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DESCRIPTION OF FLORIDA INTERNATIONAL UNIVERSITY

South Florida, with an estimated population of over four million people in Miami-Dade, Broward, and Monroe Counties in 2010, is one of the most artistically expressive, ethnically diverse, and cosmopolitan regions in the United States. As the gateway to Latin America and the Caribbean, it is a global center for trade, finance, manufacturing, tourism, and health care.

In this milieu, Florida International University (FIU) was chartered by the Florida Legislature in 1965 to offer upper division and graduate programs. FIU opened its doors in 1972 to the largest opening-day enrollment in the history of American higher education. Initially a two-year upper-division school with limited graduate programs, FIU added lower-division classes in 1981 and received authority to begin offering degree programs at the doctoral level in 1984. The University has two main campuses, the 344-acre Modesto A. Maidique Campus (MMC) in western Miami-Dade County, and the 200-acre Biscayne Bay Campus (BBC) in northeast Miami-Dade County.

Committed to both high quality and access, FIU meets the educational needs of full-time and part-time undergraduate and graduate students, and lifelong learners. Reflecting the vibrant ethnic diversity of South Florida, FIU students are 61% Hispanic, 15% White, 13% Black, 4% Asian/Pacific Islander, and 7% other minorities.

FIU is a public research university offering a broad array of undergraduate, graduate, and professional programs in carrying out the University’s mission of “high-quality teaching, state-of-the-art research and creative activity, and collaborative engagement with our local and global communities” in eleven colleges and schools: College of Architecture and the Arts, College of Arts and Sciences, College of Business Administration, College of Education, College of Engineering and Computing, College of Law, Herbert Wertheim College of Medicine, College of Nursing and Health Sciences, Chaplin School of Hospitality and Tourism Management, School of Journalism and Mass Communication, and the Robert Stempel College of Public Health and Social Work.

Through these colleges and schools, FIU offers more than 175 bachelor, masters, and doctoral degree programs and conducts basic and applied research. Interdisciplinary centers and institutes conduct collaborative research to seek innovative solutions to economic, technological, and social problems. Numerous programs are also offered at off-campus locations and online. With a fall 2011 student body of over 47,000, more than 1,000 full-time instructional and research faculty, and over 9,000 degrees awarded annually, FIU is the largest university in South Florida and one of the 25 largest public universities in the nation. More than 110,000 FIU alumni live and work in South Florida.

Ninety-nine percent of FIU full-time tenured or tenure-track instructional faculty members hold doctorates or the highest degree attainable in their fields. FIU is the only urban public university in the state chartered with a Phi Beta Kappa chapter, the nation’s oldest scholarly honorary society. The Carnegie Foundation for the Advancement of Teaching classifies FIU as a Research University/High Research Activity. The University’s annual research expenditures exceed $100 million. All academic programs of the University are approved by the Florida Board of Governors and the FIU Board of Trustees. The University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS) to award bachelor, masters, and doctoral degrees. SACS reaffirmed FIU’s accreditation in 2010. Degree programs at FIU are accredited or approved by the appropriate specialized accreditation agency.
On August 28, 2009, Florida International University’s fifth president, Mark B. Rosenberg, took the oath of office. Dr. Rosenberg is former chancellor of the State University System of Florida and the first FIU faculty member to ascend to the presidency of the University.

DESCRIPTION OF THE NICOLE WERTHEIM COLLEGE OF NURSING AND HEALTH SCIENCES

The academic nursing programs are located in the College of Nursing and Health Sciences (NWCNHS) and are housed on the Modesto A. Maidique Campus (MMC) in the Academic Health Center 3 Building, and on the Biscayne Bay Campus (BBC) in the Academic 2 Building. The College's baccalaureate and master’s degree programs are fully accredited by the Commission on Collegiate Nursing Education (initial accreditation occurred in 2008), the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs (re-accreditation occurred in 2010), and are approved by the Florida Board of Nursing (re-approval occurred in 2011.)

A broad range of nursing degree programs are currently offered by the College and include a bachelor’s degree in nursing, a master's degree in nursing, and a doctor of philosophy degree in nursing. A post-master’s degree, the Doctor of Nursing Practice, was implemented in January, 2012. The nursing unit holds institutional memberships in the American Association of Colleges of Nursing (AACN), the National League for Nursing (NLN), the Southern Collegiate Council of Nursing of the Southern Regional Education Board, the Florida Nurses Association (FNA), the Nursing Shortage Consortium of South Florida, and the South Florida Hospital and Health Care Association.

History
Nursing was present on the FIU campus from 1972 to 1978 when a RN-BSN degree was offered through the School of Health and Social Work. In 1982 the School of Nursing was established at BBC as an autonomous upper division unit through start-up funds provided by nine Miami hospitals. These health care organizations were concerned about the acute nursing shortage and were interested in contributing to baccalaureate education for qualified men and women who could assume beginning leadership positions in health care in the rapidly growing south Florida region.

During 1997, the School of Nursing merged with the College of Health to create a new academic unit, the College of Health Sciences. The College of Health Sciences included the School of Nursing and the Departments of Physical Therapy, Occupational Therapy, Dietetics and Nutrition, Medical Laboratory Sciences, Public Health, Health Information Management, and Speech-Language Pathology. The rationale for the merger was to enhance one of the University’s strategic themes, Health, through the consolidation of the health professions programs and development of interdisciplinary education and research.

During 1999, the College of Health Sciences merged with another academic unit, the College of Urban and Public Affairs, which gave rise to a new college, the College of Health and Urban Affairs (CHUA). CHUA included four schools: School of Nursing; School of Health; School of Social Work; and the School of Policy and Management. The purpose of the restructuring was to consolidate the health related fields in one college and to enhance interdisciplinary education and research in these areas. Dr. Ronald Berkman was appointed Executive Dean of the College and Dr. Divina Grossman was appointed Dean of the School of Nursing.

In December 2004, the School of Nursing joined its sister schools in CHUA by relocating from the BBC to a newly constructed Health and Life Sciences 2 building at the MMC, a distance of approximately 20
miles. The move to the MMC was part of an overall strategy to locate nursing with other health related units in the context of the proposed medical school and the development of the academic health sciences complex. The new building provided nursing classrooms, teaching laboratories, offices, and research space. To provide for expansion, the School retained offices, classrooms, and laboratories at the BBC.

On October 1, 2006 the School of Nursing was transformed to the College of Nursing and Health Sciences (NWCNHS) when CHUA was disaggregated into three (3) autonomous units: the NWCNHS, the College of Social Work, Justice, and Public Affairs, and the Stempel School of Public Health. The NWCNHS included Nursing and the Departments of Physical Therapy, Occupational Therapy, Health Information Management, Health Sciences, Communication Sciences and Disorders, and Athletic Training. The disaggregation provided autonomy for the educational units as they sought accreditation or re-accreditation from their professional agencies and laid the foundation for the future health sciences complex. Dr. Divina Grossman was appointed Dean of the NWCNHS and reported to the Provost.

In August 2006, as part of FIU’s Strategic Initiatives, a baccalaureate of science in nursing (BSN) program (the foreign-educated physician to BSN track) was re-established at the BBC. In December 2006, University administrators announced that a new NWCNHS building would be erected on the MMC. The $47 million 113,000 sq. ft. building would house the College’s combined disciplines that were scattered throughout two buildings and rapidly outgrowing them. The NWCNHS building (AHC 3), completed in December 2009, became part of the academic health sciences complex envisioned at the MMC.

In 2009, the University-wide budget cutting process required a feasibility review of all NWCNHS programs and tracks. Two College departments (Health Information Management and Health Sciences) were phased out as a result of the review. NWCNHS expansion re-occurred in 2011 with the assimilation of Health Services Administration, a baccalaureate level program previously housed in the Stempel College of Public Health and Social Work. In February 2010, NWCNHS Dean Divina Grossman was promoted to Vice-President of Engagement at FIU; Dr. Sharon Pontious was appointed Interim Dean until July 1, 2011 when Dr. Ora Strickland was appointed NWCNHS Dean.

The current NWCNHS consists of the Nursing Unit as well as Departments of Physical Therapy, Occupational Therapy, Communication Sciences and Disorders, Athletic Training, and Health Services Administration. The nursing undergraduate and graduate academic programs are administered by Program Directors; other NWCNHS academic departments are administered by Chairs.

**Bachelor of Science in Nursing (BSN) Program**

The Bachelor of Science in Nursing (BSN) degree was approved as an upper division program in 1982 by the Board of Regents of the State University System. The National League for Nursing (NLN) granted initial accreditation in 1985. Upon completion of the BSN Program, the basic (generic) student graduate is eligible to become licensed as a registered nurse. The nursing unit also offers a RN-BSN completion track. Graduates of the BSN Program are eligible for master’s level studies. In addition to the generic BSN Program, the nursing unit offers a track for foreign-educated physicians (FEPs) to complete the BSN. The FEP-BSN track, the first of its kind in the nation, enables foreign-educated physicians who are unemployed or underemployed, to complete a BSN. In 2010 the FEP-BSN track was transformed to an accelerated combined BSN/MSN track; FEP students who qualify for admission to the MSN Program continue into the nurse practitioner specialty tracks; students not admitted to the MSN Program complete the BSN degree. The BSN program at Florida International University is accredited by the Commission on
The Master of Science in Nursing (MSN) Program was approved by the Board of Regents in 1992. The National League for Nursing Accrediting Commission granted initial accreditation in 1993. The MSN Program offers nurse practitioner specialty tracks in Advanced Adult-Gerontology Health Nursing, Advanced Child Health Nursing, Advanced Family Health Nursing, Advanced Psychiatric-Mental Health Nursing, and Anesthesiology Nursing. One specialty track (Nursing Administration) is under moratorium for admissions since 2008 because of low enrollments. Graduates of the program are qualified to apply for certification examinations in their specialty areas. Nurse practitioner graduates who pass nationally certification examinations can obtain advanced registered nurse practitioner (ARNP) certification through the Florida Board of Nursing. Post-master's nurse practitioner certificates in adult nursing, family nursing, and child nursing and a certificate in nursing education are also offered. Graduates of the MSN program are eligible for doctoral level studies. The MSN program at Florida International University is accredited by the Commission on Collegiate Nursing Education, (CCNE), One Dupont Circle, NW Suite 530, Washington, DC 20036, 202-887-6791.

