

Patty Hanks
SHELTON
SCHOOL OF NURSING

HSU • McM
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325-671-2399
www.phssn.edu

MSN Student Handbook
2018-2019



WELCOME TO GRADUATE STUDENTS

It is with great pleasure that we welcome you to graduate studies at PHSSN. We look forward to the exchange of stimulating ideas, the sharing of new knowledge and the development of a collegial relationship with you.

Administration, faculty and staff are dedicated to creating an environment in which your goals can be achieved. We look forward to your graduation and your future success.

Dr. Sheila Garland
Dean

INTRODUCTION

Introduction

The purpose of this handbook is to provide you with information concerning your graduate program in nursing and to anticipate some of the frequently occurring questions of graduate students. Graduate students are expected to be aware of all regulations pertaining to their work and study. You are referred to the publications of your home university, including the [Graduate Catalog](#).

The Patty Hanks Shelton School of Nursing (PHSSN) was established in 1979 as an educational consortium consisting of Hardin-Simmons University and McMurry University for the purpose of offering an upper division major in professional nursing and graduate nursing degrees. The School offers a four year program leading to a Bachelor of Science in Nursing (BSN) and a Registered Nurse Baccalaureate articulation program. The graduate program offers the Master of Science in Nursing (MSN) degree in the functional areas of Education or Family Nurse Practitioner. Through Hardin-Simmons University PHSSN also offers a Post-Masters Certificate Family Nurse Practitioner track.

Accreditation

The PHSSN is approved by the Board of Nurse Examiners for the State of Texas.

The baccalaureate degree program in nursing and master's degree program in nursing at PHSSN is accredited by the Commission on Collegiate Nursing Education, 655 K Street, NW, Suite 750, Washington, DC 20001, 202-887-6791.

The School of Nursing is a member of the Southern Regional Education Board, the Southern Council on Collegiate Education in Nursing, and the American Association of Colleges of Nursing.

Mission Statement

The mission of the Patty Hanks Shelton School of Nursing is to educate baccalaureate and advanced practice nurses for lives of Christian service and leadership to meet the ever-changing healthcare needs of a global society.

Purpose of the Master of Science in Nursing Program

The purpose of the Master of Science in Nursing Program is to prepare nurses to assume leadership roles in advanced positions as family nurse practitioners, educators, or managers of patient care services within a variety of institutions or health care agencies. In addition, students are guided to incorporate theory and the research process in a variety of roles and practical settings.

Philosophy of the Masters of Science in Nursing Program

The graduate program of PHSSN functions within the structure of an educational consortium consisting of a consortium of Christian universities. We accept the underlying philosophy and objectives of the consortium universities that individuals be educationally prepared in a manner that promotes the development of intellectual, cultural, moral and religious values.

Faculty believe that nursing is a profession that is responsive to the changing health care needs of individuals and is supported by an expanding body of knowledge. Graduate students through study and interdisciplinary collaboration, expand their understanding of health, environment, person, and nursing roles.

Building upon a baccalaureate nursing education the faculty believe that development of critical thinking, communication, clinical skills, creativity, and self-direction are essential elements in graduate nursing education. Through the educational process faculty seek to promote awareness of social, cultural, and ethnic diversity, believing it enriches professional growth and development. The collaborative educational process between the faculty and students promotes progressive mastery and increased learner maturity. Implicit in advanced professional roles in nursing is the acceptance of accountability for lifelong learning, professional growth, competent practice, and effective leadership.

Program Outcomes of the Master of Science in Nursing Program

The mission, philosophy, and values guiding the PHSSN graduate program curriculum and outcomes are aligned with current state and national nursing standards and guidelines including the Texas Board of Nursing (TXBON), the American Association of Colleges of Nursing (AACN) Essentials of Master's Nursing Education (AACN, 2011), the Graduate Quality and Safety Education for Nurses competencies (QSEN, 2012), the National League for Nursing (NLN) Nurse Educator Core Competencies (NLN, 2013), the National Organization of Nurse Practitioner Faculties (NONPF) 2017 Nurse Practitioner Competencies, the 2013 NONPF FNP Specialty focus competencies, and the 2012 Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Quality Nurse Practitioner Education).

PHSSN MSN graduates are prepared to:

1. Practice advanced nursing roles using the nursing process to deliver advanced, holistic, comprehensive care to individuals and families throughout the life cycle in a variety of settings within a specific population focus i.e. nursing education, advanced clinical practice.
2. Design and implement strategies that incorporate the use of scientific inquiry and theoretical concepts from nursing and related fields to influence healthcare outcomes for individuals, populations, and healthcare systems.
3. Analyze spiritual, cultural, social, legal, ethical, economic, and healthcare policy perspectives that influence the health care delivery system.
4. Lead interprofessional and collaborative teams in developing evidence-based strategies within various health care systems to foster quality improvement and safety in healthcare delivery.

5. Integrate the use of information systems and patient care technologies in the development, implementation, and evaluation of evidence-based practices to support decision making for improving health and patient care delivery to a diverse global society.
6. Demonstrate the highest level of accountability for professional practice, Christian service, and life-long learning.
7. Engage in leadership through advocacy for evidence-based health policy development to improve local, national, and global health population outcomes.

Students completing the MSN FNP specialty focus courses are prepared to:

1. Demonstrate advanced practice clinical decision making in providing primary care to individuals and families throughout the life cycle in a variety of settings.
2. Provide collaborative leadership within interprofessional teams to develop and implement cost-effective and ethical treatment plans for individuals and families in primary care settings.
3. Complete a nationally recognized certification exam and apply to the Texas Board of Nursing for licensure as an Advanced Practice Nurse.
4. Analyze spiritual, cultural, social, legal, ethical, economic, and healthcare policy perspectives that influence the health care delivery system and advanced nursing practice.

Students completing the MSN Nursing Education specialty track courses are prepared to:

1. Practice in an advanced nursing and educator role within an academic, community, and Health Care Delivery setting.
2. Demonstrate skills in instructional methods, evaluation strategies, and curriculum development.
3. Analyze spiritual, cultural, social, legal, ethical, economic, and healthcare policy perspectives that influence the health care delivery system and nursing education.
4. Demonstrate effective oral and written communication in the nurse educator role.

Post-Masters Certificate students completing the FNP specialty focus courses are prepared to:

1. Demonstrate advanced practice clinical decision making in providing primary care to individuals and families throughout the life cycle in a variety of settings.
2. Provide collaborative leadership within interprofessional teams to develop and implement cost-effective and ethical treatment plans for individuals and families in primary care settings.
3. Complete a nationally recognized certification exam and apply to the Texas Board of Nursing for licensure as an Advanced Practice Nurse.
4. Analyze spiritual, cultural, social, legal, ethical, economic, and healthcare policy perspectives that influence the health care delivery system and advanced nursing practice.
5. Demonstrate the highest level of accountability for professional practice, Christian service, and life-long learning.

National Certification Exams/ Licensure

PHSSN prepares students for national certification in their discipline. Students in both the Education and Family Nurse Practitioner tracks of the MSN and the Post-Masters Family Nurse Practitioner Certificate track are eligible upon graduation to sit for national certification exams in their respective disciplines. Students graduating in the Education track are eligible to sit for the optional National League for Nursing Certified Nurse Educator exam. Students graduating from the FNP MSN and Post-Masters FNP Certificate programs are eligible to sit for a Family Nurse Practitioner certification exam from either the American Academy of Nurse Practitioners or the American Nurses Credentialing Center. Additionally, FNP students in both tracks are eligible to apply for licensure with the Texas Board of Nursing as an Advanced Practice Registered Nurse.

ACADEMIC PROFESSIONAL CONDUCT

Academic Honesty and Integrity

The education of students at PHSSN is based on the concept that integrity, sense of responsibility, and self-discipline are inherent to the profession of nursing, Christian service and leadership. The responsibility of the individual student to sustain high ethical standards is parallel to the concept that the professional nurse must be accountable for professional standards in the practice of nursing (ANA Code of Ethics for Nurses, 2015). Mutual respect and trustworthiness between the faculty and students promote optimal learning. The continuation and enhancement of ethical standards within the academic community and nursing profession are the individual responsibility of each student and faculty member.

Nursing students are expected to maintain an environment of academic integrity. It is expected that individual work should be completed by the individual responsible for the work according to the standards for the course involved. Academic work includes but is not limited to reading assignments, assessments, examinations and tests, attendance at required out-of-class activities, written presentations and oral presentations.

Actions involving scholastic or academic dishonesty violate the professional code of ethics and are disruptive to the academic environment. It is the philosophy of PHSSN that academic dishonesty is an unacceptable mode of conduct and will not be tolerated in any form. Students involved and found guilty of academic dishonesty are subject to disciplinary action that can range from lowering the assigned grade up to and including an “F”, course failure, suspension or dismissal from the program.

