Graduate Nursing Student Handbook
2019-2020

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Reviewed & Revised 8/19/2019
**TABLE OF CONTENTS:**

Lansing School Mission .......................................................................................... 3
Core Values ........................................................................................................... 3
Philosophy of the Department of Nursing ............................................................. 3-4
SON Committees, Sigma Theta Tau International ................................................ 5
Disability/Academic Advisement/Registration....................................................... 5
Grading Scale ......................................................................................................... 6
Waivers and Exceptions ......................................................................................... 6
Practicum Requirements ......................................................................................... 6
Other Requirements, Liability Insurance ............................................................... 7
Incident Report ....................................................................................................... 8
Injury/Accident/Exposure ......................................................................................... 8
Student Drug & Alcohol Policy .............................................................................. 9-12
Academic Honesty .................................................................................................. 13
Use of Social Media ............................................................................................... 13
Human Studies Review Process ............................................................................. 14
Protocol for IRB Review ........................................................................................ 15
Formal Complaints ................................................................................................. 15

**Master of Science in Nursing**

- Program Outcomes ............................................................................................. 16
- Technical Standards ............................................................................................ 16
- Family Nurse Practitioner Track Academic Policy ............................................ 17
- Re-enrollment ....................................................................................................... 17
- Progression in the FNP Track ............................................................................ 17
- Unsatisfactory Grade in Practicum .................................................................. 18
- First Unsatisfactory Grade After Admission to the FNP Track ....................... 18
- Appeal Process for Progression ......................................................................... 18
- Dismissal from the FNP Track ........................................................................... 18

**Doctor of Nursing Practice**

- Program Outcomes ............................................................................................ 19
- Technical Standards at the Post Master’s (DNP) .................................................. 19
- DNP Project ........................................................................................................ 20
- The DNP Project Team ....................................................................................... 20
- Final Project ......................................................................................................... 21
- DNP Project Process Model .............................................................................. 22
- Process for Completion of DNP Project ............................................................... 23
- The DNP Project (Process) ................................................................................ 24
- Project Proposal .................................................................................................. 24
- Project Report ...................................................................................................... 24
- Project Presentation ............................................................................................. 25
- ScholarWorks@Bellarmine Electronic Thesis, Dissertation and Capstone Submission .......................................................................................................................... 25
- DNP Program Practice Experiences .................................................................. 26

**Forms Section MSN**

- Bellarmine University Graduate Program Requirements .................................. 27
- Waiver for Seasonal Influenza ............................................................................ 28
- Tuberculosis Screening Questionnaire ................................................................ 29
- Waiver for Hepatitis B Vaccination .................................................................... 30
- Waiver for Immunizations other than Hep B ....................................................... 31
- Employer Verification of Practicum Requirements ............................................. 32
- Application for Re-enrollment to the Graduate Nursing Program .................... 33
- Application for Continuation ............................................................................. 34
- Waiver form ........................................................................................................ 35
- Clinical Incident Report ...................................................................................... 36

**Forms Section DNP**

- Appointment of The DNP Project Team Approval Form ................................... 37
- Project Checklist .................................................................................................. 38
- Project Proposal Rubric ....................................................................................... 39
- Project Practice Rubric ....................................................................................... 40
- Notice of DNP Project Proposal Approval Form .................................................. 41
- Announcement of DNP Project Presentation ...................................................... 42
- Project Presentation Outline ............................................................................... 43
- Project Approval Form ......................................................................................... 44
- Log of Supervised Practice Hours ..................................................................... 45
The Department of Nursing, consistent with an inclusive Catholic university, prepares nurse leaders with a global perspective, capable of improving practice through sound nursing judgment and clinical scholarship. Students are educated—mind, body, and spirit—for meaningful lives, rewarding nursing careers, ethical leadership, and service to improve the human condition.

Revised 8/16/2019

The Department of Nursing is recognized as a diverse and innovative learning community seeking and offering collaborative, creative opportunities to advance health knowledge, engaging in partnerships and alliances to promote health, and developing leaders in health care through transformative student experiences.

We educate the whole person to realize his or her highest potential as part of an interconnected world. Our values are

- **Academic Excellence** – We are committed to providing a scholarly and creative environment grounded in the Catholic liberal arts tradition.
- **Intrinsic Dignity** – We respect the intrinsic value and dignity of every individual.
- **Social Responsibility** – We cultivate professional nurses who contribute to, and advocate for, the public good, environmental sustainability, global understanding, and informed civic engagement.
- **Integrity** – We believe that personal and professional integrity guides the practice of nursing and health sciences.
- **Hospitality/Student Centered Learning** – We are committed to education that is student centered, inclusive, and responsive to diverse learners.
- **Quality Service** – We are committed to exercising thoughtful stewardship of resources while providing quality services that support a diverse constituency.
- **Caring** – We believe that caring is an essential component of the art and science of all healthcare practitioners.

Consistent with Catholic social teaching, the faculty believes that quality health care should be available to all, with each individual in a society having the right to pursue the highest level of health. Nursing is a scientific discipline with a professional practice domain. The faculty supports the definition of nursing proposed by the American Nurses Association in the 2010 publication *Nursing’s Social Policy Statement: The Essence of the Profession*.

*Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations.*

Faculty beliefs also include the following:

**Person**

The person receiving nursing care may be an individual or an aggregate (i.e., family, social group, community, or population). Each person is unique and worthy of respect with intrinsic value and inherent dignity. Diversity and inclusion are valued and celebrated; no individual or group should be excluded or marginalized. Persons are greater than the sums of parts, having integrated and interacting dimensions of mind, body, and spirit.
Environment

Environment is the setting for the human experience, composed of multiple interacting dimensions including physical, biological, social, political, and global aspects. Persons adapt to changing situations and habitats. Environments are influenced by the norms of a person, particular region, and culture.

Health

Health is a dynamic, multidimensional experience of well-being perceived individually by each person, including physical, physiological, emotional, intellectual, cultural, social, community, and spiritual aspects. Health is holistic wellness existing along a continuum, reflecting the person’s adaptation to changing environments, with the person’s goals for health changing during different stages of life. Health is different from “cure” and is not simply the absence of illness. Persons can and should experience health even in the presence of illness. As the dying process is a natural part of the life continuum, promoting optimal well-being and health during this final life transition is also essential.

Nursing

Nursing, steeped in a tradition of caring for all persons, is a unique professional and academic discipline grounded strongly in the liberal arts and sciences. Nursing also has its own unique body of scientific knowledge, developed through theory and research, which interfaces with the scientific knowledge from other healthcare disciplines. Grounded in this scientific foundation, professional nurses deliver evidence-based nursing care through the systematic implementation of the steps of the nursing process: assessment, diagnosis, outcomes identification, planning, implementation, and evaluation. Professional nurses engage with scholarship for evidence-based practice and are competent with information management and the application of patient care technologies.

Professional nursing practice is also an art and a person-centered relational process that is deliberate, systematic, and performed collaboratively with the person receiving nursing care. Nursing is a therapeutic process reflecting critical thinking, clinical reasoning, clinical judgment, human caring, and compassion. Nursing is uniquely different from other health care disciplines, however nurses work collaboratively within interprofessional health care teams. Nurses must possess specific knowledge, skills, and attitudes to deliver safe and effective nursing care, adapting quickly and effectively to rapidly changing clinical situations. Clinical skills are an essential component of nursing practice; however, professional nursing practice must reflect knowledge-based, holistic care.

The nurse-person relationship transpires within the environmental realities of the person, with nursing care supporting the person’s adaptation to changing environmental conditions and ensuring safety. Nurses anticipate, plan, and intervene to optimize environmental conditions, reduce health risks, and assist persons in maintaining integrity. Goals of nursing care include alleviating pain and suffering while promoting, maintaining and restoring health. Professional nurses view persons holistically to plan and implement nursing care that addresses biological, psychological, social, and spiritual needs.

Nursing care is provided in a manner that respects the uniqueness, dignity, worth, self-determination, and cultural needs of the person, focusing on care needs across the lifespan and in different roles and contexts (such as healthy, chronically ill, acutely ill, injured, at risk for injury). Although nursing care includes prevention of injury and disease and symptom management, the primary focus of nursing is optimizing holistic wellness. Through a variety of roles (including nurse leader, clinician, teacher, consultant, manager, and advocate), the professional nurse cares for persons in many settings as a member of the interprofessional health care team. Professional nurses provide leadership and serve as change agents within complex healthcare systems and in healthcare policy, public policy, financial, and regulatory environments to improve health and optimize quality of care for populations and individuals.

Learning and Teaching

Learning and teaching are collaborative, iterative processes that are lifelong and experiential. Learning is a process of self-discovery and engagement allowing for intellectual and spiritual growth; teaching facilitates the learning process through mentoring, feedback, open communication, and reflection. Experiential learning, systems thinking, the meaningful use of technology, and the engagement of learners embody the learning and teaching philosophy of the nursing faculty.

Liberal arts education introduces learners to the value of the person and the meanings of ethics, equity, and social justice. In the profession of nursing, the learning process continues with self-
discovery that introduces learners to health and wellness, the environment's influence on these constructs, and health promotion.

Teachers individualize the approach to learners, exposing learners to diverse settings and delivery methods while modeling, recognizing and rewarding professionalism and leadership. Teachers also foster safe learning environments with mutual respect among all partners in the learning/teaching endeavor. Teachers challenge the learner to think critically, ultimately synthesizing learned content within a nursing perspective. Teachers work diligently to help learners move into the multifaceted professional nursing role by fostering the growth of passion, compassion, respect, accountability, flexibility, competence, teamwork, communication, collegiality and finally cautious confidence, independence, and leadership. Learners have responsibilities to engage actively with their learning and to strive for high-level mastery of nursing knowledge and nursing practice.

Through increasingly complex active learning and teaching exchanges as the learner moves through the curriculum, learners move from knowing self to knowing others and from delivering simple to more complex nursing care. Through engagement with the curricular journey, learners move from a novice level of practice in their new nursing role towards expertise. Bellarmine University recognizes teaching as a departmental and institutional priority, providing community and institutional support that is vital to learner and faculty excellence. (Approved 3/24/2017)

**DEPARTMENT OF NURSING COMMITTEES**

**APG/Awards** – Responsible for admission review, progression and graduation decisions at the undergraduate and graduate levels. Also responsible for identifying undergraduate and graduate student award nominees.

**Clinical Instruction/Quality** – Responsible for identifying evidence-based practices regarding clinical instruction and developing policies and procedures to monitor and improve clinical instruction at the undergraduate and graduate levels.

**Curriculum** – Responsible for completing curriculum revisions in the nursing programs.

**Policy** – Responsible for reviewing, revising, updating and/or developing policies in the undergraduate and graduate handbooks.

**Evaluation and Program Effectiveness** – Responsible for undergraduate and graduate program outcome evaluation, and reporting to faculty, accrediting bodies and stakeholders.

**Student Success** – Responsible for identifying best practices to facilitate student success in undergraduate & graduate programs.

**Student representatives serve on these Committees**

Volunteers for these positions are solicited annually.