The Doctor of Nursing Practice (DNP) Program was approved for implementation by the FIU Board of Trustees and Florida Board of Governors in 2010. The DNP Program offers a post-masters plan of study for the registered nurse with specialty preparation in advanced clinical nursing practice (nurse practitioners, nurse anesthetists, nurse midwives); as well as a combined MSN-DNP option, effective Fall 2014. The DNP program at Florida International University is accredited by the Commission on Collegiate Nursing Education, (CCNE), One Dupont Circle, NW Suite 530, Washington, DC 20036, 202-887-6791.

The Doctor of Philosophy in Nursing (PhD) Program was approved by the Florida Board of Governors in 2003. The program's purpose is to develop individuals who will be leaders and educators in generating and applying the science needed to guide nursing practice. Graduates have the knowledge and skills to conduct research in the health care field, and direct and guide application of other evidence-based health care findings to improve the health of people from diverse cultures and underserved populations. In 2009 a BSN-PhD track was added for students who demonstrate outstanding academic accomplishment in their undergraduate courses.

MSN PROGRAM & CURRICULUM

MSN Program Purposes

The purpose of the MSN program is to prepare graduates for advanced nursing roles in practice, education, research, and leadership.
**MSN Program Objectives**

The objectives of the MSN program are to prepare graduates as:

- Leaders and change agents in the delivery of high-quality, accessible, culturally competent healthcare in a global society.

- Professional advanced practice nurses who use communication, collaboration, and synthesis of evidence-based practice, scholarship, and research in the delivery of health care for global health systems.

- Facilitators in designing inter-professional healthcare teams, who use an understanding of organization and environment, and are able to integrate care services across global health systems.

- Critical thinkers who use scientific evidence, patient culture, values, and preferences to investigate clinical problems and translate evidence into safe, cost effective innovative practice that adheres to the ethical tradition of nursing.

The MSN Anesthesiology Nursing Program has specific educational objectives and outcome criteria consistent with the requirements of its accrediting agency (Council on Accreditation of Nurse Anesthesia Educational Programs [COA] and the Florida Nurse Practice Act:

The student will demonstrate they have acquired knowledge, skills and competencies in patient safety, perianesthetic management, critical thinking, communication, and the competencies needed to fulfill their professional responsibility. Students will demonstrate competence, safety, and confidence in the ability to manage anesthesia care at a level of independence, consistent with that of a new graduate upon entry into practice.

- **Patient safety** is demonstrated by the ability of the graduate to:
  - Be vigilant in the delivery of patient care.
  - Protect patients from iatrogenic complications.
  - Participate in the positioning of patients to prevent injury.
  - Conduct a comprehensive and appropriate equipment check.
  - Utilize standard precautions and appropriate infection control measures.

- **Individualized perianesthetic management** is demonstrated by the ability of the graduate to:
  - Provide care throughout the perianesthetic continuum.
  - Use a variety of current anesthesia techniques, agents, adjunctive drugs, and equipment while providing anesthesia.
  - Administer general anesthesia to patients of all ages and physical conditions for a variety of surgical and medically related procedures.
  - Provide anesthesia services to all patients, including trauma and emergency cases.
  - Administer and manage a variety of regional anesthetics.
  - Function as a resource person for airway and ventilatory management of patients.
  - Possess current advanced cardiac life support (ACLS) recognition.
  - Possess current pediatric advanced life support (PALS) recognition.
  - Deliver culturally competent perianesthetic care throughout the anesthesia experience.

- **Critical thinking** is demonstrated by the graduate’s ability to:
  - Apply knowledge to practice in decision-making and problem solving.
- Provide nurse anesthesia care based on sound principles and research evidence.
- Perform a preanesthetic assessment and formulate an anesthesia care plan for patients to whom they are assigned to administer anesthesia.
- Identify and take appropriate action when confronted with anesthetic equipment related malfunctions.
- Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.
- Calculate, initiate, and manage fluid and blood component therapy.
- Recognize and appropriately respond to anesthetic complications that occur during the perianesthetic period.
- Pass the Council on Certification of Nurse Anesthetists’ (CCNA) certification examination in accordance with CCNA policies and procedures.

- Communication skills are demonstrated by the graduate’s ability to:
  - Effectively communicate with individuals influencing patient care.
  - Utilize appropriate verbal, nonverbal, and written communication in the delivery of perianesthetic care.

- Professional responsibility is demonstrated by the graduate’s ability to:
  - Participate in activities that improve anesthesia care.
  - Function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice.
  - Interact on a professional level with integrity.
  - Teach others.
  - Participate in continuing education activities to acquire new knowledge and improve his or her practice.


Nursing Unit

Organizing Framework: BSN, MSN, and Doctoral (DNP & PhD) Programs
**Curriculum Framework Definitions**

**COMMUNICATION & COLLABORATION.** (*Pervasive Thread*). Communication is the process by which information, ideas, beliefs, values, and feelings are interchanged. Communication involves symbols, such as written words, gestures, images, and spoken language. Communication is influenced by inherent capacities, socio-cultural background, environment, attitudes, past experiences, knowledge of subject matter, and ability to relate to others. Communication is also affected by technological advances in healthcare. Communication is inherent in collaboration and requires critical thinking skills.

Collaboration is the process of making and carrying out decisions with other people regarding health care and research in a caring context. Knowledge of health-care systems includes an understanding of the organization and environment in which nursing and health care is provided. Collaborative leadership is a set of skills to accomplish both individual and collective goals. Collaborative leaders must be excellent communicators of a clear vision based in theories of change and understanding of health care dynamics. Effective communication and collaboration are the foundation for developing therapeutic relationships for the purpose of providing patient care, conducting research, and collaborating with members of teams and communities at local, regional, national, and global levels.

**CULTURAL COMPETENCE.** (*Pervasive Thread*). Cultural competence is the integration of knowledge, behaviors, skills, and attitudes required to provide quality health care and conduct research with people from different cultures, transcending national boundaries. Cultural competence involves tailoring health care delivery to meet patients’ ecological, biosocial, cultural and linguistic needs in an effort to improve outcomes and eliminate disparities in healthcare. Cultural competence includes being able to recognize and respond to patient population health-related beliefs and values, disease incidence and prevalence, genetics and treatment outcomes. Cultural competence may be viewed as a process by which the healthcare professionals continually engage in self-evaluation and strive to effectively work within the cultural context of the individual, family, population, and/or community.

**DECISION MAKING PROCESS.** (*Pervasive Thread*). The decision making process is the formulation and revision of conclusions based on knowledge acquired. The decision making process requires reflective thought, interdisciplinary focus, global perspective, use of technology, ethical/legal considerations, and comfort with ambiguity. Critical thinking entails the acquisition of knowledge with the intent of deliberate inquiry and involves understanding of different alternatives before making decisions. The decision making process is influenced by many factors such as: patterns and similarity recognition, sense of importance of the facts, common-sense understanding, skilled “know-how” and deliberate rationality. Decision making process outcomes incorporate scientific evidence, patient culture, values and preferences, and clinical expertise.

**ETHICS.** (*Pervasive Thread*). Ethics is a set of shared values or principles that govern the way nurses interact with patients, families and other health professionals. A Code of Ethics makes explicit the primary goals, values, and obligations of a profession. Individuals who become nurses are expected not only to adhere to the ideals and moral norms of the profession, but also to embrace them as a part of what it means to be a nurse. The ethical tradition of nursing is self-reflective, enduring, and distinctive.

**EVIDENCE-BASED PRACTICE, SCHOLARSHIP & RESEARCH.** (*Vertical Thread*). Professional nursing is grounded in the application of evidence from research, expert panels, opinion leaders, research-based theories, clinical expertise, assessment data (including preferences and cultural values), and healthcare data. Basing practice on evidence from a number of sources improves outcomes in practice, education,
administration, and research at local regional, and national, global levels. Professional nurses participate in the scholarship of discovery, application, integration, and teaching. Professional nurses are committed to evaluating, creating, conducting, and communicating research findings.

**GENOMICS.** *(Pervasive Thread).* Genetics refers to the study of individual genes and their impact on single gene conditions while genomics examines all genes together and how they interact with each other, the environment, cultural, psychosocial and other factors. The study of genomics assists nurses and other health care practitioners and researchers to find better ways to promote health and prevent and treat disease in individuals, families, populations and communities.

**GLOBALIZATION.** *(Pervasive Thread).* Globalization is the system of interaction among the peoples, communities, and countries of the world. Globalization of health requires the dissemination of knowledge and the use of best evidence to impact policies and improve world health in a manner that transcends all cultural, economic, environmental, political, and social boundaries. The professional nurse utilizes an integrative, cross-disciplinary approach to effectively address health care disparities and reduce the overall burden of disease.

**GLOBAL HEALTH SYSTEMS.** *(Vertical Thread).* Global health systems encompass the personnel, institutions, commodities, information, financing, and governance strategies that support universal delivery of health promotion and preventative services in a fair and equitable manner, responding to people’s needs and expectations. Global health systems define the administration of health care in terms of market incentives, health impact, consumer satisfaction, and performance monitoring.