Academic dishonesty occurs when a student submits the work of someone else as his/her own or has special information for use in an evaluation activity that is not available to other students in the same activity. Examples and definitions of unacceptable behaviors include but are not limited to the following:

A. Cheating:

1. Exchanging information during an examination or copying from another’s paper
2. Using unauthorized notes, study aids, and/or information from another person on an examination, report, paper, or other evaluative document
3. Acquiring answers for any assigned work or examination from any source not authorized by the instructor(s) or the specific assignment, such as, opening the book on a closed book test or using notes on a no-note test
4. Unauthorized altering of a graded work after it has been returned, then submitting the work for re-grading
5. Submission for credit of purchased work
6. Allowing another person(s) to do all or part of one’s work and to submit the work under one’s own name
7. Collaborating with another student during a test without authorization
8. Knowingly using, buying, selling, stealing, transporting, or soliciting, in whole or in part the contents of a test without consent of the instructor
9. Substituting for another student or permitting another student to substitute for oneself to take a test
10. Obtaining an un-administered test or information about an un-administered test
11. Providing answers for any examination or assigned work when not specifically authorized to do so by the instructor(s)
12. Informing any person(s) of the contents of any examination prior to its being given
13. Claiming credit for attendance or service activity without attending or performing the activity

- B. **Plagiarism** is the appropriation, buying, receiving as a gift, or obtaining by any means another person's work and the submission and representation of it as one's own work without due credit or acknowledgment; taking credit for someone else's work or ideas, stealing others' results or methods - See Appendix B
- C. **Collusion** is the unauthorized collaboration with another person(s) in preparing any academic work offered for credit when specifically appraised by the instructor(s) to do independent work
- D. **Conspiracy** is the planning or agreeing with other person(s) to commit any act of academic dishonesty
- E. **Aiding and Abetting Dishonesty** is providing material, information or assistance to another person(s) with the knowledge or reasonable expectation that the material, information or assistance will be used to commit an act that would be prohibited by ethical standards or by law or another applicable code of conduct
- F. **Falsification of Data:** Dishonesty in reporting results, ranging from sheer fabrication or data, improper adjustment of results, fabricating any clinically related situation, altering clinical documents and gross negligence in collecting and analyzing data, to selective reporting or omission of conflicting data for deceptive purposes

Students who commit or have knowledge of academic integrity violations are expected to report such violations to the Program Director and/or Dean of the School of Nursing. Failure to report violations about which one has knowledge is a failure on the part of the student to comply with professional standards. Faculty who have knowledge of academic integrity violations are expected to report these violations to the Program Director and/or Dean of the School of Nursing.

Procedural guidelines for initiation of reporting and action, conducting an investigation and disposition of alleged violations are located in the School of Nursing Academic Integrity Policy. This policy operates in concert with those established by each of the parent universities and to ensure facilitation of a student's right to due process.

Title IX - Sexual Harassment

PHSSN is committed to providing its students, faculty and staff with an environment free from implicit and explicit coercive behavior used to control, influence or affect the well-being of any member of the PHSSN community. Sexual harassment of any person is inappropriate, unacceptable and contrary to the Christian standards of conduct expected of all members of the PHSSN community, students, staff and faculty. Sexual harassment will not be tolerated.

Students, staff and faculty have the right to be free from sexual harassment in all its forms. Sexual harassment can include physical conduct or verbal innuendo of sexual nature, imposed on the basis of sex by an employee or agent of PHSSN, when (1) submission to or rejection of such conduct by an individual is used as the basis for academic decisions affecting such individual; and (2) such conduct has the purpose or effect of creating an intimidating hostile or offensive environment. Any person who engages in sexual harassment will be subject to disciplinary action ranging from a warning to discharge from the program as appropriate.

Hardin Simmons University: Questions regarding Title IX should be directed to Megan Baldree, Associate Dean of Students, Moody 219, (325) 670-1831, titleix@hsutx.edu or Tera Gibson, Director of Human Resources, 325-670-1077, Tera.Gibson@hsutx.edu. Students, faculty, or staff are encouraged to report any

sexual misconduct directly to the Title IX Coordinator, Megan Baldree, Moody 219, (325) 670-1831. Please see the HSU website for full Title IX policies.

McMurry University has designated Lecia Hughes, Director of Human Resources to serve as its Title IX Coordinator. The University has also designated Cammie Petree, Head Volleyball Coach and Senior Woman's Administrator, as well as, Vanessa Roberts Bryan, Dean of Students to serve as Deputy Title IX Coordinators respectively. They have been charged with monitoring compliance of Title IX and addressing Title IX concerns and complaints. They are responsible for receiving and investigating complaints of sexual harassment, including sexual assault and sexual violence. Please see the McMurry website for full details related to Title IX policies.

Individuals with questions, concerns or a complaint related to Title IX may contact the university's Title IX Coordinator and/or Title IX Deputy Coordinators:

Title IX Coordinator:

Lecia Hughes, M.Ed., LPC
Director of Human Resources
Maedgen, Room 218
1 McMurry University Box 87
Abilene, TX 79697
Phone: 325-793-4998
Email: hughes.lecia@mcm.edu

Solicitation

It is the policy that no solicitation is allowed within the PHSSN facility.

Gambling

Gambling, as described by the Texas Penal Code, is forbidden within the PHSSN facility.

Alcohol and Narcotics

No faculty, staff or student shall possess, use, transmit or attempt to possess, use or transmit or be under the influence of any of the following substances on the PHSSN campus premises or any PHSSN clinical facility, PHSSN sponsored activity, function or event at any time:

- (1) Any controlled substance or dangerous drug as defined by law, including, but not limited to, marijuana, any narcotic drug, hallucinogen, stimulant, depressant, amphetamine or barbiturate
- (2) Alcohol or any alcoholic beverage
- (3) Any abuseable glue, aerosol paint, or any other chemical substance for inhalation

A student who uses a drug authorized by a licensed health care provider through a prescription specifically for that student's use shall not be considered to have violated this rule.

All students are required to have a urine drug screen completed with verified clear results at a designated lab at least one week prior to the start of any clinical activity. Students may be subject to random drug screening at any time without prior notice. Random screening will occur based on the policies and procedures of the program as a whole.

Impaired Students

For licensed Registered Nurses pursuing a graduate degree, the School of Nursing actively supports the Texas Peer Assistance Program for Nurses (TPAPN) program should the student be experiencing mental health or substance abuse problems. Faculty or students believing a graduate student is impaired may refer the student to the TPAPN representative or to the PHSSN Peer Review Committee. More information is available from the faculty TPAPN liaison.

Weapons

No faculty, staff or student shall enter the PHSSN premises, any PHSSN clinical facility, PHSSN sponsored activity, function or event with a prohibited weapon. Weapons shall include, but not limited to the following:

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|---|--------------------------|
| (1) Explosive weapons | (5) Martial arts weapons |
| (2) Firearms | (6) Fireworks |
| (3) Firearm ammunition | (7) Straight razors |
| (4) Switchblade or other illegal knives | (8) Clubs |

Hazing

Any form of hazing is forbidden in or near the PHSSN premises. Hazing is defined as any intentional, knowing, or reckless act, occurring on or off the parent university campus to include the PHSSN campus or PHSSN clinical facilities by one person alone or acting with others, directed against a student, that endangers the mental or physical health or safety of a student for the purpose of pledging, being initiated into, affiliating with, holding office in, or maintaining membership in any organization whose members are or include students at the School of Nursing or the parent university.

Bullying

The school of nursing adopts a position of zero tolerance for any form of bullying and/or lateral violence based on general professional guidelines. In preparation for a professional nursing career, PHSSN students are expected to refrain from bullying and/or lateral violence.

The American Nurses Association (ANA) defines bullying as “repeated, unwanted harmful actions intended to humiliate, offend, and cause distress in the recipient. Bullying actions include those that harm, undermine, and degrade” (American Nurses Association [ANA], 2015, p.3). Sansone & Sansone (2015) described workplace bullying as “the repetitive and systematic engagement of interpersonally abusive behaviors that negatively affect both the targeted individual and the work organization” (p. 32). Violence in the workplace has been described as “any act in which a person is abused, threatened, intimidated or assaulted in his or her employment” (Canadian Centre for Occupational Health & Safety [CCOHS], 2012, p.1). The Occupational Safety and Health Administration (OSHA) defines workplace violence as “any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behavior that occurs at the work site” (Occupational Safety and Health Administration [OSHA], n.d. para.1).

Assault

Any form of assault is not tolerated by the PHSSN community. Forms of assault include:

- (1) Intentionally, knowingly, or recklessly causing bodily injury to another
- (2) Intentionally, or knowingly threatening another with imminent bodily injury
- (3) Intentionally, or knowingly causing physical contact with another when the student knows or should reasonably believe that the other person will regard the contact as offensive or provocative

Expected Professional Behaviors

Students in the School of Nursing are expected to conduct themselves in a professional manner at all times, not only in interaction with patients (clients) but also with peers, faculty and staff. Students represent the School of Nursing and the nursing profession; thus, students assume responsibilities toward society. Professional behaviors include notification if clinical plans change to the preceptor and faculty. Students are expected to be on time to class and clinical, not use cell phones for personal use during class or clinical, turn in assignments by the due dates, and be professionally dressed in clinical with a lab coat and ID.

Any behavior that results in a negative reflection on the school, its administration, faculty or staff or its students will not be tolerated. This includes any behavior or communication, written or spoken, that may occur inside or outside of the classroom or inside or outside of the school's regular hours of operation; this includes open source information such as open chat rooms, and other Internet sources.

Chain of Command

In the course of one's educational experience, problems, issues and concerns are bound to arise. Addressing problems, issues or concerns that arise are more appropriately and effectively handled through use of an approved chain of command to reach resolution. Use of this structure and channel of communication fosters fairness to all, facilitates protection of rights for both students and faculty, and encourages a more effective forum to reach a more satisfactory resolution for all involved. It is expected that students have knowledge of and will utilize the appropriate chain of command when needed. The intent of a chain of command is to first address the problem, issue or concern at the lowest possible level to reach a mutually acceptable solution. If resolution is not effected at that point, it is appropriate to address the problem, issue or concern with the next higher authority and so on until all avenues are exhausted.