**SIGMA THETA TAU INTERNATIONAL**

Sigma Theta Tau is the Honor Society of Nursing; its mission is to be a leader in promoting leadership and scholarship in practice, education and research to enhance the health of all people. Lambda Psi is the Bellarmine University chapter. Membership is by invitation to baccalaureate and graduate nursing students who demonstrate excellence in scholarship, and to nurse leaders exhibiting exceptional achievements in nursing. Additional information may be found at the following websites:

Sigma Theta Tau International: [http://www.nursingsociety.org](http://www.nursingsociety.org)

Lambda Psi Chapter: [http://lambdapsi.nursingsociety.org/LambdaPsiChapter/Home/](http://lambdapsi.nursingsociety.org/LambdaPsiChapter/Home/)

**DISABILITY SERVICES**

Students with disabilities who require accommodations (academic adjustments and/or auxiliary aids or services) for course work must contact the Director of Disability Services, Ronda Purdy, located in CNMH 076, or Jessiemarie Voigt, administrative assistant, in CNMH 074. Students can apply for services online at [https://bellarmine-accommodate.symplicity.com/](https://bellarmine-accommodate.symplicity.com/) or call 502.272.8490 or email...
rpurdy@bellarmine.edu for more information. Students are encouraged to make these arrangements with Disability Services as early in the semester as possible so that a student and his/her course instructor can collaborate for a successful course experience.

ACADEMIC ADVISEMENT AND REGISTRATION
Academic advisement is an essential part of graduate studies. Each student should formulate educational goals with their faculty advisor and maintain communication with that advisor throughout the program of study. Assignment of advisors is by program track. Please refer to current “advisor list” for a listing of track advisors.

All graduate students must contact their advisors for academic advising prior to registration dates. Students are strongly encouraged to register as early as possible in the semester preceding the course. Classes may be cancelled due to low enrollment. Therefore, it is essential that the Registrar have an accurate number of students who desire to take a particular class as soon as possible. Students may register online only after discussing their registration plans with the advisor.

ACTIVE STATUS IN THE GRADUATE NURSING PROGRAM
Once admitted to the Graduate Nursing Program, students must register for a course every semester to maintain active status. If a matriculated student does not register in consecutive semesters (excluding summer), the student’s file is considered inactive. To return to the Graduate Nursing Program, the student must submit a Readmission form (See Forms section), in order to reactivate the file. The student should also contact his/her Graduate Nursing faculty advisor to revise the program of study.

GRADING SCALE
The following standardized grading scale is used for graduate nursing courses.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>96-100</td>
</tr>
<tr>
<td>A-</td>
<td>92-95</td>
</tr>
<tr>
<td>B+</td>
<td>89-91</td>
</tr>
<tr>
<td>B</td>
<td>85-88</td>
</tr>
<tr>
<td>B-</td>
<td>83-84</td>
</tr>
<tr>
<td>C</td>
<td>77-82</td>
</tr>
<tr>
<td>F</td>
<td>76 or less</td>
</tr>
</tbody>
</table>

WAIVERS AND EXCEPTIONS
A student may request a waiver or exception to policy by petitioning the Nursing Admission, Progression, and Graduation (APG) Committee. The student must discuss his/her request for a waiver with the Graduate Nursing faculty advisor prior to submission of the waiver form (See Forms Section). The Nursing APG Committee will notify the student of the committee’s decision.

PRACTICUM REQUIREMENTS
Graduate nursing students completing coursework or practicum in clinical/hospital/ healthcare agencies or facilities must be compliant with the Lansing School of Nursing and Clinical Sciences policy on health screening and clinical practice requirements including immunizations and communicable diseases for continuation in the programs. The purpose of the practicum requirements is to ensure the safety and health of graduate students and clients in diverse settings. Due to the terms of clinical affiliation agreements for FNP students, a different process exists for verification of practicum requirements for these students.

Prior to the start of any clinical experiences (including practicum, Immersions, and/or Residency), students must submit verification that the following requirements have been met:

- Current CPR certification
- Current on all health care requirements. These include:
  - Required immunizations (including influenza)
  - Hepatitis vaccine series (or waiver)
  - T-spot blood test
- Holds an unrestricted registered nurse license and has undergone a satisfactory criminal background check
- Mandatory drug screening, with negative results

FOR STUDENTS BEGINNING FNP CLINICAL COURSES
There are several requirements that must be completed through Castle Branch prior to starting FNP practicum. The student is responsible for all costs associated with Castle Branch.

Instructions:
1) Go to www.Castlebranch.com and click on “Place Order” then enter package code: EL52
2) Select “Background Check & Immunization” Tracker
3) Select a method of payment: Visa, MasterCard or money order
4) Mandatory Drug Screening
   All students must submit to a drug screen and test negative for drugs before engaging in any
   Instructional/clinical activities. This process will be managed through the student’s account at

Once your order is submitted, you will receive a password to view the results of your background
check within approximately 48-72 hours. If you need assistance, call us at 888.723.4263 x7194 for
more information.

ADMINISTRATION & EDUCATION MSN & DNP PROGRAMS

Students who are completing practicum hours in clinical/hospital/healthcare agencies or facilities must
submit documentation regarding background checks and immunization requirements to the Graduate
Nursing Department office at least two weeks prior to beginning the practicum.

For students who have existing documentation of these requirements on file with an employer, the form
entitled “Employer Verification of Practicum Requirements” may be used. (See copy of forms section.)
Students should take the form to the institution in which their records are on file and ask that an appropriate
individual at that institution complete the form to verify the student’s compliance with the requirements. The
student should then return the completed form to the Graduate Nursing Department office at Bellarmine at
least two weeks prior to beginning the practicum.

Students who do not have existing documentation must submit requirements through Castle Branch (see
procedures outlined on page 6).

For students completing course work or practicum in nonclinical agencies or facilities, only
compliance with the policies and requirements of the specific agency or facility is required.

OTHER REQUIREMENTS

Health Insurance
Due to the nature and variety of clinical experiences, it is strongly recommended that all nursing
students carry health insurance. Bellarmine University and the Lansing School of Nursing and Clinical
Sciences are not responsible for the costs related to health emergencies, injuries, or illnesses
occurring while students are engaged in clinical practice. Nursing students are not employed by the
affiliating clinical agencies; agencies are not responsible under Worker’s compensation for
reimbursements if injuries, incidents or illness should occur while in the role of a nursing student. The
Office of Student Affairs has information for students regarding health insurance
(http://www.bellarmine.edu/studentaffairs/). Accepted 4/16/2008

Dress Code for Practicum
Professional appearance is always expected when the student is representing Bellarmine University
and its programs. If questions about appropriate dress occur, the student must consult with the
professor for the practicum class, whose judgment will be final.

Practicum Honesty Policy
Any breach of professional and/or ethical conduct in the clinical area will be viewed as a most serious
offense. For instances of dishonesty in the laboratory or clinical settings, the nursing department will
follow the procedures outlined in the academic honesty policy in the university student handbook. The
student handbook may be accessed online via the student portal on http://www.bellarmine.edu/nursing

Online Program Orientation
Students will be required to participate in the online BU distance education orientation, as well as a
Graduate Nursing program orientation. The Nursing orientation will be held on campus, but students
may also attend either synchronously or asynchronously.
LIABILITY INSURANCE
Nursing students are insured through Bellarmine University for professional liability while enrolled in graduate nursing courses and practicing in the role of student. The student’s lab fees incorporate the cost for this insurance.

INCIDENT REPORT
All incidents, such as medication errors or an injury to a student or a patient, must be reported to the faculty member immediately upon occurrence. Each incident will be handled according to facility policies and procedures. The course faculty member is responsible for completing a Bellarmine Incident Report and turning it in to the Department Chair within 24 hours of the incident (see Forms Section).

INJURY/ACCIDENT/EXPOSURE
Neither Bellarmine University nor the clinical facility accepts responsibility for any personal injury, illness, or exposure to pathogens that the student experiences. This pertains to incidents in any setting: classroom, lab, or clinical. Expenses incurred for the medical treatment related to incidents are the direct responsibility of the student.

INVASIVE PROCEDURES POLICY
With explicit regard for the dignity and privacy of students, it is a legitimate expectation that students work with one another during normal physical assessment activities. These activities may include inspection, palpation, percussion, and auscultation of various parts of the human body.

No student will be coerced or intimidated into being a subject for other students during physical examination practice. However, all students must exhibit competence in the physical examination of another student or standardized patient.

ONLINE PROGRAM STANDARDS
1. Courses will be built using a template to provide continuity and ease of navigation.
2. Faculty will maintain a minimum of 2 virtual office hours weekly to maintain student engagement and faculty touch points.
3. Courses will not require any synchronous learning experiences. However, optional synchronous sessions may be offered.
4. Innovative teaching modalities (beyond the use of discussion boards) will be utilized to engage students and maximize learning experiences.
5. The course gradebook will be maintained in Moodle.
6. Courses requiring testing will utilize a monitoring mechanism.
7. The FNP program will maintain three, on-campus learning experiences:
   a. During Nurs 611, Advanced Health Assessment
   b. Prior to the start of clinical practicum experiences in Nurs 659, Primary Care I
   c. Prior to the start of the final clinical practicum in Nurs 663, Comprehensive FNP Practicum
8. Advisors will have a minimum of one virtual meeting with their advisees every semester.
9. Responses to student emails should take place within 48 hours on weekdays. Any contact after 5:00pm EST on Fridays, holidays, or days when the University is closed, should be returned by end of business on the following Monday.
COLLEGE OF HEALTH PROFESSIONS

STUDENT DRUG AND ALCOHOL POLICY

Introduction

The College of Health Professions (CHP) is committed to providing a quality education for Students admitted into its Programs. In order to protect the integrity of the Programs, as well as safeguard the welfare of Students and of clients receiving care from Students, this Policy addresses Drug and alcohol testing of Students involved in Instructional/Learning Activities through the CHP.

The purpose of this Student Drug and Alcohol Policy (the “Policy”) is to notify Students and Faculty Members of the CHP’ s Drug and alcohol rules and testing procedures, and to provide assistance and due process for Students who test positive for Drugs (including legally prescribed medications) and/or alcohol. This policy applies to all Students admitted to the CHP programs (“Program” or “Programs”) at Bellarmine University, and is effective immediately. The testing of Students for Drug or alcohol use while engaged in Program-sponsored Instructional/Learning Activities will be completed through an independent agency contracted by CHP. Testing costs are the responsibility of the student. These costs are beyond the control of the CHP and are subject to change at any time without notice.

It is the policy of Bellarmine University to comply with federal and state laws and regulations regarding the usage and detection of Drugs and alcohol. In addition, it is the professional duty and ethical obligation, of health care providers and students to identify and report when they have reasonable suspicion of an impaired health worker. This Policy is subject to change at the sole discretion of Bellarmine University and/or CHP, and is meant to supplement other relevant Bellarmine University policies, including but not limited to the Policy on Alcohol and the Illegal Drug Use Policy contained in the Bellarmine University Student Handbook. Violations of this Policy may result in the student’s inability to complete the program. The CHP bears no responsibility for a student’s inability to complete or participate due to a failed drug or alcohol screening.

Definitions

For the purposes of these guidelines, the following terms shall have the following meanings:

1) “Drug” or “Drugs” means all of those drugs included in the current Medical Professional substance abuse profile (LabCorp, 2016). These may include, but are not limited to:
   - Amphetamines (including Methamphetamine)
   - Barbiturates
   - Benzodiazepines
   - Cocaine metabolites
   - Cannabinoids (THC, Marijuana)
   - Methadone
   - Methaqualone
   - Ecstasy
   - Opiates (codeine, morphine)
   - Phencyclidine
   - Oxycodone
   - Propoxyphene

2) “Student” means any student enrolled in one of the CHP programs at Bellarmine University.

