



Nicole Wertheim College of Nursing & Health Sciences
FLORIDA INTERNATIONAL UNIVERSITY

Graduate Nursing

Advanced Practice Nursing Program

Adult-Gerontology Primary Care | Family Health | Pediatric Primary Care | Psychiatric-Mental Health

Nurse Educator (MSN)

Doctor of Nursing Practice

Student Handbook

"We are fueled by intellect; driven by innovation and caring."



Graduate Nursing Candidate/Student:

Welcome to the Graduate Nursing Programs at Florida International University (FIU). The Graduate Nursing programs, Masters of Science in Nursing (MSN) and Doctor of Nursing Practice (DNP) programs at FIU are accredited by the Commission on Collegiate Nursing Education (CCNE) and pride itself on its legacy of excellence in Nursing Education; designed to prepare qualified professional nurses for advanced nursing practice roles in the care and management of adults and children. The program offers nurse practitioner concentration tracks in Adult-Gerontology Primary Care, Pediatric Primary Care, Family Health, and Psychiatric-Mental Health; as well as the opportunity to complete a Nurse Educator MSN degree. Graduate certificates are also offered in all clinical concentrations and nurse educator tracks.

The Graduate Nursing Program at FIU subscribes to the notion that nurses are being entrusted with the ultimate responsibility of leading change and advancing health through the achievement of higher levels of education and the ability to practice to the full extent of their education (IOM Report, 2010). Therefore, in response to the national recommendation that all masters programs that educate advanced practice registered nurses (APRNs) to enter clinical practice should transition to the Doctor of Nursing Practice (DNP), the Graduate Nursing faculty voted and approved the transition of our MSN program to now be offered as part of the post-baccalaureate (BSN)-to-DNP program option. The post-BSN-to-DNP program at FIU provides students the opportunity to obtain both degrees, MSN and DNP, in a more streamlined manner.

FIU's Graduate Nursing program tracks are highly competitive. Your journey will be challenging, but undoubtedly rewarding. If you are committed to advancing your leader role in the nursing profession, the Nicole Wertheim College of Nursing and Health Sciences is for you. Throughout the curriculum, you will be guided in the process of self-development to pursue excellence in professional and scholarly endeavors; fulfill your professional aspirations; and answer the national call to lead change and advance health through excellence in advanced nursing care.

FIU graduates of the APRNs program tracks are eligible to apply for national certification examination in their relevant area of clinical specialization and for state professional licensure as APRNs.

The Graduate Nursing faculty at FIU-Nicole Wertheim College of Nursing and Health Sciences commends your decision to join our program, lead change and advance health.

Sincerely,

Tatayana Maltseva, PhD, APRN, PMHNP-BC
Chair, Graduate Nursing – Advanced Nursing Practice Programs
Director, Doctor of Nursing Practice



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DESCRIPTION OF FLORIDA INTERNATIONAL UNIVERSITY

South Florida, with an estimated population of over 6.1 million people in Miami-Dade, Broward, and Palm Beach Counties in 2019, 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 Non-Hispanic, 13 % Black, 4% Asian/Pacific Islander, and 7% other minority groups.

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 twelve 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, Nicole Wertheim College of Nursing and Health Sciences, Chaplin School of Hospitality and Tourism Management, School of Journalism and Mass Communication, Honors College, and the Robert Stempel College of Public Health and Social Work. For a ninth consecutive year, FIU has retained the top tier Carnegie Classifications of Institutions of Higher Education category for doctoral research universities – R1: Doctoral University – Highest Research Activity.

Through these colleges and schools, FIU offers more than 180 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 2019 student body of nearly 54,000, more than 2,000 full-time instructional and research faculty, and over 15,000 degrees awarded annually, FIU is the largest university in South Florida and one of the top 10 largest public universities in the nation. More than 115,000 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 Extensive University.

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. A political scientist specializing in Latin America, Dr. Rosenberg is the first FIU faculty member to ascend to the university's presidency. Within Miami-Dade County, Dr. Rosenberg was the 109th Chair of the Greater Miami Chamber of Commerce (GMCC), one of Florida's leading business associations; and also served a 5-year term as Chair of the Academic Leaders Council (ALC) for the Beacon Council, Miami-Dade County's official economic development organization. He serves on the Board of Directors of City National Bank of Florida and is active in a variety of other civic organizations, including the Holocaust Memorial Miami Beach, Florida Council of 100, and the United Way of Miami-Dade County.



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, masters, and Doctor of Nursing practice degree programs are fully accredited by the Commission on Collegiate Nursing Education, the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs and are approved by the Florida Board of Nursing.

A broad range of nursing degree programs are currently offered by the College and include a baccalaureate degree in nursing, a master's in nursing degree, a Doctor of Nursing practice degree, and a Doctor of Philosophy degree in nursing. 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.

In 2013, Dr. Herbert Wertheim demonstrated his commitment and confidence in the FIU College of Nursing and Health Science's visionary strategic and business plans by commemorating his wife's birthday and their 44th wedding anniversary with a \$10 million investment to name the College in honor of his beloved wife. Dr. Ora Strickland, Dean of The \$10 million naming gift from Dr. Herbert and Nicole Wertheim established endowed faculty chairs, student scholarships and incentive programs for faculty recruitment, enhancement and teaching innovation as vital to the mission and to strengthening our standing as a top national academic institution.

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. All NWCNHS academic departments are administered by Chairs.

Master of Science in Nursing (MSN) Program

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 Adult-Gerontology Primary Care, Pediatric Primary Care, Family Health, and Psychiatric-Mental Health. Effective Fall 2018 the MSN program will also offer a Nurse Educator specialty track. Graduates of the program are qualified to apply for certification examinations in their specialty areas. Nurse practitioner graduates who pass nationally certification examinations meet criteria to apply for advanced practice registered nurse (APRN) licensure through the Florida Board of Nursing. Post-graduate certificates in adult-gerontology primary care, family health, pediatric primary care, psychiatric-mental health, and 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), 655 K Street, NW, Suite 750, Washington, DC 20001, 202-887-6791.



Doctor of Nursing Practice (DNP) Program

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); post-BSN to MSN/DNP (adult-gerontology primary care, family health, pediatric primary care, psychiatric-mental health tracks) option, and a post-BSN to DNP (nurse anesthetist) option. The DNP program at Florida International University is accredited by the Commission on Collegiate Nursing Education, (CCNE), 655 K Street, NW, Suite 750, Washington, DC 20001, 202-887-6791.

Doctor of Philosophy in Nursing (PhD) Program

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 PURPOSE AND OBJECTIVES

MSN Program Purposes

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

MSN Program Objectives

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

1. Leaders, educators, practitioners, researchers, and change agents in the delivery of high-quality, accessible, culturally competent healthcare in local and global societies.
2. Professional advanced practice nurses who use communication, interprofessional collaboration, and synthesis of evidence-based practice, scholarship, and research in the delivery of health care for local and global societies.
3. Facilitators and leaders of interprofessional health care teams who use an understanding of organizational systems and the environment and are able to integrate care services and health care policy across local and global societies.
4. Critical thinkers who actively and skillfully utilize ethical principles into the translation of evidence into safe, affordable, accessible, innovative, quality care.
5. Advanced practice nurses who deliver patient and family centered holistic care using knowledge of basic sciences including genetics/genomics, preventive health, and advances in health technology
6. Advanced practice nurses who analyze, influence, and develop health policy that promotes access and delivery of high-quality healthcare to diverse populations, underserved, and vulnerable populations across the lifespan.



DNP PROGRAM PURPOSE AND OBJECTIVES

DNP Program Purpose

The purpose of the DNP program at FIU is to prepare advanced practice clinical nurses at the highest level. This is in full compliance with the American Association of Colleges of Nurses endorsement of the DNP as the terminal professional degree for all nurses seeking advanced practice roles in clinical, educational, or leadership settings. The program is designed to be in full in compliance with the DNP essentials and DNP competencies.

DNP Program Objectives:

The DNP program prepares the graduate to:

1. Demonstrate advanced levels of clinical practice, judgment, and scholarship in nursing based on scientific knowledge underpinning practice.
2. Implement analytical methodologies for the evaluation and formulation of health care policies and practices for the clinical situations, practice environment, and the health care delivery system.
3. Integrate the application of scientific evidence, professional values, and ethical decision-making in advanced nursing practice and health care delivery.
4. Access, utilize, manage, and safeguard state-of-the-science information technology and health care informatics systems for care delivery, systems operations and quality improvement.
5. Evaluate and translate research to support evidence-based practice to improve health care outcomes of medically, socially, and culturally diverse populations across the life span.
6. Collaborate with interdisciplinary teams in the delivery, evaluation, and quality improvement of health care, health promotion, disease prevention, practice models and health policy for individuals, communities as well as populations.
7. Analyze the scientific, social, ethical, economic, political, legal and policy components of health care systems which impact health care planning, access, and delivery.
8. Assume leadership roles in the development of excellence in clinical care and health care delivery systems through advanced nursing roles in clinical practice, education, or management settings.

The Post-BSN DNP Nurse Anesthetist option 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. For further information regarding the Post-BSN DNP Nurse Anesthetist program, it is available in the nurse anesthesia student handbook.

NWCNHS. Nicole Wertheim College of Nursing and Health Sciences. *Nursing unit mission, mission, and goals*. Retrieved from: <http://cnhs.fiu.edu/about-us/mission-and-vision/index.html>

CNNHS. College of Nursing and Health Sciences. (2010). *Undergraduate nursing program purposes and objectives*. Retrieved from http://cnhs.fiu.edu/nursing/pdf/BSN_CURRICULUM_OVERVIEW.pdf

CNHS. College of Nursing and Health Sciences. (2010). *Graduate nursing program purposes and objectives*. Retrieved from http://cnhs.fiu.edu/nursing/pdf/MSN_CURRICULUM_OVERVIEW.pdf



COMPARISON OF THE DNP AND PhD PROGRAM

The primary focus of the PhD program is nursing research. The PhD is a research degree prepares nurse scientists and leaders in academia and health care systems. Graduates develop new knowledge for the science and practice of nursing and are leaders in generating and applying science needed to improve health care and inform and guide health policy. Graduates conduct research to improve the health of people from diverse cultures. Graduates develop and lead research teams of nurses, physicians, and members of other health care disciplines. Candidates who want to pursue a degree in nursing research should consider this option.

The primary focus of the DNP program is nursing practice. The DNP is a practice degree that prepares nurses for leadership roles in a specialized area of advanced nursing practice with an emphasis on: philosophical, ethical, and scientific principles that provide the foundation for leadership in professional nursing care; continued acquisition of knowledge and clinical skills in an area of advanced practice specialization; and leadership and clinical expertise in healthcare delivery, evaluation, quality improvement, and advanced practice nursing education.

Features of DNP and PhD at FIU

	Doctor of Nursing Practice	PhD in Nursing
Primary Focus	Nursing Practice	Nursing Research
Degree Objectives	To prepare nurses for leadership roles in a specialized area of advanced nursing practice with an emphasis on philosophical, ethical, and scientific principles that provide the foundation for leadership in professional nursing care; continued acquisition of knowledge and clinical skills in an area of advanced practice specialization; and leadership and clinical expertise in healthcare delivery, evaluation, quality improvement, and advanced practice nursing education	To prepare nurse scientists, researchers, and leaders in academia and health care systems. Graduates develop new knowledge for the science and practice of nursing and are leaders in generating and applying science needed to improve health care and inform and guide health policy. Graduates conduct research to improve the health of people from diverse cultures. Graduates develop and lead research teams of nurses, physicians, and members of other health care disciplines.
Some Employment Opportunities Post Graduation	Clinical Educators, Health care administration, clinical nurse faculty	Nurse scientist/researcher, educator, scholar and leader in academic, health care, and political systems
Core Courses	Translational Research, Health Policy, Quality Improvement,	Advanced Research Methods Statistics, Grantsmanship, Quantitative and Qualitative