The PHSSN has established the following chain of command structure to effectively address problems, issues and concerns:

- (1) Individual faculty member
- (2) Course coordinator (if in course with multiple faculty)
- (3) MSN Coordinator
- (4) Dean

STUDENT COMPLAINT PROCESS

Patty Hanks Shelton School of Nursing is committed to addressing student complaints in a timely and appropriate manner. The PHSSN Nursing Student Handbook contains protocols that provide students the opportunity to seek resolution of complaints.

For complaints that are not covered by the policies or procedures described in the *Student Handbook*, the student should make the nature of the complaint known to the school of nursing by filling out the Student Concern Form and submitting it to the Graduate Program Chair (See Appendix N). The Graduate Program Chair will review the concern and communicate the appropriate next step(s) to the student within 3 business days.

STUDENT GRADE APPEAL PROCEDURE

The process under this policy is **NOT** intended for matters that do not relate to final course grades. Individual assignment or exam grades should be addressed with the specific course instructor. If a student disagrees with the final course grade documented by the course instructor, the student has the right to appeal using a formal appeal process. **Grade appeals deal with policies, as stated in the syllabus, by which final grades are determined.** Classes may vary within the program, but fundamentally, fair treatment of students in compliance with the syllabus provided for the course should be constant. **The specific course instructor's determination of the course grade earned is final** unless conclusive evidence shows discriminatory or irregular application of the policies used to determine the documented course grade. The student is responsible for providing such compelling evidence. The documented course grade will remain effective for all intents and purposes until a final decision regarding the appeal is reached.

Informal Process

- The student should contact the instructor that assigned the grade to determine if the grade was reported correctly. Initial attempts to resolve any dispute of a grade should be between the student and the course faculty that assigned the grade.
- If the meeting with the instructor does not resolve the dispute to the satisfaction of the student, the student may initiate the formal appeal process.
- ***(Must Be Exhausted Within 3 Business Days of the Final Course Grade Notification)***

Formal Process

The student should schedule a meeting with the Graduate Program Chair (if different from the instructor assigning the disputed grade) within 5 business days of receipt of the disputed grade. Prior to meeting, the written appeal must be submitted to the Graduate Program Chair and the documents should contain the following elements:

- 1) The name and number of the course, the name of the instructor assigning the disputed grade and the grade received.
- 2) A statement of why the student believes the grade assigned was not the grade he or she earned
- 3) A copy of the syllabus for the course
- 4) Copies of all major assignments for the course indicating grades earned, and any special comments or instruction from the instructor, which might have altered the description of the assignments in the syllabus
- 5) Any other supporting information the student deems pertinent

Any documents submitted after the receipt date of the written appeal will not be accepted unless otherwise requested by the Graduate Program Chair.

- The Graduate Program Chair will have 5 business days from receipt of the written appeal to meet with the student and course instructor individually and review all documents that are relevant to the grade appeal.
- The Graduate Program Chair will make a decision within 5 business days of receiving the formal written appeal and forward a recommendation accompanied by all supporting documents to the Dean.
- The Dean will review the documents related to the appeal and schedule any meetings as deemed necessary. The Dean will then make a decision to uphold or deny the appeal within 5 business days of receiving the recommendation.
- Both the student and instructor will be notified in writing of the Dean's decision.

- The student will be informed of the decision by certified mail and/or e-mail sent to the student's address of record. The decision is considered received by the student once it has been mailed appropriately to the student's address on file or student's school e-mail. It is the student's responsibility to keep their contact information up to date. If a grade is to be changed, the Dean will ensure that the proper forms are filled out in the Office of the Registrar.

The decision of the Dean is the final step in the grade appeal process at the Patty Hanks Shelton School of Nursing and is not subject to further appeal.

STUDENT NON-ACADEMIC APPEAL PROCESS

This policy is meant to address conduct toward a student that violates ethical or professional nursing standards. Issues involving grades are handled according to the academic appeal process. This policy cannot be used to address issues covered under Title IX.

If a student experiences a situation in which he/she perceives that an act of non-academic misconduct has occurred, the student may initiate a non-academic appeal process. The process is available to any student should a grievance arise between a student and a faculty member or other person(s) pertinent to the student's program of study. Should a grievance exist, it is the student's responsibility to follow the proper sequence in the non-academic appeal process.

Good Faith Phase:

- A.** The student will make a good faith effort to resolve the conflict with the involved party within 3 business days of the incident. The student is to meet with or make an appointment with the involved party to discuss the incident. The goal of this meeting is to agree upon an amicable resolution to the incident.
- B.** If the conflict fails to be resolved in the good faith phase, and the student wishes to pursue the grievance further, the student may initiate the grievance phase.

Grievance Phase:

- A.** The student should schedule a meeting with the Graduate Program Chair (if different from the party involved in the grievance) within 5 business days of the incident occurring. Prior to meeting, a written grievance must be submitted to the Graduate Program Chair.
- B.** The Graduate Program Chair will discuss the grievance with the involved parties and make suggestions for resolutions to the person filing the grievance.
- C.** If satisfactory resolution is impossible at this level, the Graduate Program Chair will refer the grievance to the Dean within 2 business days of an impasse being reached.
- D.** The Dean will review the grievance and make a decision. Prior to making a decision, the Dean may request a recommendation for resolution from the PHSSN MSN Committee (not including the party involved in the grievance). The Dean may choose a course of action that is different from the committee recommendations. The Dean will render an amicable solution within 5 business days of receiving the grievance.

The decision of the Dean is final and is not subject to further appeal.

GUIDELINES AND PROCEDURES

Orientation

A Graduate Student Orientation Program will be presented within the first week of classes. The purpose of this orientation is to facilitate the student's entry into and progression through the Graduate Program. (See Orientation Policy and Procedure Appendix A.)

After the General Orientation is completed, the Family Nurse Practitioner option students will receive an orientation specific to that program. The Director of the FNP program meets with students preceding the commencement of the FNP clinical courses to assist students in preparing for these courses.

Federal Privacy Rights of Students

PHSSN adheres and operates within the federal Family Educational Rights and Privacy Act of 1974 (20 U.S.C. § 1232g; 34 CFR Part 99) and current updates. The School of Nursing does not discriminate on the basis of age, race, sex, religion, or ethnic origin.

Academic Calendar

The PHSSN academic calendar follows the Hardin-Simmons (HSU) calendar except dates for adding, dropping or withdrawing from classes. Students are required to follow their institution schedules for these exceptions listed above.

School of Nursing Office Hours: 8:00 am -5:00 pm Monday - Friday

Faculty Office Hours

Office hours are posted on faculty office doors. Each faculty member is expected to schedule a minimum of ten hours office hours per week for student availability. In addition to regularly scheduled office hours, faculty make their own student appointment times on an as needed basis. If a scheduled appointment cannot be made or lateness is expected, it is a professional courtesy to make every effort to notify the faculty member.

Administrative Office Hours

The administrative offices on first floor are open Monday through Friday 8:00 a.m. to 5:00 p.m. unless otherwise posted.

Computer Lab Hours

Open Monday through Friday during the following hours: 8:00 a.m. to 5:00 p.m. A printer is available in the computer lab.

Simulation Lab Hours

The simulation lab is open Monday - Friday and is available by appointment for graduate students.

Registration of Classes

It is the student's responsibility to register for classes during the times designated by the parent university.

Student Employment

The School of Nursing recognizes the need of many students to seek employment during their nursing program. Students should discuss work plans with their program director.

Students who elect to work are advised that while working they are not in a student status at PHSSN. Any form of PHSSN identification is not to be worn outside of PHSSN clinical assignments. Additionally, students may not wear any work ID when in a PHSSN student clinical role.

Students should be aware that (1) the School of Nursing assumes no responsibility for their activities as employee of an agency; (2) they are personally responsible and liable for any activity in which they participate while employed; and (3) the professional liability insurance purchased by students at the time of registration and admission to the School of Nursing is only valid in the student role, not their employment role.

Student Activities

The consortium universities provide many opportunities for student interaction and fellowship. Students are encouraged to take advantage of these activities, but students are expected to regulate their social and school activities so that they do not interfere with the attainment of the educational objectives of the School of Nursing. Resources of the student's parent university as well those at PHSSN are available services to the student.

Libraries

PHSSN has library holdings on all parent campuses. Students enrolled in PHSSN have library privileges at all consortium universities with proper student identification. Hardin-Simmons University's Library and McMurry University's Library can be accessed through the PHSSN computer lab as well as any computer that has internet accessibility.

Parking Policy

Parking forms will be obtained during orientation. Each student will be issued one permit. Hendrick Medical Center (HMC) parking lot west of Simmons St. and PHSSN is designated for student parking. Parking is limited and tardiness due to parking is not an excuse. HMC requires that each student who drives a vehicle to PHSSN register with security and display a parking permit. Non-compliance with parking rules may result in a fine of \$25.00 or your car being towed. **STUDENTS ARE NOT TO PARK IN THE LOTS IMMEDIATELY IN FRONT OF AND BEHIND THE SCHOOL OF NURSING**

Student Lounge Policy/Living Room

Student lounges are located on second floor. Eating, drinking soft drinks or coffee, etc. is allowed in the lounge. Microwaves and a refrigerator are available for student use in the lounge. Food may remain in the refrigerator for 48 hours and must be clearly marked with name and date. Food remaining longer than that will be removed. Vending machines are also available on the second floor.