**HEALTH/ILLNESS MANAGEMENT.** *(Vertical Thread).* Health/illness management includes a scope of services across the health/illness continuum. Nursing practice includes management of health promotion, risk reduction/illness/injury prevention, health maintenance, health restoration, rehabilitation, palliative and end of life care for diverse individuals, families, groups, and vulnerable populations. Optimal health/illness management requires nurses to apply and synthesize knowledge, skills, behaviors, and attitudes to make decisions, develop strategies, and design integrative plans of care. Health/illness management principles and guidelines are developed from nursing and interdisciplinary research. Health/illness management starts at the undergraduate level and builds at the graduate and doctoral level with increasing depth and breadth of knowledge, synthesis of data, complexity of skills and interventions, and role autonomy.

**PROFESSIONAL NURSING.** *(Vertical Thread).* Professional nurses use a well-delineated and broad knowledge base for practice. Inherent in professional nursing is an understanding of the historical, legal, empirical, and contemporary context of research and evidence-based practice. Professional nursing requires strong critical reasoning, clinical judgment, communication, collaboration, and assessment skills. Professional nursing also requires the development and demonstration of a set of core values and principles, an ethical framework for practice, and involves accountability for one’s self and nursing practice within the parameters of professional regulation, competencies and scope of practice. Professional nurses are advocates for high quality care and are knowledgeable and active in the policy processes defining healthcare delivery systems. The professional nurse is committed to lifelong learning and continuous professional engagement, including graduate level of study. Professional nurses have advanced knowledge and clinical expertise necessary to promote health, provide care, educate, advocate, consult, and collaborate as well as facilitate change and provide organizational leadership. Professional nurses use and/or create knowledge through research.
QUALITY & SAFETY. *(Pervasive Thread).* Quality represents the desired health outcomes that are consistent with current professional knowledge. Quality care uses data to monitor the outcomes of care processes and uses improvement methods to design and test changes to continuously improve the quality and safety of health care systems. Quality care is safe, effective, patient centered, timely, efficient, and equitable. Nursing focuses on the achievement of appropriate self care, demonstration of health promoting behaviors, health-related quality of life, perception of being well cared for, and symptom management based on criteria as positive health outcomes. Patient safety is a critical component of high-quality health care. Safety minimizes risk of harm to patients and providers through both system effectiveness and individual performance. Nurses integrate quality aspects into patient safety and are a pivotal component in the integration of nursing care and the care provided by other members of the health team and health system.

TECHNOLOGY. *(Pervasive Thread).* Technology encompasses tools that are intended to enhance clinical practice and include, but are not limited to, computers, web based applications, decision support systems, monitors, data gathering devices, and other technological supports for patient care interventions and knowledge development. Knowledge and skills in information and patient care technology are critical in preparing nursing graduates to deliver quality patient care in a variety of healthcare settings.

SOURCES:

Organizing Curriculum Framework of the MSN Program

The organizing curriculum framework for the MSN program is derived from the mission, vision, and goals of the Nursing Unit and the purposes and objectives of the MSN program. The MSN organizing curriculum framework builds upon a common global concept schematically depicted as a "globe." The MSN curriculum framework is founded on the knowledge base and advances the organizing processes (vertical and pervasive threads) of the BSN curriculum on the "globe." The organizing curriculum framework for the MSN program is divided into two (2) major components: CORE KNOWLEDGE and
POPULATION/SPECIALIZATION. These two components include 1) four vertical organizing threads (Global Health Systems, Health/Illness Management, Evidence-Based Practice, Scholarship & Research, and Professional Nursing); and 2) seven pervasive organizing threads (Genomics, Communication & Collaboration, Quality & Safety, Technology, Globalization, Decision Making Process, Ethics, and Cultural Competence).

The vertical organizing threads depicted within the globe (Global Health Systems, Health/Illness Management, Evidence Based Practice, Scholarship & Research and Professional Nursing) are articulated in logical progression and toward increased complexity from the BSN and through the MSN curriculum, providing depth and breadth to the curriculum. The pervasive organizing threads of the framework depicted surrounding the globe (Genomics, Communication and Collaboration, Quality & Safety, Technology, Globalization, Decision Making Process, Ethics, and Cultural Competence) are integrated throughout the curriculum.

Students advance through each of the two major components of the MSN curriculum as programs of study are completed. Courses within the two components are delineated as 1) CORE KNOWLEDGE and 2) POPULATION/SPECIALIZATION courses. CORE KNOWLEDGE courses are taken by all MSN students regardless of population focus or specialization. POPULATION/SPECIALIZATION courses are dependent on which population or specialization the student has chosen to pursue. (NOTE: The tracks for advanced psychiatric-mental health nursing and nursing administration are currently on moratorium for admissions).

**Vertical Organizing Threads**

The vertical organizing threads of the framework include Global Health Systems, Health/Illness Management, Evidence Based Practice, Scholarship & Research and Professional Nursing. These organizing threads are articulated through logical progression and toward increased complexity in the MSN curriculum. These vertical threads reflect the mission, vision, and goals of the Nursing Unit and the purposes and objectives of the MSN program.

**Global Health Systems**

The vision of the Nursing Unit is to prepare graduates who will be globally recognized for their contribution in health care, education, leadership and research with a focus on the needs of the underserved populations. MSN graduates will be prepared as facilitators in designing inter-professional healthcare teams, who use an understanding of organization and environment, and are able to integrate care services across global health systems.

MSN students acquire foundational knowledge in global health systems in the CORE KNOWLEDGE component course: NGR 5131 Culture in Advanced Nursing Practice. For the POPULATION/SPECIALIZATION component, MSN students select one of the following clinical populations: advanced adult-gerontology health, advanced child health, advanced family health, or anesthesiology nursing. Progress in knowledge and skills in global health systems is provided in the following courses:

**For nurse practitioner students:**
• NGR 6201C/L Advanced Adult-Gerontology Nursing I/PR; NGR 6202C/L Advanced Adult-Gerontology Health Nursing II/PR; NGR 6209 Clinical Decision making in Advanced Adult-Gerontology Nursing; and NGR 6700L Role Synthesis in Advanced Advanced Adult-Gerontology Nursing PR;
• NGR 6301C/L Advanced Child Health Nursing I/PR; NGR 6302C Advanced Child Health Nursing II/PR; and NGR 6337L Role Synthesis in Advanced Child Health Nursing;
• NGR 6503C/L Advanced Psychiatric-Mental Health Nursing I/Practicum & NGR 6504C/L Advanced Psychiatric-Mental Health Nursing II/Practicum; and NGR 6560L Role Synthesis in Advanced Psychiatric-Mental Health Nursing PR.
• NGR 6601C/L Advanced Family Health Nursing I/Practicum & NGR 6602C/L Advanced Family Health Nursing II/Practicum; and NGR 6619L Role Synthesis in Advanced Family Health Nursing PR.

**For anesthesiology nursing students:**

• NGR 6492 Professional Aspects of Anesthesiology Nursing

**Health/Illness Management**

A goal of the NWCNHS nursing unit is to prepare graduates who will be able to collaborate with local, national, and international health care agencies in promoting excellence through cost effective, accessible, equitable and humanistic health care delivery systems for divergent individuals, families and communities. MSN graduates will be prepared as professional advanced practice nurses who use communication, collaboration, and synthesis of evidence-based practice, scholarship, and research in the delivery of health care for global health systems.

MSN students acquire foundational knowledge in the health-illness management continuum in the CORE KNOWLEDGE component courses: NGR 5141 Pathophysiologic Basis for ANP; NGR 6172 Pharmacological Concepts in ANP; and NGR 5035C Advanced Client Assessment. For the POPULATION/SPECIALIZATION component, MSN students select one of the following clinical populations: advanced adult-gerontology health, advanced child health, advanced family health, or anesthesiology nursing. Progress in knowledge and skills in health-illness management is provided in the following courses:

**For nurse practitioner students:**

• See courses under Global Health Systems

**For anesthesiology nursing students:**

NGR 6421 Principles of Anesthesiology Nursing I, NGR 6460 Pharmacology of Anesthesiology Nursing I, NGR 6493 Technology in Anesthesiology Nursing, NGR 6431L Anesthesiology Nursing Practicum I, NGR 6404 Advanced Bioscience for Anesthesiology Nursing I, NGR 6422 Principles Anesthesiology Nursing II (OB/Peds), NGR 6461, Pharmacology of Anesthesiology Nursing II, NGR 6432L Anesthesiology Nursing Practicum II, NGR 6490 Regional Anesthesia, NGR 6423 Principles of Anesthesiology Nursing III (CVT), NGR 6433L Anesthesiology Nursing Practicum III, NGR 6405 Advanced Bioscience for Anesthesiology Nursing II, NGR 6434L Anesthesiology Nursing Practicum IV, NGR 6424 Principles of Anesthesiology Nursing IV (Emergency), NGR 6435L Anesthesiology Nursing
Evidence-Based Practice, Scholarship & Research
A goal of the NWCNHS nursing unit is to prepare nursing graduates to promote, expand and validate the scientific base of nursing knowledge and practice through the discovery, organization and transmission of research-based knowledge, skills and values. MSN graduates will be prepared as critical thinkers who use scientific evidence, patient culture, values, and preferences to investigate clinical problems and translate evidence into safe, cost effective innovative practice that adheres to the ethical tradition of nursing. These scholarly endeavors will provide a foundation MSN graduates to pursue post-master’s study.