	Informatics, Organizational Systems, Healthcare Finance and Reimbursement	Research Methods, Research with Vulnerable Populations, Knowledge Development in Nursing Science, Accessing, Managing, and Packaging Information, Academic, Health Care and Political Systems.
Clinical Hours Required	540	*None
Project	Yes	No
Dissertation	No	Yes
Distance Learning/Online Option	Yes	No
Part-time study	Cohort format	Yes
Point of entry	A. Post master's in advanced nursing practice (Family, Adult, Pediatric Nurse Practitioner, Psychiatric-Mental Health, or Nurse Anesthetist) B. Post BSN	BSN or MSN (or related master's degree)
Program Length	2 Years (6 semesters)	3 to 5 years
Credits Required	36	BSN-PhD – 88 Credits MSN-PhD – 61 Credits
Curriculum Focus	Translation of evidence to practice, transformation of health care, Health care leadership, and Advanced Specialty Practice	Design and conduct rigorous research using advanced research methodology to address the health of the nation through the conduct of clinical research, dissemination of research findings through publications, and national and international presentations. Students develop a program of research based on advanced knowledge in their area of expertise.
GRE Required	Yes (applicable if admission G.P.A is less than 3.0). Otherwise, GRE is not required if admission G.P.A. is 3.0 and above.	Yes
* The BSN to PhD program does require clinical hours for the completion of clinical specialty which will vary		



MSN ESSENTIALS

The Essentials of Master's Education in Nursing (<http://www.aacnnursing.org/Portals/42/Publications/MastersEssentials11.pdf>) guide the preparation of graduates for diverse areas of practice in any healthcare setting. The MSN Program at Florida International University was designed to meet these nine *Essentials*.

1. Background for Practice from Sciences and Humanities
2. Organizational and Systems Leadership
3. Quality Improvement and Safety
4. Translating and Integrating Scholarship into Practice
5. Informatics and Healthcare Technologies
6. Health Policy and Advocacy
7. Interprofessional Collaboration for Improving Patient and Population Health Outcomes
8. Clinical Prevention and Population Health for Improving Health
9. Master's-Level Nursing Practice

American Association of Colleges of Nursing. (2011). *The Essentials of Master's Education in Nursing*. Washington, DC: Author.

DNP ESSENTIALS

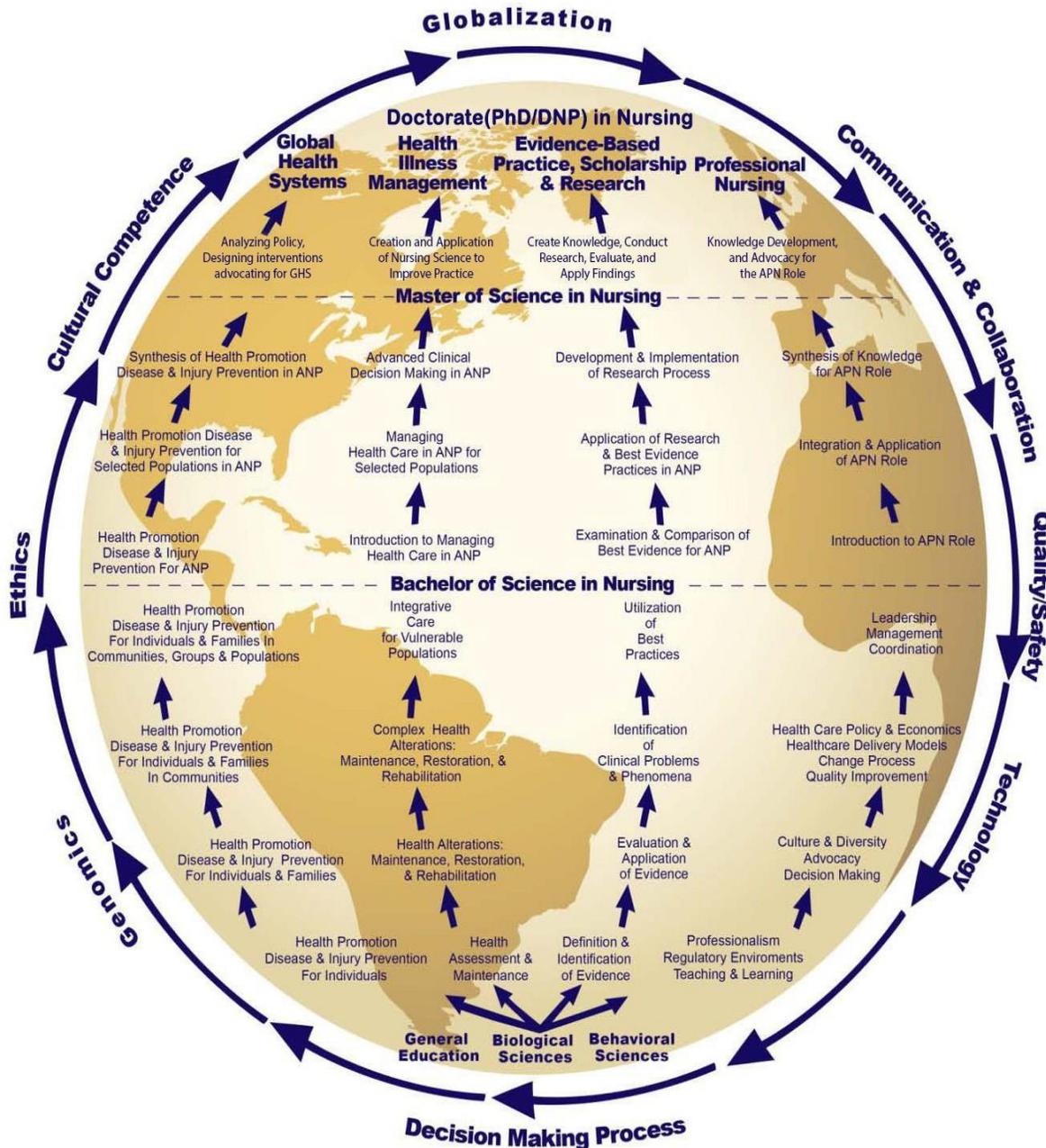
The Essentials of Doctoral Education for Advanced Nursing Practice (<http://www.aacn.nche.edu/dnp/pdf/essentials.pdf>), provide eight fundamental areas of emphasis for DNP programs and serve as a basis for accreditation of programs. The DNP Program at Florida International University was designed to meet these Essentials:

1. Scientific Underpinnings for Practice
2. Organizational and Systems Leadership for Quality Improvement and Systems Thinking
3. Clinical Scholarship and Analytical Methods for Evidence Based Practice
4. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care
5. Health Care Policy for Advocacy in Health Care
6. Inter-professional Collaboration for Improving Patient and Population Health Outcomes
7. Clinical Prevention and Population Health for Improving the Nation's Health
8. Advanced Nursing Practice

American Association of Colleges of Nursing. (2006). *The Essentials of Doctoral Education for Advanced Nursing Practice*. Washington, DC: Author.

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 health care. 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:

- American Association of Colleges of Nursing (AACN). Decision Making Process. Health/Illness Management. Retrieved from <http://www.aacn.nche.edu/>
- Agency for Healthcare Research & Quality-DHHS (AHRQ). Quality/Safety. Evidence-Based Practice, Scholarship, & Research. Retrieved from <http://www.ahrq.gov/>
- American Academy of Nursing (AAN). Evidence-Based Practice, Scholarship, & Research. Professional Nursing. Quality/Safety. Genomics. Technology. Retrieved from <http://www.aannet.org/i4a/pages/index.cfm?pageid=1>
- American Nurses Association (ANA). Code of Ethics. Professional Nursing. Communication & Collaboration. Decision Making Process. Quality/Safety. Genomics. Retrieved from <http://www.nursingworld.org/>
- International Council of Nurses (ICN). Cultural Competence. Globalization. Code of Ethics. Retrieved from <http://www.icn.ch/about-icn/about-icn/>
- Institute of Medicine (IOM). Quality/Safety. Global Health. Retrieved from <http://www.iom.edu/>
- Office of Minority Health-DHHS (OMH). Cultural Competence. Retrieved from <http://minorityhealth.hhs.gov/>
- Quality and Safety Education for Nurses (QSEN). Quality/Safety. Communication & Collaboration. Retrieved from <http://www.qsen.org/definition.php?id=4>
- World Health Organization (WHO). Globalization. Global Health Systems. Genomics. Safety. Technology. Retrieved from <http://www.who.int/en/>



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 Adult-Gerontology Nursing*.
- 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*.
- 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*.

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 6002 C 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***

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: Adult-Gerontology Primary Care Nurse Practitioner, Family Health Nurse Practitioner, Pediatric Primary Care Nurse Practitioner, Psychiatric-Mental Health Nurse Practitioner



For nurse practitioner students:

- See courses under **Global Health Systems**

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 6002 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**

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. *NGR 6538 Psychopharmacology for Advanced Practice Nursing* is a core knowledge required course for psychiatric mental health NP program.

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, psychiatric, or child programs 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 Pediatric Health Nursing students complete *NGR 6301C/6301L Advanced Child Health Nursing I Theory/Practicum* followed by *NGR 6302C/6302L Advanced Child Health Nursing II Theory/Practicum*, and finally *NGR 6337L Role Synthesis in Advanced Child Practice* and *NGR 6337C Clinical Decision Making in Child Health 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 *NGR 6619L Role Synthesis in Advanced Family Practice* and *NGR 6748 Clinical Decision Making in Family Health Nursing*.

Advanced Psychiatric-Mental Health Nursing students complete *NGR 6503C/6503L Advanced Psychiatric-Mental Health Nursing I Theory/Practicum* followed by *NGR 6504C/6504L Advanced Psychiatric-*



Mental Health Nursing II Theory/Practicum, and finally NGR 6505L Role Synthesis in Advanced Psychiatric-Mental Health Practice and NGR 6560 Clinical Decision Making in Psychiatric-Mental Health Nursing.

Master of Science in Nursing Nurse Educator students complete *NGR 6713 Curriculum Development in Nursing*, followed by *NGR 6715 Instructional Technology in Nursing and Health Sciences*, *NGR 6714C Clinical Teaching Strategies for Nursing*, *NGR 6708C Classroom Teaching Strategies for Nursing*, and *NGR 6718 Testing and Evaluation in Nursing Education*. Successful completion of this track consists of 37 credit hours of which 280 practicum hours are in classroom/clinical teaching experience/seminar.

RN-MSN-BSN

In 2008, the graduate entry 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 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.

In addition to the courses listed above, currently students must complete the FIU University Core Curriculum, and Equivalency Exams and be admitted to the MSN Program prior to enrollment in Level III courses. Applicants must have a 3.2 cumulative GPA to be admitted to the MSN Program and must meet admission criteria for the FIU Graduate School and MSN Program. Students must be admitted to the MSN program prior to taking Pathophysiological Basis of ANP, Culture & Advanced Nursing Practice, and Advanced Client Assessment courses.

Electives

Elective courses are incorporated into the curriculum in each advanced nurse practitioner specialty program. 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.



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.

Organizing Curriculum Framework of the DNP Program

The DNP program offer three entry options: 1) a post-masters doctoral plan of study for the registered nurse with specialty preparation in advanced clinical nursing practice (nurse practitioners, nurse anesthetists, nurse midwives), 2) a post-baccalaureate doctoral plan of study that incorporates essential components of the MSN curriculum with the DNP curriculum for completion and conferral of both degrees; MSN and DNP in a streamline format for the registered nurse seeking specialty preparation in advanced clinical nursing practice (adult-gerontology primary care, family health, pediatric primary care, or psychiatric-mental health) and 3) a post-baccalaureate doctoral plan of study for the registered nurse seeking advanced clinical nursing specialty preparation in nurse anesthesia practice.

The DNP program of study builds upon the clinical specialization to include study of advanced specialty practice; systematic practice and program outcome evaluation; application of health informatics resources; development of safe, equitable, and cost effective health policy; innovation, implementation and evaluation of care delivery models; leadership development in health care delivery; and clinical expertise for advanced nursing practice and education.

The curriculum is based upon the outcome objectives for DNP graduates as defined by the *2006 AACN Essentials of Doctoral Education for Advanced Nursing Practice*. The curriculum incorporates applicable graduate course offerings within the College as well as new courses developed specific to the DNP program. The resulting curriculum is educationally sound and cost effective. DNP graduates exit the program with advanced skills and competency in 1) analyzing, designing, implementing, managing, and evaluating health care practice, policy, and delivery systems; 2) facilitating the application and integration of research into clinical practice using innovative approaches across multiple settings to improve health care, patient outcomes, and health care systems; and 3) preparing to assume leadership roles in practice, education, and management.

The organizing curriculum framework for the DNP program is derived from the mission, vision, and goals of the Nursing Unit and the goals and objectives of the DNP program. The DNP organizing curriculum framework builds upon a common global concept schematically depicted in the “globe.”

The DNP curriculum framework is founded on the knowledge base and advances the organizing processes (vertical and pervasive threads) of the BSN and MSN curricula on the “globe.” The organizing curriculum framework for the DNP program is divided into the major components of CORE KNOWLEDGE, FOCUS CONCENTRATION, and DNP SCHOLARLY PROJECT, which include clinical mentorship hours and project development and dissemination. The DNP organizing curriculum framework major 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**).

Students advance through the major components of the DNP curriculum as programs of study are completed. Courses within the components are delineated as 1) CORE KNOWLEDGE 2) FOCUS CONCENTRATION, 3) DNP SCHOLARLY PROJECT courses. The CORE KNOWLEDGE and DNP SCHOLARLY PROJECT courses are taken by all DNP students, irrespective of the entry/progression plan of study option. The FOCUS CONCENTRATION courses are embedded with the MSN curriculum and dependent on which advanced clinical practice specialty the student has chosen to pursue.

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**.



Global Health Systems

The vision of the Nursing Unit is to prepare graduates that will be recognized for their contribution in healthcare, education, leadership and research with a focus on the needs of the underserved populations locally, nationally and globally. DNP graduates will be prepared to analyze the scientific, social, ethical, economic, political, legal and policy components of health care systems which impact health care planning, access, and delivery; and implement analytical methodologies for the evaluation and formulation of health care policies and practices for the clinical situations, practice environment, and the health care delivery system.

DNP students acquire knowledge in global health systems in the CORE KNOWLEDGE component courses: *NGR 7733 Organizational Dynamics of Health Systems; NGR 7891 Healthcare Finance and Economics in Advanced Clinical Practice; and NGR 7892L Health Policy Practicum*

DNP students apply knowledge in global health systems in the DNP PROJECT component courses: *NGR 7940C Project I – Identification & Proposal; NGR 7941C DNP Project II – Implementation; and NGR 7942C DNP Project III – Evaluation & Dissemination.*

Health/Illness Management

The vision of the CNHS nursing unit is to prepare graduates who will be able to collaborate with healthcare agencies to promote excellence through cost effective, accessible, equitable and humanistic healthcare delivery systems for divergent individuals, families and communities. DNP graduates will be prepared to demonstrate advanced levels of clinical practice, judgment, and scholarship in nursing based on scientific knowledge underpinning practice; access, utilize, manage, and safeguard state-of-the-science information technology and health care informatics systems for care delivery, systems operations and quality improvement; and collaborate with interdisciplinary teams in the delivery, evaluation, and quality improvement of health care, health promotion, practice models and health policy for individuals and populations.

DNP students acquire knowledge in health/illness management in the CORE KNOWLEDGE component courses: *NGR 7769 Patient Safety and Quality Improvement in Health Care; and NGR 7871 Healthcare Informatics.*

DNP students apply knowledge in health/illness management in the DNP PROJECT component courses: *NGR 7940C Project I – Identification & Proposal; NGR 7941C DNP Project II – Implementation; and NGR 7942C DNP Project III – Evaluation & Dissemination.*

Evidence-Based Practice, Scholarship & Research

The goals of the NWCNHS nursing unit are 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. DNP graduates will be prepared to evaluate and translate research to support evidence-based practice to improve health care of medically, socially, and culturally diverse, underserved and vulnerable populations across the life span; and integrate the application of scientific evidence, professional values, and ethical decision-making in advanced nursing practice and health care delivery.

DNP students acquire knowledge in evidence-based practice, scholarship, and research in the CORE KNOWLEDGE component courses: *NGR 7121 Knowledge Development in Nursing Science; NGR 7854 Analytical Methods for Evidence-Based Clinical Practice; and NGR 7853 Translational Research.*

DNP students apply knowledge in evidence-based practice, scholarship, and research in the DNP PROJECT component courses: *NGR 7940L/NGR 7941/NGR 7942 Residency in Doctoral Nursing Practice I/II/III and NGR 7940/NGR 7941/NGR 7942 DNP Project I – Identification & Proposal; DNP Project II – Implementation; DNP Project III – Evaluation & Dissemination.*



Professional Nursing

The goals of the CNHS nursing unit are to prepare graduates for leadership roles in basic and advanced professional nursing practice in a rapidly changing, multicultural, multiethnic, global environment. DNP graduates will be prepared to assume professional nursing roles in the development of excellence in clinical care and health care delivery systems through advanced nursing roles in clinical practice, education, or management settings.

DNP students apply professional nursing roles in the DNP RESIDENCY and PROJECT component courses: *NGR 7940C/NGR7941C/NGR 7942C Doctoral Nursing Practice Scholarly Project I/II/III – Identification & Proposal; DNP Project II – Implementation; DNP Project III – Evaluation & Dissemination.*

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.

DNP Curricular Model

CURRICULAR COMPONENT	Credits
DNP Core Course Credits	
NGR 7121 Scientific and Theoretical Foundations for Advanced Nursing Practice	3
NGR 7733 Organizational Dynamics of Health Systems	3
NGR 7769 Patient Safety and Quality Improvement in Health Care	3
NGR 7853 Translational Research	3
NGR 7854 Analytical Methods for Evidence-Based Clinical Practice	3
NGR 7871 Healthcare Informatics	3
NGR 7891 Healthcare Finance	3
NGR 7892L Healthcare Policy Practicum	3
DNP Quality Improvement Project Course Credits	
NGR 7940 DNP Project I – Identification & Proposal	4
NGR 7941 DNP Project II – Implementation	4
NGR 7942 DNP Project III – Evaluation & Dissemination	4
Minimum program requirements for the DNP degree for Doctorate in Nursing Practice = 36 Credits	
Theory (24 Credits) 24 Credits X 1 Contact Hour/Credit = 24 X 15 [Total # of Semester Weeks] = 360 Contact Hours TOTAL	
DNP Quality Improvement Project (12 Credits) = 6 Credits X 1 Contact Hour/Credit - 90 Contact Hours TOTAL	
6 Credits X 6 Contact Hours/Credit X 15 [Total # of Semester Weeks in Mentorship] = 540 Contact Hours TOTAL	



GENERAL STUDENT INFORMATION/POLICIES & PROCEDURES

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.

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 laptop computers, program fees, stethoscope, penlight, watch with second hand, name badge, lab coat, 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

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

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. It is the student's responsibility to understand financial aid implications for dropping courses that may directly impact their financial aid status. This can also be impacted by non-successful completion of a course and/or leave of absence. 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

Faculty Advisor

All students in the Graduate Nursing 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 and/or DNP degree. Faculty advisors are available throughout the academic year. The advisor assists the student in planning a course of study that meets the MSN and/or DNP program objectives and requirements, as well as the student's particular interests.

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 by contacting the faculty member directly via phone or email; as well as through the program's support staff. Appointments at non-posted times can be made directly with the faculty member.

Degree Completion Requirements

Questions on the completion of academic requirements for advanced degrees should be addressed by the faculty advisor or the track leader. The preparation and filing of the Scholarly Project should be addressed primarily by the DNP Scholarly Project Team leader (faculty) Chairperson. Ignorance of a rule or a deadline does NOT constitute a basis for waiving that rule or deadline!



CREDIT COURSE(S) TIME-FRAME 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 or DNP 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 approved by Graduate Nursing Chair, DNP program 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 chair 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 and mentorship 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. Both the Chair of the Graduate Nursing Program and the Associate Dean of Academic Affairs must approve a heavier load.

Degree Verifications

Degree verifications are done through the University Registrar's Office and the Graduate Nursing department (as it relates to nursing specific degree and/or clinical hours verifications). 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.

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.



ACADEMIC PROGRESSION INFORMATION/POLICIES & PROCEDURES

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, Family Health, Pediatric, and Psychiatric-Mental Health): Students who fail either the clinical course or the theory/didactic course **MUST** repeat **both** the theory/didactic and clinical courses 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

Students must notify their faculty advisors prior to dropping any course. Students who fail to notify their advisors may jeopardize their progression in the Graduate Nursing program.

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 faculty advisor's signature.

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.

Graduate Nursing students who have withdrawn from the NWCNHS must petition the Chair of the Graduate Program in writing for re-entry, providing there is evidence of resolution of the problems that necessitated withdrawal and the student meets all admission requirements in place at the time of readmission request. 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.



GRADUATION / PROGRAM COMPLETION

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

- Satisfactorily complete all courses and clinical experiences/competencies required for the MSN degree and the specialty program, including satisfactory completion of the required program EXIT examination.
- Earn the minimum of credits and clinical clock hours listed for the selected clinical specialty program.

To be eligible for the Doctor of Nursing Practice (DNP) degree, the student must:

Satisfactorily complete all courses required for the DNP degree, including the required clinical mentorship experiences, Scholarly Project submission, approval, and final presentation.

- Earn the minimum of credits and clinical mentorship clock hours listed for the degree.

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

Graduate Nursing students are expected to review the FIU Student Handbook, the APN Clinical Preceptor Manual, the APN Course Examinations and Assignments Procedures, and the 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 academic dishonesty, bribery, cheating, commercial use, complicity, falsification of records, and plagiarism:

- **Academic Dishonesty**

Academic dishonesty is defined as any act or omission not specifically mentioned in the Code and which is outside the customary scope of preparing and completing academic assignments and/or contrary to the above stated policies concerning academic integrity.

- **Bribery**

Bribery is defined as the offering of money or any item or service to a member of the faculty, staff, administration, student, or any other person in order to commit academic misconduct.

- **Cheating**

Cheating is the unauthorized use of any materials, information, study aids or assistance from another person on any academic assignment or exercise, unless explicitly authorized by the course Instructor. Cheating also includes assisting another Student in the unauthorized use of any materials, information, study aids, unless explicitly authorized by the Instructor and having a substitute complete any academic assignment or completing an academic assignment for someone else, either paid or unpaid.

- **Commercial Use**

Commercial use is the selling of course material to another person, Student, and/or uploading course material to a third-party vendor without authorization or without the express written permission of the University and the Instructor. Course materials include but are not limited to class notes, Instructor's PowerPoints, tests, quizzes, labs, instruction sheets, homework, study guides and handouts.

- **Complicity**

Complicity is defined as the planning or acting with one or more fellow Students, any member of the faculty, staff or administration, or any other person to commit any form of academic misconduct together.

- **Falsification of Records**

Falsification of records includes the tampering with or altering in any way of any academic record used or maintained by the University.

- **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.

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 affect 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).



EXAMINATION POLICIES/PROCEDURES

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.



GRADES AND GRADING

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.

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

A	93-100%
A-	91-92%
B+	89-90%
B	85-88% PASSING
B-	83-84%
C+	81-82%
C	77-80%
D	67-76%
F/F0	00-66% SEE BELOW

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

GPA Calculation Scale



A	4.00
A-	3.67
B+	3.33
B	3.00
C+	2.33
C	2.00
D	1.00
F/F0	0

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 and DNP (didactic 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.

The Panther Success Network is a FIU platform that allows faculty to remain connected with students who are at risk for course failure. The Panther Success Network makes it easier for students to stay on track, alerts students if remediation is required through progress reports from faculty and predetermined success markers. The Panther Success Network includes a record of advising reports and notes that both student and faculty advisor may view at any time.



ACADEMIC WARNING, PROBATION, AND DISMISSAL

Academic Warning

Graduate students in academic jeopardy are notified through conferences or in writing by the course faculty member, Advisor, and/or the Chair 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 who's 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

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 effects 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 hours 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

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 Chair of Graduate Nursing program(s) 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 may 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.

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 carpools, distance from home or work to clinical site, or making babysitting and/or day-care arrangements.

Nursing Clinical Rotations / Mentorship

Each clinical course and DNP scholarly project requires supervised practicum / mentorship with a school-approved preceptor / mentor and under the direction of the course faculty. The student cannot be paid for participation in the practicum / mentorship experience(s).

MSN / Clinical Specialty 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.

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 always expected to present a professional image. 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 Graduate Nursing FIU students following completion of Clinical / Mentorship Orientation. See the FIU web site for information on obtaining the panther ID.

Students must identify themselves immediately as an FIU Graduate Nursing Student (i.e., Advanced Practice Nursing or Doctor of 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.

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 Chair of the Graduate Nursing program must be notified and all steps of NWCNHS CLINICAL INCIDENT/BLOODBORNE PATHOGEN EXPOSURE POLICY must be followed.



DNP PROJECT COURSE SERIES

- DNP Project courses (I, II, and III) are designed as a 3-course series that build on each other. The courses provide the DNP student with mentored opportunities to identify, develop, implement, evaluate, and disseminate a quality improvement project. All DNP core courses must be satisfactorily completed before beginning the first DNP Project course.
- If the student has not satisfactorily completed the corresponding portion of the DNP Project during courses I, II, or III at the end of the four credit course, the student may receive an incomplete on one of the courses until the work is approved and graded by the Faculty member (University/College policies and procedures for Incomplete Grade apply). However, progression into the next Project level cannot occur until satisfactory completion of work is approved and a satisfactory grade is posted by the Project Faculty member.

See the forms section of the course syllabus/shell for all related forms needed.

DNP Project

The DNP program culminates in the successful completion of a 12 credit DNP Project, divided in 3 Progressive Project Courses (4 credits each) beginning after the completion of all DNP core course work. The DNP Project is designed by the student in collaboration with a faculty member and clinical preceptor and the report must be a significant, evidence-based contribution to nursing practice and be suitable for publication in a peer-reviewed, practice-focused nursing journal. Examples of quality improvement projects include quality improvement project proposal, program needs assessment, evidence-based program development, existing program evaluations, development of an assessment or therapeutic protocol, or a cost/benefit analysis of program models. Through this scholarly clinical project, students are intended to demonstrate synthesis of scientific knowledge in their specialty practice area and contribute to existing nursing knowledge.

DNP Project Faculty

As soon as the student has registered for the DNP courses, student will identify a focus area for the DNP Project. A faculty will guide the student in procedures about completion of the project. The student will select the immersion site with a faculty. The choice of project topic should be made based on the student's proposed area of clinical inquiry and the faculty member's clinical and scholarly interests.

The faculty must be a doctorally-prepared faculty member in the NWCNHS.

The DNP faculty supervises the project as a whole and is the primary resource person for all aspects of the project. A recommended approach for students to use in identifying a project mentor is to become informed about the scholarly interests and mentor's areas of expertise. The student, faculty, and mentor will work together, often intensively, over an extended period, so careful selection is essential.

The faculty and immersion site mentor assists the student in developing a continued plan for the project, monitoring the student's progress, and guiding the student throughout the DNP Project. To formalize the DNP Project Team, signatures from all team members are obtained by the DNP student and recorded on the DNP Project and DNP Team Approval Form. Since this form establishes the type of output the student will produce, the number of articles if applicable, and other important information, the student is advised to keep a copy of this form before sending the original, signed form to the Director of the DNP degree program for his/her signature.

Changes in DNP Project Team Membership

Any changes in the DNP Project team membership must be approved by faculty and/or Departmental Chair.

Final DNP Project



The final product includes the Final Report agreed upon by the student and their DNP Team as documented on the DNP Project and Team Approval Form, which could be:

1. A manuscript submitted for publication (Number of manuscripts required)
2. A grant proposal
3. A publishable clinical guideline
4. Innovative change project (Multimedia, Policy, Curriculum development)
5. Other (_____) Ex. Legislative bill, etc.

Steps to the DNP Project Process

The DNP project process consists of the following steps:

Step 1: Identify project topic area of interest (Project title as well)

Step 2: DNP Project Team established (lead faculty, student, primary clinical immersion mentor, and others as needed to inform the project)

Once a student has formed the DNP Project Team the student must complete the DNP Project and DNP Team Approval Form as described above (see handbook for form).

Step 3: Write Literature Review. Findings from the Literature Review will serve as the foundation of the Quality Improvement project.

Step 4: Write the Quality Improvement Project Proposal. DNP project proposal primarily focus on quality improvement initiatives at the immersion site. There must be clear evidence that DNP project proposal was developed from the finding of the literature review and the established needs of the immersion site. The DNP project protocol must be submitted to the FIU IRB for approval (additional IRB immersion site approvals may be required).

Step 5: Complete Project

Write and submit the DNP Project Final Report (APA format required) which will include the literature review, developmental process for the quality improvement project, and implementation results.

Step 6: Oral Presentation

The goals of the DNP oral presentation are:

- 1) Develop professional presentation skills.
- 2) Oral presentation of a command of the topic by presenting literature review and demonstrate how the Quality Improvement Project emerged from the findings of the literature review.
- 3) Presentation of QI project results.
- 4) Disseminate knowledge from the final project to team members, nursing peers and the academic



community at the annual DNP Symposium

All oral presentations must be live (synchronous) presentations to the DNP Team/NWCNHS. DNP Symposium is open to the public.