The School of Nursing is a non-smoking facility. No smoking is allowed within 200 feet of the building. A phone for local calls only is available in the student lounge.

Classroom Policy

Students are expected to clean-up after themselves as they leave the classroom. Trash should be picked up and deposited in appropriate containers. If furniture was rearranged, the room should be returned to its original arrangement.

Living Room Area

With permission of the Dean, the living room area may be reserved for special occasions and/or meetings.

Social Activities and Functions

Students wishing to sponsor a social function or activity not related to the Student Nurses association will request permission in writing to the Program Chair who will forward the request and recommendation to the Dean. The Dean will respond in writing.

Communication with Students

1. Students are responsible to turn in changes of phone number, mailing address, e-mail address, or name to the Academic Advisor. A local phone number where you can be reached is necessary for your clinical work at PHSSN and to ensure emergency messages are conveyed in a timely manner. Students are held responsible for all communication from the school offices sent to them at the address last given and may not claim indulgence on the plea of having moved their lodgings and, therefore of not having received the communication.
2. Bulletin boards for the graduate students are located in the graduate student classrooms. Students are responsible for checking this bulletin board frequently for official notices and general information. Job postings are frequently posted on this board.
3. Faculty frequently post information on Canvas specific to a given course. Grades will be posted via this mechanism. Students should frequently check their course site for updated or important information the faculty are posting.
4. Students are required to maintain an e-mail account while enrolled. Students can communicate directly with faculty using the web site and email link. All students must have a school email account obtained at parent universities.

Financial Information

Students enrolled in the School of Nursing must maintain current financial status with their parent university. Parent universities reserve the right to make necessary changes in the tuition, fees, housing and board rates without advance notice.

1. Financial aid - See parent universities financial aid office for information on scholarships, grants and loans. The Director of Student Services has information about certain scholarships.
2. Hospital Financial Aid: Hendrick Medical Center and Abilene Regional Medical Center provide financial assistance. See specific personnel director at the selected hospital for details.
3. Scholarships; See Academic Advisor for more details, must be in good academic standing to be eligible.
4. Tuition, Fees, Housing, Etc. See catalogue of Parent University.

Textbooks

Hardin-Simmons University Bookstore has been approved by the PHSSN Board of Trustees to be the purchasing agent for all textbooks for PHSSN. Students may charge their textbook and academic supplies to the HSU Bookstore who, in turn, will charge their account at each individual parent university. To be eligible to charge books, students must show a bona-fide student ID with name and social security number and must be enrolled in good standing at PHSSN. Students may also purchase textbooks from the internet.

Electronic Devices in Classroom

No electronic communication devices (cell phones, beepers, etc.) may be used in class, and must be turned to vibrate or silent mode before entering the classroom. Disruption of class by the sound of cell phones and paging devices is forbidden. A student facing the possibility of receiving an emergency message by one of these means may leave the device turned on during class. Unless facing an emergency call, the student must turn the device off at the beginning of class and turn it on only after class is dismissed. Routine work-related calls are not considered emergencies nor are personal calls from friends and business associates.

Health Policy

Health status is a consideration in admission to and continuation of the student in the nursing major. Students must be in good physical and mental health themselves in order to provide safe nursing care to patients.

The School of Nursing does not discriminate on the basis of physical handicaps. However, any applicant with a significant physical or emotional problem is advised to make this fact known to the School so that it can be determined whether or not the student will need assistance in meeting the requirements of the clinical nursing courses.

Documentation of an annual physical examination and current vaccinations/tests (listed below) must be on file in the School of Nursing by September 1st in order for students to participate in any clinical activities. Failure to have the documentation on file by September 1st may jeopardize a student's progression in the major. Failure to comply will preclude the student from participating in clinical experiences.

In addition to the physical examination documentation, evidence of current immunizations is required. These include:

- Hepatitis B (3 immunizations) with preferable titer
- Measles (exposure, immunization or titer)
- Mumps (exposure, immunization or titer)
- Meningitis vaccine (within 5 year period of admission to parent university)
- Rubella (immunization or titer)
- Tetanus, diphtheria, & pertussis (TDAP) (must be current within 10 years)
- Chickenpox/Varicella (immunization or titer)
- TB Test (Annual Mantoux that is negative). If TB test is positive, chest x-ray or Interferon Gamma Release Assay or IGRA (blood test) results may be submitted. **Note: The TB Tine Test is unacceptable.**

Cost for physical exams and immunizations are the responsibility of the student. Health Forms can be obtained from the Academic Advisor.

Individual health insurance is required in view of the fact that students are exposed to illnesses and potential injury in the clinical setting. PHSSN will not cover student health care costs in any situation; therefore

students are fully responsible for costs. Each student must present annual proof (card copy, front and back) of medical health insurance; if not on parent's insurance, the student must have either the University Health Insurance or a private policy. Give your proof of health insurance to the assistant to the graduate director.

Throughout the program, students must maintain a level of mental and physical health consistent with meeting the objectives of the curriculum. If a mental and/or physical health problem occurs during the student's education program in nursing, the nursing faculty will assess the student's ability to continue in the program and make recommendations for action to the Program Coordinator and Dean.

Students are advised that student health reports and test results will be made available to health agencies used for student learning experiences upon request by an authorized representative of the agency.

Clinical Evaluations

Clinical performance will be evaluated by faculty according to an evaluation instrument that delineates criteria for successful clinical performance in each course. Faculty will orient the students to this evaluation instrument during orientation to individual courses. These are completed by the instructor, student and/or preceptors. Clinical evaluation involves input from both the student and faculty member at pre-determined times during the semester. Attaining satisfactory performance and identifying learning needs to meet the criteria for attaining quality performance is the goal of clinical evaluation. Students are expected to participate in the evaluation process. Faculty may ask students to provide a self-evaluation. Students are encouraged to consult with clinical faculty to review their progress and achievement during the semester. Students are encouraged to make comments on evaluation instruments and sign the evaluation form. Signature implies that the student has participated with the instructor in the evaluation process. Students should follow the chain of command in resolving disputes or disagreements with the clinical evaluation. Students are expected to be in clinicals all the days that are planned. However, if a student cannot be present, it is the responsibility of the student to inform the preceptor and faculty. ***Students may be suspended or dismissed if a no call no show occurs in clinical.***

Should students not meet essential clinical objectives for a semester, faculty have the option to add additional clinical hours (in forty hour increments) to facilitate the student's achievement of specific essential clinical objectives.

Grading Scale- no rounding will be done

92.00 – 100.00	A
83.00 – 91.99	B
75.00 – 82.99	C
67.00 – 74.99	D
66.99 And below	F

Academic Standards to progress in program: Students must maintain a B average. In all clinical courses, students must make a B or better for progression in clinical courses in the curriculum. A grade of "D" or "F" does not meet criteria for progression in the program and results in academic probation and/or suspension. All students not receiving a B or above in a course must retake the course before progression in clinical courses is granted. If a student earns a C in any two courses, this will result in immediate and permanent dismissal from the program.

PROGRESSION AND GRADUATION POLICY AND PROCEDURE

It is the policy of Patty Hanks Shelton School of Nursing (PHSSN) to follow the Progression and Graduation guidelines of the PHSSN student handbook. Should there be a discrepancy in policy with the parent universities, the PHSSN handbook will take precedent.

Progression Requirements

Graduate nursing students are expected to know degree requirements and progression policies in the PHSSN Graduate Student Handbook and their parent university handbooks and catalogs.

- Students are expected to maintain a minimum GPA of 3.0 in all graduate courses.
- The student will be **permanently dismissed** from the program if a **grade of "C"** is obtained in **two courses**.
- **Clinical courses require a "B"** to pass the course and progress in further clinical courses within the program (AHA, Skills for Advanced Practice, and all FNP courses).
- Students whose GPA falls below 3.0 or earn a grade of D, F, or WF will be placed on **academic probation and/or suspension**. The student will be placed on academic probation for the following twelve credit hours or until the student's cumulative grade point average is returned to a 3.00 or higher. Failure to reach the 3.0 within the next twelve credit hours will result in dismissal from the program.
- Students on academic probation will be required **to re-take the failed course**. Students on academic probation may be required to re-take the failed course before being allowed to enroll in additional courses in the curriculum. Evaluation for progression before repeating the failed course will be based on overall GPA, semester in the program, and remaining coursework in the student's degree plan.
- **Failure of the same course twice will result in permanent dismissal from the program.**
- Students may not graduate on academic probation and must possess a cumulative GPA of 3.0 or higher.
- Noncompliance of clinical requirements will result in academic dismissal from the program.
- An unrestricted and unencumbered nursing license is required for admission and progression in the program.

Completion of the degree is required within a four year period. Any infraction with law enforcement must be reported to the graduate program chair immediately.

Graduation Requirements

Each student is responsible for following the requirements for filing for graduation at his/her Parent University. The student should contact the Graduate Program Chair for assistance as needed with the process. The student must complete the following to be considered for graduation at either parent university:

- Completion of all required credit hours of coursework for MSN program within 6 years
- Cumulative grade point average of 3.0
- All coursework with a maximum of two C's and no D's
- Fulfillment of all financial obligations to the University
- Payment of graduation fee

Transfer of hours

The amount of hours permitted to be transferred is outlined in the parent university catalogs. Only grades of B or higher will be transferable.

Readmission policy

A student who withdraws must reapply for admission if the period exceeds one year from their last enrollment date.