MSN students acquire foundational knowledge in evidence-based practice, scholarship and research in the CORE KNOWLEDGE component courses: NGR 5110 Theories in Nursing and NGR 5810 Research Methods in Nursing. Students work with faculty conducting research in the research project course: NGR 6910C Research Project. In the POPULATION/SPECIALIZATION component, MSN students select one of the following clinical populations: advanced adult-gerontology health, advanced child health, advanced family health, or anesthesiology nursing. Progress in knowledge and skills in evidence-based practice, scholarship and research and the ability to apply this knowledge in an advanced practice role is further developed in the following courses:

For nurse practitioner students:

- See courses under Global Health Systems

For anesthesiology nursing students:

- See courses under Health/Illness Management

Professional Nursing
A goal of the NWCNHS nursing unit is to prepare graduates for leadership roles in basic and advanced professional nursing practice in a rapidly changing, multicultural, multiethnic, global environment. The purpose of the MS program is to prepare graduates for advanced nursing roles in practice, education, research, and leadership. MSN graduates will be prepared to be leaders and change agents in the delivery of high quality, accessible, culturally competent health care in a global society.

MSN students are introduced to and acquire knowledge for developing an understanding of the roles of the advanced practice nurse within the context of professional nursing in the CORE KNOWLEDGE component courses of NGR 5141 Pathophysiologic Basis for ANP; NGR 6172 Pharmacological Concepts in ANP; NGR 5035C Advanced Client Assessment; NGR 5110 Theories in Nursing; NGR 5810 Research Methods in Nursing and NGR 6910C Research Project. In the POPULATION/SPECIALIZATION component, MSN students select one of the following clinical populations: advanced adult-gerontology, advanced child health, advanced family health, advanced psychiatric-mental health or anesthesiology nursing. Progress in knowledge and skills in understanding the role of the advanced practice nurse and the ability to apply this knowledge in an advanced practice role is further developed in the following courses:

For nurse practitioner students:
See courses under **Global Health Systems**

**For anesthesiology nursing students:**

- NGR 6492 Professional Aspects of Anesthesiology Nursing
- In addition, see courses under **Health/Illness Management**
Pervasive Organizing Threads

The pervasive organizing threads of the framework include Genomics, Communication and Collaboration, Quality & Safety, Technology, Globalization, Decision Making Process, Ethics, and Cultural Competence. These organizing threads are integrated throughout the curriculum and are found throughout course objectives in all components of the programs of study.

MSN Curriculum Components & Plan

Students advance through each of the two major components of the MSN curriculum as programs of study are completed. Courses within the two components are delineated as 1) CORE KNOWLEDGE and 2) POPULATION/SPECIALIZATION courses. CORE KNOWLEDGE courses are taken by all MSN students regardless of population focus or specialization. POPULATION/SPECIALIZATION courses are dependent on which population or specialization the student has chosen to pursue.

Allocation for course credits is based on the University formula. The ratio of credit to contact hour for theory courses is 1:1. The ratio of credit to contact hour for laboratory courses is 1:2. The ratio of credit to contact hour for clinical courses is 1:5. This ratio assures the level of learning achievement and compliance with regulatory requirements necessary for the competent role performance of the MSN graduate. Therefore, the advanced adult-gerontology health, advanced child health, and advanced psychiatric-mental health NP students complete a minimum of 630 hours of clinical practice. Advanced family health nurse practitioner students complete a minimum of 770 hours of clinical practice. Anesthesiology nursing students complete a minimum of 3,240 hours in clinical practice as required by the Council on Accreditation of Nurse Anesthesia Educational Programs.

CORE KNOWLEDGE Component

The CORE KNOWLEDGE component required of all MSN students consists of seven (7) courses of three (3) credits each (21 total credits): NGR 5110 (Theories in Nursing); NGR 5035C (Advanced Client Assessment); NGR 5141 (Pathophysiological Basis of Advanced Nursing Practice); NGR 6172 (Pharmacological Concepts in Advanced Nursing Practice); NGR 5131 (Culture and Advanced Nursing Practice); NGR 5810 (Research Methods in Nursing) and NGR 6910C Research Project. These courses are completed within the prescribed plan of study for each specialty track.

POPULATION/SPECIALIZATION Component

In the POPULATION/SPECIALIZATION component, students select one of four clinical domains of specialization: Advanced adult-gerontology health, advanced child health, advanced family health, or anesthesiology nursing. Students utilize and develop their knowledge and skills in one or more clinic settings under the supervision of a nurse practitioner or physician preceptor or certified registered nurse anesthetist (CRNA).

For nurse practitioner students:

Students in advanced adult or child tracks are awarded three (3) credits for each clinical related course. Students in the advanced family track are awarded four (4) credits for each clinical related course to allow for the added lifespan of practice experience required of these practitioners. Clinical decision making courses are three (3) credit courses. For all NP tracks, the Role Synthesis course is a four (4) credit course composed of one theory credit and three clinical credit hours.
Advanced Adult-Gerontology Nursing students complete NGR 6201C/6201L Advanced Adult-Gerontology Nursing I Theory/Practicum followed by NGR 6202C/6202L Advanced Adult-Gerontology Nursing II Theory/Practicum, and finally NGR 6700L Role Synthesis in Adult-Gerontology Practice and NGR 6209 Clinical Decision Making in Adult-Gerontology Nursing.


Advanced Family Health Nursing students complete NGR 6601C/6601L Advanced Family Health Nursing I Theory/Practicum followed by NGR 6602C/6602L Advanced Family Health Nursing II Theory/Practicum, and finally NGR 6619L Role Synthesis in Advanced Family Practice and NGR 6748 Clinical Decision Making in Family Health Nursing.


For anesthesiology nursing students:

Anesthesiology Nursing students complete a minimum of 71 credits. These credits include 21 credits of CORE KNOWLEDGE and 50 credits of POPULATION/SPECIALIZATION. The anesthesiology nursing curriculum is designed to meet program outcomes requisite for entry into practice as a CRNA upon successful completion of a national certification examination administered by the National Board of Certification and Re-Certification of Nurse Anesthetists (NBCRNA). Anesthesiology nursing students complete a lock-step curriculum that incorporates the CORE KNOWLEDGE and POPULATION/SPECIALIZATION as outlined above and which meets, or exceeds, the educational requirements set forth by the Council on Accreditation of Nurse Anesthesia Educational Programs.

Bridge Program

In 2008, a graduate entry “bridge” option was extended to all applicants to the MSN program; the “bridge” option had existed since 2001 for the Anesthesiology Nursing track. RN applicants with a baccalaureate degree other than nursing can apply to the MSN program; however, these applicants must have completed an Associate Degree in Nursing, be licensed as a RN, and take three baccalaureate level “bridge” courses of seven (7) credits (NUR 3119 Professional Nursing: Concepts & Issues, NUR 3668 Nursing Leadership in Global Health Care, and NUR 4636C Care of Families: Community Health Nursing) to advance through the nurse practitioner or nurse anesthetist areas of specialization.

Electives

Programs of study provide an opportunity to select elective courses. Students select electives according to their individual interests and career plans, after consultation with a faculty advisor. Additional courses may be applied to the student’s plan of study after consultation with a faculty advisor. Students are encouraged to pursue electives in other academic units only when appropriate.
CURRENT ADDRESS, PHONE NUMBER AND E-MAIL ADDRESS
Florida International University (FIU) and the Nicole Wertheim College of Nursing and Health Sciences (NWCNHS) require that students keep current addresses and telephone numbers on file. E-mail addresses are also valuable for communications. A current address and phone number allows College personnel to contact students for emergencies, class changes, awards, academic questions/information, etc. The College secretarial staff and the Office of the Registrar must be notified immediately of any change in address and/or phone number. The College and University must also be notified if a student changes his/her name.

PROFESSIONAL CONDUCT AND RESPONSIBILITIES
In addition to meeting the academic standards of the University and College students enrolled in nursing courses must demonstrate professionalism in classroom, laboratory, and clinical experiences. Professionalism is defined as behaviors and attitudes congruent with the Codes of Ethics of their professional organization, guidelines and standards of practice, the Florida Nurse Practice Act, and policies and expectations of the College and University.

Inherent within the concept of professionalism is the development of those behaviors by the student during the program that demonstrate increasing maturity, competence, integrity, regard for human dignity, respect for social justice, accountability, responsibility, and caring as they progress through the program. Students are expected to respect the rights of others regardless of their race, religion, nationality, sex, age, sexual orientation, physical condition or mental state. Professionalism includes, but is not limited to, satisfactory academic and clinical conduct and performance.

Administrators and faculty reserve the right to interpret, maintain, and enforce the standards of professional conduct and performance for nursing. Administrators and faculty also reserve the right to recommend dismissal of any student who has violated the standards of professional conduct or demonstrates a lack of professional development.

ACADEMIC GRIEVANCE AND APPEAL
Graduate students have the right to appeal academic and or clinical grading/course requirement decisions and program progression/dismissal decisions. Students who wish to appeal must use follow the NWCNHS Student Academic Grievance/ Appeals Procedures found on the NWCNHS website. Contact an administrator or your advisor for the website location.

For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Program Complaints

STUDENTS WITH DISABILITIES
Students with disabilities must register with the Disability Services for Students prior to the beginning of the semester. At the beginning of the course, the student must inform the faculty member concerning his/her disability. Personnel in the Office of Disability Services for Students will provide a written statement regarding any necessary accommodations. Current documentation of disability is required to receive services.
General Expenses
Expenses are incurred by all FIU students; however, nursing students have some additional expenses, such as personal digital assistant (PDA), program fees, stethoscope, penlight, watch with second hand, name badge, personal audio plug-in (earphones) for the computer, transportation, CPR certification, health screenings (including immunizations) and health insurance. These requirements not only protect students, staff, and patients, but also assist students in developing professional responsibility and accountability. Students are responsible for providing the NWCNHS clinical education department with a copy of their current CPR certification, immunizations, health screening tests, and health insurance.