3) “Reasonable Suspicion” means that the Student’s faculty member, clinical instructor, preceptor, supervisor, or his/her designee (collectively, “Faculty Member”) believes that the behavior, speech, body odor, or appearance of the Student is indicative of the use of alcohol or Drugs, as described in detail in this Policy.

4) “Instructional/Learning Activities” include classroom and other activities on and off campus that involve patient care, instruction, or practice of preparatory skills as a component of health care provider practice, including but not limited to clinical practicums, internships, clerkships, service learning, community engagement, skills labs, and/or non-class associated practice at on-campus or off-campus sites.

5) “Medical Review Officer ("MRO")” is a nationally certified, licensed medical doctor or osteopath responsible for receiving laboratory results under these guidelines who has knowledge of substance abuse disorders and has appropriate medical training to interpret and
evaluate confirmed positive test results, medical history, and any other relevant biomedical 
information. Access to the MRO is through the agency contracted to complete the testing.
6) “Positive Drug Test” is determined by the MRO in accordance with guidelines established for
healthcare workers.
7) “Positive Alcohol Test” means an alcohol test that is at or exceeds the Department of 
Transportation (“DOT”) Guidelines for blood, breath, or saliva testing depending on the test 
used, e.g. blood alcohol content of 0.04 or greater (under current DOT Guidelines).

Policy
The CHP prohibits the unlawful use or possession of Drugs or alcohol by any Student during any
Instructional/Learning Activities associated with any Program. Prior to participation in a clinical course 
in their Program, all Students will be provided with a copy of this Policy and will be required to 
complete the CHP Student Drug and Alcohol Policy Acknowledgment Form (see Appendix A).

Per Bellarmine University policy as contained in the Bellarmine University Student Handbook,
Students in possession of a controlled substance will be referred to the Dean of Students, and such 
conduct may result in suspension or expulsion from the University and/or a requirement that the 
Student enroll and actively participate in a Drug or alcohol counseling and rehabilitation program as a 
condition of continued enrollment or readmission.

In addition, the improper use of any Drugs or alcohol by any student in the CHP may constitute 
grounds for removal from all Instructional/Learning Activities and/or cause for termination from the 
program. Students who participate in a CHP Program may not Test Positive for Drugs or Test Positive 
for Alcohol, with the exception that a Student who Tests Positive for Drugs will be provided an 
opportunity to explain if that positive test is the result of his or her use of legally prescribed medication.

Mandatory Drug Screening
Many clinical training sites now require students to undergo drug testing, similar to what is required of 
their employees. Therefore, all Students will submit to a drug screen and test negative for Drugs 
before engaging in any Instructional/Learning Activities.

Consequences
1) Refusal to Participate in Mandatory Drug Screening:
   If a Student fails to comply with the policy, they will not be allowed to begin any 
   Instructional/Learning Activities within the School.
2) Negative Drug Screen Test Result:
   The Student will be allowed to participate in all Instructional/Learning Activities as planned if 
   results of the negative drug screen are received by the requested deadline. Students who fail 
   to meet the deadline will incur a $50.00 fine charged to their bursar account and will be unable 
   to attend Instructional/Learning Activities until the deficiency in documented information has 
   been resolved.
3) Positive Drug Test and Self-Admission:
   If a Student receives a Positive Drug Test, or if the Student admits to a Drug and/or alcohol 
   problem, the Student will not be allowed to attend any Instructional/Learning Activities, and will 
   be referred to their Chairperson and school Dean.

Drug and Alcohol Screening for Reasonable Suspicion
In addition, students will be tested for the use of Drugs and alcohol upon observation of behavior that 
creates a Reasonable Suspicion of alcohol or Drug use; this could include conduct that prevents the 
Student from performing the essential functions of his or her role in the Instructional/Learning Activity, 
or which poses a direct threat to the health or safety of others. Other behavior which could create a 
Reasonable Suspicion of Drug or alcohol use by a Student includes, but is not limited to: odor of 
alcohol or Drugs, unsteady or staggering gait, rapid or slurred speech, pinpoint or dilated pupils, 
unresponsiveness, bloodshot eyes, fine motor tremors, difficulty participating in activities, nausea, 
vomiting, sweating, erratic behavior, incoherent speech, verbal or physical outbursts, self-report of 
Drug use or alcohol abuse, unsafe behavior, unsatisfactory care for others, and threats to harm self or 
others. Students in an CHP Program are expected to act in conformity with, and will be held 
accountable to, the same professional standards of licensed healthcare professionals during all 
educational and Instructional/Learning Activities. While it is not the intent of the CHP to monitor 
Students’ behavior outside of their Program, Students’ use or suspected use of Drugs and alcohol
outside of the Program may adversely impact their behavior during their Program,’s Instructional/Learning Activities and may lead to a Drug or alcohol test based on Reasonable Suspicion of Drug or alcohol use. The Student will bear the cost of the screening based on a Reasonable Suspicion of Drug or alcohol use.

Faculty Members are encouraged to consult with other faculty members and clinicians, or other health care providers who may have witnessed the behavior, if possible, to validate the basis for Reasonable Suspicion testing. If the Faculty Member determines that Reasonable Suspicion of Drug use or alcohol use is present, Faculty Member should take the following steps:

1) Remove the Student from the Instructional/Learning Activity;
2) Move the Student into a private setting and in the presence of a witness, if possible;
3) Discuss the suspicious behavior with the Student and allow the Student to explain;
4) Decide whether Reasonable Suspicion exists for Drug and/or alcohol testing, in conformity with this Policy; and
5) Make arrangements for Drug and/or alcohol testing, if necessary, or allow the Student to return to the Instructional/Learning Activity.
   • Notify the Department Chairperson the of drug and/or alcohol testing need
   • If unable to reach the Department Chairperson, notify the “on call” Student Affairs staff member
   • If in the Louisville area, call the Yellow Cab Service at 502-636-5511 for transportation needs
   • Call Mainline Drug Testing Services, LLC to determine the closest testing facility (412-884-6967 or 412-398-8074)
   • Provide the student with the drug testing form
   • Either the clinical faculty member / preceptor or Department Chairperson (or their designee) should escort the student to the testing facility, wait for specimen collection to occur, and then using Yellow Cab, escort the student to their residence

If the Faculty Member determines that Reasonable Suspicion exists for a Drug and/or alcohol test, the Student must submit to a Drug and/or alcohol test at the earliest time possible in accordance with arrangements made by the Faculty Member. A Student tested for Drug, alcohol use, based on Reasonable Suspicion, will not be allowed to participate in Instructional/Learning Activities until he, or she meets with the Faculty Member, Chairperson and school Dean.

If a Student is asked to submit to a Drug or alcohol test in accordance with this Policy, the involved Faculty Member will immediately, or within one business day for evening or weekend occurrences, notify the Chairperson of their program. The Faculty Member will also make a written report for their Chairperson within two working days of the event identifying the Student involved and describing the Student’s conduct, names of witnesses, and a summary of the events that led to the Reasonable Suspicion Drug or alcohol test.

Consequences
1) Refusal to Test for Drugs or Alcohol:
   If a Student fails to produce the requested sample at the date and time designated, the Student will be allowed 30 minutes to reconsider the decision and the Faculty Member will notify the Chairperson immediately. A Student who refuses to take the test after the 30-minute waiting period will be treated as if he or she received a Positive Drug Test or Positive Alcohol Test.

2) Negative Test Result:
   If the Drug or alcohol test is negative, no action will be taken, and the Student will be allowed to participate in all Instructional/Learning Activities. The Student will be allowed to make-up any missed clinical/laboratory time at no cost.

3) Positive Drug Test or Positive Alcohol Test, Other Policy Violations, and Self-Admission:
   If a Student receives a Positive Drug Test or Positive Alcohol Test, if a Student violates this Policy in any other manner, or if the Student admits to a Drug and/or alcohol problem, the Student will be immediately removed from all Instructional/Learning Activities and the Faculty Member will notify the Chairperson and school Dean. At a minimum, a Student who violates this Policy will receive a zero for the missed clinical/laboratory day when the Student was removed for testing. The Student will be responsible for payment of all costs associated with
making up the clinical/laboratory day. However, a Student who receives a Positive Drug Test will be provided with an opportunity to explain any Positive Drug Test that results from his or her use of a legally prescribed controlled substance, and such circumstances will be taken into account in determining the consequences of the Positive Drug Test.

**Student Conduct Proceedings for Violation of the Drug and Alcohol Policy**

A Student found in violation of this Policy will be referred to the Chairperson and school Dean, as well as Bellarmine University’s Dean of Students. A Positive Drug or Positive Alcohol Test result could result in the Student’s suspension or dismissal from the CHP program and from Bellarmine University, and/or a requirement that the Student enroll and actively participate in a Drug/alcohol counseling and rehabilitation program as a condition of continued enrollment or readmission. These regulations are not substitutes for criminal sanctions provided for by state and federal statutes or regulations. Please reference the *Bellarmine University Student Handbook* for more information on student conduct proceedings.

1) If not suspended or dismissed from the CHP program and/or Bellarmine University, the Student will not be allowed to participate in Instructional/Learning Activities until he/she fulfills all terms set forth by the CHP and Bellarmine Dean of Students.

2) A second positive Drug or alcohol test or violation of this Policy will result in dismissal from the CHP program.

**Confidentiality**

The University will take reasonable measures to ensure individual privacy under this Policy including, without limitation, keeping all Drug and alcohol test results confidential to the extent possible. Drug or alcohol test results will only be released in accordance with applicable federal and state laws and regulations.

Reviewed by Mark Wiegand, Tony Brosky and Nancy York 7/11/14, 7/2016, 8/23/2017
Approved by University Council 7/22/14, 8/10/2016
Approved by LSNHS Chairs/Deans 9/8/2014, 8/12/2016
ACADEMIC HONESTY

Each student contributes to the learning of the entire class. Courteous and professional behavior is expected at all times in the classroom and clinical setting.

For issues related to academic honesty within the classroom setting, see the Bellarmine University Student Handbook https://www.bellarmine.edu/docs/default-source/student-affairs-docs/student-handbook.pdf

Student Classroom Responsibilities
1) Promptness
2) Attendance/Participation in all class activities
3) Preparation - bringing and/or submitting preparation work for class
4) Notification to professor when unable to attend/participate in class
5) Completion of assigned reading before class
6) Appropriate contributions to class
7) Appropriate conduct during class/online for example:
   • Arrives on time
   • Remains in classroom until class is dismissed
   • Returns from breaks on time
   • Stays awake in class
   • Refrains from having side conversations
   • Attends to speaker, and students asking questions, during class time
   • Allows others to hear and learn
   • Posts reflective/insightful comments to peers and faculty
   • Maintains civility in all online communications
   • Participates in online group activities

Electronic Devices
1) Portable electronic devices must be turned off and no electronic devices should be on any person during exams/test reviews.
2) Permission should be obtained from instructor or guest speakers before video/audio recording.
3) Courteous and professional responsibilities extend to electronic communication.
4) Computer etiquette should be used when communicating with professors. Professors will respond within a reasonable period during the week. Students should not expect responses to queries over the weekend.
5) Students should ask permission from the course faculty to use electronic devices in the classroom. Students using electronic devices for non-academic purposes during class will be asked to leave the classroom.

USE OF SOCIAL MEDIA

Nursing students must be aware of the risks associated with the improper use of social media, as there is an ethical and legal obligation to protect patient privacy and confidentiality. The following policy is based on the National Council of State Boards of Nursing (2011) White paper: A nurse’s guide to social media. This document has been recognized as a primary resource by the Kentucky Board of Nursing and the American Nurses Association and is available online for any person at the NCSBN website. Students should familiarize themselves with the technology policy in the University student handbook, which is available online via the student portal on the Bellarmine University website.

