

TABLE OF CONTENTS

MASTER OF SCIENCE IN NURSING PROGRAM

School of Nursing Professional Pillars	
GENERAL INFORMATION	
Philosophy	4
Mission and Vision Statements	
Honor Code	5
PROGRAMS OF STUDY	
Program Curriculum	
MSN Program Goals	7
Expected Student Outcomes	
Overview of Individual Concentrations	7

Overview of Individual Concentrations	7
Preceptor Model	9
Statement on Accreditation	
Financial Aid	10

PROGRAM POLICIES & PROCEDURES

Transfer of Credits10Health Records and Certifications10Liability Insurance11SON Required Student Forms11Licensure Requirements11Program Admission/Criteria13Technology Requirements14Accommodations for Students with Disabilities14Matriculation and Leaves of Absence15Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17Inclement Weather Policy17	Student Representation	10	J
Liability Insurance11SON Required Student Forms11Licensure Requirements11Program Admission/Criteria13Technology Requirements14Accommodations for Students with Disabilities14Matriculation and Leaves of Absence15Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17	Transfer of Credits	10)
SON Required Student Forms11Licensure Requirements11Program Admission/Criteria13Technology Requirements14Accommodations for Students with Disabilities14Matriculation and Leaves of Absence15Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17	Health Records and Certifications	10)
Licensure Requirements11Program Admission/Criteria13Technology Requirements14Accommodations for Students with Disabilities14Matriculation and Leaves of Absence15Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17	Liability Insurance	11	
Licensure Requirements11Program Admission/Criteria13Technology Requirements14Accommodations for Students with Disabilities14Matriculation and Leaves of Absence15Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17	SON Required Student Forms	11	
Technology Requirements14Accommodations for Students with Disabilities14Matriculation and Leaves of Absence15Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17	Licensure Requirements	11	
Technology Requirements14Accommodations for Students with Disabilities14Matriculation and Leaves of Absence15Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17	Program Admission/Criteria	13	;
Matriculation and Leaves of Absence15Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17	Technology Requirements	14	ŀ
Time Limits15Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17	Accommodations for Students with Disabilities	14	ļ
Progression and Dismissal in Program15Withdrawal from Program16Readmission to Program17Dismissal from University17			
Withdrawal from Program 16 Readmission to Program 17 Dismissal from University 17	Time Limits	15	j
Withdrawal from Program 16 Readmission to Program 17 Dismissal from University 17	Progression and Dismissal in Program	15	í
Readmission to Program	Withdrawal from Program	16)
Dismissal from University	Readmission to Program	17	7
Inclement Weather Policy17	Dismissal from University	17	7
	Inclement Weather Policy	17	1

COURSE GRADES & GRADING POLICIES

Grading Scale	
Incomplete Grades	
Exams and Quizzes	
Lost or Late Assignments	
Grading Disputes	
Grievance	
0110	

PROFESSIONALISM

Graduate Student Rights and Responsibilities	20
Academic Integrity	
Standards of Practice and Nursing Code of Ethics	
Attendance and Punctuality	
Guidelines for Cell Phone Use	
Information Technology	
Academic Advising	
Change in Concentration	
change in concentration	

Sigma Theta Tau International	20
CLINICAL/PRACTICUM REQUIREMENTS	• •
Clinical Course Faculty Responsibility	
Clinical Faculty Responsibility	
Student Responsibility	21
Preceptor Responsibilities	
Clinical Site Attendance	
Dress Code	22
Injuries and Blood and Body Fluid Exposure	
Evaluations	
Evaluation Forms	
GRADUATION REQUIREMENTS	
Comprehensive Assessment	23
Application for Degree and Graduation Fee	
PORTFOLIO GUIDELINES	24
ATTACHMENTS	
A1 MSN Portfolio Guidelines and Grading Rubric	
A2 Post-MSN FNP Certificate Portfolio Guidelines and Grading Rubric	
B Emergency Procedure Needlestick, Sharps Injury & Blood and Body Fluid Exposure	
C Incident, Injury & Pathogen Exposure Report	
D Family Nurse Practitioner Plan of Study	
E MSN Administration Plan of Study	
F MSN Nurse Educator Plan of Study	
G Pediatric Nurse Practitioner Plan of Study	
H Graduate Student Requirements & Checklist	
I Background Check Policy	

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.

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.

Psalm 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

GENERAL INFORMATION

DISCLOSURE STATEMENT

This handbook provides expectations, policies and procedures, information, and guidance to the student and the faculty related to the MSN Program. MSN students must abide by student policies as listed in the King University Academic Catalogue, this MSN Student Handbook, the King University Student Handbook 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 School of Nursing MSN Student Handbook will be distributed via email to the **student's King University email address**.

Additional sources of information related to student policies are the King University Catalogue which can be accessed at <u>http://king.edu/registrar/catalog_18-19.aspx</u> and the King University Student Handbook which can be accessed at <u>http://www.king.edu/students/student-handbook.aspx</u>

Course-specific policies may also be found in individual course syllabi. In circumstances where there is conflicting information, the student should seek clarification from the faculty. The MSN Student Handbook is applicable to all students in the MSN Program.

PHILOSOPHY

The philosophy of the School of Nursing reflects our beliefs about the role and the education of the professional nurse at all levels, whether it is a generalist preparation at the baccalaureate level, the specialist focus at the master's level, or the nurse who translates research into practice at the doctorate level. Our philosophy of nursing culminates from a comprehensive blend of nursing theories. Nursing serves society through the competent and compassionate delivery of direct and indirect healthcare services to individuals, families and communities, guided by Christian values.

Nursing is both an art and a science. The art of nursing includes the theories related to caring that promotes respectful relationships and individual worth. The science of nursing is based upon evidence obtained through research as well as effective interventions gained through experience, and with consideration of each individual or population.

In an uncertain and rapidly changing world, the professional nurse is a partner, provider, leader, and an advocate for consumers of health care in an increasingly diverse and aging population. As a professional discipline, nursing is based on a strong foundation of knowledge from the humanities, arts and sciences, and inter-disciplinary edification which together integrate academic and practice components. The professional nurse functions in a variety of roles addressing the incorporation of cultural, physical, spiritual, and intellectual dimensions of personhood and their influence on health, wellness, and illness prevention. The nurse contributes a unique blend of knowledge, skills, and holistic care tailored to individual or population need. The professional nurse adheres to the code of ethics and laws that direct professional standards of nursing practice. Through planed learning experiences at all levels, students are set on a path for professional nursing practice.

MISSION STATEMENT

We prepare students for professional nursing practice from the generalist level to advanced nursing practice in a Christian environment with academic rigor, while preparing professionals who are resourceful, accountable, and with a passion for serving God, community and society.

VISION STATEMENT

The vision of the school of nursing is to be recognized as a regionally respected, student-centric nursing program, steadfast in Christian commitment focused on academic excellence and graduating successful nursing professionals who will serve their communities.

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), Family Nurse Practitioner (FNP), Pediatric Nurse Practitioner (PNP), 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 concentration. 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. Graduates of the PNP program will meet eligibility requirements to take either the ANCC or the Pediatric Nurse Credentialing Board (PNCB) certification exams. For FNP and PNP 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.

PROGRAM CURRICULUM

The length of the MSN program depends upon the concentration. Nurse education is 39 credits (Attachment G), nursing administration is 35 credits (Attachment F), FNP is 45 credits (Attachment E) and PNP is 45 credits (Attachment H). The NA and NE plans of study are part-time, delivered in a completely online format, and can be completed in 5 semesters. The programs include a variety of online assignments and activities, as well as focused clinical learning experiences with qualified preceptors. 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 FNP and PNP concentration plans of study are full-time and can be completed in 5 consecutive fifteen-week semesters. The FNP plan of study is offered in a blended format, with all advanced core sciences, clinical and practice-focused courses in a face-to-face classroom setting and the supporting core courses in an online format. The FNP program is offered in Knoxville and Kingsport TN and in Abingdon, VA. The PNP plan of study is offered as an online format with mandatory, face-to-face intensives the first two days of each semester.

For the FNP and PNP students, the MSN faculty uses a variety of instructional modalities to meet specific learning needs. For the face-to-face programs, courses are held on a one-day-per-week schedule of classes (typically from 8:00 a.m. to 12:30 p.m. however, students should plan on a full day due to work on projects, or varying class schedules). 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) in addition to diagnosis, treatment and disease management. 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 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. Additional information regarding concentration-specific clinical/practicum requirements can be found in the *Information and Guidelines for Practicum Courses for Students and Preceptors* for each concentration.

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.

In addition, concentration-specific expected student outcomes that are continually monitored are: Nurse Administrator: the graduate will demonstrate competency in performing an organizational assessment for outcomes improvement

Nurse Educator: the graduate will demonstrate competency in the process of curriculum assessment for program outcomes improvement

Advanced Practice Nurse and Post-Masters Certificate APN: program completers will pass the national certification exam for licensing as an advanced practice nurse in the relevant population focus.

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 Global Health Awareness. 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. In alignment with the mission of King University and the School of Nursing, all MSN students will participate in a major service learning project during their program of study within their specialty concentration. Service learning projects will occur during the following concentration-specific courses: Nurse Administrator- NURS 5050, Family Nurse Practitioner- NURS 5019, Pediatric Nurse Practitioner- NURS 5023, 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 as thoughtful, resourceful, and responsible professionals.

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 Criteria for Evaluation of Nurse Practitioner Programs National Task Force on Quality Nurse Practitioner Education and the National Organization of Nurse Practitioner Faculties (NONPF) guidelines to prepare students to meet entry-level competencies for Nurse Practitioner practice, and to 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.

Pediatric Nurse Practitioner (PNP) concentration prepares students to assume the role of advanced nurse leader in pediatric primary care from birth through adolescence. The course of study builds on medicalsurgical knowledge with preparation for advanced practice roles specializing in pediatric primary care. The focus is on advanced theoretical knowledge and practice skills needed to function in increasingly complex care settings. The PNP plan of study is consistent with the Criteria for Evaluation of Nurse Practitioner Programs National Task Force on Quality Nurse Practitioner Education and the National Organization of Nurse Practitioner Faculties (NONPF) guidelines to prepare students to meet entry-level competencies for Nurse Practitioner practice, and to write for national Primary Care Pediatric Nurse Practitioner certification. Coursework requires evaluation and application of evidence-based practice strategies, outcomes management, clinical research, advanced clinical decision making, examination of critical content including clinical guidelines, cultural competence, patient safety, pharmacotherapeutics and documentation. In clinical practicum, students apply this knowledge in a variety of practice settings where pediatric care is delivered. The student acquires skills that allow for diagnosis and management of a variety of actual and potential health problems commonly encountered while serving as a patient advocate in accordance with the Christian belief in the dignity and worth of the individual and family.

Nursing Administration provides advanced health care and business study in economics, quality, 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, performance improvement, and quality outcomes. Graduates are prepared to function as members of interdisciplinary executive teams. Graduates are prepared to function as 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.

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, curricular design, 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.