CPR Certification. All students must have current CPR certification before entering the clinical areas. The NWCNHS Simulation Teaching And Research Center, (STAR Center) personnel may be able to schedule a CPR certification class for students upon the students’ inquiry and request. However, if a certification class cannot be scheduled (or a student cannot attend the class), the student is responsible for obtaining CPR certification (Basic Life Support) in the community. CPR certification renewals are the responsibility of the student.

Immunizations/Health Screening Requirements. Periodically, all students must obtain specific immunizations and health screening tests (such as TB tests and titers). The requirements are subject to change, depending upon current knowledge and practices relating to health care.

Major Medical/Hospitalization Insurance. All students registered in clinical nursing courses must have major medical/hospitalization insurance (student health fees cover only routine health services). Students are required to sign a waiver to release the NWCNHS from financial liability if the student does not maintain or cancels his/her major medical/hospitalization insurance.

The College is required to send reports of immunizations and health-screening tests to clinical agencies where students will practice, and these tests must reach the clinical agency before the student is allowed to practice. In addition, students must purchase NWCNHS approved goggles for eye protection. Students who do not have current and reported CPR certifications, immunizations, health screening tests, and health insurance will not be allowed in the clinical areas, and the days missed will be counted as clinical absences. Clinical absences can impact fulfillment of the clinical course objectives.

Background Checks
All students must submit information and fingerprints for background screening as a requirement for clinical placement at health care facilities. Students with an arrest history must disclose such history to the Dean of the NWCNHS who will inform the Board of Nursing. Students must disclose arrests made before and after admission to the NWCNHS. Background checks are performed by the State on application for licensure and advanced certification. Failure to disclose can result in a required appearance before the Board of Nursing and a significant delay (or possible denial) of a nursing license or advanced certification.

Application for National Certification
Students who graduated from the MSN clinical programs or post-master's clinical programs must show evidence of completing a certification review course within one year before their application/validation (Form E) for any national certification examination will be completed.
STUDENT GOVERNANCE

UPDATED: August 2014

All nursing students are encouraged to participate in the various campus activities and University governance. The NWCNHS also provides opportunities for nursing students to participate in College governance.

Pi Alpha Chapter (Sigma Theta Tau)
The purposes of this professional nursing organization are to recognize superior achievement, recognize the development of leadership qualities, foster high professional standards, encourage creative work, and strengthen commitment to the ideals and purposes of the profession. Membership is based on GPA and class rank at graduation. Eligible graduates will receive an invitation and application from the Chapter Eligibility Committee.

FIU Graduate Students Association
The aim of the Graduate Students Association (GSA) is to facilitate and enhance the graduate student experience, to advance the reputation and assist in the expansion of graduate programs, and to promote quality teaching and research at Florida International University.

FINANCIAL AID

UPDATED: August 2014

General Assistance
Financial assistance is available to graduate students through fellowships, assistantships, scholarships, and loans. For general and current information on financial assistance, students should first access the FIU Financial Aid web site. For information on financial assistance specific to graduate students, see FIU Graduate Student Financial Aid.

Scholarships And Traineeships
Scholarships and traineeships are awarded to admitted students meeting various criteria such as outstanding academic potential, prior achievement, financial need, and minority recruitment. For a list of current scholarships offered to graduate nursing students, go to the NWCNHS Office Student Services website.

Graduate Assistant Matriculation Fee Waivers
Graduate Assistant fee waivers may be awarded to graduate assistants. Contact the Office of the NWCNHS Associate Dean for Administrative Affairs for details.

GENERAL ACADEMIC INFORMATION/POLICIES & PROCEDURES

UPDATED: August 2014

Faculty Advisor
All students in the MSN program(s) are advised by faculty academic advisors. Upon admission to the NWCNHS each student is assigned a faculty advisor to assist the student in progressing satisfactorily
toward the MSN degree. Faculty advisors are available throughout the academic year. The advisor assists the student in planning a course of study that meets the MSN program objectives and requirements, as well as the student’s particular interests.

For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Program-Student Communication

**Students’ Advisement Responsibility**
Students are responsible for arranging to meet with their advisors prior to registering for courses. Students’ advisement assignments are intended to ensure advisors’ accessibility to students. Students should see their advisors if they find they are having personal or academic difficulties that could impede their progress toward graduation. Advisement hours are posted outside each faculty member’s office and appointments can be made through the program’s support staff. Appointments at non-posted times can be made directly with the faculty member.

**Required Forms**
Questions on the completion of academic requirements for advanced degrees or the preparation and filing of the thesis should be addressed to the Academic Advisor or the Thesis Chairperson. Ignorance of a rule or a deadline does NOT constitute a basis for waiving that rule or deadline!

**CREDIT COURSE(S) TIMEFRAME POLICY**
Advanced Pathophysiology, Advanced Pharmacology, and Advanced Client Assessment Courses should be taken within three (3) years of admission/re-admission into the MSN program.

**Transfer Credits**
A maximum of six semester hours of graduate credit earned from another institution beyond a bachelor’s degree may be accepted towards the MSN degree. University Graduate School (UGS) policy requires that all graduate courses be completed within six (6) years of enrollment. Transfer credit request(s) will be reviewed and/or approved by advanced nursing practice programs director or designee. A transfer of credit request form must be completed by the student.

Degree seeking students requesting transfer of credits for the following courses: Advanced Pathophysiology, Advanced Pharmacology, and/or Advanced Client Assessment (a.k.a. 3 Ps) will be subject to the additional graduate nursing Credit Course(s) Timeframe Policy. UGS transfer credit policy will be applied for all other courses.

Non-degree seeking students will have their courses evaluated on an individual basis.

Any exceptions to the above policies (e.g. denial of credits for courses taken within the 3-6 year timeframe or acceptance of courses beyond these timeframes) will be at the discretion of the graduate nursing director or designee.

**Non-Degree Seeking Status**
Non-degree seeking students include students seeking admission to graduate degree programs who enroll prior to completing the requirements for admission. Enrollment as a non-degree seeking student does not imply a right to future admission as a regular degree-seeking student. A maximum of 12
graduate level credit hours earned at FIU as a non-degree seeking student may be counted toward a
graduate degree provided they were earned within the six years preceding admission to the degree
program.

**Required Course Registration**
Due to University/College insurance requirements, students **must** be registered for a nursing course in
order to practice as a student in the clinical area.

**Fulltime Status**
The University requires (9) credit hours, or its equivalent, for Fall and Spring graduate enrollment, and six
(6) credit hours, or its equivalent, for Summer graduate enrollment for full-time status. The number of
hours which a graduate student may carry without special permission is 15. A heavier load must be
approved by both the Director of the Graduate Program and the Associate Dean of Academic Programs.

For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Vacation and Leave of
Absence Requests

**Degree Verifications**
Degree verifications are done through the University Registrar's Office. The employing agency must send
a written request for a degree verification, and it must be accompanied by a written release of information
signed by the graduate. The NWCNHS cannot do degree verifications.

**Letters of Recommendation**
Recommendations regarding clinical skills/performance can be completed by a faculty member should a
student or agency request it. If an agency requests a recommendation, the agency must send a release
of information form signed by the graduate with the recommendation form.

For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Deferral of Graduation

**ACADEMIC PROGRESSION INFORMATION/POLICIES & PROCEDURES**

**UPDATED: August 2014**

**Program Progression Plan**
The Program Progression Plan is a tool for ensuring students' logical progression in his/her course of
study from admission to graduation. Faculty and student advisee should jointly review the Progression
Plan at periodic intervals and during registration to ensure logical program progression and academic
requirements are met as planned.

**Program Progression Checklist**
The Program Progression Checklist delineates course requirements and documents the student's
progress through the program. A copy of this form and current transcripts are kept in each student's file
for use by the advisor and student during conferences.

**Course Sequencing**
The curriculum content is logically sequenced to build upon previous knowledge, intellectual skills and clinical competence. Therefore, the student must demonstrate satisfactory comprehension of the course content in order to progress to the courses with more complexity and increased depth of content.

**FAILURE IN CLINICAL SPECIALTY COURSES**

**Failure in the Clinical Specialty Courses** (i.e. Adult-Gerontology, Child Health, Family Health, Psychiatric-Mental Health): Students who fail either the clinical course or the theory course MUST repeat both the theory and clinical component of the failed course prior to progressing to the next level.

**Cumulative Grade Point Average**
To achieve and maintain a classification of “good standing,” a student must maintain a cumulative grade point average (GPA) of 3.0 or better for each semester.

**Dropping and Adding Courses**
To drop and/or add a course, the student must obtain and submit a Drop/Add form to the Office of the Registrar. Registering for and adding courses require a nursing advisor’s signature. Students must notify their advisors prior to dropping any course. Students who fail to notify their advisors may jeopardize their progression in the MSN program.

**Withdrawal from the University**
Students who withdraw from the University must file the appropriate paperwork. See the FIU Graduate Catalog for additional policies/procedures related to withdrawal.

If a student must withdraw from the Program/University after the final withdrawal date because of major illness, the student can complete the appropriate forms to petition for an excused withdrawal. The student must provide documentation of the illness and attach it to the withdrawal form. The Medical Withdrawal Form can be obtained from the Office of Registrar.