• Students are restricted from posting any information, which may lead to the identification of a patient. Privacy settings within websites are not sufficient to protect patient privacy and confidentiality. If there is a reasonable basis to believe that the person could be identified, then use or disclosure of the information could constitute a violation of the Health Insurance Portability and Accountability Act (HIPAA).
• Students and faculty have an ethical/legal responsibility to promptly report an identified breach of confidentiality or privacy to the appropriate course instructor and the Department Chairperson.
- Students are strictly prohibited from transmitting by means of any electronic device any patient-related information. This includes but is not limited to photographs or audio/video recording. Students are restricted from transmitting any information that could be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.

- Students should not refer to patients, staff members, faculty members, or other students in a harassing manner via social media, even if the individual cannot be identified. Harassment includes, but is not limited to, verbal harassment, sexual harassment, hate speech, cyber-bullying, and verbal threats. This includes conduct, which is disorderly, obscene, lewd, indecent, or a breach of peace.

- Students must maintain professional boundaries in the use of electronic media. The fact that a patient initiates contact with a student does not permit the student to have a personal relationship with the patient.

Non-adherence to these guidelines will result in charges under the Code of Conduct as noted in the University student handbook. The Student Conduct Procedures (Non-Academic) will be used to adjudicate student conduct cases involving alleged violations of the Code of Conduct. All confirmed incidents of academic dishonesty via social media will be reported to the Assistant Vice President for Academic Affairs, and sanctions will be imposed as dictated by the academic honesty policy. The use of social media policies apply to a student’s use at any time, in any place, and with any medium.

Resources:
American Nurses’ Association. (2011). *ANA Principles of social networking and the nurse*. Silver Springs, MD; American Nurses’ Association
Kentucky Board of Nursing. (2011) http://kbn.ky.gov/

**HUMAN STUDIES REVIEW PROCESS**

Students completing a scholarly project or thesis involving human subjects may need to submit an application for Bellarmine Institutional Review Board (IRB) review and approval. Approval from the IRB must be obtained prior to beginning the project or thesis. IRB procedures and documents can be retrieved from the website at: http://www.bellarmine.edu/academicaffairs/effective/research-and-creativity/irb/

If you are conducting a project at your place of employment, and your facility requires that the project go through its own IRB of record, then the project should be submitted to that IRB. Once you have received approval, a copy of the approval letter should be submitted to the Bellarmine IRB, along with a cover form (available from the Bellarmine IRB Office). As a result, the Bellarmine University IRB will have a record of the project, but will not be responsible for project oversight.

If you are not required to submit your project to your facility’s IRB, you should submit the project to the Bellarmine University IRB for review and determination of status. While you may believe that the project is exempt or does not meet the definition of research, the project should still be submitted for the IRB to make that determination.
PROTOCOL FOR IRB REVIEW

Describe the study’s purpose and methods in no more than three typewritten pages. The following outline is intended to serve as a guide.

1) Introduction
   • Very brief introduction to the topic of interest and why it’s important
   • No more than 1 – 2 paragraphs

2) Statement of purpose
   • Methods
   • Study design

3) Setting – Where will the study take place?

4) Subjects
   • How many do you plan to study?
   • Inclusion/exclusion criteria for the sample
   • How will you recruit? If relevant, include process for obtaining consent.

5) Measures
   • Indicate how you will measure the variables of interest in the study
   • Be sure to include a full copy of any questionnaires, surveys, or other measurement instruments to be used (not included in the 3 pages)

6) Procedure for data collection
   • Describe (step by step) how the study will be conducted.
   • Include (as appropriate):
     o Description of study visit(s) and procedures to be done at each visit
     o What data will be collected and when? By whom?
     o Detailed description of any intervention that will be delivered

7) Ethical considerations
   • Measures to maintain privacy/confidentiality
   • How and where will data be stored

*References should be included as an appendix, along with copies of all study instruments, intervention materials (e.g. patient education booklet), and any other materials of relevance.

APPEALING DECISIONS OF THE ADMISSIONS, PROGRESSION, & GRADUATION COMMITTEE

1) If a student decides to appeal a decision from the APG committee, the first appeal must be submitted in writing within 7 calendar days to the Department Chairperson. There must be some clear basis for the student’s appeal, such as the student’s belief that a **procedural violation** occurred.

2) If a student desires to appeal the chair’s decision, the second appeal must be submitted in writing within 7 calendar days to the Dean of the Lansing School of Nursing and Clinical Sciences. The decision of the Dean is final.

FORMAL COMPLAINTS/ACADEMIC GRIEVANCES

The graduate nursing programs adhere to the Academic Grievance Policy as outlined in the university catalog. This policy can be found at [https://catalog.bellarmine.edu/2017-2018/undergraduate-academic-policies#Academic_Grievance_Policy](https://catalog.bellarmine.edu/2017-2018/undergraduate-academic-policies#Academic_Grievance_Policy)
MASTER OF SCIENCE IN NURSING

PROGRAM OVERVIEW

The purpose of the Master of Science in Nursing is to prepare nurses to identify and address gaps in healthcare delivery and design through advanced nursing knowledge and higher-level leadership skills for improving health outcomes. The graduate of this program is prepared in nursing education, nursing administration, or advanced practice nursing. Consistent with Bellarmine’s goal to prepare leaders for our society, graduate students in nursing will be able to lead change, promote health, and elevate nursing care in various roles and settings.

The graduate program leading to the Master of Science in Nursing builds on the baccalaureate degree. The curriculum is designed to meet the individual needs of students, while maintaining a sound academic program in nursing. Each student identifies educational goals with a faculty advisor and maintains communication with the advisor throughout the program of studies. The family nurse practitioner (FNP) track is designed for full-time or part-time study, while the administration and education tracks may be pursued on a part-time basis.

PROGRAM OUTCOMES

Graduates of the MSN program will be able to:
1) Integrate findings from the sciences and humanities to continually improve nursing practice across diverse settings.
2) Collaborate within interprofessional teams using effective leadership skills, ethical awareness, and critical decision making to promote quality and safety outcomes within the healthcare system.
3) Use appropriate quality improvement methods and healthcare technologies to integrate, coordinate, and improve care.
4) Employ evidence based practice methods to initiate changes in practice settings and to disseminate results.
5) Examine strategies to advocate for policies that improve the health of the public and the profession of nursing.
6) Incorporate organizational, client-centered, and culturally sensitive concepts in the implementation of evidence-based clinical prevention for individuals, families, and identified populations.
7) Demonstrate advanced level expertise in performing direct or indirect nursing interventions that influence healthcare outcomes for individuals, populations, or systems

TECHNICAL STANDARDS AT THE MASTER’S LEVEL

Each student must be able to meet the basic technical standards of performance necessary for the practice of nursing (provided at the time of application).

The master’s degree program curriculum is designed to provide the education necessary for the advanced practice of nursing. Students build on the fundamental principles of nursing, acquire skills of critical judgment based on education and experience, and develop an ability to use principles and skills wisely in decision-making and problem-solving pertaining to their roles as nurse educators or nurse administrators or advanced nurse practitioners. Students in the Master of Science programs are expected to fulfill the following technical standards:
1) Acquire information from demonstrations and experiences in the basic and applied sciences, including but not limited to information conveyed through lecture, online activities, group seminar, small group activities and physical demonstrations.
2) Acquire information from written documents and computer-information systems (including literature searches and data retrieval), and identify information presented in images from paper, video, transparencies and slides.
3) Use and interpret information from diagnostic maneuvers (e.g., sphygmomanometer, otoscope, ophthalmoscope, etc.), and other diagnostic representations of physiological phenomena during the course of conducting a comprehensive physical assessment of a client.
4) Accurately elicit information, including a medical history and other information required to adequately and effectively evaluate a client’s condition.
5) Synthesize information, problem solve and think critically to judge which theory and/or strategy of assessment and intervention is most appropriate.
6) Exercise proper judgment, and accurately complete responsibilities attendant to the advanced practice role in a timely manner.
7) Maintain effective, mature, and sensitive relationships with clients, students, faculty, staff and other professionals under all circumstances.
8) Communicate effectively and efficiently with faculty, colleagues, preceptors and all members of the health care team during practicum and other learning experiences.
9) Function effectively under stress and adapt to changing environments inherent in the classroom and practice setting.

Upon admission, a candidate who discloses a disability and requests accommodation will be referred to Disability Services, on the B- level of the W.L. Lyons Brown Library; office B05 A. call (502)272-8490). The University will provide reasonable accommodations, but is not required to make modifications that would substantially alter the nature or requirements of a program or provide auxiliary aids that present an undue burden to the University. To matriculate or continue in the curriculum, the candidate must be able to perform all the essential functions outlined in the Technical Standards either with or without accommodation.

**FAMILY NURSE PRACTITIONER TRACK**

**ACADEMIC POLICIES**

1) No more than 25% of the final grade will be derived from non-exam materials (e.g. papers, presentations, projects) in any of the following FNP Track specialty courses:
   - NURS 611 Advanced Physical Assessment and Clinical Reasoning
   - NURS 629 Pathophysiologic Concepts for Clinical Decision Making
   - NURS 650 Pharmacotherapeutics in Advanced Practice
   - NURS 659 Primary Care 1
   - NURS 660 Primary Care 2

2) Students must achieve an average grade of 83% or better on course exams in order to successfully pass the course. Quiz grades are not factored into the 83% or better course exam average that is required. If the student does not pass the exams with an average grade of 83% or better, the average grade for the exams will be submitted as the final grade. All other assignments will be computed into the final grade only after an average grade of 83% or better has been successfully achieved.

3) When taking an assessment on ExamSoft, all students are responsible for checking their exam time at the start of the exam. If the time is incorrect, the student must notify the exam proctor before beginning the exam.

**RE-ENROLLMENT IN FNP TRACK**

Review for re-enrollment applies to any student who has been admitted to the FNP track and has withdrawn from the track for any reason. When requesting to return to the FNP track sequence, the student must submit an “Application for Re-enrollment to the Graduate Nursing Program” (see Forms Section) and include an explanation of the absence. The application must be submitted to the Admission, Progression, and Graduation (APG) Committee Chairperson at least 2 weeks before registration begins for the semester in which the student wants to return. The APG Committee will review the application and may set conditions for the student’s return.

**PROGRESSION IN THE FNP TRACK**

Due to the foundational nature of the courses that comprise the APRN track, students must achieve a grade of B minus or higher in each of these courses in order to progress in the FNP track. These courses may be repeated once in order to achieve the required grade. These courses include:

- NURS 611 Advanced Physical Assessment and Clinical Reasoning
- NURS 629 Pathophysiologic Concepts for Clinical Decision Making
- NURS 650 Pharmacotherapeutics in Advanced Practice
- NURS 659 Primary Care 1
NURS 660 Primary Care 2

**UNSATISFACTORY GRADE IN FNP PRACTICUM**
A student who receives an unsatisfactory evaluation in a practicum course will receive a grade of Fail for the course. The student must request continuation in the program according to the procedure outlined in the Graduate Student Handbook. If the student is approved for continuation by the APG Committee, the student must repeat the course in its entirety and complete the requirements as outlined by the APG Committee.