Step 7: Submit Copies of Completed DNP Project Report

Once the oral presentation has been completed and approved by the student's committee, students are required to submit a minimum of two (2) bonded copies of the final project to the Departmental Chair for signing: one for the Chair, and one for the Graduate office. Final copied should be printed on high quality bond paper, 11x 8.5, no less than a standard 12-point font (Times Roman, Arial, Cambria).

Students will also submit an electronic copy of their final project report, and product to the DNP program director. This electronic version must have the signed title page and include all of the attachments, and sign off forms as well as any final products produced as one merged pdf document entitled with the student, Last Name, First Name, and "DNP" (insert Class year): Ex; **Smith, John, DNP 2020**. This is to be submitted on a USB flash drive with no other documents on it.

Students must meet the deadlines for completion/presenting, formatting and submission for the semester in which they will complete degree requirements. The deadlines are published in the Schedule of Classes and graduate school web site. Timelines will be adhered to closely.

GUIDELINES FOR DNP PROJECT and FINAL REPORT

The DNP student is expected to submit a quality improvement project commensurate with advanced doctoral nursing practice specific to their focus concentration area: advanced clinical practice, clinical education, or systems administration. To complete the objectives of the three-course series successfully, the DNP student is expected to submit a doctoral thesis of the Project (i.e., quality improvement project) completed in conjunction with the advanced doctoral nursing practice mentorship experience, and disseminate findings of the project. Dissemination activities (i.e, NGR 7942) may take several forms including development of an evidence-based practice guideline, educational modules, curriculum, tool kit to move science into practice, publication, and other strategies.

Focus of DNP Project (Clinical Mentorship) Hours

Beyond the MSN, clinical practice experiences at the DNP level expand the student's practice to DNP level expectations. All students must complete a minimum of 540 supervised practice hours at the DNP level.

NOTE: Per the DNP essentials all students must have minimally a 1,000 documented clinical practice hours post-baccalaureate. Hence students might be required to complete additional residency hours beyond the required 540 if upon admission based on the required "Verification of Post-Baccalaureate Clinical Practice Hours" form their total number of hours upon completion of the program with the 540 will be less than the 1,000 hour minimum requirement. This will be determined early in the program and a plan of action designed for each student who may need additional practice hours.

Particular areas of focus for DNP practice experiences include:

1. Translation of research evidence into practice, including the complexities of motivating and achieving sustainable practice changes and staff behaviors in clinical environments.
2. Systems leadership for improving patient and healthcare outcomes.
3. Specific DNP competencies that the student may lack or has yet to develop. Students are encouraged to review the DNP *Essentials* document and identify specific competencies in their practices that they would like to strengthen through their clinical hour requirements.
4. Development of skills that support successful completion of the student's DNP Project.
5. Health policy immersion, analysis, and creation.

Clinical hours and credits needed for DNP Project I I (NGR 7940C), DNP Project II (NGR 7941C), and in DNP Project III (NGR 7942C) are stipulated on the course syllabus and are coordinated collaboration with the course professor. Students may fulfill these clinical requirements in their own work settings, through arrangements with a NWNWCNHS approved preceptors. It may be helpful to schedule a joint meeting of the Residency Faculty, student, and Preceptor early in each course to clarify the student's learning objectives and plan for student clinical hours.

Guidelines and Policy for Preceptors and Clinical Contracts

Students may not begin any DNP Residency activities until an approved clinical contract with the healthcare facility or institution is in place. FIU must have an affiliation agreement in place with the potential clinical site before student can attend that clinical site. DNP clinical rotations must be approved by the Clinical Education Department before students can start residency immersion experience hours.

Students must follow the following steps:



1. Identify a preceptor/mentor in the student's place of practice or in the community. Ideally the preceptor should be doctorally-prepared, an expert in the student's field, willing to be the student's preceptor/mentor, and agree to complete all written evaluation forms to document the Residency.

2. Verify that a contract with the facility or institution is in place. Follow the Clinical Education – Preceptor Approval Process. Check our current list of Clinical Site Contracts

Note: *Initiation of new contracts can take from 6 – 8 weeks, students are encouraged to begin the placement verification process with sufficient time.*

3. Whether you select a currently contracted facility or initiate a new contract, you are responsible for reading the contract, abiding by it, and completing and submitting any requisite forms in addition to NWNWCNHS requirements governing clinical placement.

4. You must also fully adhere to any rules and regulations specified by any clinical facility or institution that govern student clinical rotations on their premises.

General Guidelines for Mentorship Component of DNP Project Courses

- Clinical mentorship hours may be done at the student's current job site. However, if this is the case the clinical hours must go beyond the student's current work responsibilities and be done outside of their regularly scheduled work hours. Also, the preceptor/mentor of record cannot be the student's regular work supervisor.
- Clinical mentorship hours must be supervised by a preceptor/mentor who is an expert in the student's clinical specialty area and/or in the DNP Project field of interest.
- The student must document a minimum of 540 supervised clinical/practice hours, upon completion of the program, as stipulated in each of the DNP Project courses and Health Policy immersion course.
- Students must develop objectives/goals for their residency experiences in collaboration with their preceptor/mentor and they must be approved the DNP residency faculty member.
- Students must document meeting all objectives/goals.
- DNP Project courses have a coordinating course faculty for each of the three DNP Project courses.
- DNP Project courses are designed in a progressive series fashion, therefore, successful completion of DNP Project I is necessary to progression into DNP Project II and successful completion of Residency II is necessary for progression into DNP Project III.
- Students may not register for more than one DNP Project course per semester. Each DNP Project course consist of 4 credit hours (2 credits for DNP scholarly project and 2 credits for DNP clinical mentorship directly related to the DNP scholarly project focus area = 160 hours of clinical practice time.



CLINICAL FACILITIES

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. The DNP mentor/preceptor must have extensive clinical expertise in their specialty area. 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



ours, as the purpose of clinical rotations is “hands on practice”.

- A majority of student’s 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.