Part- time and full- time enrollment definitions

This varies per degree plan as follows: FNP students in the first year full time enrollment is seven to eight hours in the fall and spring and six to seven hours in the summer. Due to Clinicals FNP full time hours for the second year is seven hours in the fall and spring and in the summer. Part time enrollment for first year FNP students is four hours in the fall and spring and four hours in the summer. Part time enrollment of FNP students in the second year consists of four hours in the fall and spring semesters.

Education students in the first year full time enrollment is seven to eight hours in the fall and spring and seven hours in the summer. For the second year education students is six to seven hours full time in the spring. Part time enrollment would be four hours in the fall and spring of the first year, three to four hours in the summer of the first year, and three hours in the fall and spring of the second year.

Evaluation of Faculty and Course

The faculty values honest, constructive, student evaluation of teaching effectiveness as a means of improving teaching skills; evaluations are considered prior to modifying courses, specific classes, and clinical experiences. Students are encouraged to evaluate classroom, clinical instruction and the clinical agency using the forms and methods provided. These evaluations are rendered using an online format. Verbal input is always welcome.

Needlestick Injury

In the event of a needle stick injury immediately contact your clinical instructor/PHSSN faculty and follow the **CDC guidelines** below:

If you experienced a needlestick or sharps injury or were exposed to the blood or other body fluid of a patient during the course of your work, **immediately follow these steps:**

- Wash needle sticks and cuts with soap and water
- Flush splashes to the nose, mouth, or skin with water
- Irrigate eyes with clean water, saline, or sterile irrigants
- Report the incident to your supervisor
- Immediately seek medical treatment

<http://www.cdc.gov/niosh/topics/bbp/emergnedl.html>

Body Substance Isolation Guidelines

Students will adhere to all clinical sites policies in regard to Universal Blood and Body Fluid Precautions.

Americans with Disabilities Act (ADA) Policy with Core Performance Standards

Consistent with its parent universities, PHSSN is committed to a policy of non-discrimination toward any individual's admission to, progression in, and graduation from a program in the School of Nursing. The purpose of this policy, with respect to ADA, is to protect and safeguard against discriminatory practices that might adversely affect any individual who is qualified, yet might need mental and/or physical accommodations, to meet the core performance standards of the nursing curricula. The faculty and administration of the School of Nursing are committed to making reasonable accommodations to allow any qualified individual to meet the school's objectives in keeping with applicable law and the ADA policies of Hardin-Simmons University.

Nursing roles are often physically demanding, i.e. standing, sitting, walking, pushing and lifting, for more than the usual activities of daily living. Present and past physical conditions may hinder one's ability to perform these often taxing physical activities.

In addition, the demands of decision making and complex problem solving may result in unexpected stress levels. The faculty of the School of Nursing has identified essential requirements and core performance standards as necessary for success in the schools nursing programs. All students are held to the school's standards for providing safe nursing care and meeting the objectives of nursing courses.

Any student who anticipates difficulty in meeting any of the standards is to notify the Program Coordinator at the start of the Fall Semester. Appropriate referral will be made to the parent institution counseling center for evaluation and coordination of needs.

If a reasonable accommodation is requested by the student, it is the student's responsibility to provide appropriate documentation of any disabilities. When a qualified student has provided required documentation of requested accommodations, the staff of the School of Nursing, in consultation with the individual and other appropriate consultants, will determine how the individual with or without reasonable accommodations or modifications can be assisted in meeting the identified core performance standards.

This policy applies also to those students with learning disabilities who request reasonable accommodation. Students have the responsibility to identify themselves as needing accommodations and providing required documentation in a timely manner (no later than beginning of the Semester). Procedures to request reasonable accommodations can be obtained from the Program Coordinator.

Student Uniform

The School of Nursing requires the student to appear in appropriate attire. Additionally, it is the health care consumer's right to know the name and position of the person involved in his/her care.

PHSSN picture name badges should be worn at all times while the student is in the clinical setting.

The Badge should read _____, RN, BSN
Graduate Student

FNP students should wear a white laboratory coat with the PHSSN name badge over appropriate street clothes and in the dress required by the agency where clinical time is acquired. Master's students who are NOT in the FNP option should dress in appropriate business clothing or dress as required by the agency where clinical time is acquired.

Student Use of Simulation Resource Center Lab/ Graduate Lounge

It is the policy of the School of Nursing to maintain an organized and orderly Simulation Lab. Students are an important component in implementing this policy. **Please do not sit on beds housing mannequins.**

The Simulation lab is located on the second floor of the School of Nursing. There are media lounges, and simulated client-care areas. Student responsibilities in the lab are as follows:

- A. Obtain faculty permission for access to the lab.
- B. No food or drink are permitted in the lab areas designated above. There is a student lounge for student use.
- C. Audio visual materials must be checked out with faculty, recorded in the log book, and returned at the designated time.
- D. Materials checked out must be returned promptly and in good condition or it is the responsibility of the student to replace it.
- E. Students using the clinical laboratory are expected to clean the area after use and return all equipment to the proper secure place.
- F. A computer laboratory is located on the first floor.

Student Professional Liability

Students are required to provide proof of current malpractice insurance when participating in clinical courses. Individual policies may be obtained outside the university OR students may obtain coverage through the HSU policy. If the HSU policy is selected, fees per semester will be added to the tuition statement. Copies of individual policies must be submitted to the Program Chair. **STUDENTS WILL NOT BE PERMITTED TO PARTICIPATE IN CLINICAL COURSES WITHOUT PROOF OF CURRENT MALPRACTICE INSURANCE AND AN UNENCUMBERED REGISTERED NURSE LICENSE.**

- Students will be asked to submit documented proof of professional liability insurance at the beginning of each academic year.
- It is the student's responsibility to maintain the professional liability insurance.

Student Cardiopulmonary Resuscitation (CPR) Certification Requirement

It is the policy of the School of Nursing to require that all students obtain and maintain CPR certification.

- Students will be asked to submit documented proof of CPR at the beginning of each academic year.
- Students are NOT permitted to enter the clinical setting without valid CPR certification.
- It is the student's responsibility to maintain CPR certification.

Student Advanced Cardiac Life Support (ACLS) Certification Requirement

It is the policy of the School of Nursing to require that all students in the Family Nurse Practitioner Option obtain and maintain ACLS certification.

- Students will be asked to submit documented proof of ACLS certification at the beginning of each academic year.
- Students are NOT permitted to enter the clinical setting in FNP I, II, or III without valid ACLS certification.
- It is the student's responsibility to maintain ACLS certification.

PHSSN HONOR SOCIETY

Membership in *Sigma Theta Tau, Omicron Zeta Chapter* is conferred on students in the graduate program who have demonstrated excellence in their nursing program and to graduates who had good records as students and whose professional careers demonstrate commitment to the ideals and purpose of the profession and the Honor Society. The membership thus includes students, graduates of the School, transfer members from other chapters, and nursing leaders from the community.

The purposes of the Honor Society are to:

1. Recognize superior achievement.
2. Recognize the development of leadership qualities.
3. Foster high professional standards.
4. Encourage high professional standards.
5. Strengthen commitment to the ideals and purposes of the profession.

The membership is available by invitation only and is limited to those persons meeting specific international criteria.

Student Participation in Governance

Students are encouraged to volunteer for positions of various PHSSN committees in order to facilitate communication. Specifically, students have representation on the graduate faculty committee. Additionally, students are encouraged to maintain contact with their parent university by participating in graduate student association activities.

Student Conduct

Graduate students are role models for undergraduates and are considered representatives of Patty Hanks Shelton School of Nursing and their parent universities. Students are expected to follow the policies and procedures of their parent universities and all PHSSN Student Policies and Procedures.

Program Evaluation

A total program evaluation plan provides the graduate faculty an outline for on-going evaluation of the graduate program. The plan provides for annual evaluation of the majority of elements of the graduate program including:

- A. organization and administration;
- B. mission and goals (philosophy and outcomes);
- C. program of study, curriculum and terminal objectives;
- D. student admission policies;
- E. student achievement;
- F. student services;
- G. new faculty orientation;
- H. faculty performance;
- I. clinical resources;
- J. educational resources and services;
- K. evaluations
 - a. student evaluation of preceptors
 - b. preceptor evaluation of student
 - c. faculty evaluation of student

- d. student evaluation of faculty
- e. faculty/student evaluation of clinical site

All graduate faculty participate in the review and the program chair has the responsibility for insuring any revisions or changes are communicated to students or other concerned parties.

APPENDIX A

MASTER'S STUDENT ORIENTATION POLICY AND PROCEDURE

I. Policy

It is the policy of Patty Hanks Shelton School of Nursing (PHSSN) Graduate Program to orient new students to the Graduate Program.

II. Procedure

A. General Orientation: All graduate nursing students will be oriented prior to first courses to:

1. Overview of Graduate Student Handbook

- a) Background, philosophy and function of the PHSSN.
- b) Facility and resources
- c) Support staff and function
- d) PHSSN policies and procedures
- e) Course overview and progression
- f) Procedures for obtaining name badges
- g) Fees

B. Orientation to Family Nurse Practitioner Option

1. Role expectation
2. Course overview
3. Clinical guidelines and preceptor information
4. Malpractice insurance requirements

APPENDIX B

PLAGIARISM

Plagiarism is:

1. Copying someone else's work and passing it off as your own.
2. Quoting or copying directly from a source (book, magazine, etc.) without proper acknowledgment in a footnote.
3. Borrowing the ideas of someone else, even though you have put them in your own words, without proper acknowledgment in a footnote.
4. Making use of an author's words without using quotation marks even though there is proper acknowledgment in a footnote.