**FIRST UNSATISFACTORY GRADE AFTER ADMISSION TO THE FNP TRACK OF THE GRADUATE PROGRAM**
For purposes of continuation, one unsatisfactory grade is defined as:
- a grade of C+ or lower in any of the FNP specialty courses, **OR**
- two withdrawals from any single of the above courses or combination of these courses

The student must request continuation in the graduate program by submitting an “Application for Continuation (Graduate Version - Forms Section)” to the APG Committee Chairperson at least 2 weeks before registration begins for the semester in which the student wants to return.

If the student is approved for continuation by the APG Committee, the student must repeat the course in its entirety and complete the requirements as outlined by the APG Committee in order to continue in the FNP track.

**APPEAL PROCESS FOR PROGRESSION**

1) If the student decides to appeal the decision from the APG committee, the first appeal must be submitted in writing within 7 calendar days to the Department Chairperson. There must be some clear basis for the student’s appeal, such as the student’s belief that a procedural violation occurred.

2) If a student desires to appeal the chair’s decision, the second appeal must be submitted in writing within 7 calendar days to the Dean of the Lansing School of Nursing and Clinical Sciences. The decision of the Dean is final.

**DISMISSAL FROM THE FNP TRACK**

Grounds for dismissal from the FNP track are any of the following:

1) Two unsatisfactory grades in any combination of the following courses:
   - NURS 611 Advanced Physical Assessment and Clinical Reasoning
   - NURS 629 Pathophysiologic Concepts for Clinical Decision Making
   - NURS 650 Pharmacotherapeutics in Advanced Practice
   - NURS 659 Primary Care 1
   - NURS 660 Primary Care 2
   - NURS 663 Comprehensive FNP Practicum

A student who demonstrates unprofessional behavior in either the classroom or clinical setting will meet with a designated faculty member and/or Graduate Program Chair to determine the consequences for the behavior. Consequences of unprofessional behaviors by the student may result in a failing course/clinical grade or dismissal from the nursing major.
DOCTOR OF NURSING PRACTICE

PROGRAM OVERVIEW

The changing demands of today’s complex health care environment require the highest level of scientific knowledge and practice expertise to assure high quality patient outcomes. The Doctor of Nursing Practice program is designed to prepare nurses to transform health care delivery through the design, evaluation, and continuous improvement of the context within which nursing care is delivered. Nurses prepared at the doctoral level with a blend of clinical, organizational, economic and leadership skills are most likely to be able to critique nursing and other clinical scientific findings and design programs of care delivery that are locally acceptable, economically feasible, and which significantly impact health care outcomes.

The curriculum consists of core courses, which all students take, and specialty-specific courses. Core content includes topics such as research and evidence-based practice, quality improvement and patient safety, clinical informatics, advanced statistics, health care economics and financing, and domestic and global health policy. In addition, all students complete a practice immersion and residency experience, which culminates in a final project.

PROGRAM OUTCOMES

Graduates of the DNP program will be able to:

1) Use epidemiologic and other scientific findings from nursing and other clinical disciplines, as well as organizational, political, and economic sciences, to develop practice initiatives that will improve the quality of care delivery.
2) Provide organizational and systems leadership to develop care delivery models that are fiscally responsible and demonstrate sensitivity to diverse organizational cultures and patient populations.
3) Engage in clinical scholarship to evaluate the effectiveness of evidence-based efforts in the planning and practice of health care program delivery to individuals and communities.
4) Use healthcare informatics and technology to improve patient safety and clinical outcomes.
5) Collaborate with healthcare professionals, consumers, and other stakeholders to influence health policy and health promotion/disease prevention endeavors at the local, state, federal, and/or international levels that improve patient and population health outcomes.

TECHNICAL STANDARDS AT THE DNP LEVEL

Each student must be able to meet the basic technical standards of performance necessary for the practice of nursing (provided at the time of application).

The program curriculum is designed to provide the education necessary for nurses to assume a role as advanced practice clinical leaders or executive leaders. Students in the degree program are expected to fulfill the following technical standards:

1) Acquire information from demonstrations and experiences in the basic and applied sciences, including but not limited to information conveyed through lecture, group seminar, small group activities and physical demonstrations.
2) Acquire information from written documents and computer-information systems (including literature searches and data retrieval), and identify information presented in images from paper, video, transparencies and slides.
3) Synthesize information, problem solve and think critically to judge which theory and/or strategy of assessment and intervention is most appropriate.
4) Exercise proper judgment, and accurately complete responsibilities attendant to the advanced practice role in a timely manner.
5) Maintain effective, mature, and sensitive relationships with clients, students, faculty, staff and other professionals under all circumstances.
6) Communicate effectively and efficiently with faculty, colleagues, preceptors and all members of the health care team during practicum and other learning experiences.
7) Function effectively under stress and adapt to changing environments inherent in the classroom and practice setting.
- Upon admission, a candidate in any nursing program who discloses a disability and requests accommodation will be referred to The Director of Disability Services, Student Success Center (SSC), on the B-level of the W.L. Lyons Brown Library; office B05 A. (502) 272-8490. More information is provided at the website http://www.bellarmine.edu/studentaffairs/disabilityservices/. The University will provide reasonable accommodations, but is not required to make modifications that would substantially alter the nature or requirements of a program or provide auxiliary aids that present an undue burden to the University. To matriculate or continue in the curriculum, the candidate must be able to perform all the essential functions outlined in the Technical Standards either with or without accommodation.

DNP PROJECT

The final DNP project produces a tangible and deliverable academic product that is derived from the practice immersion experience and is reviewed and evaluated by an academic committee. The final product documents outcomes of the student’s educational experiences, provides a measurable medium for evaluating the immersion experience, and summarizes the student’s growth in knowledge and expertise. The final DNP product should be defined by the academic unit and utilize a form that best incorporates the requirements of the specialty and the institution that is awarding the degree. Whatever form the final product takes, it will serve as a foundation for future scholarly practice. (P 20 of the ESSENTIALS DNP, 2004 document)

THE DNP PROJECT TEAM

The DNP Project team is made up of the student, the faculty advisor who serves as the committee chair, another doctorally prepared university faculty or staff member, and a clinical mentor. The advisor and advisee are expected to work together in establishing the Project Team, which should be appointed by the end of the advisee’s first year into the program of study and must be appointed no later than the semester that precedes the first practice Immersion.

Faculty Advisor
The Faculty Advisor should be identified by the end of the student’s second semester in the program. The faculty advisor provides academic guidance and mentoring. The student should meet regularly with the advisor for assistance with clinical, scholarly and professional development as related to the DNP program. Faculty advisors do not need to be experts in the advisee’s area of interest. Rather, they serve as facilitators and guide the advisee’s progress in the program.

Faculty Team Member
The faculty team member is an appointed member of the University faculty or staff who has practice, content or methodology interest/expertise in the advisee’s area of interest and in particular in the student’s project focus. It is preferred that the team member have previous experience in graduate education. The team member assists the advisor and advisee on matters related to the student’s project. Within the structure of the DNP Project Team, the team member also provides insight on matters that pertain to the project during the student’s course work.

Project Clinical Mentor
Clinical mentors are external to the University. They are individuals in advanced clinical practice or administrative roles who are experts in the student’s focus area, willing to assist in clinical coaching and agree to collaborate on the Project Team. Clinical mentors serve in the role of consultant or may actually guide select work of the student in clinical experiences of the program. They have an ongoing relationship with the student throughout the program, contributing especially to the student’s development as a leader in the student’s area of practice or executive management. Clinical mentors may be selected from among a variety of disciplines, thereby building upon the DNP program objective to enhance the student’s interdisciplinary experience. Clinical mentors should be doctorally prepared in their discipline and, whenever possible, identified experts in the field.
Time Line
In regard to formation of the DNP Project Team, the following time line should be followed:

- The Faculty Advisor should be identified no later than the end of the student’s second semester in the program.
- The remaining Team members should be identified by the end of the student’s first year in the program. The “Appointment of the DNP Project Team Approval” form should be completed and submitted to the Office of Graduate Nursing at this time (see Forms Section).
- Team approval of the student’s project topic should be obtained no later than the start of the student’s second year in the program.

FINAL PROJECT

The DNP project provides tangible evidence of the student’s academic growth, derived from the immersion experience, and represents an opportunity for the student to demonstrate the ability to systematically analyze current evidence, develop or support a project, evaluate outcomes, and disseminate information. The project is based on the individual student’s interest area, as approved by the DNP Project Team. The project focus is on the scholarship of practice, with an emphasis on internal validity rather than external generalizability.

Projects may vary, depending on the student’s area of interest. Types of projects include, but are not limited to:

- quality improvement
- policy design and analysis, using databases
- design and evaluation of new care delivery models
- translation of research into practice
- design and evaluation of programs for patient or community-based populations
- implementation and evaluation of evidence based practice guidelines
- implementation and evaluation of innovative uses of technology in clinical practice
- comparison of various aspects of care delivery models (e.g., cost, consumer satisfaction, quality of care)

However, all DNP projects should:

- Focus on a change that impacts healthcare outcomes either through direct or indirect care.
- Have a systems (micro-, meso-, or macro-level) or population/aggregate focus.
- Demonstrate implementation in the appropriate arena or area of practice.
- Include a plan for sustainability (e.g., financial, systems or political realities, not only theoretical abstractions).
- Include an evaluation of processes and/or outcomes (formative or summative). DNP Projects should be designed so that processes and/or outcomes will be evaluated to guide practice and policy.
- Provide a foundation for future practice scholarship.

When formulating a project idea, students should consider the following criteria to ensure that the final project will make a difference in practice:

- Entails engagement in partnerships/collaboration, either intra- or inter-professional
- Involves the translation/use of evidence in practice
- Informs (educates) and influences healthcare
- Enhances health outcomes, either at the direct (patient-centered) or indirect (organization/system) level

The process for developing and completing the project is depicted on the following pages. A checklist to help students track the required steps is available in the Forms Section.
Process for Completion of DNP Project

1. Write Proposal
2. Reviewed by Chair (~2 weeks)
   - OK?
     - Yes: Committee Review
     - No: Revisions Required
   - No: IRB Review (Allow 2 weeks)
3. Committee Review
   - OK?
     - Yes: Conduct Project
     - No: Requires IRB approval
4. Requires IRB approval
   - Yes: IRB Review (Allow 2 weeks)
   - No: Conduct Project
5. Conduct Project
6. Write Draft of Final Paper
7. Reviewed by Chair (~2 weeks)
   - OK?
     - Yes: Reviewed by committee (Allow 2 weeks)
     - No: Revisions Required
   - No: Continue to Phase 2
8. Reviewed by committee (Allow 2 weeks)
   - OK?
     - Yes: Grade submitted
     - No: Continue to Phase 2
9. Phase 2
   - Schedule presentation (at least 2 weeks prior to date)
     - Present Project
       - OK?
         - Yes: Make any final revisions
         - No: Continue to Phase 2
     - No: Continue to Phase 2
   - Submit:
     - Signed approval form graduate studies in nursing
     - Electronic copy to Scholar Works
   - Grade submitted
   - Celebrate!

Continue to Phase 2
THE DNP PROJECT (PROCESS)

Project Proposal

Proposal should be 15-25 pages excluding appendices and references and be written in APA Style.