MSN students who have withdrawn from the NWCNHS must petition the Director of the Graduate Program in writing for re-entry, providing there is evidence of resolution of the problems that necessitated withdrawal. No student will be allowed to re-enter the program more than once and student will be subject to the Graduate Nursing Credit Course Timeframe Policy upon re-admission to the program.

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For additional information, see Anesthesiology Nursing Policies/Procedures: Evaluation & Grading

**Graduation**
To be eligible for the Master of Science in Nursing (MSN) degree, the student must:

- Satisfactorily complete all courses required for the MSN degree and the specialty program, including the required elective credits.

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For additional information, see Anesthesiology Nursing Policies/Procedures: Deferral of Graduation
- Earn a minimum of credits and clinical clock hours listed for the selected clinical specialty program.

Petition for Exception to Graduate Requirements
Students can request an exception to the following UGS requirements: GPA, transfer credits, time limit, leave of absence, or for students on OPS, working more than 20 hours/week. To obtain a copy of the certification form, see Graduate Student Forms and then Petition for Exception to Graduate Requirements. The student must complete the form and provide a letter explaining the reason for the request. The form must be signed by the Director of the MSN, the NWCNHS Associate Dean of Academic Programs, and the Dean of the University Graduate School.

ACADEMIC CONDUCT AND PERFORMANCE

UPDATE: August 2014

Advanced Practice Nursing (APN) students are expected to review the FIU Student Handbook and the APN Course Examinations and Assignments Procedures and Academic Integrity Policy for details on Standards of Student Conduct and Policies. The Standards of Student Conduct addresses three major areas of moral integrity: Academic Honesty, Respect for the Law, and Respect for People. Students who plagiarize, cheat and/or harass an instructor or peer may be charged with Academic Misconduct. Penalties for academic misconduct may include up to dismissal from the University. Below are the definitions of plagiarism, cheating, and harassment:

- **Plagiarism**
  Plagiarism is the deliberate use and appropriation of another’s work without any indication of the source and the passing off of such work as the student’s own. Students who are using another person's ideas or writings must document their sources. Direct quotes must be consistent with American Psychological Association (APA) format. Any student who fails to give credit for ideas or materials taken from another is guilty of plagiarism. Any student helping another plagiarize may be found guilty of academic misconduct.

- **Cheating**
  Cheating is the unauthorized use of books, notes, aids or assistance from another person with respect to examinations, course assignments, field service reports, class recitations, or possession of examination papers or courses materials, whether originally authorized or not. Any student helping another cheat may be found guilty of academic misconduct.

- **Harassment**
  Harassment is defined as conduct that creates an intimidating, hostile, or offensive environment for another person of group. This definition includes harassment and threats through computers or electronic communication.

Course Requirements
Students are expected to adhere to the stated course requirements outlined in the course syllabus by faculty (provided at the beginning of the course), including due dates for assignments and the specified grading system. Unless prior arrangements have been made with the faculty member, work that is submitted late is downgraded one FULL letter grade for each day the paper/project is late until the grade
of "F" is reached. Refer to the Course Examinations and Assignments Procedures and Academic Integrity Policy. Students are expected to be prepared for all classes and to participate in them.

Students should not ask a faculty member to change the course requirements by requesting special treatment such as "extra credit" work to raise a grade, or ask for extensions of due times for papers. These requests are unfair to other students and the faculty member.

Classroom Conduct and Responsibilities
As a matter of common courtesy, students should not enter classrooms late; carry on conversations, even whispered ones; or take up class time with questions of solely personal interest. Taping class lectures is at the discretion of each faculty member. The student must request permission before taping any classroom activity. Audible beepers and portable telephones must be turned off during class periods.

Children or pets are never permitted in the classrooms unless for specified laboratory experiences. Food and drinks are not permitted in the classrooms or the laboratories. This is a University policy. Students are expected to assist in keeping the School, College, and University laboratories, classrooms and lounge areas in a presentable condition at all times.

In consideration of others, classroom furniture or equipment that is moved during a teaching/learning activity should be returned to its original location.

Attendance
Students are expected to attend all classes and laboratory experiences. Courses include the instructional strategy of shared knowledge and experience between students during group presentations and discussions. Absence interferes with the student's ability to learn from this in class sharing.

Students are expected to read and adhere to the course syllabus regarding clinical and class attendance. Excessive absence or habitual tardiness may effect the course grade (since the stated course objectives cannot be met) and can result in failure.

Written Assignments
All written work is to be submitted on the announced due date unless the student made previous arrangements with the faculty member. Refer to the Course Examinations and Assignments Procedures and Academic Integrity Policy. Computers are available for student use in the NWCNHS and University computer laboratories. Formal written papers (term or scholarly papers) shall follow the format using the guidelines of the American Psychological Association's (APA) Publication Manual (the latest edition is available for purchase at the FIU Bookstore).

For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Class Attendance
For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Tardiness

EXAMINATION POLICIES/PROCEDURES

UPDATED: August 2014
Examination Security
If exams are closed book, students may not use notes, texts, dictionaries, or other materials; nor can they speak to other students during the exam. If a student has a problem or question, it must be discussed with no one other than the faculty member proctoring the exam. If a student leaves the classroom, he/she will be asked to hand in the paper, and will not be permitted to return. Refer to the Course Examinations and Assignments Procedures and Academic Integrity Policy.

Examination Reviews
Reviews of exams are at the discretion of the course faculty. Without permission of the particular faculty member, no other person, including another faculty member, Director, Associate Dean, or Dean can review and/or discuss the exam with the student. Refer to the Course Examinations and Assignments Procedures and Academic Integrity Policy.

Failure to Take Examination
Students unable to take the exam at the scheduled time must make arrangements with the faculty member PRIOR to the exam date. If the student communicates with the faculty member prior to the exam, possible alternate arrangements can be discussed. If the faculty member is not available, the Director of the Graduate Program must be notified. Refer to the Course Examinations and Assignments Procedures and Academic Integrity Policy.

If a student fails to communicate with the faculty member prior to the exam and subsequently claims an emergency, illness, or accident, the explanation will be considered to determine extenuating circumstances. If extenuating circumstances are found, the student will not be penalized. If the faculty member believes there to be no extenuating circumstances, the student MAY be allowed to take the exam, and may receive a lower grade at the discretion of the faculty member. Refer to the Course Examinations and Assignments Procedures and Academic Integrity Policy.

An alternate exam may be selected by the faculty member if taken late by the student.

For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Class Attendance

**GRADES AND GRADING**

**UPDATED: August 2014**

**Cumulative Grade Point Average**
To achieve and maintain a classification of "good standing," a student must maintain a cumulative grade point average (GPA) of 3.0 or better for each semester.

Students whose GPA falls below 3.0 are subject to University and Graduate Program policies related to warning, probation, and dismissal. Students are advised to refer to the Rules and Regulations section of the *FIU Graduate Catalog* and this Manual for further information about dismissal.

**Course Grades**
A grade of "B" or better in all nursing courses is necessary for continuing in the program. Credit hours for
courses in which the grade is “B-minus” or below will not count toward satisfying graduate degree requirements.

For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Evaluation & Grading

Repeating Nursing Courses and Dismissal
Students who fail a graduate nursing course must retake the course the next semester that course is offered.

Only one course in the program can be repeated, and that course can be repeated only once. If a student fails the same course twice or fails a second course, he/she will be dismissed from the program.

After successfully completing the repeated course, the student must obtain and submit a Repeated Course form to the Office of the Registrar. While both grades will be included on the student's transcript, only the last grade for the repeated course will be computed into the student's GPA.

Grading Scale

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>A</td>
<td>93-100%</td>
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<tr>
<td>A-</td>
<td>91-92%</td>
</tr>
<tr>
<td>B+</td>
<td>89-90%</td>
</tr>
<tr>
<td>B</td>
<td>85-88%</td>
</tr>
<tr>
<td>B-</td>
<td>83-84%</td>
</tr>
<tr>
<td>C+</td>
<td>81-82%</td>
</tr>
<tr>
<td>C</td>
<td>77-80%</td>
</tr>
<tr>
<td>C-</td>
<td>75-76%</td>
</tr>
<tr>
<td>D+</td>
<td>73-74%</td>
</tr>
<tr>
<td>D</td>
<td>69-72%</td>
</tr>
<tr>
<td>D-</td>
<td>67-68%</td>
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<tr>
<td>F/F0</td>
<td>00-66% SEE BELOW</td>
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</tbody>
</table>

Passing (Applies only to individual courses, NOT to the cumulative GPA).
GPA Calculation Scale

<table>
<thead>
<tr>
<th>Grade</th>
<th>Points</th>
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</thead>
<tbody>
<tr>
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<td>4.00</td>
</tr>
<tr>
<td>A-</td>
<td>3.67</td>
</tr>
<tr>
<td>B+</td>
<td>3.33</td>
</tr>
<tr>
<td>B</td>
<td>3.00</td>
</tr>
<tr>
<td>C+</td>
<td>2.33</td>
</tr>
<tr>
<td>C</td>
<td>2.00</td>
</tr>
<tr>
<td>C-</td>
<td>1.67</td>
</tr>
<tr>
<td>D+</td>
<td>1.33</td>
</tr>
<tr>
<td>D</td>
<td>1.00</td>
</tr>
<tr>
<td>D-</td>
<td>0.67</td>
</tr>
<tr>
<td>F/F0</td>
<td>0</td>
</tr>
</tbody>
</table>

Fzero Grade
Beginning Fall, 2004, the Faculty Senate approved the addition of a course grade of F0 (Fzero). An F0 will be given to students who both earn a failing grade based on course standards and who fail to complete at least 60% of the course requirements or fail to attend at least 60% of class sessions. An F0 equals zero grade points per credit hour and is a permanent grade.