You must be careful not only to acknowledge the use of the material of others in footnotes, but also not to borrow the words of the author without using quotation marks. Since you should use quotations sparingly in your paper, you must be sure that you put the ideas of others in your own words.

The following examples will illustrate this type of plagiarism:

Original Material

America was not only shoveling coal during these decades, it was helping fashion a New South. One feature of that New South was the cotton mill. It was largely sustained by the labor of women and children, many of them from mountain counties. Appalachian "hillbillies" mingled with poor whites of the lowlands to form

clusters of mill villages in their mutual search for a better existence. The search was grueling. In 1900, 57.5 percent of the children working in Southern cotton mills were between the ages of 10 and 13.

Plagiarized Version in Research Paper

America was helping fashion a New South during these decades. The cotton mill, largely sustained by the labor of women and children from mountain counties, was one feature of that New South. In their search for a better existence, "hillbillies" mingled with poor whites to form mill villages. Their search was grueling since many of the children working in Southern cotton mills were between the ages of 10 and 13.

This is a plagiarized paragraph even though acknowledgment to the author has been given in the footnote. The wording is too much like the original. Sentences from the original have been inverted or combined or some words omitted, but the words and the phrases are the original author's, not those of the author of the research paper. Compare this plagiarized paragraph with the legitimate version which follows.

Legitimate Version

Wilma Dykeman refers to the influence of the cotton mill on the New South and on the Appalachian mountain families who came work in the mills. The "hillbillies," as well as the poor whites of the low lands, hoped that industrialization would mean a better life. The grueling existence they found instead is revealed in the fact that "in 1900, 57.5 percent of the children working in Southern cotton mills were between the ages of 10 and 13."⁴

*Reproduced by permission from Davis, Beulah. "The research paper," *A brief composition handbook*, Roane State Community College, Harriman, TN.

⁴ Wilma Dykeman, "Appalachia in Context," in *An Appalachian Symposium Ed.*

Ed. J. W. Williamson (Boone, N.C.: Appalachian State University Press, 1977), p.35.

The Use of Quotations

Use quotations sparingly in your research paper. You may want to quote an expert opinion or an important person. A quotation is also appropriate if the original version is written so well that you feel a paraphrase would destroy its impact. However, you must be very selective in your use of quotations. If you have too many quotations in your paper, it will appear that you have not digested or understood the information from your sources, or that you are too lazy to paraphrase the material.

All quotations must be integrated smoothly into the text of your paper. One way of doing this is to introduce the quotation by referring to the author:

As Samuel Johnson said, "Dictionaries are like watches: the worst is better than none, and the best cannot be expected to go quite true."

Rather than quoting an entire sentence, you may find it easier to integrate a partial quotation.

Wrong: "Neither did they want imposing church buildings because, to them, the church is not of this world and the building is only a place to meet."

Right: Loyal Jones comments that the Appalachian people do not desire "imposing church buildings because, to them, the church is not of this world and the building is only a place to meet."

If you do not want to refer to the author, or there is no author, you can use introductory phrases such as these:

According to some critics . . .
One source declares that . . .
Some authorities feel that . . .
Opponents of the plan insist that . . .

Another good way to integrate the quotation is to work a partial quotation into your own paraphrased sentence.

To Darl the water is "like hands molding and prodding at the very bones."

A mirror for Appalachia is needed, which will help Appalachians to become "aware of who we are and why, and be at ease with this knowledge."

Remember that you must reproduce quotations exactly as they appear in the original. If there is an error, such as a misspelled word, you must reproduce the error just as it is but indicate that you are aware of the error by inserting Latin word sic in square brackets immediately after the error. Otherwise, the reader will assume the error is yours.

Any other explanatory matter can be inserted in square brackets.

Example

The strides made by the Eastern Cherokees can perhaps best be summarized in a statement by Ted Krenzke, a former Indian agent at Cherokee: "The Eastern Band of Cherokees can be rated among the top 10 percent of all such Indians today (those living on reservations) . . . in employment, personal income, educational services, housing, recreation, health and all kinds of community service."

Ellipsis Marks

Use ellipsis marks, three spaced periods (. . .), to indicate omissions within quoted materials. Ellipsis marks are not used with quoted words or phrases since it is evident that an entire sentence is not being quoted.

Example

"A dictionary . . . is an inventory of the language It is no task of the maker of it to select the good words of a language."

Notice that there are four periods after language, one to end the sentence and three for the ellipsis marks."

It is a rare student who plagiarized deliberately. Most students need only to be on guard against the unintentional plagiarism. With such examples as are provided by these pages, every student capable of doing college work is capable of avoiding even an accidental infringement.

Since education is meaningless for anyone who lacks intellectual honesty, the person who deliberately plagiarizes has no right to the privileges of membership in a college or university. All institutions and all members of their facilities regard plagiarism as a serious offense to be punished when the occasion arises by serious penalties.

*The material from David, Beulah. A brief composition handbook ends here.

Reviewed 2/2012

APPENDIX C

STANDARD PRECAUTIONS

Information on the Center for Disease Control and Prevention (CDC) Recommended Standard Precautions is disseminated to all students during their orientation to the SON. It is the student's responsibility to maintain compliance with those recommendations during all clinical settings.

Standard Precautions

Because the potential diseases in a patient's blood and body fluids cannot be known, blood and body fluid and substance precautions recommended by the CDC should be adhered to for all patients and for all specimens submitted to the laboratory. These precautions, called "standard precautions", should be followed regardless of any lack of evidence of the patient's infection status. Routinely use barrier protection to prevent skin and mucous membrane contamination with:

- a. secretions and excretions, except sweat, regardless of whether or not they contain visible blood
- b. body fluids of all patients and specimens
- c. non intact skin
- d. mucous membranes.

Hand Washing

- a. Wash hands after touching blood, body fluids, secretions, excretions, and contaminated items, whether or not gloves are worn. Wash hands immediately after gloves are removed, between patient contacts and when otherwise indicated to avoid transfer of microorganisms to other patients or environments. It may be necessary to wash hands between tasks and procedures on the same patient to prevent cross contamination of different body sites.
- b. Use a plain (non-antimicrobial) soap for routine hand washing.
- c. Use an antimicrobial agent or waterless antiseptic agent for specific circumstances (e.g., control of outbreaks or hyperendemic infections) as defined by the practice site.

Wear gloves (clean non sterile gloves are adequate) when touching blood, body fluids, secretions, excretions and contaminated items. Put on clean gloves just before touching mucous membranes and nonintact skin. Change gloves between tasks and procedures on the same patient after contact with material that may contain a high concentration of microorganisms. Remove gloves promptly after use, before touching non-contaminated items and environmental surfaces and before going to another patient. Wash hands immediately to avoid transfer of microorganisms to other patients or environments.

Mask, Eye Protection, Face Shield

Wear a mask and eye protection or a face shield to protect mucous membranes of the eyes, nose, and mouth during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions and excretions.

Gown

Wear a gown (a clean non sterile gown is adequate) to protect skin and prevent soiling of clothing during procedures and patient care activities that are likely to generate splashes or sprays of blood, body fluids, secretions or excretions or cause soiling of clothing. Select a gown that is appropriate for the activity and amount of fluid likely to be encountered. Remove a soiled gown as promptly as possible and wash hands to avoid transfer of microorganisms to other patients or environments.

Patient Care Equipment

Handle used patient care equipment soiled with blood, body fluids, secretions and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing and transfer of microorganisms to other patients and environments. Ensure that reusable equipment is not used for the care of another patient until it has been appropriately cleaned and reprocessed and single use items are properly discarded.

Environmental Control

Ensure that the hospital has adequate procedures for the routine care, cleaning and disinfection of environmental surfaces, beds, bed rails, bedside equipment and other frequently touched surfaces and that these procedures are being followed.

Linen

Handle, transport, and process used linen soiled with blood, body fluids, secretions and excretions in a manner that prevents skin and mucous membrane exposures and contamination of clothing and avoids transfer of microorganisms to other patients and environments.

Occupational Health and Blood-borne Pathogens

- a. Take care to prevent injuries when using needles, scalpels and other sharp instruments or devices; when handling sharp instruments after procedures; when cleaning used instruments and when disposing of used needles. Never recap used needles or otherwise manipulate them with both hands or any other technique that involves directing the point of a needle toward any part of the body; rather, use either a one-handed scoop technique or a mechanical device designed for holding the needle sheath. Do not remove used needles from disposable syringes by hand and do not bend, break or otherwise manipulate used needles by hand. Place used disposable syringes and needles, scalpel blades and other sharp items in appropriate puncture-resistant containers located as close as practical to the area in which the items were used. Place reusable syringes and needles in a puncture-resistant container for transport to the reprocessing area.
- b. Use mouthpieces, resuscitation bags or other ventilation devices as an alternative to mouth-to-mouth resuscitation methods in areas where the need for resuscitation is predictable.

Patient Placement

Place a patient who contaminates the environment or who does not (or cannot be expected to) assist in maintaining appropriate hygiene or environmental control in a private room.