COURSE DESCRIPTIONS: See the University Catalogue

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. Selected MSN courses will be awarded precepted clinical hours, wherein the course faculty serves as the preceptor.

STATEMENT ON ACCREDITATION

The Commission on Collegiate Nursing Education (CCNE) is an autonomous, national accrediting agency officially recognized by the U. S. Secretary of Education. CCNE contributes to the improvement of the public's health by ensuring the quality and integrity of baccalaureate and graduate education programs by assessing and identifying programs that engage in effective educational practices. As a voluntary, self-regulatory process, CCNE accreditation supports and encourages continuing self-assessment by nursing education programs and the continuing growth and improvement of collegiate professional education.

The baccalaureate degree in nursing, master's degree in nursing and Doctor of Nursing Practice program at King University is accredited by the Commission on Collegiate Nursing Education, (<u>http://www.ccneaccreditation.org</u>). The School of Nursing's baccalaureate, master's and doctoral programs are fully approved by the Tennessee Board of Nursing.

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 http://king.edu/financial-aid-home.aspx.

Some websites are:

- https://www.discovernursing.com
- http://www.aacn.nche.edu/students/scholarships
- http://www.n-e-f.org/apply.html
- https://www.lrp.nih.gov/eligibility-programs
- http://bhpr.hrsa.gov/scholarshipsloans/
- http://www.nsf.gov/dir/index.jsp?org=EHR
- http://www.collegescholarships.org/graduate-nursing.htm
- http://www.nursingsociety.org/advance-elevate/careers/nursing-scholarship-opportunities

PROGRAM POLICIES & PROCEDURES

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 <u>not</u> permitted. Students should check their King University email daily for updates and/or announcements and respond to all emails within 48 hours.

STUDENT REPRESENTATION

Each graduate cohort will select at least one class representative to act as a liaison between the students of the cohort and the School of Nursing.

The responsibilities of student representatives are to:

- attend monthly graduate faculty meetings via phone, Zoom or in person (optional)
- provide feedback and/or suggestions from students to graduate faculty
- disclose information gathered at faculty meetings to the representative's cohort

When a representative presents a problem to the faculty, the representative must also suggest a potential solution to the problem. The purpose of the representative is NOT for verbalizing discontent with individual instructors but to enhance the student educational experience through collaboration with faculty.

Graduate Transfer Credit

MSN students may transfer up to **6 credits** of graduate study from another accredited institution and program to be credited toward core or elective program requirements at King.

Courses being transferred must have been assigned a grade of B or higher and must have covered content which is required for a particular core course or specialty program concentration. To request transfer credit, the student must obtain the Authorization for Acceptance of Prior Graduate/Doctoral Work for from the Office Registration and Records. This completed form, along with an official transcript verification of the course and course description must be submitted to the Office of Registration and Records, which will be reviewed by School of Nursing faculty. When authorization of acceptance is given, the Office of Registration and Records will be notified.

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 and a urine drug screen is also required for clinical placement. MSN students must maintain current BCLS (CPR) certification and submit proof to the SON office. CPR certification course must include certification for infant, child and adult. AHA BCLS for Healthcare Providers is preferred. All nursing students must clear a criminal background check before admission to the clinical sites utilized by King University. The Criminal Background Check policy is located in Attachment D. Students may contact the King University Security Department (423-652-4333) with questions regarding background checks. All students must hold and maintain a current and unencumbered RN license in TN or an enhanced compact state for registered nurse license. Students are required to report any action/disciplinary measure levied against nursing license to the School of Nursing within one month of action taken. Any student who cannot practice as a licensed Registered Nurse will not be allowed to continue in the program of study. Students may apply for readmission upon reinstatement of Registered Nurse license

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, and associated costs, are the responsibility of the individual student.

LIABILITY INSURANCE

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. The insurance covers the student only for activities directly related to King University. It does not cover an accidental injury to the student that may occur before, during or after classroom activities. The policy also does not cover the registered nurse while working at their employment setting. Insurance independently maintained by the MSN student is optional but will not replace the insurance purchased through the University.

SON REQUIRED STUDENT FORMS

The SON forms must be received in **the CastleBranch clinical document system by** the deadlines listed based on semester of admission. The deadlines are <u>prior</u> to the start of the first semester of classes. See Attachment I for additional information regarding creating an account within the CastleBranch document system and a checklist of clinical requirements upon entering the program and for each subsequent year.

Deadline for student forms:

Fall Admission - July 1st Spring Admission - November 1st

The following forms must be submitted via CastleBranch:

- KU SON Student Health History Form
- KU SON Healthcare Provider Health and Physical Assessment Form
- Record of Immunizations
- Hepatitis B Vaccine record or declination
- Documentation of TB skin test, CXR or completion of High-risk Exposure Screening Tool
- Influenza vaccine (yearly)
- Current, unencumbered Tennessee RN license or enhanced compact state license with ability to practice in Tennessee
- BCLS (CPR) certification (adult, child and infant)
- Review of KU MSN Student Handbook Acknowledgement

- Criminal Background Policy Acknowledgement
- KU SON HIPAA Acknowledgement
- Urine Drug Screen: completed via Castlebranch by selecting new program code and "I need to order my drug test"

RELIGIOUS OBJECTIONS

A student has the right to refuse immunizations due to religious objections. If you select this option, we ask that you provide an official clergy statement and affirm your reason under the penalties of perjury.

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 Enhanced Nurse Licensure Compact agreement with the ability to practice in the state of Tennessee, and any non-compact state in which the student is performing clinical requirements. Proof of current licensure must be submitted to the SON via the CastleBranch clinical document system. Any clinical hours planned to be completed outside of Tennessee or Virginia should be discussed with the course faculty, clinical faculty or faculty advisor.

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 Enhanced Compact as "the state of a person's declared fixed permanent and principal home or domicile for legal purposes." The Nurse Licensure Enhanced Compact authorizes Registered Nurses licensed and residing in an enhanced compact state to practice in other enhanced compact states without the necessity of obtaining an additional license. The Enhanced 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. Health. Health Related Boards JH/G5086005/BN) (State TN. Dept. https://www.tn.gov/content/dam/tn/health/healthprofboards/medicalexaminers/Nursing%2 0eNLC%20Final%20Rules%20adopted%20121217 2%20.pdf

PROGRAM ADMISSION/CRITERIA

The MSN program is open to qualified applicants who hold a bachelor's degree in nursing from an accredited school and a current unencumbered license as a registered nurse. All applicants must complete an online application. Each candidate must complete all required sections of the application, including all disciplinary actions at previous schools, and upload all required documents before the application can be processed and sent to the appropriate MSN Admissions Committee for consideration. The application can be accessed at http://apply.king.edu Application deadlines for Fall admission is March 1 and for Spring admission is November 1.

The MSN Admissions Committee will review all complete applications, select the candidates that meet the set criteria and rank them based on their ability to successfully complete the program. For admission to the NE, FNP and PNP programs, the MSN Admissions Committees will schedule interviews and administer a timed writing sample with top candidates. Once interviews and writing samples are complete the MSN admissions committees will assign one of the following four admission statuses:

• Admitted—The student meets or exceeds all required admissions criteria therefore is fully admitted to the MSN program without any conditions.

- **Conditionally Admitted**: The student does not meet the minimum grade point average admission requirement however the MSN Admissions Committee will permit the candidate to enter the program as long as the agreed upon conditions are satisfactory met by the student.
- **Provisionally Admitted**—The MSN Admission Committee may grant provisional admittance to applicants who do not yet meet all the admission requirements (anticipated completion of a final semester of a degree program or a single course prior to the start of the MSN program) but have been able to demonstrate they have been academically successful in the past. The MSN Admissions Committee will permit the candidate to enter the program as long as the agreed upon conditions are satisfactory met by the student.
- **Provisionally/Conditionally Admitted**: The MSN Admission Committees may grant provisional/conditional admittance to applicants who do not meet the minimum grade point average admission requirement and do not yet meet all of the admission requirements but anticipated completion of a final semester of a degree program or a single course will occur prior to the start of the MSN program which could affect the grade point average of the student.
- Admission Denied— The MSN Admissions Committee have found the applicant does not meet the minimum criteria for admission to the MSN program or believes the applicant is not likely to succeed in the MSN program therefore, the committee will deny acceptance.

The MSN Admissions Committee typically makes its decision within two weeks after interviews. The Admissions Office will notify applicants of the status of the MSN Admissions Committee review in writing or by e-mail.

The MSN program is an academically rigorous program developed to prepare nursing educators, nursing administrators, and nurse practitioners who integrate Christian faith, scholarship and service into their daily lives and careers. Admission to the MSN program is competitive and focuses on multiple factors to determine the best candidates. Decisions for admission are based on demonstrated academic performance, work history, professional accomplishments, community service, writing ability and interview. Applicants must submit the following documents to be considered for admission:

- King University application.
- A \$25.00 non-refundable application fee.
- Official transcripts of all academic work demonstrating that the applicant holds a Baccalaureate degree in nursing with a GPA of 3.0 or higher from a baccalaureate degree program accredited by the Accreditation Commission for Education in Nursing (ACEN) or the Commission on Collegiate Nursing Education (CCNE).
- A Bachelor of Science in Nursing degree with transferrable course work in Health Assessment, Nursing Research/Evidence-based Practice, and Statistics. (Pathophysiology is recommended for FNP, PNP and Nurse Educator programs).
- A 2-3-page research-based writing sample describing "What is the role of graduate education in preparing nurses to meet the health needs of our society?"
- Two letters of recommendation. One academic (former nursing instructor) and one from a professional source.
- Copy of current curriculum vitae including professional organization memberships and activities and community service.
- Copy of current unencumbered RN license in TN or an enhanced compact state with the ability to practice in Tennessee.
- Copy of certificates in area of clinical specialization (if applicable)
- One year as a practicing RN is required for the FNP and PNP programs.
- FNP, PNP and NE applicants will be required to complete an interview and impromptu writing sample at the time of interview
- Admission exam is not required but GRE scores may be submitted.

Only completed applications are reviewed

TECHNOLOGY REQUIREMENTS

All students should be computer literate. A high-speed internet connection is essential. Students will need to have a laptop computer and minimum computer competencies. The following are recommended:

- * Computer with audio/video output equipment
- * Internet Access (broadband recommended)

Recommended Minimum Hardware Specifications

- * Intel i5 Processor
- * 4GB RAM
- * DVD-ROM, either embedded or detached
- * 128 GB hard drive storage minimum; 256 GB or greater hard drive storage is preferred
- * Screen Size: 13" or bigger with resolution of at least 1024 x 768
- * Graphics Card: 512 MB minimum
- * 100 MB/1 GB NIC and/or 802.11 b/g/n Wireless Network Card
- * Laptop Operating System: Windows 7 Home Premium or better (32 or 64 Bit) or Mac OSX
- * NOTE: Chromebooks and many tablets will NOT meet the minimum requirements for the SON

programs. These include iPads, Android tablets, Windows RT tablets (Surface, although Surface Pro is fine), and all Chromebooks. Students should choose a laptop that runs either the full version of Windows 7 or later (excluding Windows RT), or Mac OSX (Yosemite recommended).

Recommended Minimum Software

- * Microsoft Office latest version
- * Internet Web Browser: Various browsers may be required for different software packages used at the SON.

We recommend installing the latest versions of Internet Explorer, Google Chrome, and Mozilla Firefox.

* Anti-Virus Software

* A Personal Firewall Software/Internet Security package to protect the computer from unauthorized access via the Internet is suggested.

Students also need access to a scanner and the ability to scan and upload documents. Minimum competencies include: basic familiarity with computers, use of the internet, e-mail, word-processing, Excel, media players, screencasting and presentation software.

Blackboard is the online platform utilized by King University. King email is the required email account for communication. Additional information on minimum computer specifications can be located in the KU Student Handbook at http://www.king.edu/students/student-handbook.aspx

ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES

King University is committed to enable students with documented disabilities to participate in university programs by providing reasonable and appropriate accommodations. In general, university policy calls for accommodations to be made on an individualized and flexible basis. Students who are participating in King University's educational programs online or at off-site instructional locations follow the same process for requesting accommodations or other disability-related support services must file timely requests <u>each</u> <u>semester</u> with the Office of Learning and Disability Services for accommodation letters can be provided via FAX and/or email, and the Director of Learning Services is available to consult with any student or faculty member regarding the implementation of approved accommodations in a way that is appropriate to the context and delivery-method of the course. Students are responsible for seeking assistance at the university and making their needs known. All services are confidential and free. For accommodations with course work, contact the Office of

Learning Services at 423-652-4740 or <u>disability@king.edu</u> The Office of Learning and Disability Services will issue accommodation letters that student must provide to his or her instructor(s) when seeking accommodations. These letters should be provided as much in advance of the needed accommodation as possible.

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.

Leave of Absence- Refer to the University Catalog for policy. Readmission to nursing programs will be granted on a space-available basis only. Communication with the Student Success Specialist, Program Coordinator can assist with readmission questions.

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 a student's cumulative GPA falls below a 3.0, the student may be placed on Academic Probation for one semester to improve the cumulative GPA to at least 3.0. If, after the semester of Academic Probation, the cumulative GPA is not at least 3.0 the student will be dismissed from the MSN program. 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.

Students are required to report any action/disciplinary measure levied against nursing license to the School of Nursing within one month of action taken. Any student who cannot practice as a licensed Registered Nurse will not be allowed to continue in the program of study. Student may apply for readmission upon reinstatement of Registered Nurse license.

WITHDRAWAL

A student who wishes to officially withdraw from an individual course must notify his/her instructor and advisor as soon as the decision to withdraw is determined. The student will need to complete a course withdrawal form which can be obtained from the Office of Registration and Records or from their Student Success Specialist. A student who fails to attend the first two weeks of class will automatically be withdrawn from a course.

A student who wishes to officially withdraw from King University and the MSN program must contact his/her advisor and Student Success Specialist. The student will then submit the withdrawal form to the Office of Registration and Records.

A student withdrawing from King will receive a grade of 'W' in all courses for the term unless there is a course that has not begun in which case the course would be dropped from the student's record. No student will be allowed to withdraw from King later than the last day to withdraw from a course as published in the academic calendar.

For additional information regarding the withdrawal process refer to the King Student Handbook and to the policy for Withdrawal from the Institution in the University Catalog.

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 and meet all current admission requirements. There must be space available in the courses and/or clinical placements needed by the applicant. The student must have met all financial obligations to the University. The MSN Nursing Admissions Committee will evaluate both the application and the school's ability to accommodate the readmission of the applicant. Once a decision is made, the student will be notified of readmission status by the Admissions Office.

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. For complete information, refer to the Academic Appeals policy in the University Catalog. Students are obligated to follow the policy for appeals.

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. In the event that any King University campus is closed or classes are cancelled due to weather, all online classes will continue as scheduled. All classes that normally meet in person are expected to continue via online assignments, web video conferencing, extra assignments, and/or individual conferences. These determinations are made at the discretion of individual faculty members. Students are responsible for checking their King email and/or Blackboard announcements to receive direction from the instructor on how the disruption of instructional time will be addressed. All students are expected to remain apprised of class status in case of inclement weather by checking their King University email. Students may also sign up for Emergency Notifications via text message by going to www.king.edu/security Current King University Inclement Weather Policy is available at www.king.edu/security

<u>Note</u>: 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.

COURSE GRADES & GRADING POLICIES

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 clinical courses, a grade of C+ **or higher** in all non-clinical NURS courses and maintain an overall GPA of **3.0/4.0 scale**. Final course grade calculations are NOT rounded up. All grades in school of nursing courses are recorded in the electronic learning management system.

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

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

INCOMPLETE GRADES

An "incomplete" grade must be applied for by the student and must receive approval from the course faculty and the Registrar. An Incomplete can mean the student did not have enough time to complete coursework or clinical hours due to unforeseen life events or the faculty member or preceptor believes the course work is not appropriate for master's-level work. 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.

EXAMS AND QUIZZES

Students do not have an automatic right to "make-up" missed exams or quizzes. Making up a missed assignment is at the discretion of the instructor and may be in an alternate format and at a time and date of the instructor's designation. 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

All assignments are to be completed by the due date. Assignments submitted after the due date will be graded as stated in the specific grading rubric and/or grading guidelines for the assignment. Assignments submitted late and not rubric-guided may receive a minimum 10% reduction in the earned grade per-day. Students are responsible to communicate with the instructor prior to any unavoidable and legitimate absence and discuss options for make-up work. Making up a missed assignment is at the discretion of the instructor and may be in an alternate format and at a time and date of the instructor's designation

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 video conference 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 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.

The following should be noted:

- Students are expected to have addressed the concern with the professor of the course in question (if applicable), the chair of the department/program coordinator (if applicable), and the dean of the school before pursuing any appeal with the Office of Academic Affairs or the ASC.
- The ASC conducts its reviews based on the documents received. Therefore, any letter or documentation of appeal should specifically detail the reasons for which he/she believes the committee should overturn, modify, or amend decisions of the professor, department chair/program coordinator, and/or school dean.
- Normally, the ASC will be concerned with grades, course policies, and institutional academic procedure. Normally, the committee will not hear appeals of procedure particular to schools or departments. The committee should only hear appeals with regard to school or departmental policies and procedures when it is determined that the appeal relates to unfair or inconsistent application of a policy or procedure.
- If deemed necessary, the Office of Academic Affairs will convene a meeting of the ASC at a mutually convenient time to all members of the committee.
- The committee may then render a decision based on its review of the submitted documents.
- Review by the Office of Academic Affairs and/or the ASC is the final forum for appeals of the nature noted above.
- Normally, the Academic Standards Committee process should render a decision to the student within 30 days of receipt of a written appeal. In the event that the process will extend beyond 30 days, the student should be notified in writing of the delay, the reason(s) for the delay, and the anticipated completion date.

GRIEVANCE

Refer to the King University Student Handbook - Grievance Policy/Procedure

PROFESSIONALISM

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 course faculty and/or the program coordinator 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 KU Student Handbook; students are responsible for reading this document in its 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. Academic integrity is expected in all activities that occur online and all activities related to clinical practicum hours conducted within an outside healthcare agency.

Students at off campus instructional sites and those participating in nursing clinicals, student teacher assignments, internships, and community service experiences are subject to King's Honor Code, as well as, the host site's organizational policies and procedures. Written assignments may be channeled through Safe Assign, an On-line Management System (OLMS). Safe Assign is an academic integrity assessment program. Students visiting a foreign country must abide by the laws of that country. Students who violate campus policies may be subject to disciplinary action through the Student Conduct Process.

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, 2011); The Code of Ethics with Interpretive Statements (2015). The FNP and PNP curriculum integrates standards from the Criteria for Evaluation of Nurse Practitioner Programs (NTE, 2016); Core Competencies for Nurse Practitioners (NONPF, 2014); The Consensus Model for APRN Regulation (2008); Tennessee Law Regulating the Practice of Nursing (2015, Rev.) and The Rules of Tennessee Board of Nursing for Advanced Practice Nurses and Certificates of Fitness to Prescribe (June 2015, 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, intensive and bookend sessions are essential to student success. Students with illness, injury, or other condition temporarily affecting their ability to function effectively in didactic and or clinical areas must contact their instructor, Student Success Specialist 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, leaving early from and lateness to class and/or clinical experiences does not release students from responsibility for all work. Excessive absences, leaving early 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. Failing to adhere to participation schedules/deadlines in online or face-to-face 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. If a student needs to be available for calls during clinical, a discussion with the preceptor should occur in regards to clinical agency policy. Students are required to follow clinical agency policy at all times. At no time should cell phone use interfere with the clinical learning experience.

INFORMATION TECHNOLOGY

The Policy on the Responsible and Ethical use of Computing & Information Technology Resources is available in its entirety on the King website under Information Technology. Copies are also available in the Student Affairs Office. Additional use and guidelines for the King University computer network is located in the King University Student Handbook.

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, completion of final portfolios and evaluation in achieving course and program outcomes.

Each student is advised to anticipate counseling needs and should schedule regular appointments throughout each 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 faculty 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.

SIGMA THETA TAU INTERNATIONAL – EPSILON SIGMA CHAPTER-AT –LARGE

Epsilon Sigma chapter became an at-large chapter of Sigma Theta Tau, International in 2014, accepting into its membership qualified individuals from area schools of nursing and qualified community nurse leaders. Member schools are East Tennessee State University, King University, Lincoln Memorial University and Milligan College. The honor society recognizes superior achievement, research, leadership, high professional standards, creative work, and commitment to the high ideals of the nursing profession among nursing students and community members. Membership is open to qualified BSN, MSN and DNP students at King University. Membership is an honor conferred on students by invitation following a committee review of the student's qualifications.

Sigma Theta Tau International supports the Virginia Henderson Research Library and provides major resources annually in the form of research grants, conferences, publications, films, exhibits and awards to its members on a competitive basis.

CLINICAL/PRACTICUM EXPERIENCE & RESPONSIBILITIES

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. A student may conduct clinical learning experiences at their place of employment, however, the student cannot be precepted by a preceptor who is his/her supervisor or participates in the student's employee evaluation. Additional clinical information and clinical forms are located in concentration-specific *Information and Guidelines for Practicum Courses for Students and Preceptors*. The following responsibilities are expected of faculty, student, and preceptor:

CLINICAL COURSE 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. Maintain communication with Clinical Faculty regarding student performance.
- 6. Develop and maintain relationships with preceptors, clinical faculty and clinical sites.
- 7. Determine degree to which student has achieved course objectives and completed course requirements. The clinical faculty assigns final grade.
- 8. Send letters of appreciation and verification of precepting hours to clinical preceptors.
- 9. Verify all appropriate student paperwork complete and in student file.

CLINICAL FACULTY RESPONSIBILITY

- 1. Assist students in developing goals and objectives for clinical experiences.
- 2. Communicate with preceptors and provide with appropriate clinical information and required forms.
- 3. Review clinical requirements with student.
- 4. Develop and maintain relationships with preceptors and clinical sites.
- 5. Assist student throughout clinical experience to ensure appropriate learning.
- 6. Visit clinical sites as necessary. Participate in student evaluation with preceptor; faculty maintains responsibility for student evaluation.
- 7. Determine degree to which student has achieved course objectives and completed course requirements. The clinical faculty assigns final grade.
- 8. Coordinate with Clinical Course faculty regarding sending letters of appreciation and verification of precepting hours to clinical preceptors.
- 9. Grade clinical assignments within 1 week of due date.

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. Understand that clearance to attend clinicals is not complete until student receives the final approval from the School of Nursing Office
- 4. Develop goals and objectives for clinical experiences.
- 5. Coordinate clinical experiences to accommodate preceptor's availability and schedule.
- 6. Provide preceptor all necessary paperwork to be completed for the semester and clinical faculty contact information during first week of clinical.
- 7. Provide clinical faculty with clinical hours schedule.
- 8. Maintain on-going communication with clinical faculty member regarding clinical experiences.
- 9. Maintain accurate clinical logs with preceptor verification.
- 10. Complete scheduled periodic self-assessments.
- 11. Be on time, communicate with your preceptor regarding any unavoidable absences or changes to your schedule.
- 12. Coordinate personal and work schedules to allow successful completion of required clinical hours.
- 13. Adhere to "dress code" that meets guidelines of clinical setting and the School of Nursing.

- 14. Provide all required health information, forms, licensures, certifications, and background check information to the school of nursing Administrative Assistant as requested.
- 15. Wear King University student name badge only when participating in or involved in experiences related to graduate student role.
- 16. Agree to be responsible for any and all individual costs related to clinical experiences.
- 17. Submit of all required clinical paperwork each semester in a timely manner based on specialty concentration and course.
- 18. Complete any and all additional clinical requirements mandated by clinical agency and submit to school of nursing Administrative Assistant.

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, PNP, Educator or Nurse Administrator.
- 9. Provide a variety of patient cases, adequate patient volume and/or learning experiences.
- 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.

CLINICAL SITE ATTENDANCE

Students may not complete hours in the clinical setting until the student receives final approval from the School of Nursing office. Any hours completed without approval from the nursing office will be void and will not be counted toward completion of clinical hours. Completion of clinical hours without approval can result in dismissal from the program.

Students must provide clinical faculty with a schedule of clinical practice hours prior to attendance in the clinical setting. Students are not allowed to attend clinical at any time the University offices are closed for holidays. If the University is closed for weather, students with consultation of the preceptor, are to use discretion and may attend clinical if the student deems travel safe. If the student is unable to attend a scheduled clinical, the student is to notify the clinical preceptor and the clinical faculty.

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 with the King University School of Nursing logo. Approved lab coats with embroidered logo may be purchased from Best Uniform (<u>https://www.bestuniformcenter.com/</u> or 423-573-8037). 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 and keep a copy of the "Blood and Body Fluid Emergency Procedure" and "Incident, Injury & Pathogen Exposure Report" (Attachments at end of handbook) with them at all times during completion of clinical practicum hours. 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 student identifies student-specific clinic objectives for each clinical experience and discusses these with the preceptor in addition to performing a self-evaluation of clinical skills. The preceptor identifies competencies achieved by the student while the student comments on preceptor mentoring and satisfaction with the learning experiences. The student and preceptor evaluate the performance of clinical skills at the end of the experience. Students must maintain a clinical log of hours for certifying bodies. Preceptors must verify and sign all logs and student documentation. Faculty members must verify appropriate documentation and completion of the required clinical hours and competencies. 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.

GRADUATION REQUIREMENTS

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.

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 exist, but students fail to schedule sufficient hours to meet graduation requirements.
- 3. Pass NURS 5990 Final Comprehensive Competency Demonstration

COMPREHENSIVE ASSESSMENT – MAJOR FIELD

NURS 5990 Final Comprehensive Competency Demonstration0 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

APPLICATION FOR DEGREE AND GRADUATION FEE

Candidates for a degree must complete a form notifying the registrar of their intent to graduate. A onetime fee of \$175 is required of all graduates. All financial obligations must be settled in full before the degree will be conferred.

MSN PORTFOLIO GUIDELINES

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 <u>2011</u> 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 to the faculty advisor. The faculty advisor is responsible for setting the specific due date during the 12th week of the final semester and evaluating 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. A minimum score of 80 must be achieved to pass the portfolio.

In the event that a student does not achieve a passing score upon initial evaluation, the student will meet with his/her faculty advisor to discuss the deficiencies identified and constructive feedback will be provided. The student will be given the opportunity to correct deficiencies and re-submit within 3 business days. If a passing score is not achieved upon the second submission the student will fail the portfolio and NURS 5990, resulting in NURS 5990 needing to be repeated and graduation to be delayed. If this is a second failure the student will be dismissed from the program (see Dismissal Policy).

A portfolio submitted late will receive a 10% per day deduction on the first attempt. If more than 3 days late a failing grade will be given for the portfolio. If a second attempt is granted the first and second attempt will be averaged for the score, which must be 80 or higher to pass.

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.

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 12th week of the final semester (exact date TBA).**

PORTFOLIO DEVELOPMENT

Students will supply the faculty advisor the web link or access information for the portfolio. Wix, Weebly, and myefolio, are examples of web site builders that are easy to use, have multiple templates and offer 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 the site builder websites. Please discuss the chosen web site builder with the instructor of your Informatics course or faculty advisor *prior* to developing your portfolio.

The following is an outline of the expected content of the electronic portfolio. Each section under the "Content Links" should have a link from the Home Page of the site. Use the list of "Items to Include" to determine what is needed in each of the content areas. For the best portfolio outcome, students should continue to build his/her portfolio throughout the program and add items each semester based on the content area specifications. Each course instructor should be able to assist with determining where assignments would best fit in the portfolio.

Content Links Description of Section		Item(s) to include		
Title Page/Home Page	This will be your home page of your website	You should include your name, and then have links to the areas listed in Bold print in the first column.		
Philosophy of Professional Advanced Nursing Practice	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		
Career Development:				
	Evidence of The Essentials of Master's Educ OR	-		
	<i>Evidence of Nurse Practitioner Core Co</i> rovide a detailed summary of how you have met the o mples for each Essential. (quizzes, discussions, prese	competencies for each individual Essential.		
I. Background for Practice from Sciences and Humanities/ Scientific Foundations	Integrates scientific findings from nursing, humanities, biopsychosocial fields, genetics, public health, quality improvement, health economics, translational science and organizational sciences for the continual	The following instructions are for <u>each</u> MSN Essential Competency Area. 1) Narrative reflection of how you achieved		
	improvement of nursing care. Knowledge from information sciences, health communication and health literacy are used to provide care	competency in the specific area. Narrative shows commitment to learning and evidence of growth in competency area throughout MSN curriculum.		

management and coordination to multiple populations. Critically analyzes data and

	avidance for improving advanced runsing	
	evidence for improving advanced nursing practice.	2) Include self-assessment of strengths and
II. Organizational and	Recognizes that organizational and systems	weaknesses in competency area and how specific
Systems Leadership	leadership are critical to the promotion of high	competency has facilitated your growth
Systems Leader sinp	quality and safe patient care. Leadership skills	professionally.
	emphasize ethical and critical decision making.	professionary.
	Graduate will be able to initiate and maintain	3) Provide assignments and activities that you have
	effective working relationships using respectful	completed during your program of study that serve
	communication and collaboration within	as examples of achieving this competency. You will
	interprofessional teams, demonstrating skills in	need to provide <u>at least 4 examples</u> that show
	care coordination, delegation, and initiating	continued growth and achievement in competency
	conflict resolution in multiple and varied settings.	area.
	Essential leadership skills: communication,	
	collaboration, negotiation, delegation,	(Refer to specific assignments by Title and place in
	coordination. Uses critical thinking and reflective	order they are referenced in your narrative)
	thinking while advocating for improved access,	
	quality and cost-effective health care.	
III. Quality Improvement	Recognize, analyze, and apply the methods,	
and Safety	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.	
IV. Translating and	Examines policies and seeks evidence for every	
Integrating Scholarship	aspect of practice. Applies research within	
into Practice/ Practice	practice settings to resolve practice problems and	
Inquiry	work as a change agent; Applies ethically sound	
1 0	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.	
V. Informatics and	Uses patient-care technologies to deliver and	
Healthcare Technologies/	enhance care. Uses communication technologies	
Information Literacy	to integrate and coordinate care. Data	
Information Eliteracy	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.	
	Demonstrates information literacy skills in	
	complex decision making. Uses technology	
	systems that capture data on variables for the	
	evaluation of nursing care.	
VI. Health Policy and	Demonstrates skills to promote health, help shape	
Advocacy	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	

	I	
	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.	
VII. (MSN)	Demonstrates work as a member and leader of	
Interprofessional	interprofessional teams; communicates,	
Collaboration for	collaborates and consults with other health	
Improving Patient	professionals to manage and coordinate care	
and Population Health	across systems and environments.	
Outcomes		
VII. (Post-MSN) Health	Applies knowledge of organizational practices	
Care Delivery	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	
VIII. (MSN) Clinical	Applies and integrates broad, organizational,	
Prevention and	client-centered and culturally appropriate	
Population Health for	concepts in the planning, delivery, management,	
Improving Health	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.	
VIII. (Post-MSN) Ethics	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	
IX. (MSN) Master's-Level	Describe evolution into Masters-level Nursing	1. Compose a narrative summary of your journey
Nursing Practice	Practice Role: MSN practice includes any form	to a Masters-level practicing nurse which shows
	of nursing intervention that positively influences	a deeper understanding of the nursing
	healthcare outcomes for a variety of individuals,	profession. Include in the summary a reflection
	populations, or systems; Utilizes expanded	on your education and practices throughout the
	critical thinking and clinical reasoning skills to	MSN program and include a plan of lifelong
	make appropriate clinical decisions;	learning and professional development.
	Demonstrates highest level of professional	
	accountability in decisions based on ethical,	2. Provide at least 4 examples or descriptions of
	professional and Christian standards.	how you have demonstrated the highest level of

IX. (Post- MSN) Independent Practice	 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) 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 	 accountability for professional practice in your chosen MSN role (FNP, Administrator, Educator) 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. 2. Provide at least 4 examples or descriptions of how you have demonstrated the highest level of accountability for professional practice in the
	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.	APRN role
Fulfillment of the King University Mission & Core Values Integration of the School of Nursing Professional Pillars	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 School of Nursing Professional Pillars are integrity, commitment, service, accountability, civility, compassion. Refer to the full Mission and Vision of King University in the Academic Catalogue at http://students.king.edu/academic-catalog/ this section will assist with completing this section	 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. Describe how you incorporate the SON Professional Pillars into your chosen MSN role. 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.

The following areas will be included in the grading of your portfolio in addition to the actual content:

Appearance/Organization:

- 1. Home Page with links to all content areas
- 2. Professional
- 3. Organized
- 4. Ease of Navigation
- 5. Neat

Mechanics:

Punctuation, capitalization, spelling, sentence structure, and word usage. 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

Essential Element	Meets or Exceeds Expectations	Does Not Meet Expectations	Total Points
Philosophy of Professional Masters Level Nursing Practice (Defines individual values and beliefs; how values and beliefs influence your role as an advanced practice nurse)	 Clearly written; excellent reflection and commitment (3) 	 No philosophy of nursing practice included (0) Philosophy of nursing does not exemplify masters level nursing practice (1) 	
Career Development: Required: 1. License 2. Certifications 3. CV/Resumé 4. Transcripts/Degrees (official undergraduate, unofficial graduate up until current) Two of the following from the last 3 years: 1. Professional Memberships 2. Excellence in Clinical Practice Exemplars 3. Awards 4. Publications/presentations 5. Performance Evaluations 6. Continuing Education 7. Committee Involvement All are not required but highly suggested Additional items may be added	 Includes all required components (5) Includes 2 or more additional components (2) 	 Deficient in one or more required Components (0) Deficient in 1 of the additional components (1) Deficient in 2 of the additional components (0) 	
For each area provide a detailed su		<i>cation in Nursing</i> * npetencies for each individual Essentia ns, practicum experiences, service, etc.	
I. Background for Practice from Sciences and Humanities (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.)	 □ Detailed narrative summary; clearly written; shows commitment to learning, <u>evidence of growth</u> in science and humanities (2) □ Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in science and humanities (2) □ Exemplars representative of continued growth and achievement (2) □ ≥ 4 examples of competency in science and humanities are provided; (2) 	 Narrative summary vague, unclear; does not show evidence of growth in science and humanities (1) Narrative lacking self- assessment of strengths and weaknesses in the sciences and humanities (0) Exemplars do not show growth in science and humanities (0) 3 examples of competency in science and humanities are provided (1) < 3 examples of competency in science and humanities are provided (0) 	30

II. Organizational and Systems	□ Detailed summary; clearly	□ Narrative summary vague,	

provided (0)

Leadership	written; shows commitment to	unclear; does not show evidence	
Leavership	learning; Narrative shows	of growth in organizational and	
(Decompose that appendicational and	evidence of growth in	systems leadership (1)	
(Recognizes that organizational and systems leadership are critical to the	organizational and systems	□ Narrative lacking self-	
promotion of high quality and safe patient	leadership (2)	assessment of strengths and	
care. Leadership skills emphasize ethical	\Box Narrative shows an excellent	weaknesses in the	
and critical decision making. Graduate will	self-assessment including	organizational and systems	
be able to initiate and maintain effective	strengths and weaknesses in	leadership (0)	
working relationships using respectful	organizational and systems	\Box Exemplars do not show growth	
communication and collaboration within	leadership (2)	in organizational and systems	
interprofessional teams, demonstrating	□ Exemplars show continued	leadership (0)	
skills in care coordination, delegation, and	growth and achievement in	\Box 3 examples of competency in	
initiating conflict resolution in multiple	organizational and systems	organizational and systems	
and varied settings. Essential leadership	leadership (2)	leadership are provided (1)	
skills: communication, collaboration,	$\Box \geq 4$ examples of competency	\Box < 3 examples of competency in	
negotiation, delegation, coordination)	in organizational and systems	organizational and systems	
	leadership (2)	leadership are provided (0)	
III. Quality Improvement and	□ Detailed summary; clearly	□ Narrative summary vague,	
Safety	written; shows commitment to	unclear; does not show evidence	
	learning; Narrative shows	of growth in quality	
(Recognize, analyze, and apply the	evidence of growth in quality improvement and safety (2)	improvement and safety (1) □ Narrative lacking self-	
methods, tools, performance measures, and	□ Narrative shows an excellent	assessment of strengths and	
standards needed to improve quality and	self-assessment including	weaknesses in quality	
safety across the care continuum in diverse	strengths and weaknesses in	improvement and safety (0)	
settings. Demonstrate knowledge of	quality improvement and safety	□ Exemplars do not show growth	
potential and actual impacts of national	(2)	in quality improvement and	
patient safety resources, initiatives, and	□ Exemplars show continued	safety (0)	
regulations.)	growth and achievement in	\Box 3 examples of competency in	
	quality improvement and safety	quality improvement and safety	
	(2)	are provided (1)	
	$\Box \ge 4$ examples of competency in	\Box < 3 examples of competency in	
	quality improvement and safety	quality improvement and safety	
	(2)	are provided (0)	
IV. Translating and Integrating	□ Detailed summary; clearly	□ Narrative summary vague,	
Scholarship into Practice	written; shows commitment to	unclear; does not show evidence	
Ĩ	learning; Narrative shows	of growth in translating and	
(Examines policies and seeks evidence for	evidence of growth in	integrating scholarship into	
every aspect of practice. Applies research	translating and integrating	practice (1)	
within practice settings to resolve practice	scholarship into practice (2)	□ Narrative lacking self-	
problems and work as a change agent;	□ Narrative shows an excellent	assessment of strengths and	
Applies ethically sound principles to	self-assessment including strengths and weaknesses in	weaknesses in translating and	
decision-making.)	translating and integrating	integrating scholarship into practice (0)	
	scholarship into practice (2)	Exemplars do not show growth	
	□ Exemplars show continued	in translating and integrating	
	growth and achievement	scholarship into practice (0)	
	translating and integrating	\Box 3 examples of competency in	
	scholarship into practice (2)	translating and integrating	
	$\square \ge 4$ examples of competency in	scholarship into practice are	
	translating and integrating	provided (1)	
	scholarship into practice (2)	\Box < 3 examples of competency	
		translating and integrating	
		scholarship into practice are	
		provided (0)	
V. Informatics and Healthcare	□ Detailed summary; clearly	□ Narrative summary vague,	

Technologies	written; shows commitment to	unclear; does not show evidence
reemologies	learning; Narrative shows	of growth in informatics and
(Uses patient-care technologies to deliver	evidence of growth in	healthcare technologies (1)
and enhance care. Uses communication	informatics and healthcare	□ Narrative lacking self-
technologies to integrate and coordinate	technologies (2)	assessment of strengths and
care. Data management to analyze and	\Box Narrative shows an excellent	weaknesses in informatics and
improve outcomes of care. Health	self-assessment including	healthcare technologies (0)
information management for evidence-	strengths and weaknesses in	\Box Exemplars do not show growth
based care and health education. Facilitates	informatics and healthcare	in informatics and healthcare
the use of electronic health records.	technologies (2)	technologies (0)
Ethically manages data, information,	□ Exemplars show continued	\Box 3 examples of competency in
knowledge and technology to communicate	growth and achievement in	informatics and healthcare
effectively with the healthcare team,	informatics and healthcare	technologies (1)
patients and caregivers.)	technologies (2)	\Box < 3 examples of competency
	$\Box \ge 4$ examples of competency in	informatics and healthcare
	informatics and healthcare	technologies (0)
	technologies (2)	
VI. Health Policy and Advocacy	□ Detailed summary; clearly	□ Narrative summary vague,
	written; shows commitment to	unclear; does not show evidence
(Demonstrates skills to promote health,	learning; Narrative shows	of growth in health policy and
help shape the health delivery system, and	evidence of growth in health	advocacy (1)
advance values through policy processes	policy and advocacy (2)	□ Narrative lacking self-
and advocacy. Use political competence to		assessment of strengths and
improve health outcomes of populations	self-assessment including strengths and weaknesses in	weaknesses in health policy and advocacy (0)
and improve the quality of the healthcare	health policy and advocacy (2)	Exemplars do not show growth
delivery system. Understand the principles	□ Exemplars show continued	in health policy and advocacy
of healthcare economics, payment methods	growth and achievement in	(0)
and the relationship between policy and health economics.)	health policy and advocacy (2)	\Box 3 examples of competency in
nearth economics.)	$\square \ge 4$ examples of competency in	health policy and advocacy (1)
	health policy and advocacy (2)	$\square < 3$ examples of competency in
	neurin poney and advocacy (2)	health policy and advocacy (0)
VII. Interprofessional	□ Detailed summary; clearly	□ Narrative summary vague,
-	written; shows commitment to	unclear; does not show evidence
Collaboration for Improving	learning; Narrative shows	of growth in interprofessional
Patient	evidence of growth in	collaboration for improving
and Population Health Outcomes	interprofessional collaboration	patient and population health
	for improving patient and	outcomes (1)
(Demonstrates work as a member and	population health outcomes (2)	□ Narrative lacking self-
leader of interprofessional teams;	□ Narrative shows an excellent	assessment of strengths and
communicates, collaborates and consults	self-assessment including	weaknesses in interprofessional
with other health professionals to manage	strengths and weaknesses in	collaboration for improving
and coordinate care across systems and	interprofessional collaboration	patient and population health
environments.)	for improving patient and	outcomes (0)
	population health outcomes (2)	□ Exemplars do not show growth
	□ Exemplars show continued	in interprofessional
	growth and achievement in	collaboration for improving
	interprofessional collaboration	patient and population health
	for improving patient and	outcomes (0)
	population health outcomes (2)	□ 3 examples of competency in
	$\Box \ge 4$ examples of competency in	interprofessional collaboration
	interprofessional collaboration	for improving patient and
	for improving patient and	population health outcomes (1)
	population health outcomes (2)	

VIII. Clinical Prevention and Population Health for Improving	□ Detailed summary; clearly		
Health (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.)	 written; shows commitment to learning; Narrative shows evidence of growth in clinical prevention and population health for improving health (2) □ Narrative shows an excellent self-assessment including strengths and weaknesses in clinical prevention and population health for improving health (2) □ Exemplars show continued growth and achievement in clinical prevention and population health for improving health (2) □ Exemplars show continued growth and achievement in clinical prevention and population health for improving health (2) □ ≥ 4 examples of competency in clinical prevention and population health for improving health (2) 	 Narrative summary vague, unclear; does not show evidence of growth in clinical prevention and population health for improving health (1) Narrative lacking self- assessment of strengths and weaknesses in clinical prevention and population health for improving health (0) Exemplars do not show growth in clinical prevention and population health for improving health (0) 3 examples of competency in clinical prevention and population health for improving health (1) < 3 examples of competency in clinical prevention and population health for improving health (1) < 3 examples of competency in clinical prevention and population health for improving health (0) 	
 IX. Master's-Level Nursing Practice (Any form of nursing intervention that positively influences healthcare outcomes for a variety of individuals, populations, or systems. 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) Provides evidence of Master's- Level Nursing practice in your chosen role (Education, Administration, FNP) demonstrating the highest level of accountability for professional practice 	 □ Detailed summary; clearly written; Narrative includes journey to MSN nursing role with a deeper understanding of nursing profession (2) □ Narrative includes reflection on education and practices throughout MSN program (2) □ Narrative includes a plan of lifelong learning and professional development (2) □ ≥ 4 examples or descriptions that demonstrate the highest level of accountability for professional practice in your chosen MSN role (2) □ Narrative describes the 	 Narrative summary vague, unclear; does not show deeper understanding of nursing profession (0) Narrative summary does not include reflection on education and practices in MSN program (0) Narrative summary does not include a plan of lifelong learning and professional development (0) 3 examples or descriptions that demonstrate the highest level of accountability for professional practice in your chosen MSN role (1) <3 examples or descriptions that demonstrate the highest level of accountability for professional practice in your chosen MSN role (1) Narrative summary does not 	
Mission & Core Values:	importance of the integration of	describe the importance of the	
---	---------------------------------------	---	---
King's mission is to build meaningful lives	the values of the Christian	core values or how they will	
of achievement and cultural transformation	community and how they will	lead to a life of achievement and	
in Christ.	lead to a life of achievement	cultural transformation in Christ	
	and cultural transformation in	(0)	
King's Core Values are Christian faith,	Christ (2)	\Box No description of how SON	
scholarship, service, and career	□ Describe how you incorporate	Professional Pillars are	
School of Nursing Professional Pillars are	the SON Professional Pillars	incorporated into chosen MSN	
integrity, commitment, service,	into your chosen MSN role.	role. (0)	
accountability, civility, compassion	(2)	No Service Learning Project	
	□ Completes Service Learning	completed (0)	
Completion of Service Learning Project	project and provides summary	Service Learning Project	
	of project. (2)	completed but summary omitted	
	□ Describes how the project	(1)	
	supported the community,	Project narrative lacking	
	enriched learning for the	explanation of how project	
	student and provided insight	supported the community,	
	into the core value of service	enriched student learning or	
	(2)	provided insight into value of	
		service (0)	
Appearance/Organization:			
1. Home Page with links to content	\Box Links to all content areas (1)	□ Missing links or nonfunctioning	
areas	\Box Very well organized (1)	(0)	
2. Professional	□ Professional (1)	□ Unorganized, disjointed (0)	
3. Organized	\Box Easy to navigate (1)	□ Unprofessional (0)	
4. Ease of Navigation	\Box Neat (1)	□ Hard to navigate, chaotic (0)	
5. Neat		 Main to havigate, chaotic (0) Messy, sloppy, cluttered (0) 	
Mechanics:			
Punctuation, capitalization,	□ Less than 3 grammatical	\Box 3-4 grammatical and/or APA	
spelling, sentence structure, and	and/or APA errors. (5 pts)	errors (2.5)	
word usage.		\Box > 4 grammatical and/or APA	
APA format – margins, titles,		errors (0)	
references			
			/
		TOTAL POINTS	/

Comments:_____

Faculty Signature_____Date_____

Attachment A2 Post MSN APRN Certificate Portfolio Guidelines & Grading Rubric

Philosophy of Professional Masters Level Nursing Practice (Defines individual values and beliefs; how values and beliefs influence your role as an advanced practice nurse)	 Clearly written; excellent reflection and commitment (3) 	 No philosophy of nursing practice included (0) Philosophy of nursing does not exemplify masters level nursing practice (1)
Career Development: <u>Required:</u> 1. License 2. Certifications 3. CV/Resumé 4. Transcripts/Degrees (official undergraduate, unofficial graduate up until current) <u>Two of the following from the last 3</u> <u>years:</u> 1. Professional Memberships 2. Excellence in Clinical Practice Exemplars 3. Awards 4. Publications/presentations 5. Performance Evaluations 6. Continuing Education 7. Committee Involvement <i>All are not required but highly suggested</i> <i>Additional items may be added</i>	 Includes all required components (5) Includes 2 or more additional components (2) 	 Deficient in one or more required Components (0) Deficient in 1 of the additional components (1) Deficient in 2 of the additional components (0)

Evidence of Nurse Practitioner Core Competencies*

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.)

I. Scientific Foundations (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.)	 □ Detailed narrative summary; clearly written; shows commitment to learning, evidence of growth in science and humanities and application to practice (2) □ Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in science and humanities and application to practice (2) □ Exemplars representative of continued growth and achievement (2) □ ≥ 4 examples of competency in science and humanities with application to practice are provided;(2) 	 Narrative summary vague, unclear; does not show evidence of growth in science and humanities (1) Narrative lacking self- assessment of strengths and weaknesses in the sciences and humanities (0) Exemplars do not show growth in science and humanities (0) 3 examples of competency in science and humanities are provided (1) < 3 examples of competency in science and humanities are provided (0) 	
II. Leadership	 Detailed summary; clearly written;	 Narrative summary vague,	
(Assumes complex and advanced leadership	shows commitment to learning;	unclear; does not show	
roles to initiate and guide change, foster	Narrative shows <u>evidence of growth in</u>	evidence of growth in assuming	
collaboration with patients, communities,	assuming a leadership role to improve	a leadership role to improve	

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)	 health care (2) Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in assuming a leadership role to improve health care (2) Exemplars show continued growth and achievement in assuming a leadership role to improve health care (2) ≥ 4 examples of competency in assuming a leadership role to improve health care (2) 	 health care (1) Narrative lacking self- assessment of strengths and weaknesses in assuming a leadership role to improve health care (0) Exemplars do not show growth in assuming a leadership role to improve health care (0) 3 examples of competency in assuming a leadership role to improve health care are provided (1) < 3 examples of competency in
III. Quality	 Detailed summary; clearly written; shows commitment to learning; 	assuming a leadership role to improve health care are provided (0)
(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.)	 shows commitment to learning; Narrative shows evidence of growth in quality improvement and safety (2) □ Narrative shows an excellent self- <u>assessment</u> including strengths and weaknesses in quality improvement and safety (2) □ Exemplars show continued growth and achievement in quality improvement and safety (2) □ ≥ 4 examples of competency in quality improvement and safety (2) 	 evidence of growth in quality improvement and safety (1) Narrative lacking self- assessment of strengths and weaknesses in quality improvement and safety (0) Exemplars do not show growth in quality improvement and safety (0) 3 examples of competency in quality improvement and safety are provided (1) < 3 examples of competency in quality improvement and safety are provided (0)
IV. Practice Inquiry (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)	 □ Detailed summary; clearly written; shows commitment to learning; Narrative shows evidence of growth in translating and integrating evidence- based research into practice (2) □ Narrative shows an excellent self- assessment including strengths and weaknesses in translating and integrating evidence-based research into practice (2) □ Exemplars show continued growth and achievement translating and integrating evidence-based research into practice (2) □ ≥ 4 examples of competency in translating and integrating evidence- based research into practice (2) 	 Narrative summary vague, unclear; does not show evidence of growth in translating and integrating evidence-based research into practice (1) Narrative lacking self- assessment of strengths and weaknesses in translating and integrating evidence-based research into practice (0) Exemplars do not show growth in translating and integrating evidence-based research into practice (0) 3 examples of competency in translating and integrating evidence-based research into practice are provided (1) < 3 examples of competency

		translating and integrating evidence-based research into practice are provided (0)
V. Technology and Information Literacy (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.)	 □ Detailed summary; clearly written; shows commitment to learning; Narrative shows evidence of growth in informatics and healthcare technologies (2) □ Narrative shows an excellent self-assessment including strengths and weaknesses in informatics and healthcare technologies (2) □ Exemplars show continued growth and achievement in informatics and healthcare technologies (2) □ Exemplars show continued growth and achievement in informatics and healthcare technologies (2) □ ≥ 4 examples of competency in informatics and healthcare technologies (2) 	 Narrative summary vague, unclear; does not show evidence of growth in informatics and healthcare technologies (1) Narrative lacking self- assessment of strengths and weaknesses in informatics and healthcare technologies (0) Exemplars do not show growth in informatics and healthcare technologies (0) 3 examples of competency in informatics and healthcare technologies (1) < 3 examples of competency informatics and healthcare technologies (0)
VI. Policy (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.)	 □ Detailed summary; clearly written; shows commitment to learning; Narrative shows <u>evidence of growth</u> in health policy and advocacy (2) □ Narrative shows an excellent <u>self-assessment</u> including strengths and weaknesses in health policy and advocacy (2) □ Exemplars show continued growth and achievement in health policy and advocacy (2) □ ≥ 4 examples of competency in health policy and advocacy (2) 	 Narrative summary vague, unclear; does not show evidence of growth in health policy and advocacy (1) Narrative lacking self- assessment of strengths and weaknesses in health policy and advocacy (0) Exemplars do not show growth in health policy and advocacy (0) 3 examples of competency in health policy and advocacy (1) < 3 examples of competency in health policy and advocacy (0)
VII. Health Delivery System (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.)	 □ Detailed summary; clearly written; shows commitment to learning; Narrative shows evidence of growth in knowledge of organizational practices to improve health care delivery and outcomes (2) □ Narrative shows an excellent self- assessment including strengths and weaknesses in knowledge of organizational practices to improve health care delivery and outcomes (2) □ Exemplars show continued growth and achievement in knowledge of organizational practices to improve health care delivery and outcomes (2) □ Exemplars show continued growth and achievement in knowledge of organizational practices to improve health care delivery and outcomes (2) □ ≥ 4 examples of competency in knowledge of organizational practices to improve health care delivery and 	 Narrative summary vague, unclear; does not show evidence of growth in knowledge of organizational practices to improve health care delivery and outcomes (1) Narrative lacking self- assessment of strengths and in knowledge of organizational practices to improve health care delivery and outcomes (0) Exemplars do not show growth in knowledge of organizational practices to improve health care delivery and outcomes (0) Sexemplars do not show growth in knowledge of organizational practices to improve health care delivery and outcomes (0) 3 examples of knowledge of organizational practices to improve health care delivery