Incomplete “I” Grade
An incomplete grade is a temporary symbol given at the discretion of the instructor for work not completed because of serious interruption not caused by the student’s own negligence. An incomplete must be made up as quickly as possible, but no later than two consecutive semesters after the initial taking of the course or it will automatically default to an “F” or the grade that the student earned in the course. There is no extension of the two semester deadline. The student must not register again for the course to make up the incomplete. Students who have incomplete grades on their records must remove the incomplete by the end of the fourth week of the term in which they plan to graduate. Failure to do so will result in a cancellation of graduation.

"Incompletes" in MSN clinical (theory and laboratory) courses must be completed to a grade before progression.

It is the student’s responsibility to ensure that the faculty member has received the missing materials in a timely fashion and has forwarded the necessary Change of Grade form. The student should print out his/her unofficial transcript three to four weeks after the form was initiated to ensure that the change was
entered on the student's transcript. If it has not been entered, the faculty member must be notified immediately. If the faculty member is not available, the Program Director must be notified.

Communicating Grades
Final Grades can be obtained through Panthersoft. Students will need their Panthercard ID and password to obtain grades. Otherwise, grades are communicated through a procedure designated by the faculty member. Only faculty members are authorized to report grades over the phone.

ACADEMIC WARNING, PROBATION, AND DISMISSAL

UPDATED: August 2014

Academic Warning
Graduate students in academic jeopardy are notified through conferences or in writing by the course faculty member, Advisor, and/or the Director of the Graduate Program.

A graduate student whose cumulative GPA falls below 3.0 will be placed on Academic Warning by the University.

Academic Probation
A student on Academic Warning whose cumulative GPA remains below 3.0 in the following semester will be placed on Academic Probation by the University. To remove the Academic Probation status, a student must attain a cumulative GPA of 3.5 or above in the subsequent semester.

Dismissal
A graduate student on probation whose cumulative and semester GPAs fall below a 3.0 will be automatically dismissed from the Program and University.

Students are advised to refer to the Rules and Regulations section of the FIU Graduate Catalog for further information about academic warning, probation, and dismissal.

CLINICAL CONDUCT AND PERFORMANCE

UPDATED: August 2014

Clinical Evaluation
Clinical performance is evaluated during each clinical course by course faculty and preceptors. Clinical evaluation tools are designed to address specific course expectations and objectives. Typical clinical expectations include, but are not limited to:

- Safe, effective, ethical performance of nursing tasks;
- Problem solving;
- Use of appropriate judgment;
- Appropriate communication and interaction with others;
- The ability to apply knowledge.

Refer to the Advanced Practice Nursing Programs Clinical Preceptor Manual for additional information
**Professional Behavior and Language in the Clinical Setting**

Nursing students are expected to respect the rights of others regardless of their race, religion, nationality, sex, age, sexual orientation, physical condition or mental state, in both laboratory and clinical settings. Students are expected to:

- Adhere to established laboratory and clinical deadlines.
- Have no unexplained laboratory and clinical absences, either at arrival or while the clinical setting.
- Exhibit promptness when attending classroom, laboratory, and clinical experiences.
- Remain for the entire laboratory and clinical learning experience, unless excused.
- Adhere to policies and procedures related to the assigned clinical agency.
- Promptly and properly identify one’s self and role during clinical experiences.
- Adhere to the [uniform and dress policies](#) found in the MSN student policies/procedures manual.

**Unprofessional Conduct and/or Professional Misconduct**

Nursing students are expected to act in a manner consistent with the Code of Ethics of their applicable professional organization. Failure to comply may result in action by administrators and/or faculty including in appropriate cases, dismissal from the nursing program. Examples include but are not limited to:

- Negligence in patient care.
- Unprofessional behavior either at the laboratory or at the clinical agency.
- Substantiated act or acts of patient abuse, either physical or verbal.
- Unsatisfactory performance as judged by the clinical supervisor.
- Neglect of duty with actual cause or potential to cause patient harm.
- Fraudulent or egregious acts.
- Demonstrated and/or documented incompetence.
- Personal conduct which adversely affects the work environment and/or the supervisor’s ability to perform their responsibilities.
- Exhibiting aggressive or intimidating behavior (e.g., profanities, threats, loud talking, rudeness, verbal coercion) toward or in the presence of faculty, staff, peers, patients/clients, or agency personnel.

**Clinical Probation, Failure, and Dismissal**

A student who demonstrates unprofessional conduct and/or professional misconduct will be notified by the faculty member of such behavior. The faculty member will counsel the student, document the occurrence of the behaviors in writing and place the documentation in the student’s file. The student may respond in writing within 48 hrs to the faculty member’s findings and/or submit written documentation relevant to the behavior. Depending on the nature of the behavior, the faculty member, in consultation with the Director of the Graduate Program and/or the Director of the Anesthesiology track, may place the student on clinical probation.

**Clinical Probation**

Clinical probation is based on the performance of the student in relationship to course objectives, and expected behaviors and attitudes that are consistent with those of a professional nurse. In addition to persistent behavior or behaviors related to unprofessional conduct (see above), a student enrolled in a clinical nursing course may be placed on clinical probation for one or more of the following:
• Initiating clinical experiences without a contract;
• Initiating interventions or actions without appropriate supervision or approval of the supervisor;
• Consistent difficulties in applying theory to the clinical setting;
• Inconsistently completing clinical assignments or logs.

The faculty member will notify the Director of the Graduate Program and/or the Director of the Anesthesiology track of any student who is placed on clinical probation. In addition, the faculty member will send a letter to the student indicating the areas of weakness as the basis for clinical probation. A copy of the letter will be placed in the student’s academic file.

The student is expected to complete the requirements of the probation by the end of the course. If the student demonstrates satisfactory progress in improving performance and meets the course objectives, the faculty member will remove the probationary status at the end of the course. Failure to meet the requirements of the probation will result in clinical failure.

**Clinical Failure**

Clinical failure is based on the unsatisfactory performance of the student in relationship to the course objectives, expected behaviors, and attitudes that are consistent with those of a professional nurse. A student enrolled in a clinical nursing course may receive a clinical failure and/or dismissal from the program for one or more of the following:

• Failure to demonstrate satisfactory progress after being placed on clinical probation;
• Recurring absenteeism or tardiness in the clinical setting;
• Recurring failure to follow clinical course policies, policies of the clinical agency, or recommendations of the supervisor;
• Acts of dishonesty;
• Repeated lack of preparation for the clinical setting.
• Demonstrating behaviors that, in the judgment of the faculty, constitute unsafe or potentially unsafe practice;
• Demonstrating practices that are inconsistent with professional standards or codes of ethics;
• Unsatisfactory final clinical evaluation.

The faculty member will notify the Director of Graduate Program and/or the Director of the Anesthesiology track of any student who earns a clinical failure. In addition, the faculty will place a copy of the letter sent to the student indicating the clinical failure in the student’s academic file.

**Dismissal**

A student may be dismissed without a probationary period for identified infractions. Grounds for dismissal without a probationary period include:

• Level of incompetence representing a threat to patient safety;
• Falsification of documents or records;
• While in the clinical area, being under the influence of alcohol, marijuana, or any controlled substances not legally prescribed;
• Insubordination or failure to follow direct orders from a clinical supervisor;
• Theft of College, University, or agency property;
• The inappropriate administration of any drug or treatment without the permission of the clinical supervisor.
PRACTICUM GUIDANCE & SUPERVISION

UPDATED: August 2014

Background Checks
All students must submit information and fingerprints for background screening as a requirement for clinical placement at health care facilities. Students with an arrest history must disclose such history to the Director of Advanced Practice Nursing Program (MSN) or designee. Students must disclose arrests made before and after admission to the NWCNHS. Background checks are performed by the State on application for licensure and advanced certification. Failure to disclose can result in non-approval for assignment to clinical facilities and may prevent the student from completing the program and/or from attaining the appropriate licensing/certification.

Transportation
All students are expected to have transportation to and from their clinical sites. Faculty members are not responsible for arranging students' assignments according to car pools, distance from home or work to clinical site, or making babysitting and/or day-care arrangements.

Nursing Practicum
Each clinical course requires supervised practicum with a school-approved preceptor and under the direction of the course faculty. The student cannot be paid for participation in the practicum.

For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Clinical Placements

Practicum Requirements
Prior to enrolling in clinical courses (including advanced health assessment), students must provide proof that the following criteria are valid throughout the semester of each clinical course. The criteria are:

- **Current RN licensure in Florida**
- **Current Professional Liability Insurance** Nurse Practitioner Student Professional liability insurance is available through the American Nurses Association and other selected carriers. The NWCNHS does not recommend any specific company.
- **Immunization/Health Screening Requirements.** The requirements are subject to change, depending upon current knowledge and practices relating to health care, or in keeping with policies related to a practicum site.
- **Major Medical/Hospitalization Insurance.** All students registered in clinical nursing courses must have major medical/hospitalization insurance (student health fees cover only routine health services).
- **CPR Certification.** American Heart Association Healthcare Provider Certification is required.
For additional ANP information, see Anesthesiology Nursing Policies/Procedures: Professional Liability & Health Insurance

**Students who do not have current and reported CPR certifications, immunizations, health screening tests, health insurance, and nurse practitioner student liability insurance will not be allowed in the clinical areas, and the days missed will be counted as clinical absences.**

Clinical absences can impact fulfillment of the clinical course objectives. Refer to the Advanced Practice Nursing Programs Clinical Preceptor Manual for additional information

**Clinical Dress Guidelines**
Clothing is to be appropriate for professional appearance. A white lab coat and comfortable shoes are required. Dress length and pant length is expected to present a professional image at all times. Makeup should be minimal. Colognes, perfumes, and aftershave lotions are to be avoided.

The following apparel will not be acceptable: jeans, sweatpants, shorts, t-shirts as outer garments, midriff tops. Scrubs will only be permitted when it is a specific requirement stipulated by the clinical site. Clinical agencies also have the right to refuse the placement of a student who is inappropriately attired; in which event the clinical faculty and/or Advanced Practice Nursing Program director is to be notified immediately.

Refer to the Advanced Practice Nursing Programs Clinical Preceptor Manual for additional information

**Identification Name Badge**
The FIU NWCNHS approved identification name badge which identifies student by first and last name, FIU Nurse Practitioner Student, and includes a picture. The Panther ID can be placed in a plastic sleeve and must be clipped on the lab coat. These cards are issued to MSN FIU students following completion of Clinical Orientation. See the FIU web site for information on obtaining the panther ID.

Students must identify themselves immediately as an FIU advanced nursing practice student to other professionals working in the area.

Refer to the Advanced Practice Nursing Programs Clinical Preceptor Manual for additional information

**Clinical Tardiness and Absence**
A student who is absent or tardy in the clinical facility on the assigned day is expected to contact the clinical faculty member prior to the assigned reporting time.

Students are expected to have 100% attendance for all laboratory and clinical experiences. The stated course objectives must be met in order to successfully pass the course.

Refer to the Advanced Practice Nursing Programs Clinical Preceptor Manual for additional information
Illness
If a student needs health care and/or is at risk to others, the faculty member must determine appropriate action based on the individual circumstances and make the proper referrals. Health care alternatives are treatment at the nearest walk-in facility, the FIU Student Health Clinic, or a private physician.

For additional information, see Anesthesiology Nursing Policies/Procedures: Illness

Accidents/Injuries
If an accident or injury occurs while the student is in the clinical area, the student is responsible for following up on the necessary medical care and for the cost of their medical care. Faculty are to follow the clinical agency’s policy for employee/student injuries, such as an incident report, emergency room treatment, etc.

The Director of Advanced Nursing Practice Programs must be notified and all steps of NWCNHS CLINICAL INCIDENT/BLOODBORNE PATHOGEN EXPOSURE POLICY must be followed.

CLINICAL FACILITIES

UPDATED: August 2014

The graduate nursing program uses a variety of clinical agencies to achieve graduate program objectives. All are carefully selected and evaluated on a regular basis. Contacts between clinical course faculty and agency preceptors are made periodically throughout the semester by phone and in person as needed. Students have the opportunity to experience appropriate learning environments to facilitate mastery of advanced practice competencies. Refer to the Advanced Practice Nursing Programs Clinical Preceptor Manual for additional information

Selection of Clinical Facilities
The role of the advanced practice nurse (APN) is developed through the blending of theoretical knowledge and diverse clinical placements. Following university guidelines and in collaboration between the NWCNHS clinical education office and the office of academic affairs, specific clinical experience and practice sites are selected based on client populations, available resources, and student academic needs for professional role development and attainment of specific advanced nursing role competencies.

The graduate nursing clinical coordinator is the central contact for the placement of students at these selected sites and is responsible for contacting, coordinating, and corresponding with preceptors and clinical sites during the placement process.

Another critical criterion is the technical competencies of the preceptor. Thus, the prospective preceptor is carefully reviewed in terms of educational background, professional experience, state and national certification as NP and/or CNS, nursing philosophy, and willingness to precept students.

A master’s degree in nursing is a minimum requirement. In all cases, the course faculty works closely with the clinical preceptor and student to ensure the relevance of the student’s practice experiences relating to the course objectives. Refer to the Advanced Practice Nursing Programs Clinical Preceptor Manual for additional information
Student clinical rotations are established the semester before each clinical course as a collaborative process between faculty and students.

Clinical rotations are based on student learning needs and course/program objectives. Clinical faculty members evaluate the student’s prior experiences in determining the most appropriate clinical site for the student. Students must do clinical rotations in sites and with preceptors for whom NWCNHS has all required contract and other documents as deemed by the NWCNHS Office of Clinical Education. Students must also have completed a satisfactory clinical clearance process prior to starting the clinical rotation.

While faculty members strive to collaborate with students to determine the best clinical placements, certain clinical-related situations are prohibited:

• Students cannot choose family or close friends as clinical preceptors.

• Students cannot do their clinical rotation in the unit where they work (if student works in a large institution, they may do their rotation in their institution but on a different unit).

• Students cannot do clinical rotations in an ICU/progressive care unit.

• Students will only be allowed to observe during hospital rounds if the preceptor is not an employee of the hospital. Observations must be kept at a minimum and will not count towards total clinical practicum hours, as the purpose of clinical rotations is “hands on practice”.

• A majority of students clinical rotations will be with nurse practitioners.

• Students are encouraged to change clinical sites (the type and location) and preceptors every semester to obtain the broadest experiences.

• Clinical rotation can only take place during semester periods when school is in progress, inclusive of University campus breaks only with prior faculty documented approval.

Criteria Used for the Selection of Clinical Facilities
The following criteria have been developed and used by the faculty for the selection and evaluation of clinical facilities and preceptors:

• Educational background, professional competencies and experience of the preceptor (a minimum of one year of professional experience in the field/specialty required).

• Active status of the preceptor’s professional licensure and national certification(s)

• The philosophy of the facility and the preceptor supports graduate nursing education.

• Clinical administration of the agency is supportive of graduate nursing education.
• The types of clients/patients and services offered provide students opportunities for meeting instructional objectives.

• The clinicians and staff members of the clinical setting are appropriate role models for the students.

• The standards of care within the agency meet the standards of its accrediting agency and/or reflect the regulatory requirements.

• Physical facilities of the agency support the students’ educational needs, e.g., use of examination/consultation room, space for student/preceptor to meet.

• The contractual terms are mutually acceptable to both the University and the Agency.

• By contract, the agency assumes responsibility for the continuity of care of all patients assigned to students.

For additional information, see Anesthesiology Nursing Policies/Procedures: Clinical Placements

ADVANCED PRACTICE CORE COMPETENCIES

Refer to the Advanced Practice Nursing Programs Clinical Preceptor Manual for additional information

Advanced Practice Nurse Competencies: Nurse Practitioner (NP)

Direct Care Provider

• Demonstrates critical thinking and diagnostic reasoning skills in clinical decision making.
• Assesses, diagnoses, monitors, coordinates, and manages the health status of clients over time.
• Provides primary care.
• Communicates the client’s health status verbally or in writing, using appropriate terminology and format.
• Performs and interprets common screening and laboratory tests.
• Diagnoses and manages acute and chronic diseases while attending to the illness experience of clients based on expert knowledge and technical competence.
• Provides anticipatory guidance for expected, potential, and situational events where there is knowledge deficit or ethical issues arise.
• Provides culturally competent care, appreciating the growing diversity of the population and the need to understand health status and health care through differing cultural beliefs and values.
• Schedules follow-up visits to appropriately monitor clients and evaluate care.
• Serves as a role model in providing culturally competent care.
• Promotes prevention and wellness care, emphasizing primary and secondary preventive strategies.

Client Advocate
• Builds and maintain a supportive and caring attitude toward clients and their families.
• Establishes a relationship with clients and their families, acknowledging individual and collective strengths and assist them in meeting their health care needs.
• Provides clients comfort and protect human dignity in the midst of crisis.
• Facilitates client decision-making in health care.
• Provides emotional and informational support to clients and families.

Collaborator
• Interprets own professional strengths and scope of role to peers, clients, and families.
• Participates in coordinated care, working effectively as a leader or team member in organized settings that value high quality, cost-effective, integrated services, and nursing case management.
• Builds and maintains a therapeutic team to provide optimum therapy.
• Participates in peer review and performance evaluation of other health care providers.
• Works with team in problem-solving efforts, establishing realistic work goals, and identifying strategies for goal attainment.
• Participates in peer review and review of other health care practitioners.
• Provides constructive feedback to other health care providers to ensure safe practices.
• Creates strategic partnership toward improved health care systems operations and accountability from a broad economic, social, political, and legal perspective.

Teacher/Coach/Educator
• Promotes an environment which facilitates learning.
• Assesses health behaviors and learning needs of clients.
• Provides anticipatory guidance appropriate for age/developmental status.
• Assists clients to integrate implications of their illness and recovery into healthy lifestyles.
• Assists clients with goal setting for health promotion and maintenance.
• Establishes plans and protocols for client teaching.
• Provides an interpretation of the client’s condition and give rationale for procedures.
• Utilizes selected strategies/theories to facilitate client educational activities.
• Provides information about therapeutic actions, side effects and instructions to promote optimum effects of therapeutics.
• Develops age-specific educational programs that are appropriate to health problems, level of functioning, emotional needs, and client characteristics.

Researcher
• Critically evaluates and apply research findings pertinent to patient care management.
• Conducts research studies pertinent to primary care.
• Engages in research utilization and dissemination.

Leader
• Provides leadership in professional activities at the local, state, and national levels.
• Evaluates implications of contemporary health care policy on health care providers, consumers, and the nation.
• Participates in legislative and policy-making activities influencing health services.
• Supports the socialization, education, and training of novice practitioners by serving as preceptor, role model, and mentor.
• Assesses and use technology appropriately, containing costs.
• Develops informed leadership integrated across the various functions within nursing.

Life-Long Learner

• Identifies mechanisms to update knowledge base and clinical competencies.
• Assumes responsibility and accountability in maintaining standards of practice.
• Maintains eligibility requirements for professional certification.