APPENDIX D

Guidelines for Students: Americans with Disabilities Act

ADA Guidelines apply to all qualified disabled persons. A qualified disabled person is a person with a disability who, with or without reasonable modifications to rules, policies or practices, the removal of architectural, communication, or transportation barriers, or the provision of auxiliary aids and services, meets the essential eligibility requirements for the receipt of services, or the participation in programs or activities provided by a public entity and who can perform the essential functions of the position. The following essential eligibility requirements for participation in the School of Nursing (Standards/Functions) and examples of necessary activities (NOT all inclusive) should be used to assist each applicant/student in determining whether accommodation or modification is necessary

Area	Standard	Some Examples of Necessary Activities (not all inclusive)
Emotional	Possess ability to demonstrate emotional stability to engage in nursing safely as determined by standards of practice	Able to provide essential nursing actions in stressful situations
Critical Thinking	Possess critical thinking ability sufficient for clinical judgment	Identify cause-effect relationships in clinical situations, develop nursing care plans consistent with patient/client condition
Interpersonal	Possess interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds	Establish rapport with patients/clients and colleagues
Communication	Possess communication abilities sufficient for interaction with others in verbal and written form	Explain treatment procedures, initiate health teaching, and document and interpret nursing actions and patient/client responses
Mobility	Possess physical abilities sufficient to move from room to room and maneuver in small spaces	Moves around in patient rooms, work spaces, and treatment areas; administers cardiopulmonary resuscitation
Motor Skills	Possess gross and fine motor abilities sufficient to provide safe and effective nursing care	Calibrate and use equipment; position patient/clients
Hearing	Possess auditory ability sufficient to monitor and assess health needs	Hear monitor alarm, emergency signals, auscultatory sounds, cries for help, understands normal speaking voice with speaker's mouth covered
Visual	Possess visual ability for observation and assessment necessary in nursing care	Observes patient/client responses, identifies cyanosis, absence of respirations
Tactile	Possess tactile ability sufficient for physical assessment	Perform palpation, functions of physical examination, and/or those related to therapeutic intervention, e.g. insertion of a catheter

APPENDIX E

ANA CODE OF ETHICS FOR NURSES

- Provision 1** The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
- Provision 2** The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
- Provision 3** The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
- Provision 4** The nurse has authority, accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to provide optimal patient care.
- Provision 5** The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
- Provision 6** The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
- Provision 7** The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
- Provision 8** The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
- Provision 9** The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

Source: American Nurses Association. (2015). Code of ethics with interpretative statements. Silver Spring, MD: Author. Retrieved from <http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-ofEthics-For-Nurses.html>

APPENDIX F

BILL OF RIGHTS AND RESPONSIBILITIES FOR STUDENTS OF NURSING

The NSNA Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006). Further amendments were adopted by the House of Delegates at the NSNA Annual Convention on April 7, 2017 in Dallas, TX.

1. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, or personal attributes, or economic status.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom and quality education; students should exercise their freedom in a responsible manner.
3. Each institution has a duty to develop policies and procedures which provide for and safeguard the students' freedom to learn.
4. Students should be encouraged to develop the capacity for critical judgment and engage in an autonomous, sustained, and independent search for truth.
5. Students should be free to take reasoned exception in an informed, professional manner to the data or views offered in any course of study. However, students are accountable for learning the content of any course of study for which they are enrolled.
6. Students should have protection, through orderly approved standard procedures, against prejudicial or capricious academic evaluation. However, students are responsible for maintaining standards of academic performance established for each course in which they are enrolled.
7. Information about student views, beliefs, political ideation, legal status, United States citizenship status, sexual orientation or other personal information which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as an element of evaluation.
8. The student should have the right to advocate for themselves and other students in the construction, delivery and evaluation of the curriculum.
9. Institutions should have a clearly written published policy as to the disclosure of private and confidential information which should be a part of a student's permanent academic record in compliance with state and federal laws.
10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions in an informed, professional manner, both publicly and privately.
11. Students should be allowed to invite and hear any individual of their own choosing within the institution's guidelines, thereby advocating for and encouraging the advancement of their education.

12. The student body should have clearly defined means to participate in the formulation and application of institutional policy affecting academic and student affairs, thereby encouraging leadership, e.g., through a faculty-student council, student membership, or representation on relevant faculty committees.
13. The institution has an obligation to clarify those standards of conduct which it considers essential to its educational mission, community life, and its objectives and philosophy. These may include, but are not limited to, policies on academic dishonesty, plagiarism, punctuality, attendance, and absenteeism.
14. Disciplinary proceedings should be instituted only for violations of standards of conduct. Standards of conduct should be formulated with student participation, clearly written and published in advance through an available set of institutional regulations. It is the responsibility of the student to know these regulations.
15. The nursing program should have readily available a set of clear, defined grievance procedures.
16. As citizens and members of an academic community, students are exposed to many opportunities and they should be mindful of their corresponding obligations.
17. Students have the right to belong to or refuse membership in any organization.
18. Students have the right to personal privacy in their individual/personal space to the extent that their wellbeing and property are respected.
19. Adequate safety precautions should be provided by nursing programs, for example, adequate street and building lighting, locks, patrols, emergency notifications, and other security measures deemed necessary to ensure a safe and protected environment.
20. Dress code, if present in school, should be established with student input in conjunction with the school administration and faculty. This policy ensures that the highest professional standards are maintained, but also takes into consideration points of comfort and practicality for the student.
21. Grading systems should be carefully reviewed initially and periodically with students and faculty for clarification and better student-faculty understanding.
22. Students should have a clear mechanism for input into the evaluation of their nursing education and nursing faculty.
23. The nursing program should track their graduates' success in finding entry-level employment as registered nurses and make this information available to all who apply and enroll.
24. The nursing program should provide comprehensive, clear and concise information related to student loans, scholarships and any other student financial aid.

APPENDIX G

NSNA CODE OF PROFESSIONAL, ACADEMIC, AND CLINICAL CONDUCT

Code of Professional Conduct

1. Maintain the highest standard of personal and professional conduct.
2. Actively promote and encourage the highest level of ethics within nursing education, the profession of nursing, and the student nurses' association.
3. Uphold and respect all Bylaws, policies, and responsibilities relating to, the student nurses' association at all levels of membership, reserving the right to propose changes and to critique rules and laws.
4. Strive for excellence in all aspects of collaboration, decision making, leadership, and management at all levels of the student nurses' association.
5. Use only legal, ethical, and human rights standards in all association decisions and activities in accordance with NSNA's Core Values.
6. Ensure the proper use of all association funds and resources in accordance with the fiduciary responsibilities set forth in NSNA Bylaws, policies and state/federal law.
7. Ensure impartiality and prevent conflicts of interest, neither provide nor accept personal compensation to or from another individual while serving as members of student nurses' associations.
8. Maintain the confidentiality of privileged information entrusted or known to me by virtue of an elected or official position in the student nurses association.
9. Affirm and support diversity and inclusion by refusing to engage in or condone unjust discrimination on the basis of race, sex, sexual orientation, gender identity, age, citizenship, religion, national origin, disability, illness, legal status, or personal attributes.
10. Uphold integrity in personal, professional, and academic life by refraining from and reporting any form of dishonesty, using proper established channels of communication and reporting as set by the policies of the organization in question.
11. Always communicate internal and external association statements in a truthful and accurate manner by ensuring that there is accuracy in the data and information used by the student nurses' association.
12. Cooperate in every reasonable and proper way with association volunteers and staff by working with them to advocate for student rights and responsibilities and the advancement of the profession of nursing.
13. Use every opportunity to improve faculty and student understanding of the role of the student nurses' association.
14. Use every opportunity to raise awareness of the student nurses' association mission, values, purpose, and goals at the school, state and national chapter level as defined in bylaws and policies.

First adopted by the 1999 House of Delegates, Pittsburgh, PA. Amended by the House of Delegates at the NSNA Annual Convention on April 7, 2017, in Dallas, TX.

Code of Academic and Clinical Conduct for Nursing Students

Students of nursing have a responsibility to society in learning the academic theory and clinical skills needed to provide safe, quality nursing care. The clinical setting presents unique challenges and responsibilities for the nursing student while caring for human beings in a variety of health care environments.

The Code of Academic and Clinical Conduct is based on an understanding that to practice nursing as a student is an agreement to uphold the trust society has placed in us. The statements of the code provide guidance for nursing students in their personal development of an ethical foundation and need not be limited strictly to the academic or clinical environment, but can assist in the holistic development of the person.

As students are involved in the clinical and academic environments, we believe that ethical principles are a necessary guide to professional development. Therefore, within these environments we:

1. Advocate for the rights of all clients.
2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate and professional manner.
5. Communicate client care in a truthful, timely and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for our actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any techniques or procedures for which the student has not been adequately trained
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
14. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or other substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issue.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.

Adopted by the NSNA Board of Directors, October 27, 2009 in Phoenix, AZ.

