safety (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in quality improvement and safety (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement in quality improvement and safety (2)</li> <li><input type="checkbox"/> <math>\geq 4</math> examples of competency in quality improvement and safety (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in quality improvement and safety (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in quality improvement and safety (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in quality improvement and safety (0)</li> <li><input type="checkbox"/> 3 examples of competency in quality improvement and safety are provided (1)</li> <li><input type="checkbox"/> <math>&lt; 3</math> examples of competency in quality improvement and safety are provided (0)</li> </ul>	
<p><b>IV. Translating and Integrating Scholarship into Practice</b></p> <p>(Examines policies and seeks evidence for every aspect of practice. Applies research within practice settings to resolve practice problems and work as a change agent; Applies ethically sound principles to decision-making.)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth</u> in translating and integrating scholarship into practice (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in translating and integrating scholarship into practice (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement translating and integrating scholarship into practice (2)</li> <li><input type="checkbox"/> <math>\geq 4</math> examples of competency in translating and integrating scholarship into practice (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in translating and integrating scholarship into practice (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in translating and integrating scholarship into practice (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in translating and integrating scholarship into practice (0)</li> <li><input type="checkbox"/> 3 examples of competency in translating and integrating scholarship into practice are provided (1)</li> <li><input type="checkbox"/> <math>&lt; 3</math> examples of competency translating and integrating scholarship into practice are provided (0)</li> </ul>	
<p><b>V. Informatics and Healthcare</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear;</li> </ul>	

<p><b>Technologies</b></p> <p>(Uses patient-care technologies to deliver and enhance care. Uses communication technologies to integrate and coordinate care. Data management to analyze and improve outcomes of care. Health information management for evidence-based care and health education. Facilitates the use of electronic health records. Ethically manages data, information, knowledge and technology to communicate effectively with the healthcare team, patients and caregivers.)</p>	<p>written; shows commitment to learning; Narrative shows <u>evidence of growth in informatics and healthcare technologies</u> (2)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in informatics and healthcare technologies (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement in informatics and healthcare technologies (2)</li> <li><input type="checkbox"/> <math>\geq 4</math> examples of competency in informatics and healthcare technologies (2)</li> </ul>	<p>does not show evidence of growth in informatics and healthcare technologies (1)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in informatics and healthcare technologies (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in informatics and healthcare technologies (0)</li> <li><input type="checkbox"/> 3 examples of competency in informatics and healthcare technologies (1)</li> <li><input type="checkbox"/> <math>&lt; 3</math> examples of competency in informatics and healthcare technologies (0)</li> </ul>	
<p><b>VI. Health Policy and Advocacy</b></p> <p>(Demonstrates skills to promote health, help shape the health delivery system, and advance values through policy processes and advocacy. Use political competence to improve health outcomes of populations and improve the quality of the healthcare delivery system. Understand the principles of healthcare economics, payment methods and the relationship between policy and health economics. )</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth in health policy and advocacy</u> (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in health policy and advocacy (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement in health policy and advocacy (2)</li> <li><input type="checkbox"/> <math>\geq 4</math> examples of competency in health policy and advocacy (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in health policy and advocacy (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in health policy and advocacy (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in health policy and advocacy (0)</li> <li><input type="checkbox"/> 3 examples of competency in health policy and advocacy (1)</li> <li><input type="checkbox"/> <math>&lt; 3</math> examples of competency in health policy and advocacy (0)</li> </ul>	
<p><b>VII. Interprofessional Collaboration for Improving Patient and Population Health Outcomes</b></p> <p>(Demonstrates work as a member and leader of interprofessional teams; communicates, collaborates and consults with other health professionals to manage and coordinate care across systems and environments.)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth in interprofessional collaboration for improving patient and population health outcomes</u> (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in interprofessional collaboration for improving patient and population health outcomes (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement in interprofessional collaboration for improving patient and population health outcomes (2)</li> <li><input type="checkbox"/> <math>\geq 4</math> examples of competency in interprofessional collaboration for improving patient and population health outcomes (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in interprofessional collaboration for improving patient and population health outcomes (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in interprofessional collaboration for improving patient and population health outcomes (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in interprofessional collaboration for improving patient and population health outcomes (0)</li> <li><input type="checkbox"/> 3 examples of competency in interprofessional collaboration for improving patient and population health outcomes (1)</li> <li><input type="checkbox"/> <math>&lt; 3</math> examples of competency in interprofessional collaboration for improving patient and population health outcomes (0)</li> </ul>	

<p><b>VIII. Clinical Prevention and Population Health for Improving Health</b></p> <p>(Applies and integrates broad, organizational, client-centered and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care to individuals, families, and populations. Designs and delivers clinical prevention interventions and population-based care that promote health and reduce risk of or prevention of disease.)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth</u> in clinical prevention and population health for improving health (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in clinical prevention and population health for improving health (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement in clinical prevention and population health for improving health (2)</li> <li><input type="checkbox"/> ≥ 4 examples of competency in clinical prevention and population health for improving health (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in clinical prevention and population health for improving health (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in clinical prevention and population health for improving health (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in clinical prevention and population health for improving health (0)</li> <li><input type="checkbox"/> 3 examples of competency in clinical prevention and population health for improving health (1)</li> <li><input type="checkbox"/> &lt; 3 examples of competency in clinical prevention and population health for improving health (0)</li> </ul>	
<p><b>IX. Master’s-Level Nursing Practice</b></p> <p>(Any form of nursing intervention that positively influences healthcare outcomes for a variety of individuals, populations, or systems.</p> <p>3. Describe evolution into Masters Level Nursing Practice Role (a paper of your own journey to a masters level practicing nurse to show a deeper understanding of the nursing profession based on reflective practices and a plan of lifelong learning and professional development)</p> <p>4. Provides evidence of Master’s-Level Nursing practice in your chosen role (Education, Administration, FNP) demonstrating the highest level of accountability for professional practice</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; Narrative includes journey to MSN nursing role with a <u>deeper understanding of nursing profession</u> (2)</li> <li><input type="checkbox"/> Narrative <u>includes reflection</u> on education and practices throughout MSN program (2)</li> <li><input type="checkbox"/> Narrative includes a <u>plan of lifelong learning</u> and professional development (2)</li> <li><input type="checkbox"/> ≥ 4 examples or descriptions that demonstrate the highest level of accountability for professional practice in your chosen MSN role (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show deeper understanding of nursing profession (0)</li> <li><input type="checkbox"/> Narrative summary does not include reflection on education and practices in MSN program (0)</li> <li><input type="checkbox"/> Narrative summary does not include a plan of lifelong learning and professional development (0)</li> <li><input type="checkbox"/> 3 examples or descriptions that demonstrate the highest level of accountability for professional practice in your chosen MSN role (1)</li> <li><input type="checkbox"/> &lt;3 examples or descriptions that demonstrate the highest level of accountability for professional practice in your chosen MSN role (0)</li> </ul>	
<p><b>Fulfillment of the King University Mission &amp; Core Values:</b></p> <p>King’s mission is to build meaningful lives of achievement and cultural transformation in Christ.</p> <p>King’s Core Values are Christian faith, scholarship, service, and career</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; Describes how KU MSN curriculum has prepared student to become competent in chosen MSN role (2)</li> <li><input type="checkbox"/> Narrative describes the importance of the</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary does not show evidence that KU education prepared student for chosen MSN role (0)</li> <li><input type="checkbox"/> Narrative summary does not describe the importance of the core values or how they will lead to a life of achievement and cultural</li> </ul>	

Completion of Service Learning Project	<p>integration of the values of the Christian community and how they will lead to a life of achievement and cultural transformation in Christ (2)</p> <p><input type="checkbox"/> Completes Service Learning project and provides summary of project (2)</p> <p><input type="checkbox"/> Describes how the project supported the community, enriched learning for the student and provided insight into the core value of service (2)</p>	<p>transformation in Christ (0)</p> <p><input type="checkbox"/> No Service Learning Project completed (0)</p> <p><input type="checkbox"/> Service Learning Project completed but summary omitted (1)</p> <p><input type="checkbox"/> Project narrative lacking explanation of how project supported the community, enriched student learning or provided insight into value of service (0)</p>	
<p><b>Appearance/Organization:</b></p> <p>6. Home Page with links to content areas</p> <p>7. Professional</p> <p>8. Organized</p> <p>9. Ease of Navigation</p> <p>10. Neat</p>	<p><input type="checkbox"/> Links to all content areas (1)</p> <p><input type="checkbox"/> Very well organized (1)</p> <p><input type="checkbox"/> Professional (1)</p> <p><input type="checkbox"/> Easy to navigate (1)</p> <p><input type="checkbox"/> Neat (1)</p>	<p><input type="checkbox"/> Missing links or nonfunctioning (0)</p> <p><input type="checkbox"/> Unorganized, disjointed (0)</p> <p><input type="checkbox"/> Unprofessional (0)</p> <p><input type="checkbox"/> Hard to navigate, chaotic (0)</p> <p><input type="checkbox"/> Messy, sloppy, cluttered (0)</p>	
<p><b>Mechanics:</b></p> <p>Punctuation, capitalization, spelling, sentence structure, and word usage.</p> <p>APA format – margins, titles, references</p>	<p><input type="checkbox"/> Less than 3 grammatical and/or APA errors. (5 pts)</p>	<p><input type="checkbox"/> 3-4 grammatical and/or APA errors (2.5)</p> <p><input type="checkbox"/> &gt; 4 grammatical and/or APA errors (0)</p>	
<b>TOTAL POINTS</b>			/100

\*Adapted from the AACN's *The Essentials of Master's Education in Nursing* March 21, 2011

Pass ≥ 80     Fail < 80

Comments: \_\_\_\_\_

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

**Attachment A2**  
**KING UNIVERSITY – School of Nursing**  
**Post-MSN FNP Certificate Portfolio Guidelines and Grading Rubric**

Essential Element	Meets or Exceeds Expectations	Does Not Meet Expectations	Total Points
<p><b>Philosophy of Professional Masters Level Nursing Practice</b>            (Defines individual values and beliefs; how values and beliefs influence your role as an advanced practice nurse)</p>	<input type="checkbox"/> Clearly written; excellent reflection and commitment (3)	<input type="checkbox"/> No philosophy of nursing practice included (0)  <input type="checkbox"/> Philosophy of nursing does not exemplify masters level nursing practice (1)	
<p><b>Career Development:</b>  <u><b>Required:</b></u>            1. License            2. Certifications            3. CV/Resumé            4. Transcripts/Degrees            (official undergraduate, unofficial graduate up until current)</p> <p><u><b>Two of the following from the last 3 years:</b></u>            1. Professional Memberships            2. Excellence in Clinical Practice Exemplars            3. Awards            4. Publications/presentations            5. Performance Evaluations            6. Continuing Education            7. Committee Involvement</p> <p style="text-align: center;"><i>All are not required but highly suggested            Additional items may be added</i></p>	<input type="checkbox"/> Includes all required components (5)  <input type="checkbox"/> Includes 2 or more additional components (2)	<input type="checkbox"/> Deficient in one or more required Components (0)  <input type="checkbox"/> Deficient in 1 of the additional components (1)  <input type="checkbox"/> Deficient in 2 of the additional components (0)	
<p><b><i>Evidence of Nurse Practitioner Core Competencies*</i></b></p> <p>For each area provide a detailed summary of how you have met the competencies for each individual Competency. Include examples for each Competency. (quizzes, discussions, presentations, practicum experiences, service, etc.)</p>			
<p><b>I. Scientific Foundations</b>            (Critically analyzes data and evidence for improving advanced nursing practice. Integrates knowledge from the humanities and sciences within the context of nursing science while translating research and other forms of knowledge to improve practice processes and outcomes. Develops new practice approaches based on the integration of research, theory and practice.)</p>	<input type="checkbox"/> Detailed narrative summary; clearly written; shows commitment to learning, <u>evidence of growth in science and humanities</u> and application to practice (2) <input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in science and humanities and application to practice (2) <input type="checkbox"/> Exemplars representative of continued growth and achievement (2) <input type="checkbox"/> ≥ 4 examples of competency in science and	<input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in science and humanities (1) <input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in the sciences and humanities (0) <input type="checkbox"/> Exemplars do not show growth in science and humanities (0) <input type="checkbox"/> 3 examples of competency in science and humanities are provided (1) <input type="checkbox"/> < 3 examples of competency in science and humanities are provided (0)	

	humanities with application to practice are provided; (2)		
<p><b>II. Leadership</b>  (Assumes complex and advanced leadership roles to initiate and guide change, foster collaboration with patients, communities, health care teams and policy makers to improve health care. Uses critical thinking and reflective thinking while advocating for improved access, quality and cost effective health care. Advances practice through the development and implementation of innovations incorporating principles of change, Communicates practice knowledge effectively both orally and in writing. Participates in professional organizations and activities. Essential leadership skills: communication, collaboration, negotiation, delegation, coordination)</p>	<input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth in assuming a leadership role to improve health care (2)</u> <input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in assuming a leadership role to improve health care (2) <input type="checkbox"/> Exemplars show continued growth and achievement in assuming a leadership role to improve health care (2) <input type="checkbox"/> ≥ 4 examples of competency in assuming a leadership role to improve health care (2)	<input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in assuming a leadership role to improve health care (1) <input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in assuming a leadership role to improve health care (0) <input type="checkbox"/> Exemplars do not show growth in assuming a leadership role to improve health care (0) <input type="checkbox"/> 3 examples of competency in assuming a leadership role to improve health care are provided (1) <input type="checkbox"/> < 3 examples of competency in assuming a leadership role to improve health care are provided (0)	
<p><b>III. Quality</b>  (Uses evidence to continuously improve the quality of clinical practice. Evaluates factors that influence the cost, quality and safety of healthcare and how organization structures, processes and policies impact that quality. Promotion of a culture of excellence. Demonstrates a proactive approach in implementing interventions to ensure high quality care is given.)</p>	<input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth in quality improvement and safety (2)</u> <input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in quality improvement and safety (2) <input type="checkbox"/> Exemplars show continued growth and achievement in quality improvement and safety (2) <input type="checkbox"/> ≥ 4 examples of competency in quality improvement and safety (2)	<input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in quality improvement and safety (1) <input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in quality improvement and safety (0) <input type="checkbox"/> Exemplars do not show growth in quality improvement and safety (0) <input type="checkbox"/> 3 examples of competency in quality improvement and safety are provided (1) <input type="checkbox"/> < 3 examples of competency in quality improvement and safety are provided (0)	
<p><b>IV. Practice Inquiry</b>  (Generates knowledge from practice to improve patient outcomes and translates new knowledge into practice. Leads practice inquiry, analyzes clinical guidelines for application to practice, and disseminates evidence from inquiry to diverse audiences. Utilization of the most current evidence-based research in practice)</p>	<input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth in translating and integrating evidence-based research into practice (2)</u> <input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in translating and integrating evidence-based research into practice (2) <input type="checkbox"/> Exemplars show continued growth and achievement translating and integrating evidence-based research into	<input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in translating and integrating evidence-based research into practice (1) <input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in translating and integrating evidence-based research into practice (0) <input type="checkbox"/> Exemplars do not show growth in translating and integrating evidence-based research into practice (0) <input type="checkbox"/> 3 examples of competency in translating and integrating	

	<p>practice (2)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> ≥ 4 examples of competency in translating and integrating evidence-based research into practice (2)</li> </ul>	<p>evidence-based research into practice are provided (1)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> &lt; 3 examples of competency translating and integrating evidence-based research into practice are provided (0)</li> </ul>	
<p><b>V. Technology and Information Literacy</b> (Integrates appropriate technologies to improve health care. Translates technical and scientific health information appropriate for user’s needs –assess patients’/families’ needs to provide effective care. Demonstrates information literacy skills in complex decision making. Contributes to the design of clinical information systems that promote safe, cost-effective care. Uses technology systems that capture data on variables for the evaluation of nursing care. Examples: use of EMRs, electronic prescriptions, telemedicine, social networking to improve pt care. Data banks or QA findings matched with EBP in web-based or electronic communication to enhance care.)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth in informatics and healthcare technologies</u> (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in informatics and healthcare technologies (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement in informatics and healthcare technologies (2)</li> <li><input type="checkbox"/> ≥ 4 examples of competency in informatics and healthcare technologies (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in informatics and healthcare technologies (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in informatics and healthcare technologies (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in informatics and healthcare technologies (0)</li> <li><input type="checkbox"/> 3 examples of competency in informatics and healthcare technologies (1)</li> <li><input type="checkbox"/> &lt; 3 examples of competency in informatics and healthcare technologies (0)</li> </ul>	
<p><b>VI. Policy</b> (Demonstrates understanding of the interdependence of policy and practice. Advocates for ethical policies that promote access, equity, quality and cost. Analyzes factors affecting policy development and implications of existing policies. Contributes to development of policy. Evaluates the impact of globalization on health care policy development. Demonstrates knowledge of HIPAA, CMS, TJC, documentation, coding/reimbursement, and other policies that directly affect health care, providers and patients.)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth in health policy and advocacy</u> (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in health policy and advocacy (2)</li> <li><input type="checkbox"/> Exemplars show continued growth and achievement in health policy and advocacy (2)</li> <li><input type="checkbox"/> ≥ 4 examples of competency in health policy and advocacy (2)</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in health policy and advocacy (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in health policy and advocacy (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in health policy and advocacy (0)</li> <li><input type="checkbox"/> 3 examples of competency in health policy and advocacy (1)</li> <li><input type="checkbox"/> &lt; 3 examples of competency in health policy and advocacy (0)</li> </ul>	
<p><b>VII. Health Delivery System</b> (Applies knowledge of organizational practices and complex systems to improve health care delivery. Effects health care change by negotiating, consensus-building and partnering. Minimizes risk to patients and providers at individual and systems levels. Facilitates the development of health care systems that address the needs of culturally diverse populations. Evaluates the impact of health care delivery on patients, providers and other stakeholders. Analyzes organizational structure and function to improve the delivery of care. Collaborates in planning for transitions across the continuum of care.)</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth in knowledge of organizational practices to improve health care delivery and outcomes</u> (2)</li> <li><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in knowledge of organizational practices to improve health care delivery and outcomes (2)</li> <li><input type="checkbox"/> Exemplars show continued</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in knowledge of organizational practices to improve health care delivery and outcomes (1)</li> <li><input type="checkbox"/> Narrative lacking self-assessment of strengths and in knowledge of organizational practices to improve health care delivery and outcomes (0)</li> <li><input type="checkbox"/> Exemplars do not show growth in knowledge of organizational practices to improve health care delivery and outcomes (0)</li> <li><input type="checkbox"/> 3 examples of in knowledge</li> </ul>	

	<p>growth and achievement in knowledge of organizational practices to improve health care delivery and outcomes (2)</p> <p><input type="checkbox"/> ≥ 4 examples of competency in knowledge of organizational practices to improve health care delivery and outcomes (2)</p>	<p>of organizational practices to improve health care delivery and outcomes (1)</p> <p><input type="checkbox"/> &lt; 3 examples of competency in knowledge of organizational practices to improve health care delivery and outcomes (0)</p>	
<p><b>VIII. Ethics</b> (Integrates ethical principles in decision making Evaluates ethical consequences of decisions. Applies ethically sound solutions to complex issues. Examples: Understands provider/patient boundaries, duty to report, confidentiality, privacy, APRN Scope of Practice, Code of Ethics for Nurses, do no harm, patient rights, prescribing laws, etc.)</p>	<p><input type="checkbox"/> Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth</u> in integration of ethical principles into decision making (2)</p> <p><input type="checkbox"/> Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in integration of ethical principles into decision making (2)</p> <p><input type="checkbox"/> Exemplars show continued growth and achievement in integration of ethical principles into decision making (2)</p> <p><input type="checkbox"/> ≥ 4 examples of competency in integration of ethical principles into decision making (2)</p>	<p><input type="checkbox"/> Narrative summary vague, unclear; does not show evidence of growth in integration of ethical principles into decision making (1)</p> <p><input type="checkbox"/> Narrative lacking self-assessment of strengths and weaknesses in integration of ethical principles into decision making (0)</p> <p><input type="checkbox"/> Exemplars do not show growth integration of ethical principles into decision making (0)</p> <p><input type="checkbox"/> 3 examples of competency in integration of ethical principles into decision making (1)</p> <p><input type="checkbox"/> &lt; 3 examples of competency integration of ethical principles into decision making (0)</p>	
<p><b>IX. Independent Practice</b></p> <ol style="list-style-type: none"> <li>Describe evolution into Advanced Practice Nursing Role (a paper of your own journey to an advanced practicing nurse to show a deeper understanding of the nursing profession based on reflective practices and a plan of lifelong learning and professional development)</li> <li>Demonstrates the highest level of accountability for professional practice evidenced by functioning as an independent practitioner while providing patient-centered care. Provides the full spectrum of health care services to patients across the lifespan to include: health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative care, end of life care, management of acute and chronic disorders, assessment, screening and diagnostic strategies in the development of diagnoses, prescribing of medications, development and evaluation of treatment plans.</li> </ol>	<p><input type="checkbox"/> Detailed summary; clearly written; Narrative includes journey to APRN role with a <u>deeper understanding of nursing profession</u> (2)</p> <p><input type="checkbox"/> Narrative <u>includes reflection</u> on education and practices throughout Post-MSN FNP certificate program (2)</p> <p><input type="checkbox"/> Narrative includes a <u>plan of lifelong learning</u> and professional development (2)</p> <p><input type="checkbox"/> ≥ 4 examples or descriptions that demonstrate the highest level of accountability for</p>	<p><input type="checkbox"/> Narrative summary vague, unclear; does not show deeper understanding of nursing profession (0)</p> <p><input type="checkbox"/> Narrative summary does not include reflection on education and practices in Post-MSN FNP certificate program (0)</p> <p><input type="checkbox"/> Narrative summary does not include a plan of lifelong learning and professional development (0)</p> <p><input type="checkbox"/> 3 examples or descriptions that demonstrate the highest level of accountability for professional practice in the APRN role (1)</p>	

	professional practice in the APRN role (2)	<input type="checkbox"/> <3 examples or descriptions that demonstrate the highest level of accountability for professional practice in the APRN role (0)	
<b>Fulfillment of the King University Mission &amp; Core Values:</b> King's mission is to build meaningful lives of achievement and cultural transformation in Christ.  King's Core Values are Christian faith, scholarship, service, and career  Completion of Service Learning Project	<input type="checkbox"/> Detailed summary; clearly written; Describes how KU MSN curriculum has prepared student to become competent in chosen MSN role (2) <input type="checkbox"/> Narrative describes the importance of the integration of the values of the Christian community and how they will lead to a life of achievement and cultural transformation in Christ (2) <input type="checkbox"/> Completes Service Learning project and provides summary of project (2) <input type="checkbox"/> Describes how the project supported the community, enriched learning for the student and provided insight into the core value of service (2)	<input type="checkbox"/> Narrative summary does not show evidence that KU education prepared student for chosen MSN role (0) <input type="checkbox"/> Narrative summary does not describe the importance of the core values or how they will lead to a life of achievement and cultural transformation in Christ (0) <input type="checkbox"/> No Service Learning Project completed (0) <input type="checkbox"/> Service Learning Project completed but summary omitted (1) <input type="checkbox"/> Project narrative lacking explanation of how project supported the community, enriched student learning or provided insight into value of service (0)	
<b>Appearance/Organization:</b> 1. Home Page with links to content areas 2. Professional 3. Organized 4. Ease of Navigation 5. Neat	<input type="checkbox"/> Links to all content areas (1) <input type="checkbox"/> Very well organized (1) <input type="checkbox"/> Professional (1) <input type="checkbox"/> Easy to navigate (1) <input type="checkbox"/> Neat (1)	<input type="checkbox"/> Missing links or nonfunctioning (0) <input type="checkbox"/> Unorganized, disjointed (0) <input type="checkbox"/> Unprofessional (0) <input type="checkbox"/> Hard to navigate, chaotic (0) <input type="checkbox"/> Messy, sloppy, cluttered (0)	
<b>Mechanics:</b> Punctuation, capitalization, spelling, sentence structure, and word usage. APA format – margins, titles, references	<input type="checkbox"/> Less than 3 grammatical and/or APA errors. (5 pts)	<input type="checkbox"/> 3-4 grammatical and/or APA errors (2.5) <input type="checkbox"/> > 4 grammatical and/or APA errors (0)	
<b>TOTAL POINTS</b>			/100

\*Adapted from the NONPF's *Nurse Practitioner Core Competencies* 2012 and *Population-Focused Nurse Practitioner Competencies* 2013

Pass  $\geq$  80       Fail  $<$  80

Comments:

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

## Attachment B



### SCHOOL OF NURSING EMERGENCY PROCEDURE NEEDLESTICK, SHARPS INJURY & BLOOD AND BODY FLUID EXPOSURE

#### Exposure Response

Eye Splashes	Splashes on Oral or Nasal Mucosa	Skin Exposure, Needlestick or Sharps Injury
<ul style="list-style-type: none"><li>● Remove Contacts</li><li>● Immediately flush with water, saline or sterile irrigant for 15 minutes</li></ul>	<ul style="list-style-type: none"><li>● Flush vigorously with cold water for 15 minutes</li></ul>	<ul style="list-style-type: none"><li>● Immediately flush and wash thoroughly with soap and water</li></ul>

\*And follow any agency policy for injury or exposure

#### Student Responsibilities DO NOT WAIT!

- 1) **NOTIFY** IMMEDIATELY notify your preceptor and King faculty
- 2) **GO** **Non-Hospital:** GO immediately to nearest Hospital Emergency Department (obtain name of follow-up contact at that site)  
**Hospital:** GO to Employee/Occupational Health or the Emergency Department
- 3) **IDENTIFY** IDENTIFY yourself as a King University nursing student who has received a Needlestick/Sharps Injury or BBF Exposure
- 4) **FINANCIAL RESPONSIBILITY**  
All students in the King University School of Nursing program are financially responsible for any necessary emergency treatment provided to them during clinical practice rotations.
- 5) **NOTIFY** NOTIFY Emergency center staff of King University requirements for students
  1. Rapid HIV Test & Labs within 2 hours of exposure
  2. Baseline Labs:
    - HIV Antibody
    - Hepatitis B Surface Antibody
    - Hepatitis C Antibody
    - Pregnancy Test (for Women)

- 6) **STOP** Before you leave the Emergency Department
1. Obtain copy of facility Incident Report from preceptor or Charge Nurse\*
  2. Obtain copy of Lab Results\*
  3. Obtain copy of Emergency Department's Discharge paperwork\*
  4. Call your King Faculty Clinical Instructor and inform them of the incident.

If instructor is not available within one hour of exposure, the undergraduate student should contact King University nursing office and graduate students should contact the appropriate clinical preceptor and instructor as soon as possible after the incident.

- 7) **FOLLOW UP** COMPLETE the SON Exposure Incident Report and submit to your King faculty member along with copies of the documents indicated with the \* above. Follow clinical agency policy for documentation and reporting of incident.

### **Other Important Information**

- The student is responsible for following recommendations for follow-up by the facility, his/her primary care provider and for following up with his/her King faculty member.
- Students whose clinical activities are restricted by their health care provider cannot return to clinical training until documentation of the release to practice is provided to the student's clinical instructor.

### **Faculty Responsibilities**

Faculty is expected to reinforce with BSN, MSN, and DNP students the appropriate education and practice related to the use of standard precautions and are to review this policy with all students.

#### ***When a student reports an exposure:***

1. Refer to the Emergency Response Instructions listed above.
2. Immediately, or as soon as feasible, assist in investigating the source (patient or client) status relating to blood borne pathogens.
  - Determinations regarding source of exposure, including contact with the source, testing of the source, and notifying the source's health care provider shall be made in cooperating with the affiliating facility or agency in which the exposure occurred and in compliance with all applicable laws and regulations.
  - Obtain a detailed description of the incident from the student AND have the student complete the attached Incident Report form. The completed Incident Report form should be reviewed by the faculty member, who may add notes to clarify and provide more

detailed information. The form is signed by the student, the faculty member and submitted by the faculty member to the Dean of Nursing within 24 hours or, if the incident occurs on a weekend or holiday, by 8:00 a.m. the next business day.

- If an incident report is completed by the site, where the exposure occurred or by the emergency room, the clinical instructor should obtain a copy of the facility's report from the student and attach it to the School of Nursing Incident Report.
- The faculty member will review standard precautions with the student and proper procedures for avoiding exposure prior to the student returning to the clinical setting.
- Initial and subsequent care and follow-up activities, including recommendations relating to counseling, prophylactic treatment, and continued or restricted practice activities should be made by the student's health care provider.
- If the student's health care provider restricts the student's practice, the faculty member will follow up regarding the status of the restrictions prior to allowing a return to clinical training.
- Students whose clinical activities are restricted by their health care provider cannot return to clinical training until documentation of the release to return to practice is provided by the student's clinical instructor. Documentation is then placed in the student's file.
- Document and maintain all information relating to the exposure incident in a confidential manner in student's file.

### **Affiliating Agency Responsibilities**

- Affiliating agency representatives are informed of the School of Nursing's policies and procedures related to pathogen exposure through routine correspondence from the School.
- Affiliating agencies are expected to assist students and faculty in obtaining information about the communicable disease status of the source patient.

# Attachment C



## SCHOOL OF NURSING INCIDENT, INJURY & PATHOGEN EXPOSURE REPORT

STUDENTS SHOULD COMPLETE THIS FORM: King Faculty member will add follow up comments.

Student's Full Name \_\_\_\_\_

Address \_\_\_\_\_

Soc Sec # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_ E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Program: BSN MSN DNP Specialty: \_\_\_\_\_

Student's Immunization Status: Tetanus \_\_\_\_\_ Hepatitis B Vaccine \_\_\_\_\_ Titer \_\_\_\_\_

Last PPD \_\_\_\_\_ Other (specify) \_\_\_\_\_

Date of Incident \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_:\_\_\_\_ AM PM

Location/Facility Name \_\_\_\_\_ Dept/Unit \_\_\_\_\_

Type of Facility: Hospital Private Practice Community Agency Other: \_\_\_\_\_

Site Preceptor \_\_\_\_\_ Work Phone & Cell # \_\_\_\_\_

Site Contact for follow up \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_

### TYPE OF INCIDENT

Needlestick Type of Needle \_\_\_\_\_  Other sharp object (explain below) \_\_\_\_\_

Other Injury (explain below)  TB Exposure  Other (explain below) \_\_\_\_\_

### TYPE OF EXPOSURE (*check all that apply*)

Body fluid splash  Blood  Urine  Saliva  Wound drainage  Animal scratch  Animal

bite  Mucous membrane  Eye  Mouth  Nose  Broken skin  Intact skin  Inhalant

Other \_\_\_\_\_

Who witnessed the incident? \_\_\_\_\_

To whom at the facility was it reported? \_\_\_\_\_

Name of King University faculty member notified? \_\_\_\_\_

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

Was an incident report created by the site? Yes No Please attach a copy.

Where were you treated for the needle stick? Facility Name \_\_\_\_\_

Please attach a copy of the Emergency Center Report \_\_\_\_\_

Were baseline labs obtained from the source or source patient? No Why not? Yes Which serology?

Attach copy of results (without patient name) or list:

\_\_\_\_\_

Was acute serology drawn on you (the student)? No Yes By \_\_\_\_\_

Note: what will be tested (rapid HIV, Hep B, etc.) \_\_\_\_\_

FULLY describe the incident/injury/exposure and explain in detail what you were doing when the injury/ exposure/incident occurred, including the use of tools, equipment or materials.

What body part(s) was affected? \_\_\_\_\_ Have you ever required medical treatment for this part of your body or condition before?  yes  no Please use additional sheets if necessary:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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



**To be Completed by KING UNIVERSITY FACULTY, Clinical Instructor's Comments**

In addition, please review and provide additional information/clarification to the student's statement.

King Faculty Clinical Instructor \_\_\_\_\_ Work # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Faculty Notified: Date \_\_\_\_\_ Time \_\_\_\_\_ AM PM

Faculty Report:

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**Follow Up Actions by student already conducted and to be conducted** (please note timeline)

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Are student's clinical activities restricted? No Yes (If Yes, please describe and give begin and end dates or date for review **by student's personal health care provider.**)

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**Signatures SON**

Faculty Member/Specialty Advisor \_\_\_\_\_ Date \_\_\_\_\_

Program Coordinator \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Dean of Nursing \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Date Academic Affairs Notified \_\_\_\_\_ by \_\_\_\_\_

Notes:



School of Nursing  
**Criminal Background Check Policy**  
Last Updated 08/24/2014

**I. Policy Background/Process/Cost**

Clinical agencies utilized by King University require all students meet new standards relating to criminal background. This policy affects all students enrolled in clinical nursing courses at King University. This is to ensure a safe clinical environment for both students and the public and to meet the contractual requirements of area healthcare facilities.

**The criminal background check requirement must be completed at least 30 days prior to the student entering their first semester in the nursing program, and must be completed annually 30 days prior to the student beginning their semester.** All nursing students must clear a criminal background check before admission to the clinical settings utilized by King University. Therefore, **failure to undergo the background check by the deadlines mentioned above will result in dismissal from the nursing program.** No student will be allowed to begin clinicals until the criminal background check has been completed and cleared. Criminal history does not necessarily exclude the nursing student from the nursing program (Refer to Paragraph III below). Students must read, sign and return to the Nursing Office the attached Criminal Background Check Policy Acknowledgment.

Students need to contact the King University Security Department (423-652-4333) to process the criminal background check. Students are responsible for all costs associated with the criminal background check. The cost of the background check is **\$65.00 each**. (Upon processing the background check with security, the student is to sign the background check policy acknowledgement page at the end of this policy and submit to the SON).

Upon completion of the background check with security, if any information is found that would negatively affect your eligibility for the nursing program, student shall complete a Criminal Conviction Participation Waiver through the King University School of Nursing. Students must agree that all results are available to the program and the clinical sites associated with the program. Should a clinical agency refuse to place (accept) a student based on the outcome of the background check, King University School of Nursing has no responsibility for arranging alternate clinical placements.

**II. Criminal Background Check Policy**

1. 30 days prior to the student beginning any classes in the first semester of the nursing program, and annually 30 days prior to the student starting their semester, students must complete a background check in its entirety (this is done by scheduling a time to meet with security to begin the process). Once the student has met with security and begun the background check process, the student is to sign the Background Check Acknowledgement (at the end of this policy) and submit the signed acknowledgement to the SON annually.
2. Sign an authorization and release form authorizing King University and/or a qualified Tennessee licensed private investigation company to complete a criminal history records check.

3. As part of the admission process to the School of Nursing, students must supply a criminal background check to the Tennessee Bureau of Investigation and the Federal Bureau of Investigation and submit to a criminal history records check performed by the Tennessee Bureau of Investigation.
4. Entrance to, or continuance in the School of Nursing shall be denied if the student has a past conviction listed in Section III, bullet number 2 of this policy. Other criminal convictions will be reviewed on a case by case basis.
5. All background checks must be completed through the King University Security Department.

### **III. Finding of Past Criminal Conviction**

Upon notification that a student's background check resulted in a finding of past criminal conviction, representatives of the King University School of Nursing will:

1. Arrange for a meeting with the student in question within an appropriate time period.
2. Students shall be denied admission to, or continuance in School Of Nursing if they have been convicted of any of the following criminal offenses:
  - a. Murder in the first degree
  - b. Murder in the second degree
  - c. Especially aggravated kidnapping
  - d. Aggravated kidnapping
  - e. Especially aggravated robbery
  - f. Aggravated rape
  - g. Rape
  - h. Aggravated sexual battery
  - i. Rape of a child
  - j. Aggravated child abuse
  - k. Aggravated rape of a child
  - l. Sexual exploitation of a minor involving more than one hundred (100) images
  - m. Aggravated sexual exploitation of a minor involving more than twenty-five (25) images
  - n. Especially aggravated sexual exploitation of a minor
  - o. Manufacture of a controlled substance
  - p. Delivery of a controlled substance
  - q. Sale of a controlled substance
  - r. Possession of a controlled substance with intent to manufacture, deliver, or sell the controlled substance
3. If the report includes any offenses other than those enumerated in Paragraph 2 above, the process outlined below shall apply:
  - a. The School of Nursing representatives will secure the student's agreement for the release of all investigative records related to the reported offense.
  - b. In the event that a student refuses to comply with the requirement for the release of all investigative records, the student will immediately be denied further consideration for admission or continuance into the School of Nursing.

- c. Nothing in this procedure will be construed as to compel the disclosure of a parking or moving traffic violation if the maximum sanction provided by law for such violation does not include a period of confinement (T.C.A. 40-5-406(a)(3)).
- d. Representatives of the School of Nursing exercising due diligence will investigate the report of past criminal behavior. Their conclusions and a recommendation as to whether the student in question should be admitted to, or continue in the School of Nursing will be presented to the Dean of the School of Nursing.
- e. The Dean of the School of Nursing will consider the evidence presented and upon proper motion will consider the admission or continuance of the potential candidate into the School of Nursing Program. Nothing in this section or in previous sections shall preclude the Dean of the School of Nursing from requesting the presence of the student in question for the purpose of clarifying matters or for further examination by the Dean. The action of the Dean of the School of Nursing shall be in accordance with current King University Academic Policies.
- f. In the event the Dean of the School of Nursing decides to admit the student in question, or allow continuance into the School of Nursing, it shall be the responsibility of a representative of the School of Nursing to secure a signed waiver from the student. The waiver will stipulate that the student agrees to the disclosure of the criminal history report to any host school and/or any clinical site in which the student is placed for the duration of the student's academic program and to hold harmless King University, including the School of Nursing, and all agents or representatives of King University, in the event the student is unable to secure licensing/certification or in the event the student is unable to complete but not limited to: required observations and or clinical placements in host schools and/or clinical site because of the student's criminal record (See Criminal Conviction Participation Waiver). A copy of the criminal history report received from TBI or the FBI will then be provided to any host school in which the student is placed.

#### **IV. Reporting of Criminal Behavior/Violation of the Law**

Consistent with the King University Student Handbook, a student who violates local, state or federal law on or off campus is expected to report criminal charges and/or being arrested to the King University Director of Security within 72 hours of being arrested and/or criminally charged or convicted.

#### **V. Process for Criminal Background Check Cleared/Not Cleared**

##### **Nursing Student Applicant Criminal Background Check "Cleared"**

1. King University School of Nursing will submit the appropriate forms to the clinical agency.
2. No further action is required by the nursing student.

##### **Nursing Student Applicant Criminal Background Check "Not Cleared"**

1. Nursing Student shall contact King University School of Nursing to attempt to clear the discrepancy. If cleared with notification, no further action is required. If not cleared, continue with actions required below.
2. **Student should contact the Dean, School of Nursing, or Administrative Assistant, to schedule an appointment with the appropriate clinical facility (in which they are**

**scheduled to perform clinicals) and speak with that facility's authorized designee for consideration of clearance to their facility.**

- a. The student shall not begin clinicals, under any circumstances, until the student has received clearance from the clinical facility and the Dean of Nursing.
  - b. Nursing student shall advise their clinical instructor they are working with the clinical facility and the Dean, School of Nursing regarding clearance to attend clinicals.
  - c. During the scheduled appointment, the nursing student applicant will provide the original criminal background check documentation to the individual who is approved by the clinical facility as the designee for verification and review.
  - d. The Clinical Facility Designee will review the criminal conviction record and determine "clearing/not clearing" of the nursing student applicant based on three approved criteria, as follows:
    - i. Tennessee Board of Nursing Rules and Regulations of Registered Nurses and Licensed Practical Nurses.
    - ii. Any felony conviction, as specified in the Tennessee Board of Nursing Rules and Regulations.
    - iii. More than three misdemeanor convictions/one or more misdemeanors which may, but are not limited to, moral turpitude (lying, cheating, or stealing).
  - e. Following review, the Clinical Facility Designee will make a determination, either "cleared/not cleared", of the criminal background check.
  - f. Clinical Facility Designee will inform the nursing student/applicant of the decision and provide a written document of the final decision, **which is to be delivered (in person or fax) by the nursing student applicant to the School of Nursing office (Bristol campus, White Hall Room 116 – for Dean, School of Nursing review)** within 72 hours. Failure to clear the background check with the appropriate agencies by the above deadline may result in dismissal from the nursing program.
  - g. Clinical Facility Designee will also send an e-mail to the Dean, School of Nursing with the final decision of "cleared/not cleared" of the criminal background check.
  - h. The Dean, School of Nursing will review the decision from the clinical facility and notify both the student and the clinical instructor of the student's status of clearance and/or ability to attend the designated clinical facility.
3. King University School of Nursing has no responsibility for arranging alternate clinical placements should an agency refuse to place a student based on the outcome of the background check. The student will be dismissed from the nursing program if he or she is unable to participate in required clinical placements due to a criminal background check that is not cleared.

# CRIMINAL BACKGROUND CHECK POLICY ACKNOWLEDGMENT

*The Criminal Background Check Policy is a requirement of King University School of Nursing.*

*The Criminal Background Check Policy is NOT debatable.*

***Failure to complete a background check (within 30 days prior to the start of the first semester in the nursing program AND annually 30 days prior to the beginning of the semester) will result in dismissal from the nursing program.***

I have read and understand the Criminal Background Check Policy for the King University School of Nursing.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Program (Traditional, Master's or DNP)

**RETURN THIS FORM TO THE NURSING OFFICE**

**Attachment E**  
**KING UNIVERSITY SCHOOL OF NURSING**  
**Family Nurse Practitioner (FNP) Plan of Study**

<b>SEMESTER</b>	<b>COURSE #</b>	<b>HOURS</b>	<b>COURSE TITLE</b>
<b>FALL #1</b>	NURS 5002	3	Advanced Pathophysiology
	NURS 5004	3	Advanced Physical Assessment & Health Promotion
	NURS 5014	3	Healthcare Informatics
		9	
<b>SPRING # 1</b>	<b>NURS 5001 –CORE</b>	3	Research Designs in Nursing
	NURS 5006	3	Advanced Pharmacology
	NURS 5018	3	FNP I Care of Women & Families* (60 hours of clinical)
		9	
<b>SUMMER #1</b>	<b>NURS 5000 – CORE</b>	3	Theoretical Basis of Nursing Practice
	NURS 5019	6	FNP II Care of Adults and Geriatric Populations* (180 hours of clinical)
		9	
<b>FALL #2</b>	<b>NURS 5022 -CORE</b>	3	Research Seminar
	<b>NURS 5010 - CORE</b>	3	Social, Cultural & Political Perspectives on Healthcare & Delivery Systems
	NURS 5023	3	FNP III Care of Pediatric Populations* (120 hours of clinical)
		9	
<b>SPRING #2</b>	NURS 5024	6	FNP IV Seminar and Intensive Practicum (240 hours of clinical)
	NURS 5026	3	Practice Management and Advanced Role Development
	KING 5990	0	Final Comprehensive Competency Demonstration
		9	
<b>Total Credits</b>		45	

\* Clinical hours: 60 contact hours per clinical hour per semester. Total 600 clinical hours

**Attachment F**  
**KING UNIVERSITY SCHOOL OF NURSING**  
**MSN Administration - Part Time Plan of Study**

<b>SEMESTER</b>	<b>COURSE #</b>	<b>HOURS</b>	<b>COURSE TITLE</b>
<b>SEMESTER 1</b>	<b>NURS 5014 - CORE</b>	3	Healthcare Informatics
	NURS 5050	3	Visionary Leadership in Nursing 1.75 didactic/ 1.25 clinical(75 hrs)
		6	
<b>SEMESTER 2</b>	<b>NURS 5000 - CORE</b>	3	Theoretical Basis of Nursing Practice
	<b>NURS 5001 - CORE</b>	3	Research Designs in Nursing
		6	
<b>SEMESTER3</b>	NURS 5056	3	Continuous Quality Improvement and Outcomes Management 2 didactic/1 clinical (60 hrs)
	NURS 5058	3	Transformational Strategies - Practicum I 2 didactic/1clinical* (60 hrs)
		6	
<b>SEMESTER 4</b>	<b>NURS 5010 - CORE</b>	3	Social, Cultural & Political Perspectives on Healthcare and Delivery Systems
	NURS 5054	3	Financial/Accounting Issues for Nurse Managers 2.7 didactic/0.3 clinical *(20 clinical hrs)
	NURS 5059	5	Transformational Strategies – Practicum II 3 didactic/2 clinical* (120 hrs)
		11	
<b>SEMESTER 5</b>	<b>NURS 5022 - CORE</b>	3	Research Seminar
	NURS 5060	3	Transformational Strategies – Practicum III 2 didactic/1 clinical* (60 hrs)
	NURS 5990	0	Final Comprehensive Competency Demonstration
		6	
<b>Total Semester Hours</b>		35	

\* Clinical hours: 60 contact hours per clinical hour per semester. Total 395 clinical hours

**Attachment G**  
**KING UNIVERSITY SCHOOL OF NURSING**  
**MSN/MBA - Part Time Plan of Study**

<b>SEMESTER</b>	<b>COURSE #</b>	<b>HOURS</b>	<b>COURSE TITLE</b>
<b>SEMESTER 1</b>	<b>NURS 5014 - CORE</b>	3	Healthcare Informatics
	NURS 5050	3	Visionary Leadership in Nursing 1.75 didactic/ 1.25 clinical(75 hrs)
		6	
<b>SEMESTER 2</b>	<b>NURS 5000 - CORE</b>	3	Theoretical Basis of Nursing Practice
	<b>NURS 5001 - CORE</b>	3	Research Designs in Nursing
		6	
<b>SEMESTER3</b>	NURS 5056	3	Continuous Quality Improvement and Outcomes Management 2 didactic/1 clinical (60 hrs)
	NURS 5058	3	Transformational Strategies - Practicum I 2 didactic/1clinical* (60 hrs)
		6	
<b>SEMESTER 4</b>	<b>NURS 5010 - CORE</b>	3	Social, Cultural & Political Perspectives on Healthcare and Delivery Systems
	NURS 5054	3	Financial/Accounting Issues for Nurse Managers 2.7 didactic/0.3 clinical *(20 clinical hrs)
	NURS 5059	5	Transformational Strategies – Practicum II 3 didactic/2 clinical* (120 hrs)
		11	
<b>SEMESTER 5</b>	<b>NURS 5022 - CORE</b>	3	Research Seminar
	NURS 5060	3	Transformational Strategies – Practicum III 2 didactic/1 clinical* (60 hrs)
	NURS 5990	0	Final Comprehensive Competency Demonstration
		6	
<b>Total Semester Hours</b>		35	

\* Clinical hours: 60 contact hours per clinical hour per semester. Total 395 clinical hours

## REQUIRED BUSINESS COURSES

<b>BUSINESS COURSES**</b>	BUSA 4891	0	Business Principles: Economics
	BUSA 4892	0	Business Principles Accounting
	BUSA 4893	0	Business Principles: Marketing
	BUSA 4894	0	Business Principles: Finance
	BUSA 5010	3	Leadership
	BUSA 5040	3	Economics of Organizational Architecture and Strategy
	BUSA 5050	3	Strategic Marketing Management
	BUSA 5062	3	Strategic Financial Management
	BUSA 5069	3	Business and Organizational Ethics
	BUSA 5090	3	Strategic Management
	BUSA 5410	3	Healthcare Systems
	BUSA 5420	3	Legal and Ethical Issues in Healthcare
	BUSA 5430	3	Managed Healthcare
		27	
<b>Total Credits</b>		62	

\*\* BUSA class schedule to be verified when offered through the School of Business

\*\*\* Specialization options are available; contact the MBA Program Director for details

**Attachment H**  
**KING UNIVERSITY SCHOOL OF NURSING**  
**MSN Nurse Educator- Part Time Plan of Study**

<b>SEMESTER</b>	<b>COURSE #</b>	<b>HOURS</b>	<b>COURSE TITLE</b>
<b>SEMESTER 1</b>	NURS 5002	3	Advanced Pathophysiology
	<b>NURS 5014 - CORE</b>	3	Healthcare Informatics
		6	
<b>SEMESTER 2</b>	<b>NURS 5000 - CORE</b>	3	Theoretical Basis of Nursing Practice
	<b>NURS 5001 - CORE</b>	3	Research Designs in Nursing
		6	
<b>SEMESTER 3</b>	NURS 5006	3	Advanced Pharmacology
	NURS 5030	3	Principles of Teaching and Learning
		6	
<b>SEMESTER 4</b>	NURS 5004	3	Advanced Physical Assessment & Health Promotion
	NURS 5032	3	Curriculum Development & Implementation in Nursing Education
		6	
<b>SEMESTER 5</b>	<b>NURS 5022 - CORE</b>	3	Research Seminar
	NURS 5036	4	Nursing Education Practicum 4 didactic/clinical (180 hrs)
		7	
<b>SEMESTER 6</b>	<b>NURS 5010 - CORE</b>	3	Social, Cultural & Political Perspectives on Healthcare & Delivery Systems
	NURS 5035	5	Focused Clinical Seminar and Practicum 1 didactic/2 clinical (240 hrs)
	NURS 5990	0	Final Comprehensive Competency Demonstration
		8	
<b>Total Semester Hours</b>		39	

\* Clinical hours: 60 contact hours per clinical hour per semester. Total 420 clinical hours.  
240 hours in clinical focus area practicum = Two 8-hour day/week x 15 weeks.  
180 hours in educational practicum = Two 6-hour days/week x 15 weeks.

## Appendix G



### King University School of Nursing HIPAA Acknowledgement

**As a King University nursing student, you may have access to confidential patient information, both written and oral, in the course of your assignments. It is imperative that this information is not misused or disclosed to any unauthorized individuals to maintain the integrity of the patient information. By signing below, you agree to abide by the rules outlined.**

**Student Name:** \_\_\_\_\_

I understand that I am responsible for keeping protected health information from unauthorized disclosure, and that I will not share any patient's or client's protected health information with anyone who is not engaged in treatment, payment, or healthcare operations. I understand that I will not in any way copy, release, alter, revise or destroy any confidential information. I also agree that I will not access any patient's protected health information unless I have a legitimate need to know that it is related to my assignment. I understand that it is my responsibility to assure that confidential information in my possession is maintained in a physically secure environment.

If a computer password or access code is given to me by a clinical agency, I understand that I will safeguard this password or access code. I also understand that I will not share this password or access code with another person.

If I am involved in research, any research utilizing identifiable protected health information will be performed in accordance with federal, state and local Institutional Review Board Policies.

I understand that I am responsible for learning the particular policies and procedures of the clinical agency where I may be placed. I also understand that I am subject to the sanctions those clinical agencies may impose for a breach of confidentiality. I also understand that my failure to abide by the agency's policies and procedures related to confidentiality of protected health information could result in a variety of academic, legal, and/or disciplinary sanctions, up to and including dismissal from my academic program.

I understand that any misuse or sharing of protected health information, except in the direct performance of my assignments, is a violation of federal law and of the trust placed in me as a healthcare professional.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ACKNOWLEDGEMENT PAGE**

**REVIEW OF**

**NURSING STUDENT HANDBOOK**

**Print this page, list which program you are in, sign and date, and turn in to the Bristol Campus Nursing Office (Administrative Assistant). This is a required reading and ensures to the School of Nursing that you have reviewed the current handbook for that semester/academic year.**

**Please Mark “ X” beside the program you are in:**

**\_\_\_\_ Undergraduate - Traditional BSN Program**

**\_\_\_\_ GPS – RN to BSN Program**

**\_\_\_\_ Master’ s Program**

**\_\_\_\_ DNP Program**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Print Name:** \_\_\_\_\_