The following outline is designed to provide a framework for the project deliverables, but format details will be finalized in collaboration with the student’s faculty advisor (see also Proposal Rubric in Forms Section)

1) Background and Significance (description of the phenomena, its importance to health care and affected stakeholders, epidemiological and political perspectives, etc.)
2) Purpose Statement (clear, concise summary of the specific goal (or outcome) of this project
3) Literature Review (brief, integrated summary of the state of the science)
4) Conceptual and/or Theoretical Framework/EBP Model
5) Methods and Procedures
   • Participants/population/Sampling
     o Inclusion/exclusion criteria
   • Setting
   • Intervention (if applicable), including who will be responsible for implementing
   • Evaluation plan: For each objective/research question, indicate:
     o Instruments/indicators to be used for measurement
     o Detailed data collection plan, including timeline
     o Plan for data analysis
   • Ethical considerations
     o Potential risks to participants
   • Potential barriers to project implementation and sustainability
     o Plan for addressing barriers
6) Significance and/or Potential Implications
7) References
8) Appendices (as appropriate):
   • Results of needs assessment
   • Literature matrix
   • Tools to measure variables
   • Participant invitation letter
   • Key personnel listing
   • Stakeholders - notification
   • Proposed implementation timeline
   • Anticipated resources needed and estimated costs
   • Required approvals needed for implementation

Following successful presentation and approval of the project proposal, the student should submit a signed copy of the “DNP Project Proposal Approval Form” (See Forms Section) to the Office of the Chair of Graduate Nursing Studies.

Once approved by the DNP Project Team, the proposal is used to guide development of the IRB application, when applicable. (See information regarding the Human Subjects Review Process, located in the general policies section of this Handbook)

DNP Project Report
Students are required to complete two manuscripts, which comprise the project report. The two interrelated scholarly manuscripts pertain to the DNP project, with one reporting a description
of the project and the evaluative component, including results and outcomes. The specific nature of the second paper will be determined in conjunction with the student’s Advisor and Project Team; typically, an integrative review of literature or a report that focuses on a specific aspect of the project is appropriate.

Criteria for evaluation of the project report include:
1) The papers relate to advanced nursing practice and/or nursing administration and focus on an issue affecting a group, population or community.
2) The project is conducted according to ethical principles.
3) A critical review of existing evidence supports the need for the project.
4) A systematic approach is used to collect data using reliable and valid methods.
5) Outcomes are clearly defined, measured and evaluated.
6) The project is presented to the community in a public forum.

(See also DNP Project Rubric in Forms Section)

DNP Project Presentation
The public forum is intended to include the university community of faculty, students and staff, as well as guests of the student who is presenting the project to the Project Team. Students are asked to work with the Project Team and Chair of Graduate Studies in Nursing when scheduling their project presentation. At least two weeks prior to the scheduled date, the “Announcement of DNP Project Presentation” form (See Forms Section) must be submitted to the Office of the Chair of Graduate Nursing Studies.

The process to be followed for the presentation should be as follows:
1) The Project Advisor will introduce the Team members, the doctoral student, and the project title
2) The student will present the completed project (20 – 30 minutes). Please refer to the suggested project presentation outline for guidance (Forms Section)
3) Questions are taken from the audience and Team members (15 minutes)
4) The audience is excused and the Team continues to meet with the student, asking for any further clarification and/or any additional questions (15 minutes)
5) The student is then excused and the Team deliberates on the student’s project (10 – 15 minutes)
6) The Project Advisor informs the student of the Team’s decision.

Following successful presentation and approval of the project, the student should submit a signed copy of the “DNP Project Approval Form” (See Forms Section) to the Office of the Chair of Graduate Nursing Studies.

ScholarWorks@Bellarmine Electronic Thesis, Dissertation and Capstone Submission
ScholarWorks@Bellarmine (http://scholarworks.bellarmine.edu/) Electronic Thesis, Dissertation and Capstone Submission (ETD) promotes the discovery, distribution and preservation of the scholarly and creative works of the faculty, staff and students of Bellarmine University. Administered by the W.L. Lyons Brown Library, ScholarWorks@Bellarmine is created to collect, organize, preserve and increase the impact of the scholarship of the Bellarmine University community. The DNP project is an important work of scholarship, which the University believes, should be distributed and preserved as part of our educational mission. The Graduate Nursing Department requires that all projects be deposited and made available through the University’s ETD archive. The final project version approved by the student’s Project Team must be deposited.

Information regarding submission requirements is available at http://libguides.bellarmine.edu/scholarworks to assist you with the process.

DNP Project Completion
Students who do not complete all scholarly project requirements by the end of Nurs 895, Residency, must register for Nurs 896, Residency Extension, and continue to register for this course until they are finished. Students will receive a grade of “X” for Nurs 895 and Nurs 896 [if enrolled more than once], so the grades will not automatically convert to an F after the following semester. Once the student successfully completes the project, all “X” grades will be changed to Pass. An Incomplete grade may be granted for Nurs 895 only with permission of the Department Chair.
DNP PROGRAM PRACTICE EXPERIENCES

DNP education requires 1000 academically supervised practice hours at the post-entry level (AACN, 2006). Incoming students must have documentation of the total number of clinical hours secured in their master’s program. Enrolled students are responsible for tracking clinical hours earned during the program and reporting them to the faculty advisor (See Clinical Hours Tracking Log in Forms Section).

The DNP program at Bellarmine University includes 400 clinical hours as part of the DNP project requirements. To meet the required 1000 academically supervised hours of practice, students who enter the program with less than 500 hours from their master’s program take Nurs 841, Selected Topics in Advanced Nursing, which includes required practice hours. Additionally, some courses have designated practice hours incorporated in the credit hour base for that course, along with optional clinical experiences.

The faculty member will specify what practice behaviors/activities constitute a passing level in meeting the course objectives. Students will work with their course faculty member and academic advisor to identify appropriate practice sites where these objectives can be met. In addition, a clinical liaison may be necessary to facilitate the student’s activities at the practice site. A clinical liaison is defined as a person employed at the site who can facilitate the student’s entry and progress toward meeting clinical objectives. The clinical liaison should be the most qualified person available and is not required to be doctorally prepared.

What constitutes practice hours

Direct care or practice contact hours
- Practice experiences that are outside of the job description and responsibilities of the student. The practice experience must have goals and learning outcomes completed during a mentored relationship with a clinical expert and/or faculty member.

Practice experiences may include, but are not limited to:
- In depth work with clinical experts, including an interdisciplinary team
- Meaningful engagement in the practice environment
- Programmatic efforts to address a clinical practice issue
- Mobilizing interdisciplinary teams to solve complex clinical problems
- Significant meetings that related directly to the outcomes
- Discussions with preceptor/mentor and others who can add to the outcome
- Data collection and analysis
- Organizational assessment of current standard of care and then to facilitate translation of evidence based findings as needed into practice

Note:
Travel, library and research hours, and reading time do not count as practice experience hours.

Tracking Practice Hours
Practice hours completed throughout the program should be documented in the “Log of Supervised Practice Hours”. This document, available in the DNP Student Class Notebook, allows students to track their practice experiences, including the date of the experience, a description of the experience, the DNP Essentials addressed through the experience, and the cumulative number of hours completed.

Practice Hours Associated with NURS 841, Selected Topics
Students who did not have an administrative focus in their MSN program will complete a leadership portfolio as part of the course requirements and may be expected to spend a portion of the clinical hours in leadership experiences. Students should work with their faculty advisor to design this experience.
FORMS SECTION (MSN)
BELLARMINE UNIVERSITY GRADUATE PROGRAM REQUIREMENTS

NAME: _______________________________  Student ID # __________________________

DATE ______________________________

Please read this document carefully and check the box next to each item that you accept the following conditions:

GENERAL POLICIES

☐ I have read the Lansing School of Nursing & Clinical Sciences Graduate Nursing Student Handbook and agree to abide by the policies and content within the handbook. I understand that changes to this handbook may be made. I will be notified of any changes to the existing policies and agree to abide by these policies.

☐ I authorize the release of my non-academic records to verify compliance with the responsibilities as stated in the Clinical Facility Agreement.

☐ I authorize Bellarmine University, its representatives, employees or agents to contact and obtain information regarding me from all public agencies, licensing authorities and educational institutions.

☐ I hereby waive all rights and claims I may have regarding Bellarmine University, its representatives, employees, or agents gathering and using such information and all other persons, corporations or organizations for furnishing such information about me.

☐ I understand that if health care is required while participating in a program of study, the emergency/or other health care services shall be at the expense of me or my insurance carrier.

☐ I hereby acknowledge that I have received a copy of the Lansing School of Nursing & Clinical Sciences’ Student Drug and Alcohol Policy (the “Policy”) and agree that I have read, or will read, the Policy. I understand that there may be situations where I will be required to take a drug and/or alcohol test. I also understand that if I refuse to take the test, or if a test proves positive, I may be suspended or dismissed from the Lansing School of Nursing & Clinical Sciences and may be subject to additional sanctions as described in the Policy. I also understand that if I have any questions regarding the Policy, I am to contact my department Chairperson or Lansing School of Nursing & Clinical Sciences Dean.

PROFESSIONAL RESPONSIBILITIES

☐ I understand the professional responsibilities as stated in the Graduate Nursing Student Handbook. I will abide to these standards in all settings: classroom, laboratory, and clinical because as a student, I am a representative of Lansing School of Nursing and Clinical Sciences and Bellarmine University.

☐ I have read the Practica Requirements and understand that I must meet these requirements prior to starting any clinical experiences.

TECHNICAL STANDARDS

☐ As a student in the nursing program at Bellarmine University, I have thoroughly reviewed and understand the technical standards provided to me in this document. I understand that I must be capable of performing the technical standards, with or without reasonable accommodation, in order to pursue my chosen area of nursing education.

MY SIGNATURE INDICATES THAT I HAVE READ THIS DOCUMENT AND AGREE TO THE STANDARDS.

X ______________________________

Please sign and return to Gayle Ramirez at gramirez@bellarmine.edu

28
Lansing School of Nursing and Clinical Sciences
Seasonal Influenza Vaccination Form
Complete this section for administration of vaccine.

NAME____________________BU ID # _________________DATE______________

Documentation of Immunization

INFLUENZA VACCINATION GIVEN □ INTRANASAL □ INTRAMUSCULAR

LOT ID #________________________ EXP DATE___________________

DATE GIVEN____________________ ADMINISTERED BY__________________

Lansing School of Nursing and Clinical Sciences

Declination of Seasonal Influenza Vaccination Form

Complete this portion of the form only for declination

The Lansing School of Nursing and Clinical Sciences has recommended that I receive influenza vaccination in order to protect myself and the clients I serve. I acknowledge that I am aware of the following facts:

• Influenza is a serious respiratory disease that kills an average of 36,000 persons and hospitalizes more than 200,000 persons in the United States each year.
• Influenza vaccination is recommended for me and all other healthcare workers to prevent influenza disease and its complications, including death.
• If I contract influenza, I will shed the virus for 24–48 hours before influenza symptoms appear. My shedding the virus can spread influenza infection to clients in the healthcare setting.
• If I become infected with influenza, even when my symptoms are mild, I can spread severe illness to others.
• I understand that the strains of virus that cause influenza infection change almost every year, which is why a different influenza vaccine is recommended each year.
• I cannot get the influenza disease from the influenza vaccine.
• The consequences of my refusing to be vaccinated could endanger my health and the health of those with whom I have contact, including clients in this healthcare setting, my coworkers, my family, my community

Despite these facts, I am choosing to decline influenza vaccination right now.

I understand that I may change my mind at any time and accept influenza vaccination, if vaccine is available.

If I remain unvaccinated, I will be required to follow the clinical facility’s policies regarding unvaccinated health care providers (for example, in the event of an epidemic of influenza, I will wear a mask within 6 feet of patients).

I have read and fully understand the information on this declination form.

Name (print): __________________________________ BU Student ID ______________

Signature: _______________________________ Date: _________________ Revised 3/6/2013
Tuberculosis Screening Questionnaire
Bellarmine University Health Services

Student Name (print): _______________________________________________________
Student ID _________________________
Positive TB Skin Test (PPD) Date: ___________________________________________
Last Chest X-Ray Date: ____________________________________________________

Please indicate if you have had any of the following problems for three to four weeks or longer:

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic cough (greater than three weeks)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Production of Sputum:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood Streaked Sputum:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unexplained Weight Loss:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fever:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fatigue/Tiredness:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Night Sweats:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shortness of Breath:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The information I have given is true and accurate AND THERE IS NO EVIDENCE OF PULMONARY TUBERCULOSIS OR CONTAGIUM. Applicants with negative TB skin test results or recent chest x-rays (less than one year) do not need the RN signed TB questionnaire.

Date: ________________________________

Student Signature: ________________________________

Reviewed by: ________________________________RN

Date: ________________________________
WAIVER FOR HEPATITS B VACCINATION

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. However, I decline vaccination at this time. I also understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B.

Student name (print) _______________________________________

Student Signature: _______________________________________________________________________

Date: _________________________________

Witness name (print) _______________________________________

Witness signature: _______________________________________________________________________

Date: _________________________________
WAIVER FOR IMMUNIZATIONS OTHER THAN HEPATITIS B VACCINE

NAME__________________________ Bellarmine ID # __________________

I understand that I may be exposed to TB or communicable disease in the clinical area and that I may be at risk of contracting disease. I am requesting a waiver for the following immunization requirements:

________________________________________________________________________

Health care provider must complete this section:

<table>
<thead>
<tr>
<th>Name of immunization</th>
<th>Reason for request for immunization waiver</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

Anticipated date immunizations can be administered__________________________

______________________________________________
Signature of Physician, Health Care Provider, or Health Department designee:

Date__________________________

________________________________________________________________________
Print Name of Physician, Health Care Provider or Health Department designee

Address ____________________________ Phone Number ____________________________
Employer Verification of Practica Requirements

Student Name: ________________________________________________________________

The above named individual is enrolled in a graduate level-nursing program at Bellarmine University, in the Lansing School of Nursing and Clinical Sciences. Prior to beginning the clinical practicum portion of the program, the student is required to provide verification of the completion of the requirements specified below.

This is to verify that our employee, ______________________________________________, meets all of the following requirements:

- Current CPR certification
- Current on all health care requirements. These include:
  - Required immunizations
  - Hepatitis vaccine series (or waiver)
  - TB skin test or indicated alternative
- Holds an unrestricted registered nurse license and has undergone a satisfactory criminal background check.
- Most recent mandated drug screen was negative

This information is maintained in the employee’s file and is available upon request.

Printed name of person providing verification: ______________________________________

Signature: __________________________________________

Your title within the institution: _________________________________________________

Name of Institution: __________________________________________________________

Your contact information (phone and/or email): ____________________________________
Application for Re-enrollment to the Graduate Nursing Program

This form is for students who have been admitted to Bellarmine University as a graduate nursing student but have not been enrolled in a nursing course for consecutive semesters.

Name                                                                 SS# or Bellarmine ID#
Address/City                                                            State/Zip
Phone, indicate H (ome); C (ell), P (ager), W (ork) number             Email Address

Last attended a graduate nursing course __________________________________________
Course name & number          Semester/Yr.

Please explain your activities and involvements since leaving the program:
_________________________________________________________________________________
_________________________________________________________________________________

Indicate the Track for which you are reapplying:

[ ] MSN Nursing Administration          [ ] MSN Nursing Education
[ ] MSN/MBA Program                     [ ] Dual Track (please indicate both)
[ ] Post Graduate Certificate (please indicate track)          [ ] FNP
[ ] DNP Advanced Practice               [ ] DNP Executive Leadership

List all colleges and universities you have attended since attending Bellarmine:

<table>
<thead>
<tr>
<th>Institution</th>
<th>Location</th>
<th>Dates attended</th>
<th>Degree</th>
<th>Dismissed or suspended?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

What semester do you wish to re-enroll in?        FA_ _ _ _      SP_ _ _ _     SU_ _ _ _

Employer: _______________________________________________________________

Position: _________________________________________________________________

I declare that the information provided on this form is true, correct, and complete. Bellarmine University has my permission to verify information by obtaining documents as needed. I understand that providing false information may result in Bellarmine University revoking my student status as student in good standing.

_____________________________________________________________             ____________________
Student Signature                                                          Date

Send to:
Bellarmine University, Lansing School—Miles Hall 203
Graduate Nursing Program, Louisville KY 40205-0671,
ATTN: Graduate Nursing Admission, Progression and Graduation Committee
Bellarmine University
Donna and Allan Lansing School of Nursing and Clinical Sciences
Graduate Nursing Program
2001 Newburg Road, Miles Hall, Louisville KY 40205-0671

Application for Continuation
(Type or print clearly, attaching additional pages if needed)

Name: __________________________________________

Date: ____________

Address: _________________________________________________________

Phone #s: ______________________ BU ID#: __________________________

Current email: _____________________________________________________

I give APG permission to contact me by email: Yes:______ No:_____

I would like the opportunity to meet with the committee: Yes:______ No:____

I request that a graduate student representative be present
During the committee’s deliberations: Yes:______ No:_____

Student: Clearly explain to the committee your request, including course numbers and any unique circumstances that you think would be helpful for the committee in considering your request. Also, include how, if the request is granted, how circumstances would be different or what strategies you would implement to be successful.

Course Instructor: Include grades on various assignments, any information the committee should consider, as well as your recommendation.

Academic Advisor:
WAIVER TO POLICY
(Type or print clearly, attaching additional pages if needed)

Student Name: ___________________________________________ Date: __________

Address: ____________________________________________________________________

Phone #s: ____________________ BU ID#: ________________________

Current email: ______________________________________________________________

Policy(s) to be waived (note course #s and semesters involved). Provide rationale for request. Attach separate documentation, if needed

Academic Advisor:
Signature________________________ Date________________

BSN Department Chair:
Student's GPA: __________ Total hours earned ____________
Signature________________________ Date________________

APG Committee Decision: □ Approved □ Not approved
Signature________________________ Date______________
Donna and Allan Lansing School of Nursing and Clinical Sciences Bellarmine University

CLINICAL INCIDENT REPORT

Date/Time of Incident: ______________________________________________________________

Student/Faculty Name: ____________________________________________________________

Address: _______________________________________________________________________

Telephone: ___________________ Cell Phone: ________________________________

Insurance Company: ______________________________________________________________

Named Policy Holder: _____________________________________________________________

Clinical Facility: _________________________________________________________________

Address: _______________________________________________________________________

Telephone: ______________________________________________________________________

Place Incident Occurred: ______________________________________________________________________

Faculty/Unit Supervisor: ___________________________________________________________

Use back of report sheet if more room is needed.

Student's description of incident. Include others involved: _______________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Medical Treatment given; Include date and time: ____________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Restrictions noted during medical treatment: ________________________________________________

_____________________________________________________________________________________

Yes □ No □ Student/Faculty was advised that expenses incurred in emergency treatment are his/her responsibility. These expenses are not the responsibility of the clinical facility or Bellarmine University.

Report prepared by: ___________________________ Date of this report: _________________

Signatures:

Student: __________________________________________ Date: ___________________________

Clinical Instructor: _______________________________ Date: ___________________________

Department Chair: _______________________________ Date: ___________________________

Dean, Lansing School: __________________________ Date: ___________________________

37
FORMS SECTION (DNP)
LANSING SCHOOL OF NURSING AND CLINICAL SCIENCES
APPOINTMENT OF THE DNP PROJECT TEAM

The DNP Project Team is made up of the student, the faculty advisor who serves as the committee chair, another doctorally-prepared university faculty or staff member, and a clinical mentor. The advisor and advisee are expected to work together in establishing the Project Team, which should be appointed by the end of the advisee’s first year into the program of study and must be appointed no later than the semester that precedes the first practice Immersion.

STUDENT INFORMATION
FIRST NAME: ___________________________  LAST NAME: ___________________________
EMAIL: _______________________________  PHONE: ______________________________
ADMIT TERM & YEAR: ________  DEGREE EMPHASIS: ________  APN: ________  EXECUTIVE LEADERSHIP

TEAM COMPOSITION – Refer to the DNP Capstone Scholarly Project guidelines for selecting a Project Team. Please print the names of the team members on the left, and have those individuals sign on the right.

__________________________________________________________
PROJECT TEAM CHAIR

__________________________________________________________
PROJECT TEAM MEMBER

__________________________________________________________
PROJECT TEAM MEMBER

__________________________________________________________
PROJECT TEAM MEMBER

__________________________________________________________
PROJECT TEAM MEMBER

__________________________________________________________
PROJECT TEAM MEMBER

STUDENT SIGNATURE – I understand that I must notify the chair of Graduate Nursing studies if there are any changes to this committee.

__________________________________________________________
STUDENT SIGNATURE  DATE

ADDITIONAL REQUIRED APPROVAL SIGNATURES

__________________________________________________________
CHAIR OF GRADUATE NURSING STUDIES  DATE
### Appendix F
Lansing School of Nursing and Clinical Sciences
Doctor of Nursing Practice Program
DNP Project Checklist

<table>
<thead>
<tr>
<th>Semester</th>
<th>Task</th>
<th>Documents to Submit</th>
<th>Date Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>II</td>
<td>• Identify DNP project Faculty Advisor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>III</td>
<td>• Select and confirm DNP Project Team members</td>
<td>Appointment of DNP Project Team Approval Form</td>
<td></td>
</tr>
<tr>
<td>No Later Than Semester IV</td>
<td>• Obtain Team approval for project topic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Immersion II</td>
<td>• Obtain Team approval of DNP project proposal (<strong>Note:</strong> Required for progression to Immersion II)</td>
<td>Contract Course Application Project Proposal Approval Form</td>
<td></td>
</tr>
</tbody>
</table>
| Immersion III | • Maintain regular contact with Faculty Advisor regarding progress. Contact Team members, as needed.  
• Apply for graduation | Contract Course Application Graduation Application Form |  |
| Residency | • Work with Faculty Advisor to finalize drafts of project manuscripts  
• Schedule final presentation of DNP project (**no later than 3 weeks before end of semester**). All Team members must agree and be available for the final presentation.  
• Submit draft of DNP project manuscripts to Project Team members, following Faculty Advisor’s approval, **at least 2 weeks before scheduled presentation**  
• Draft of final slide presentation should be submitted to the Faculty Advisor **no later than 1 week before scheduled presentation**  
• Obtain Team approval of completed project  
• Submit final Project report to ScholarWorks@Bellarmine  
• If project is not completed by end of semester, must register for Nurs 896, Residency Extension | Contract Course Application Presentation Announcement Project Approval Form Confirmation of submission to Faculty Advisor Contract Course Application |  |
## Doctor of Nursing Practice Project Proposal Rubric

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Unsatisfactory</th>
<th>Satisfactory</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Background &amp; Significance</td>
<td>Fails to describe the phenomena, its importance to healthcare and affected stakeholders.</td>
<td>Describes the phenomena, its importance to healthcare and affected stakeholders.</td>
<td></td>
</tr>
<tr>
<td>Purpose Statement</td>
<td>Fails to clearly and/or concisely state the goal of the project.</td>
<td>Clearly and concisely states the goal of the project.</td>
<td></td>
</tr>
<tr>
<td>Review of the Literature</td>
<td>Provides single source summaries of the literature.</td>
<td>Provides an organized, integrated summary of the state of the science (with level of evidence provided).</td>
<td></td>
</tr>
<tr>
<td>Conceptual/Theoretical Framework/EBP Model</td>
<td>Fails to provide appropriate framework.</td>
<td>Provides appropriate framework to guide project.</td>
<td></td>
</tr>
<tr>
<td>Methods and Procedures</td>
<td>Does not clearly and/or concisely summarize key methods/procedures pieces.</td>
<td>Clearly and concisely summarizes (where applicable):</td>
<td></td>
</tr>
<tr>
<td>References</td>
<td>Missing key citations.</td>
<td>Current state of the science references including all appropriate disciplines (with matrix).</td>
<td></td>
</tr>
<tr>
<td>Key Personnel and Stakeholders</td>
<td>Does not identify needed personnel and does not recognize potential impact of project</td>
<td>Accurately identifies individuals needed to complete project, as well as those who will be most affected by it</td>
<td></td>
</tr>
<tr>
<td>Timeline</td>
<td>Does not provide, or provides unrealistic, timeline.</td>
<td>Provides realistic timeline for project implementation.</td>
<td></td>
</tr>
<tr>
<td>Resources</td>
<td>Does not provide all required resources and/or costs.</td>
<td>Identifies all anticipated resources and potential costs.</td>
<td></td>
</tr>
<tr>
<td>Approvals for Implementation</td>
<td>Does not identify required approvals.</td>
<td>Identifies required approvals needed for implementation (cooperating agencies, IRB, etc.)</td>
<td></td>
</tr>
<tr>
<td>Clarity of Writing and Writing Technique</td>
<td>Writing is convoluted and/or unnecessary words are used. Misspelled words, incorrect grammar, and improper punctuation are evident.</td>
<td>Writing is crisp, clear, and succinct. The writer incorporates the active voice when appropriate. The use of pronouns, modifiers, parallel construction, and non-sexist language are appropriate.</td>
<td></td>
</tr>
<tr>
<td>APA</td>
<td>APA not consistent.</td>
<td>Follows APA.</td>
<td></td>
</tr>
<tr>
<td>Criteria</td>
<td>Unsatisfactory</td>
<td>Satisfactory</td>
<td>Comments</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>-------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Background &amp;</td>
<td>Fails to describe the phenomena, its importance to healthcare and affected</td>
<td>Describes the phenomena, its importance to healthcare and affected stakeholders.</td>
<td></td>
</tr>
<tr>
<td>Significance</td>
<td>stakeholders.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Purpose Statement</td>
<td>Fails to clearly and/or concisely state the goal of the project.</td>
<td>Clearly and concisely states the goal of the project.</td>
<td></td>
</tr>
<tr>
<td>Review of the Literature</td>
<td>Provides single source summaries of the literature.</td>
<td>Provides an organized, integrated summary of the state of the science (with level of evidence provided).</td>
<td></td>
</tr>
<tr>
<td>Conceptual/Theoretical Framework/EBP Model</td>
<td>Fails to provide appropriate framework.</td>
<td>Provides appropriate framework to guide project.</td>
<td></td>
</tr>
<tr>
<td>Methods and Procedures</td>
<td>Does not clearly and/or concisely summarize key methods/procedures pieces.</td>
<td>Clearly and concisely summarizes (where applicable):</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Participants/population/sampling</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Setting</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Intervention (if applicable)</td>
<td></td>
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<td></td>
<td></td>
<td>• Evaluation plan, to include</td>
<td></td>
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<td></td>
<td></td>
<td>• Instruments</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Data collection plan</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Data analysis plan</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Ethical considerations</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Barriers to implementation and sustainability</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Plan for addressing problems</td>
<td></td>
</tr>
<tr>
<td>Resources</td>
<td>Does not provide all required resources and/or costs.</td>
<td>Identifies all required resources and costs.</td>
<td></td>
</tr>
<tr>
<td>Approvals for Implementation</td>
<td>Does not provide all letters of support.</td>
<td>Provides all required letters of support from cooperating agencies (as appendices).</td>
<td></td>
</tr>
<tr>
<td>Results</td>
<td>Complete results, facilitators, barriers and/or unintended consequences not</td>
<td>Provides results for each objective or research question.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>provided.</td>
<td>• Provides facilitators and barriers encountered.</td>
<td></td>
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<td>• Identifies unintended consequences (both positive and negative, if appropriate) and how handled.</td>
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<td>Recommendations</td>
<td>Does not adequately provide future recommendations and/or possible application</td>
<td>Provides future recommendations for this project/research project and possible application of this project in other</td>
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<td>of this project in other settings.</td>
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<td>Program Outcome 1</td>
<td>Does not adequately address the: Use of epidemiologic and other scientific findings from nursing and other clinical disciplines, as well as organizational, political, and economic sciences, to develop practice initiatives that will improve the quality of care delivery.</td>
<td>Adequately addresses: Use of epidemiologic and other scientific findings from nursing and other clinical disciplines, as well as organizational, political, and economic sciences, to develop practice initiatives that will improve the quality of care delivery.</td>
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<td>Program Outcome 2</td>
<td>Does not adequately address the Provision of organizational and systems leadership to develop care delivery models that are fiscally responsible and demonstrate sensitivity to diverse organizational cultures and patient populations.</td>
<td>Adequately addresses: Provision of organizational and systems leadership to develop care delivery models that are fiscally responsible and demonstrate sensitivity to diverse organizational cultures and patient populations.</td>
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<td>Program Outcome 3</td>
<td>Does not adequately address the Engagement in clinical scholarship to evaluate the effectiveness of evidence-based efforts in the planning and practice of health care program delivery to individuals and communities.</td>
<td>Adequately addresses: Engagement in clinical scholarship to evaluate the effectiveness of evidence-based efforts in the planning and practice of health care program delivery to individuals and communities.</td>
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<td>Program Outcome 4</td>
<td>Does not adequately address: Use of healthcare informatics and technology to improve patient safety and clinical outcomes.</td>
<td>Adequately addresses: Use of healthcare informatics and technology to improve patient safety and clinical outcomes.</td>
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<td>Program Outcome 5</td>
<td>Does not adequately address the: Collaboration with healthcare professionals, consumers, and other stakeholders to influence health policy and health promotion/disease prevention endeavors at the local, state, federal, and/or international levels that improve patient and population health outcomes.</td>
<td>Adequately addresses: Collaboration with healthcare professionals, consumers, and other stakeholders to influence health policy and health promotion/disease prevention endeavors at the local, state, federal, and/or international levels that improve patient and population health outcomes.</td>
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NOTICE OF DNP PROJECT PROPOSAL APPROVAL FORM

STUDENT NAME: ____________________________________________________________

PROJECT TITLE: _______________________________________________________________________

DATE: ___________________________________________________________________________

Approval has been granted by the Project Team for this student to proceed with implementation of the proposed project.

PROJECT TEAM CHAIR ____________________________________________________________

PROJECT TEAM COMMITTEE CHAIR ____________________________________________________

PROJECT TEAM MEMBER ____________________________________________________________

PROJECT TEAM COMMITTEE MEMBER _________________________________________________

PROJECT TEAM MEMBER ____________________________________________________________

PROJECT TEAM COMMITTEE MEMBER _________________________________________________

PROJECT TEAM MEMBER ____________________________________________________________

PROJECT TEAM COMMITTEE MEMBER _________________________________________________

NOTE: You should have this sheet prepared at the time of your project proposal presentation and bring it to the meeting. The name and credentials of each member should be typed on the left side of the form. A copy of the form is to be filed with the Office of the Chair of Graduate Nursing Studies following approval. This serves as a contract between you and your Project Team regarding implementation of the project.
ANNOUNCEMENT OF DNP PROJECT PRESENTATION

Form must be submitted two weeks prior to project presentation date.

To: Chair, Graduate Nursing Studies

From: __________________________, __________________________
Student Name Date

My DNP project defense will take place at __________________________.
Date Time Bldg., Room

The chairperson of my Project Team is __________________________

The title of my DNP Project is __________________________

All members of my Project Team can attend the presentation on the approved date and my Chairman and team members all agree that the Project is in acceptable draft form and ready for presentation.

(Student Signature) Please accept this typed signature as my own

Cc: All Project Team Members
Project Presentation Outline

Project Title
  • Name

Background & Significance
  • Literature review and/or baseline data supporting need for change
  • Purpose statement
  • Objectives
    o 2 slides maximum
    o 5 minutes maximum

Theoretical Framework
  • 1 slide
  • 1 minute maximum

Project Design
  • Project plan/methods
  • Participants/population
  • Sample/setting
  • Equipment or instruments used
  • Timeline
  • Resources required
  • Market/strategic analysis
  • Key personnel/stakeholders
  • Approvals required
    o 3-5 slides maximum
    o 5 minutes maximum

Evaluation Plan
Project outcomes (should directly relate to your project objectives)
  • How each outcome was evaluated
  • Method of statistical analysis used for each outcome

Results
  • Results for each outcome
  • Key facilitators and barriers to meeting each outcome
  • Any unintended consequences (positive or negative)
    o Slide per outcome is appropriate
    o 1 minute per outcome is appropriate

Discussion & Recommendations
  • Overall strength of the project
  • Any gaps/limitations identified
  • Application to practice
  • Future recommendations for practice, research and/or policy
    o 2-3 slides
    o 5 minutes maximum

Some guidelines...
  • These are only recommendations – your actual presentation may vary. Work with your Chair for assistance.
  • Presentations should last no longer than 20-25 minutes. 5-10 additional minutes for Q&A will be allowed.
  • Use key words/phrases on slides – not long sentences. Good presentations only provide the “outline” of what the speaker is covering.
  • Rules: A) 8-12 lines or less per slide; B) font size at least 24; C) standard font such as Arial or Times New Roman; D) DO NOT USE ALL CAPITALS IT IS DIFFICULT TO READ; E) dark backgrounds with white font is easiest for readers to see from a distance; and F) minimal use of color – it is distracting.
  • Cite all sources (e.g., Smith & Jones, 2010; Wilder, Johnson & Follett, 2012).
  • You can add a slide recognizing/thanking your committee members – but it is not required.
LANSing School of Nursing and Clinical Sciences

DNP Project Approval Form

Formal approval is hereby given to this submitted DNP project:

Student Name: ________________________________________________________________

Project Title: _________________________________________________________________

Date: ________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

PROJECT TEAM CHAIR PROJECT TEAM COMMITTEE CHAIR

PROJECT TEAM MEMBER PROJECT TEAM COMMITTEE MEMBER

PROJECT TEAM MEMBER PROJECT TEAM COMMITTEE MEMBER

PROJECT TEAM MEMBER PROJECT TEAM COMMITTEE MEMBER

Note: You should have this sheet prepared at the time of your project presentation and bring it to the meeting. The name and credentials of each member should be typed on the left side of the form. A copy of the form is to be filed with the Office of the Chair of Graduate Nursing Studies following the presentation.
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* DNP Essentials

I Scientific Underpinnings for Practice

II Organizational and Systems Leadership for Quality Improvement and Systems Thinking

III Clinical Scholarship and Analytical Methods for Evidence-Based Practice

IV Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care

V Health Care Policy for Advocacy in Health Care

VI Interprofessional Collaboration for Improving Patient and Population Health Outcomes

VII Clinical Prevention and Population Health for Improving the Nation's Health

VIII Advanced Nursing Practice