		outcomes (2)	and outcomes (1)
		outcomes (2)	and outcomes (1) $\Box < 3$ examples of competency in
			knowledge of organizational
			practices to improve health care
			delivery and outcomes (0)
VIII. H	Ethics	□ Detailed summary; clearly written;	□ Narrative summary vague,
(Integrat	tes ethical principles in decision	shows commitment to learning;	unclear; does not show
	Evaluates ethical consequences of	Narrative shows evidence of growth in	evidence of growth in
	s. Applies ethically sound solutions to	integration of ethical principles into	integration of ethical principles
	issues. Examples: Understands	decision making (2)	into decision making (1)
	c/patient boundaries, duty to report,		□ Narrative lacking self-
	ntiality, privacy, APRN Scope of	□ Narrative shows an excellent <u>self-</u>	assessment of strengths and
	, Code of Ethics for Nurses, do no	assessment including strengths and	weaknesses in integration of
narm, pa	atient rights, prescribing laws, etc.)	weaknesses in integration of ethical	ethical principles into decision making (0)
		principles into decision making (2)	\Box Exemplars do not show growth
			integration of ethical principles
		□ Exemplars show continued growth and	into decision making (0)
		achievement in integration of ethical	\Box 3 examples of competency in
		principles into decision making (2)	integration of ethical principles
			into decision making (1)
		$\Box \ge 4$ examples of competency in	\Box < 3 examples of competency
		integration of ethical principles into decision making (2)	integration of ethical principles
		decision making (2)	into decision making (0)
IX. In	dependent Practice		
4	_		
1.	Describe evolution into Advanced	Detailed summary; clearly written;	□ Narrative summary vague,
	Practice Nursing Role (a paper of	Narrative includes journey to APRN	unclear; does not show deeper
	your own journey to an advanced practicing nurse to show a deeper	role with a <u>deeper understanding of</u> <u>nursing profession</u> (2)	understanding of nursing profession (0)
	understanding of the nursing	nursing profession (2)	Profession (0)
	profession based on reflective	□ Narrative <u>includes reflection</u> on	□ Narrative summary does not
	practices and a plan of lifelong	education and practices throughout	include reflection on education
	learning and professional	Post-MSN FNP certificate program (2)	and practices in Post-MSN FNP
	development)	1 OST-WISTN FINE CERTITICATE program (2)	certificate program (0)
2.	Demonstrates the highest level of	□ Narrative includes a <u>plan of lifelong</u>	
	accountability for professional	<u>learning</u> and professional development	□ Narrative summary does not
	practice evidenced by functioning as	(2)	include a plan of lifelong
	an independent practitioner while	\/	learning and professional
	providing patient-centered care.	$\square \geq 4$ examples or descriptions that	development (0)
	Provides the full spectrum of health	demonstrate the highest level of	_
	care services to patients across the	accountability for professional practice	□ 3 examples or descriptions that
	lifespan to include: health promotion,	in the APRN role (2)	demonstrate the highest level of
	disease prevention, health protection, anticipatory guidance, counseling,		accountability for professional
	disease management, palliative care,		practice in the APRN role (1)
	end of life care, management of acute		
	and chronic disorders, assessment,		\Box <3 examples or descriptions
	screening and diagnostic strategies in		that demonstrate the highest
	the development of diagnoses,		level of accountability for
	prescribing of medications,		professional practice in the
	development and evaluation of		APRN role (0)
	treatment plans.		
	ment of the King University	□ Narrative describes the importance of the integration of the values of the	□ Narrative summary does not
	on & Core Values:	the integration of the values of the Christian community and how they will	describe the importance of the core values or how they will
King's r	nission is to build meaningful lives of	Christian community and now they will	core values of now they will

		supported the community, enriched student learning or	
		enriched student learning or	
		provided insight into value of	
		service (0)	
Appearance/Organization:	\Box Links to all content areas (1)		
1. Home Page with links to content	 □ Links to all content areas (1) □ Very well organized (1) 	 Missing links or nonfunctioning (0) 	
areas 2. Professional	□ Professional (1)	(0)	
		\Box Unorganized, disjointed (0)	
 Organized Ease of Navigation 	\Box Easy to navigate (1)	□ Unprofessional (0)	
0	\Box Neat (1)	\Box Hard to navigate, chaotic (0)	
5. Neat		□ Messy, sloppy, cluttered (0)	
Mechanics:			
	□ Less than 3 grammatical and/or APA	□ 3-4 grammatical and/or APA	
Punctuation, capitalization, spelling,	errors. (5 pts)	errors (2.5)	
sentence structure, and word usage.	(1015. (5 pts)	$\square > 4$ grammatical and/or APA	
APA format – margins, titles,			
references		errors (0)	
references			
		1	

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

\Box Pass ≥ 80	\Box Fail < 80
Comments:	

Faculty Signature_____

_Date_____

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

Exposure Response

Eye Splashes		es	Splashes on Oral	Skin Exposure, Needlestick or		
			or Nasal Mucosa	Sharps Injury		
	· ·			• Immediately flush and wash		
		nediately flush with cold water for 15 minutes thoroughly with soap and water				
	ater, saline or st					
	rigant for 15 min		· .			
*And	i tollow any agei	ncy policy to	r injury or exposure			
Stude	ent Responsibili	ties DO NOT	T WAIT!			
1)	NOTIFY	IMMED	NATELY notify your preceptor and Kir	ng faculty		
2)	GO		spital: GO immediately to nearest Hos			
			ent (obtain name of follow-up contact a			
			l: GO to Employee/Occupational Heal			
		Departm	nent			
3)	IDENTIFY	IDENTI	FY yourself as a King University nursit	ng student who has		
		received	a Needlestick/Sharps Injury or BBF Ex	xposure		
4)	FINANCIAI	L RESPONS	IBILITY			
		All stude	ents in the King University School of N	Nursing program are financially responsible for an		
			y emergency treatment provided to the			
5)	NOTIFY	NOTIFY	CEmergency center staff of King Unive			
		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	•	ou leave the Emergency Department			
		1.	Obtain copy of facility Incident Report	t from preceptor or		
		•	Charge Nurse*			
		2.	Obtain copy of Lab Results*			
		3.	Obtain copy of Emergency Department			
		4.	Call your King Faculty Clinical Instruction	ctor and inform them of the		
		TE :	incident.			
				exposure, the undergraduate student should conta		
				students should contact the appropriate clinic		
7)	FOLLOW		r and instructor as soon as possible after			
"	UP		ETE the SON Exposure Incident Report nber along with copies of the document			
	UI		follow clinical agency policy for document			
Otha	r Important Info		onow enniear agency poncy for docum	icitation and reporting of inclucin.		
one			la for following recommendations for	r follow up by the facility his/her primery as		
•			up with his/her King faculty member.	r follow-up by the facility, his/her primary ca		
-	-	-		and provider connect return to alinical training and		
•		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.				

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 bit	e 🗌 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/expo	osure and explain in detail wh	at you were doing when the injury/ exp	osure/incident
occurred, including the use of tools, equi	pment or materials.		
What body part(s) was affected?	Have you ever	required medical treatment for this part	of your body or
condition before? \Box yes \Box no Please use	e additional sheets if necessar	у:	
Student Signature	Date		
To be Completed by KING UNIVERS	ITY FACULTY, Clinical In	structor's Comments	
In addition, please review and provide ad	ditional information/clarifica	tion to the student's statement.	
King Faculty Clinical Instructor		Work #	
Cell Phone #			
Faculty Notified: Date	Time /	AM PM	
Faculty Report:			
Follow Up Actions by student already	conducted and to be conduc	eted (please note timeline)	
Are student's clinical activities restricted	? No Yes (If Yes, please des	scribe and give begin and end dates or d	ate for review
by student's personal health care prov	· •		
Signatures SON			
Signatures SON Faculty Member/Specialty Advisor		Date	
C			
Faculty Member/Specialty Advisor	Signature	Date	
Faculty Member/Specialty Advisor Program Coordinator	Signature Signature	Date Date	

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

SEMESTE R	COURSE #	HOURS	COURSE TITLE
SEM #1	NURS 5002	3	Advanced Pathophysiology
	NURS 5004	3	Advanced Physical Assessment & Health Promotion
	NURS 5014– CORE (online	3	Healthcare Informatics
		9	
SEM #2	NURS 5001 –CORE (online)	3	Research Designs in Nursing
	NURS 5006	3	Advanced Pharmacology
	NURS 5018	3	FNP I Care of Women & Families* (60 hours of clinical)
		9	
SEM #3	NURS 5000 – CORE (online)	3	Theoretical Basis of Nursing Practice
	NURS 5019	6	FNP II Care of Adults and Geriatric Populations* (180 hours of clinical)
		9	(100 hours of childen)
SEM #4	NURS 5012 -CORE (online)	3	Global Health Awareness
	NURS 5010 – CORE (online)	3	Social, Cultural & Political Perspectives on Healthcare & Delivery Systems
	NURS 5023	3	FNP III Care of Pediatric Populations* (120 hours of clinical)
		9	
SEM #5	NURS 5024	6	FNP IV Seminar and Intensive Practicum (240 hours of clinical)
	NURS 5026	3	Practice Management and Advanced Role Development
	NURS 5990	0	Final Comprehensive Competency Demonstration
		9	
Total Credits		45	

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

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

SEMESTER	COURSE #	HOURS	COURSE TITLE
SEMESTER 1	NURS 5014 - CORE	3	Healthcare Informatics
	NURS 5050	3	Visionary Leadership in Nursing 1.75 didactic/ 1.25 clinical(75 hrs)
		6	
SEMESTER 2	NURS 5000 - CORE	3	Theoretical Basis of Nursing Practice
	NURS 5001 - CORE	3	Research Designs in Nursing
		6	
SEMESTER 3	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	
SEMESTER 4	NURS 5010 - CORE	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	
SEMESTER 5	NURS 5012 - CORE	3	Global Health Awareness
	NURS 5060	3	Transformational Strategies – Practicum III 2 didactic/1 clinical* (60 hrs)
	NURS 5990	0	Final Comprehensive Competency Demonstration
		6	
Total Semester Hours		35	

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

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

SEMESTER	COURSE #	HOURS	COURSE TITLE
SEMESTER 1	NURS 5002	3	Advanced Pathophysiology
	NURS 5014 -CORE	3	Healthcare Informatics
	NURS 5030	3	Principles of Teaching and Learning
		9	
SEMESTER 2	NURS 5000 - CORE	3	Theoretical Basis of Nursing Practice
	NURS 5001 - CORE	3	Research Designs in Nursing
		6	
SEMESTER 3	NURS 5006	3	Advanced Pharmacology
	NURS 5032	3	Curriculum Development & Implementation in Nursing Education
		6	
SEMESTER 4	NURS 5004	3	Advanced Physical Assessment & Health Promotion
	NURS 5010 - CORE	3	Social, Cultural & Political Perspectives on Healthcare & Delivery Systems
	NURS 5036	4	Nursing Education Practicum (180 hrs)
		10	
SEMESTER 5	NURS 5012 -CORE	3	Global Health Awareness
	NURS 5035	5	Focused Clinical Seminar and Practicum (240 hrs)
	NURS 5990	0	Final Comprehensive Competency Demonstration
		8	
Total Semester Hours		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.

Attachment G KING UNIVERSITY SCHOOL OF NURSING Pediatric Nurse Practitioner (PNP) Plan of Study

SEMESTER	COURSE #	HOURS	COURSE TITLE
SEMESTER 1	NURS 5002	3	Advanced Pathophysiology
	NURS 5004	3	Advanced Physical Assessment & Health Promotion
	NURS 5014 -CORE	3	Healthcare Informatics
		9	
SEMESTER 2	NURS 5000- CORE	3	Theoretical Basis of Nursing Practice
	NURS 5001- CORE	3	Research Designs in Nursing
	NURS 5018	3	Care of Women & Families*
		9	(60 hours of clinical)
CEMECTED 2			
SEMESTER 3	NURS 5006	3	Advanced Pharmacology
	NURS 5021	6	Pediatric Growth and Development/Health Promotion and
			Illness Prevention*
			(180 hours of clinical)
		9	
SEMESTER 4	NURS 5012-CORE	3	Global Health Awareness
	NURS 5010 - CORE	3	Social, Cultural & Political Perspectives on Healthcare & Delivery Systems
	NURS 5023	3	Care of Pediatric Populations* (120 hours of clinical)
		9	· · · ·
SEMESTER 5	NURS 5025	6	Seminar and Intensive Practicum – Pediatric Acute Illness and Chronic Disease Management (240 hours of clinical)
	NURS 5026	3	Practice Management and Advanced Role Development
	NURS 5990	0	Comprehensive Assessment
		9	
Total Credits		45	

* 60 clinical contact hours per clinical hour per semester. Total 600 clinical hours

Attachment H

KING UNIVERSITY SCHOOL OF NURSING GRADUATE STUDENT REQUIREMENTS AND CHECKLIST

Outlined below are the requirements you must have in place **<u>BY THE DEADLINES NOTED</u> <u>BELOW.</u>** All completed forms, documents and requirements must be submitted to CastleBranch by the deadlines stated. (Please call your faculty advisor or administrative assistant if you have any questions 423-652-6312).

CastleBranch Clinical Document System

Students must access the CastleBranch Clinical Document System that contains all of the needed student clinical forms at <u>https://portal.castlebranch.com/KC96</u> Follow the instructions to complete your order for **KC99im:** KC99 MSN and create your student account. You may use a personal email as you will have access to this information after graduation.

DISCLAIMER:

<u>ALL</u> requirements listed below must be met **before** any clinical assignments will be considered and approved. Students should allow 6-8 weeks (after submitting site requests) to receive clinical site clearance, and any student who does not comply with the requirements deadline should expect further delay in their approval process.

The below requirements are satisfactory for students to attend MOST clinical sites, however, please note that some sites may require additional information before a student can be approved to attend their site. In such instances, the student will be responsible to comply with the clinical sites requirement(s) and assume any associated costs, if any, in order to attend that particular clinical site.

YEAR ONE REQUIREMENTS (New Admission Students):

DEADLINE:

- Students with a Fall Admission: July 1st (this is prior to the start of your first semester in the nursing program).
- Students with a Spring Admission: November 1st (this is prior to the start of your first semester in the nursing program).

These requirements are considered LATE, if you have not submitted them by the above deadline.

- □ KU SON Student Health History Form: student to complete, sign, date
- □ **KU SON Healthcare Provider Health and Physical Assessment Form**: to be completed and signed by a physician or healthcare provider; physical examination must occur prior to starting clinicals
- □ **KU SON Record of Immunizations**: to be completed and signed by a physician or healthcare provider. Must have appropriate tetanus vaccination within past 10 years.
- □ **KU SON Hepatitis B Vaccine**: to be completed and signed by the student, as well as attach confirmatory paperwork.
- □ **KU SON Negative TB Testing or High-Risk Exposure Screening Tool**: student to complete, sign and date; Documentation of TB skin testing if available, if required based on screening tool or required by clinical agency. Please note, some clinical agencies require yearly TB skin testing.

- □ **Influenza Vaccine**: Documentation of receiving the yearly influenza immunization must be submitted. (*must have received by November* 1^{st})
- □ **Criminal Background Check**: Students must complete the required Criminal Background Check through the King University Security Department per the attached Criminal Background Check Policy. This is a **yearly** requirement. Students must sign and return the Criminal Background Check Policy Acknowledgment.
- □ **CPR Certification**: Documentation of current CPR certification. American Heart Association BLS for Healthcare Providers (CPR and AED) preferred. Course *must* include certification for adult, child and infant. The student is responsible for maintaining current certification status with a copy on file in the CastleBranch system.
- □ **RN License**: Documentation of current RN license (State of Tennessee license or Enhanced compact state with privileges to practice in the state of TN and in any state where you will be conducting clinical practicum hours). If you have questions, please contact clinical faculty or program coordinator. The student is responsible for maintaining a current RN license with a copy on file in the CastleBranch system
- □ **KU MSN Student Handbook Acknowledgement**: After reading the handbook for the current academic year in its entirety, student will acknowledge review of handbook in the CastleBranch system.
- □ KU SON HIPAA Acknowledgement form
- □ Urine Drug Screen: completed via Castlebranch by selecting new program code KC99dt and "I need to order my drug test"

<u>ANNUAL REQUIREMENTS FOR ALL SUBSEQUENT YEARS (Continuing Students – based</u> <u>on your admission semester):</u>

DEADLINE:

- **Continuing Students who had a Fall Admission: Forms due July 1st** (this is prior to the start of your Fall semester).
- Continuing Students who had a Spring Admission: Forms due November 1st (this is prior to the start of your Spring semester).

These requirements are considered LATE, if you have not submitted by the above deadline.

- □ KU SON Statement of Continuing Health Status: student to complete, sign and date
- □ **KU SON Negative TB Testing or High-Risk Exposure Screening Tool**: student to complete, sign and date; Documentation of TB skin testing if available, if required based on screening tool or required by clinical agency.
- □ **Influenza Vaccine**: Documentation of receiving the influenza immunization must be submitted (must have received by November 1st)
- □ **Criminal Background Check**: Students must complete the required Criminal Background Check through the King University Security Department per the attached Criminal Background Check Policy. This is a **yearly** requirement.
- □ **CPR Certification**: Documentation of current CPR certification. AHA BLS for Healthcare Providers (CPR and AED) preferred. Course *must* include certification for adult, child and infant. The student is responsible for maintaining current certification status with a copy on file in the CastleBranch system.
- □ **RN License**: Documentation of current RN license (State of Tennessee license or Enhanced compact state with privileges to practice in the state of TN and in any state where you will be conducting

clinical practicum hours). The student is responsible for maintaining a current RN license with a copy on file in Castle Branch.

- □ **KU MSN Student Handbook**: After reading the MSN handbook for the current academic year in its entirety, student will acknowledge review of handbook in the CastleBranch system.
- **KU SON HIPAA Acknowledgement form**
- □ **Urine Drug Screen**: completed via Castlebranch by selecting new program code **KC99dt:** and "I need to order my drug test"



School of Nursing Criminal Background Check Policy June 26, 2018

Background Check Policy General Information/Process/Cost

• King University requires all students to complete a criminal background check upon admission to the School of Nursing and enrollment in clinical nursing courses. This is to ensure a safe clinical environment for both students and the public and to meet the contractual requirements of area healthcare facilities.

Failure to undergo the background check by the deadlines may result in failure of clinical nursing classes and/or dismissal from the nursing program.

- The criminal background check requirement must be completed at least 30 days prior to the student entering their first semester in the nursing program.
- Each student is required to complete and clear a Background Check yearly through the King University Security Office. Students are responsible for all costs associated with the criminal background check. The cost of each background check is **\$65.00**.
- Nursing students should be aware that clinical facilities have the right to preclude students with certain criminal histories from any facility. Additionally, any state board of nursing may deny licensure based on a student's criminal history. Even if licensure is granted, certain employers may preclude applicants with certain criminal histories. Questions regarding criminal history and state licensure should be discussed with the appropriate State Board of Nursing.
- 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. 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.
- If a criminal history report provides an indication of an arrest without an outcome the student will be required to provide certified court paperwork to the King University Security Department, the School of Nursing and these documents may be reviewed by clinical agencies. Students must agree that all results are available to the program and the clinical sites associated with the program. A committee designated by the Dean of the School of Nursing will convene to review the student's criminal history and associated documents and make a determination if the students can progress in the SON.
- 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 the law for such violation does not include a period of confinement.

I. Criminal Background Check Process

1. Information to schedule a Background Check and fingerprinting is located on the Security Office section of the King University website or follow the link below:

http://king.edu/security/securityservices/fingerprinting.aspx

- 2. Click on "School of Nursing Background Check Form". This will take you through the process to schedule your Background Check. For questions or issues, contact the Security Office at 423-652-4366 or email <u>jfrazier@king.edu</u>
- 3. The student will 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.
 - a. As part of the admission process to the School of Nursing, students must supply a request for 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. Once the fingerprinting process is complete, students will document the date of fingerprint submission in the student's Castlebranch account.
- 5. The Security Office is responsible for relaying criminal background results of "clear" or "indication" to the School of Nursing

The student shall not begin clinicals, under any circumstances, until the student has received clearance from the School of Nursing via KU email

II. Criminal Background Check Indicating a Criminal Conviction/ Findings of Past Criminal Conviction

Upon notification that a student's background check results in a finding of past criminal conviction, the following will occur:

- 1. The Security Department notifies the School of Nursing that the student has an indication of criminal record.
- 2. The King University Security Department in consultation with the Dean of the School of Nursing exercising due diligence will review report(s) of past criminal behavior. They will determine whether the student in question should continue in the School of Nursing. Factors influencing this determination may include the likelihood of the student's ability to receive a license and/or to participate in clinicals.
- 3. The SON will send a letter to the student to inform of the process to obtain clearance at the clinical sites or dismissal from the program based on the results of the background check indication(s).

4. For clinical clearance, the letter will explain it is the student's responsibility to sign a waiver with the Security Office, obtain a copy of the background check result, schedule a meeting with the clinical agency's authorized designee to discuss the results of the background check findings or send background check results to the agency designee and seek permission to complete a clinical rotation within that clinical agency.

The Student's responsibilities include:

- 1. The student should contact the KU Security Department to sign the Criminal Offense Indication Participation Waiver and to provide any additional documentation requested.
 - a. In the event 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 in the School of Nursing.
- 2. The student should contact each clinical site designee and schedule a meeting to discuss the background check results or provide the original criminal background check documentation to the authorized clinical designee for verification and review.
- 3. If permission is granted, the student should request a letter be sent to the School of Nursing Dean, <u>on agency letterhead</u>, granting permission for the student to complete clinical hours at the agency. All correspondence must be on agency letterhead and all emails must be from agency email.

The clinical agency responsibilities include:

- 1. The clinical agency's authorized designee will review the criminal conviction record and determine "clear/not clear" of the nursing student applicant.
- 2. If the student is "clear" to attend clinical at the clinical agency, the authorized designee will place on the clinical agency's letterhead whether the student is permitted to complete the clinical experience at that the healthcare agency. The signed authorization letter is to be submitted to the SON Dean via email, fax or by the US Postal Service (King University, 1350 King College Road, White Hall Room 116 for Dean, School of Nursing). For email or fax information call the School of Nursing at (423) 652-6312. This process is to be followed by the student for each semester and each clinical experience in which the student is scheduled to participate while in the nursing program at King University.
 - a. If the student retains the same clinical site for subsequent semesters, the student is permitted to obtain written permission from the clinical agency upon the initial approval only, unless a new conviction or arrest has occurred since the previous background check was completed.
- Previous offenses that have been investigated by the KU Security Department will not be referred to the School of Nursing. In addition, no additional waiver form will be required to be completed by the student.

4. Subsequent communications from the SON to the student will occur through the King University email account.

III. Process for Criminal Background Check Indicating No Criminal Conviction/ Nursing Student Applicant Criminal Background Check "Cleared"

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

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 Dean of Students or the Director of Security within 72 hours of being arrested and/or criminally charged or convicted.