APPENDIX H

PATIENT/CLIENT CONFIDENTIALITY POLICY

In accordance with the Texas Nursing Practice Act Rule 217.12 Unprofessional Conduct, Disclosing confidential information or knowledge concerning the client except where required or allowed by law, the faculty of the School of Nursing have adopted the following policy:

1. Except in the structured, teaching-learning situation, all aspects of the patient/client's medically-related information and/or data shall not be discussed with any other person or persons under any circumstances
2. Proper identification as stated in the Dress Code/Uniform Policy is required before reading charts/records
3. Under no circumstances is the student to photocopy and/or tape record any part of the patient's chart/records
4. Failure to honor this basic ethical right of the patient/client may result in immediate dismissal of the student from the nursing program.
5. All students are required to comply with the federally mandated Health Information Privacy and Protection Act (HIPAA)

APPENDIX I

DO NOT USE ABBREVIATION LIST

**DO NOT USE
ABBREVIATION LIST**

Abbreviation	Incorrect Example	Correct Example
1) U (unit) <i>Do not use "U" for unit; it can be mistaken for a 0</i>	insulin 5 u	insulin 5 units
2) IU (international unit) <i>Do not use "IU" for international unit; it can be mistaken for IV or 10</i>	vitamin E 400 IU	vitamin E 400 international units daily
3) Q.D. (every day) <i>Do not use "qd" for every day or daily; it can be mistaken for qid or qod</i>	qd	daily
4) Q.O.D. <i>Do not use "qod" for every other day; it can be mistaken for qid</i>	qod	every other day
5) Trailing Zeros <i>Do not use a trailing zero after the decimal point; the decimal point may be missed</i>	morphine 1.0 mg	morphine 1 mg
6) Leading Zeros <i>Use a leading zero before the decimal point; the decimal point may be missed</i>	hydromorphone .5 mg	hydromorphone 0.5 mg
7) MS <i>Do not use "MS" for morphine sulfate; it can be mistaken for magnesium sulfate</i>	MS 1 mg	morphine 1 mg
8) MSO₄ <i>Do not use "MSO₄" for morphine sulfate; it can be mistaken for magnesium sulfate</i>	MSO₄ 1 mg	morphine 1 mg
9) MgSO₄ <i>Do not use "MgSQ₄" for magnesium sulfate; it can be mistaken for morphine sulfate</i>	MgSO₄ 2 g	magnesium sulfate 2 g
10) μ (Greek symbol for meg) <i>Do not use the Greek symbol for micrograms; it can be mistaken for mg</i>	Levothroid 50 μg	Levothroid 50 mcg
11) T.I.W. (three times weekly) <i>Do not use "TIW" for three times weekly; it can be mistaken for three times daily resulting in overdose</i>	Coumadin 2 mg T.I.W.	Coumadin 2 mg three times weekly
12) c.c. (for milliliter) <i>Do not use "cc" for milliliter; it can be mistaken as U (unit) when poorly written</i>	10 cc	10 ml

**DANGEROUS
ABBREVIATIONS**

µg (for microgram)

T.I.W.
(for three times a week)

AS., AD., A.U.
(Latin abbreviation for
left, right or both ears)

U
(Unit)

IU
(International Unit)

Q.D.
(Daily)

Q.O.D
(Every other day)

Zero after decimal
point (1.0)

No zero before
decimal dose (.5mg)

MgSO₄

MSO₄
MS

**POSSIBLE
INTERPRETATION**

Mistaken for mg (milligrams)

Mistaken for three times a
day or twice weekly

Mistaken for OS, OD, OU, etc

Misread as 0, 4, or cc
4U mistaken as 40

Misread as IV

The period can be
mistaken for an “I”

The “O” can be
mistaken for “I”

Misread as 10

Misread as 5 mg

Misread as
Morphine Sulfate

Misread as Magnesium
Sulfate

**ACCEPTABLE
TERMINOLOGY**

Write “mcg”

Write “3 times weekly”
or “three time weekly”

Write: “left ear”,
“right ear” or both ears’

Write “Unit”

Write Unit”

Write “every day”/“daily”

Write “every other day”

Write “1”

Write “0.5 mg”

Write “Magnesium Sulfate”

Write “Morphine Sulfate”

Dangerous Abbreviations Do Not Use!

APPENDIX J

AACN ESSENTIALS OF MASTER'S EDUCATION IN NURSING, 2011

The *Essentials of Master's Education in Nursing* reflect the profession's continuing call for imagination, transformative thinking, and evolutionary change in graduate education. The extraordinary explosion of knowledge, expanding technologies, increasing diversity, and global health challenges produce a dynamic environment for nursing and amplify nursing's critical contributions to health care. Master's education prepares nurses for flexible leadership and critical action within complex, changing systems, including health, educational, and organizational systems. Master's education equips nurses with valuable knowledge and skills to lead change, promote health, and elevate care in various roles and settings. Synergy with these *Essentials*, current and future healthcare reform legislation, and the action-oriented recommendations of the Initiative on the Future of Nursing (IOM, 2010) highlights the value and transforming potential of the nursing profession.

These *Essentials* are core for all master's programs in nursing and provide the necessary curricular elements and framework, regardless of focus, major, or intended practice setting. These *Essentials* delineate the outcomes expected of all graduates of master's nursing programs. These *Essentials* are not prescriptive directives on the design of programs. Consistent with the *Baccalaureate* and *Doctorate of Nursing Practice Essentials*, this document does not address preparation for specific roles, which may change and emerge over time. These *Essentials* also provide guidance for master's programs during a time when preparation for specialty advanced nursing practice is transitioning to the doctoral level.

Master's education remains a critical component of the nursing education trajectory to prepare nurses who can address the gaps resulting from growing healthcare needs. Nurses who obtain the competencies outlined in these *Essentials* have significant value for current and emerging roles in healthcare delivery and design through advanced nursing knowledge and higher level leadership skills for improving health outcomes. For some nurses, master's education equips them with a fulfilling lifetime expression of their mastery area. For others, this core is a graduate foundation for doctoral education. Each preparation is valued.

The dynamic nature of the healthcare delivery system underscores the need for the nursing profession to look to the future and anticipate the healthcare needs for which nurses must be prepared to address. The complexities of health and nursing care today make expanded nursing knowledge a necessity in contemporary care settings. The transformation of health care and nursing practice requires a new conceptualization of master's education.

Master's education must prepare the graduate to:

- Lead change to improve quality outcomes,
- Advance a culture of excellence through lifelong learning,
- Build and lead collaborative interprofessional care teams,
- Navigate and integrate care services across the healthcare system,
- Design innovative nursing practices, and
- Translate evidence into practice.

Graduates of master's degree programs in nursing are prepared with broad knowledge and practice expertise that builds and expands on baccalaureate or entry-level nursing practice. This preparation provides graduates with a fuller understanding of the discipline of nursing in order to engage in higher level practice and leadership in a variety of settings and commit to lifelong learning. For those nurses seeking a terminal degree, the highest level of preparation within the discipline, the new conceptualization for master's education will allow for seamless movement into a research or practice-focused doctoral program (AACN, 2006, 2010).

The nine Essentials addressed in this document delineate the knowledge and skills that *all* nurses prepared in master's nursing programs acquire. These Essentials guide the preparation of graduates for diverse areas of practice in any healthcare setting.

• **Essential I: Background for Practice from Sciences and Humanities**

- Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.

• **Essential II: Organizational and Systems Leadership**

- Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.

• **Essential III: Quality Improvement and Safety**

- Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization.

• **Essential IV: Translating and Integrating Scholarship into Practice**

- Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.

• **Essential V: Informatics and Healthcare Technologies**

- Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.

• **Essential VI: Health Policy and Advocacy**

- Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.

• **Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes**

- Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.

• **Essential VIII: Clinical Prevention and Population Health for Improving Health**

- Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations.

- **Essential IX: Master's-Level Nursing Practice**

- Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.

American Association of Colleges of Nursing. (2011). *The essentials of master's education in nursing*. Washington, DC: Author.

APPENDIX K

NLN NURSE EDUCATOR CORE COMPETENCIES

Competency I: Facilitate Learning

Nurse educators are responsible for creating an environment in classroom, laboratory, and clinical settings that facilitates student learning and the achievement of desired cognitive, affective, and psychomotor outcomes.

Competency II: Facilitate Learner Development and Socialization

Nurse Educators recognize their responsibility for helping students develop as nurses and integrate the values and behaviors expected of those who fulfill that role.

Competency III: Use Assessment and Evaluation Strategies

Nurse educators use a variety of strategies to assess and evaluate student learning in classroom, laboratory and clinical settings, as well as in all domains of learning.

Competency IV: Participate in Curriculum Design and Evaluation of Program Outcomes

Nurse educators are responsible for formulating program outcomes and designing curricula that reflect contemporary health care trends and prepare graduates to function effectively in the health care environment.

Competency V: Function as a Change Agent and Leader

Nurse Educator's function as change agents and leaders to create a preferred future for nursing education and nursing practice.

Competency VI: Pursue Continuous Quality Improvements in the Nurse Educator Role

Nurse Educators recognize that their role is multidimensional and that an ongoing commitment to develop and maintain competence in the role is essential.

Competency VII: Engage in Scholarship

Nurse Educators acknowledge that scholarship is an integral component of the faculty role, and that teaching itself is a scholarly activity.

Competency VIII: Function Within the Educational Environment

Nurse educators are knowledgeable about the educational environment within which they practice and recognize how political, institutional, social, and economic forces impact their role.

National League for Nursing. (2017). *The scope of practice for academic nurse educators*. Retrieved from: <http://www.nln.org/professional-development-programs/competencies-for-nursing-education/nurse-educator-core-competency>

APPENDIX L

STUDENT CONCERN FORM

This form should be used for concerns/complaints that are not covered by the policies or procedures outlined in the *Graduate Student Handbook* Student Complaint Process regarding academic grade appeals or non-academic appeal grievances related to non-academic misconduct. Concerns related to Title IX sexual harassment issues will need to be reported to the parent university Title IX Coordinator.

Student Name:	Date:
Student ID:	Parent University:
Concern:	
Date Received:	Date of Response to Student:
Program Chair:	Dean: