Holy Family
U N I V E R S I T Y

SCHOOL OF
**NURSING &
HEALTH SCIENCES**

Doctor of Nurse Practice Program Handbook

Policy Manual

August 2023

Holy Family University is a private Catholic institution located in Philadelphia, PA. Founded in 1954, the University's mission is informed by its core values of family, respect, integrity, service and responsibility, learning, and vision. The University embraces diversity and inclusion, ensuring a welcoming and accessible learning community for all. Holy Family University educates students in liberal arts and professional studies to fulfill lifelong responsibilities toward God, society, and self. The University is composed of five schools: Arts and Sciences, Business Administration, Education, Nursing and Health Sciences, and Professional Studies. Nestled in the heart of a historic residential neighborhood in the Northeast, the University is just minutes from the excitement of Center City. Holy Family enrolls more than 3100 students at the undergraduate, graduate, and doctoral levels at its Philadelphia and Newtown campus locations.

Holy Family University is a sponsored ministry of the Sisters of the Holy Family of Nazareth.

DOCTOR OF NURSE PRACTICE PROGRAM HANDBOOK

The Holy Family University of Nursing and Health Professions Doctor of Nursing Practice Program Handbook presents an overview of the program, the policies and procedures that guide the student, clinical faculty and preceptors. This handbook should be used in conjunction with the *Holy Family University Graduate Catalog*, which provides detailed information regarding programs of study, course descriptions, and University Graduate Program policies and procedures.

Holy Family University reserves the right to change, without notice, any statement in this publication concerning, but not limited to rules, codes of conduct, processes and procedures, policies, tuition, and fees.

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1.0   GENERAL INFORMATION

1.1 HOLY FAMILY UNIVERSITY AND SCHOOL OF NURSING AND HEALTH SCIENCES MISSION AND VALUES STATEMENT

Mission: To educate students within the University environment, at the graduate and undergraduate levels, to assume a professional role in the delivery of high-quality care in nursing, radiologic science and health promotion and wellness, and to cultivate a sense of responsibility to be actively involved in service to the human family.

Vision: To provide exceptional quality nursing, radiologic science, and health promotion and wellness education in a caring, collegial, faith-based environment that challenges students and faculty to extend their intellectual horizons.

Values: The mission and values of the SONHS are built upon the core values of Holy Family University: family, respect, integrity, service and responsibility, learning and vision. The Mission and Values of Holy Family University are readily accessible on www.holyfamily.edu.

1.2 Holy Family University Nursing Philosophy

The Philosophy of Nursing at Holy Family University embodies and enlarges upon the institutional mission by including statements of values and beliefs about humankind, the environment, health, nursing and education. These statements provide the foundation for the conceptual and theoretical bases for the Nursing programs.

In the setting of a small Catholic liberal arts university, the nursing curricula are committed to the development of the whole person. Through close personal interaction between students and faculty, an atmosphere of mutual respect, and an environment, which facilitates dialogue, trust is developed. In the context of the Judeo-Christian tradition, nursing fosters a reverence for the dignity of the human family, and a respect for the uniqueness of the individual. Furthermore, an appreciation for education as a liberating force is highly valued.

1.2.1 Humankind

A diverse and complex creation of God, humankind is a unique combination of body, mind, and spirit. Humans exist within the contexts of the individual, family, group, community, nation, and world. Humans have the capacity for self-knowledge, the ability to choose, think critically, and assume responsibility for themselves and others.

1.2.2 Environment

The environment is complex in nature and is a continuous dynamic interchange of physical, psychosocial, cultural, spiritual, economic, and political contexts within a global world. The effects of the environment on the health of individuals, families and communities are addressed by nursing.

1.2.3 Health

Health is a dynamic multidimensional state fluctuating along a wellness·illness continuum. The responsibility for health lies ultimately with the person and society, not with any one segment of that society. Individuals can take deliberate action to promote, maintain, enhance, and/or restore health for themselves and society.

1.2.4 Nursing

Nursing encompasses the arts and sciences and requires the integration of specialized knowledge and skills in providing comprehensive care for individuals, families, and communities. The art of nursing primarily consists of the use of self in caring for others and requires an appreciation of the whole person. The development of a sense of service and social consciousness is important to the role of the professional nurse. Nursing as a science builds upon extant theories from nursing and other disciplines. Nursing science generates and tests hypotheses to develop comprehensive nursing knowledge for the delivery of nursing care.

Professional nursing involves accountability for the diagnosis and treatment of actual and potential human responses throughout the lifespan. Nursing as a profession assists human beings in the management of these responses on a continuous basis to sustain life and health, recover from disease or injury, and/or die with dignity.

Nursing actively participates in developing a quality, accessible health care delivery system. Nursing practice focuses on health promotion, disease prevention, early detection of illness and health restoration. Essentially, nursing provides a human service that encourages self-reliance in the management of health care. Nursing in partnership with consumers and health team members, assists in the development of healthy communities. Working collaboratively with other members of the health care team, nursing ensures clients' rights to actively participate in planning their health care.

1.2.5 Education

Nursing education is engaged in developing critical thinking and critical reasoning skills. The application of knowledge based on scientific principles, which incorporates research into practice, is essential in the development of the professional nursing role. The partnership between faculty, student, and consumer is a key component for learning in all Nursing programs. Faculty and students are critical thinkers and active learners. Faculty facilitates learning and provides guidance for students through expanded learning experiences. Students are assisted to assume responsibility for seeking and using resources, actively participating in learning, and evaluating personal progress. Nursing recognizes its responsibility to prepare graduates for the changing needs of society. The nursing faculty believes the advancement of the nursing profession is accomplished through the educational process, which includes scholarship, practice, technological competence, and leadership. The expectation for graduates is that they will accept responsibility for continued professional growth, advancement of the profession, and the provision of competent and safe nursing care that is evidence-based, collaborative, culturally appropriate, and guided by moral, ethical and legal principles.

1.3 Statement of Commitment to Human Dignity and Diversity at Holy Family University

The mission of Holy Family University emphasizes and affirms the dignity of the person and the oneness of the human family. This mission encourages commitment to fostering a university community that is rich in its diversity of people and ideas.

To these ends, as a university community, we dedicate our efforts to respecting individuality, valuing personal dignity, fostering civility and mutual respect, and modeling the core values. We are an academic environment that provides a place for the sharing of ideas and values from many different traditions so to foster the awareness of one's serious responsibility toward all humanity.

We, at Holy Family University, are dedicated to empowering our students with knowledge and sensitivity to "assume life-long responsibilities towards God, society and self." We embrace the challenge of seeking peace and harmony in a diverse global community. The faculty of the Department of Nursing provides a caring and supportive environment while respecting the diversity of the student body and communities which it serves.

2.0   THE DNP PROGRAM

2.1 Purpose of the DNP Program

The purpose of the DNP degree program is to prepare advanced practice nurses and nurse leaders as practice scholars to improve patient outcomes and translate evidence into practice to improve quality and safety. The DNP graduate is prepared to apply evidence-based practice, systems thinking, and quality improvement to transform health care systems and improve patient care. Graduates are also prepared to lead interprofessional collaborative teams to shape health care systems, policy, and clinical and patient care innovations.

The core DNP essentials include translation of research into practice, transformational leadership, and advanced expert nursing practice as Family Nurse Practitioner (FNP) or Nursing Leader. The Doctor of Nursing Practice-Family Nurse Practitioner is prepared to practice at the highest level to address the healthcare continuum needs of individuals and families throughout the lifespan in the primary care settings while serving as a nursing leader. The Doctor of Nursing Practice- Leader is prepared to become a nursing expert who brings evidence-based knowledge into the practice arena, improves health care outcomes, and strengthens the executive nurse leadership role in guiding complex care delivery.

The center of the nursing curriculum is the patient. The patient is defined as the individual, the family and the community. These concepts unify the curriculum and are the focus of each clinical course. The patient is framed within a prevention-centered curriculum as the foundation for achieving the *Healthy People 2030* objectives. The roles of the nurse, specifically the nurse as a member of the profession, provider of care and leader/manager of care are focused on within each nursing course. The plan of study is designed to educate students in logical developmental stages from early learner to competent advanced practice nurse.

Nursing courses focus on elevating the nursing students' critical thought process beyond nurse generalists. Safe, high-quality, evidence-based nursing practice is emphasized throughout the

curriculum. Graduates demonstrate advanced-level competency in the transition from theory to practice; organizational and systems leadership; evidence-based practice; information technology; healthcare policy; interprofessional collaboration; health promotion; and advanced nursing practice.

Students who complete the required program of study are eligible for the American Nurse Credentialing Center (ANCC) or the American Academy of Nurse Practitioners (AANP) examination for certification as an FNP or the ANCC Nurse Executive Certification.

2.2 DNP Program Mission and Vision

The mission of the DNP program is to prepare nurses for advanced practice roles as clinical scholars skilled in the application of theory and research, evidence-based practice, advanced clinical practice, measurement of patient outcomes, and transformation of health care systems to ensure quality and safety. Graduates build on their education and experience to influence change. The DNP program is committed to the provision of high-quality graduate education that instills in the DNP graduate a responsibility to God, humanity, the nursing profession, and self. The vision of the DNP program provides exceptional quality nursing, in a caring, collegial, faith-based environment that challenges students and faculty to extend their intellectual horizons.

Accreditation

The Doctor of Nursing Practice at Holy Family University is accredited by the Commission on Collegiate Nursing Education (CCNE).655 K Street NW, Suite 750, Washington DC, 20001.

Program Goals

The Doctor of Nursing Practice program philosophy, purpose, and objectives are aligned with those of the University, the School of Nursing and Health Sciences, The Essentials of Doctoral Nursing Practice (AACN, 2006), Essentials of Master's Education in Nursing (AACN 2011), the National Organization of Nurse Practitioner Faculties Competencies and Curriculum (NONPF, 2017), Healthy People 2020, and AACN's Graduate- Level QSEN Competencies: Knowledge, Skills and Attitudes (2012).

The Doctor of Nursing Practice program will:

- Provide a doctoral nursing curriculum that is designed to address current and future global health care needs and issues in a variety of health care settings.

- Prepare graduates for positions of leadership in advanced nursing practice.

- Provide a foundation for certification as a Family Nurse Practitioner (BSN-DNP, MSN-DNP/FNP).

DNP Program Outcomes

At the completion of the program, the Holy Family University DNP graduate will be able to:

- Synthesize nursing and multidisciplinary theories of practice to develop new practice approaches.

- Demonstrate organizational and systems leadership skills and behaviors that emphasize practice, ongoing improvement of health outcomes, and ensure patient safety.

- Disseminate new knowledge to improve healthcare outcomes.

- Implement programs using information technology for quality improvement and evaluation of healthcare outcomes.

- Design, influence and implement healthcare policies that frame healthcare financing, practice regulation, access, safety, quality, and efficacy.

- Provide effective team leadership, play a central role in establishing inter-professional teams, participate in the work of the team, and assume leadership of the team when appropriate.

- Engage in leadership to integrate and institutionalize evidence-based clinical prevention and population health services for individuals, aggregates, and populations.

- Design, implement, and evaluate therapeutic interventions based on nursing science and other sciences, as appropriate to the area of specialization

Program Outcome At the completion of the program, the Holy Family University Certified Nurse Practitioner/Doctor of Nursing Practice graduate will be able to:	MSN Essentials (AACN, 2011)	DNP Essentials (AACN, 2006)	NONPF Competencies (NONPF, 2017)	AONE (AONE, 2015)	Healthy People 2030	Graduate Level QSEN Competencies: Knowledge, Skills, and Attitudes (2012)
Synthesize nursing and multidisciplinary theories of practice to develop new practice approaches	I. Background for practice from sciences and humanities	I. Scientific underpinnings for practice	Scientific foundation (1-4) Ethics (1-3)	Communication and Relationship Building Knowledge of Health Care Environment Leadership	Create social and physical environments that promote good health for all	Evidence-based practice

Demonstrate organizational and systems leadership skills and behaviors that emphasize practice, ongoing improvement of health outcomes, and ensure patient safety	II. Organizational and Systems Leadership	II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking	Leadership (1-7) Health Delivery System (1-7) Quality (1-5)	Communication and Relationship Building Knowledge of Health Care Environment Leadership Professionalism Business Skills	Attain high quality, longer lives free of preventable disease, disability, injury, and premature death	Quality Improvement Safety
Disseminate new knowledge to improve healthcare outcomes	IV. Translating and Integrating Scholarship into Practice	III. Clinical Scholarship and Analytical Methods for Evidence-based Practice	Scientific foundation (1-4)	Knowledge of Health Care Environment Professionalism	Attain high quality, longer lives free of preventable disease, disability, injury, and premature death	Evidence-based Practice Quality Improvement
Implement programs using information technology for quality improvement and evaluation of healthcare outcomes	III. Quality Improvement and Safety V. Informatics and Healthcare Technologies	IV.Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care	Technology and Information Literacy (1-5) Health Delivery System (1-7)	Knowledge of Health Care Environment Leadership Professionalism	Promote quality of life, healthy development and healthy behaviors across all life stages	Quality Improvement Safety Informatics
Design, influence, and implement healthcare policies that frame healthcare financing, practice regulation, access, safety, quality, and efficacy.	III. Quality Improvement and Safety VI. Health Policy and Advocacy	V. Health Care Policy for Advocacy in Health Care	Policy (1-7) Quality (1-5) Leadership (1-7)	Communication and Relationship Building Knowledge of Health Care Environment Leadership Professionalism Business Skills	Achieve health equity, eliminate disparities, and improve the health of all groups	Quality Improvement Safety

Provide effective team leadership, play a central role in establishing inter-professional teams, participate in the work of the team, and assume leadership of the team when appropriate.	II. Organizational and Systems Leadership	II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking	Leadership (1-7) Quality (1-5)	Communication and Relationship Building Knowledge of Health Care Environment Leadership Professionalism		Quality Improvement Safety Informatics
Engage in leadership to integrate and institutionalize evidence-based clinical prevention and population health services for individuals, aggregates, and populations.	II. Organizational and Systems Leadership	II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking	Leadership (1-7) Health Delivery System (1-7)	Communication and Relationship Building Knowledge of Health Care Environment Leadership Professionalism		Quality Improvement Safety Informatics
Design, implement, and evaluate therapeutic interventions based on nursing science and other sciences, as appropriate to the area of specialization	I. Background for practice from sciences and humanities	I. Scientific underpinnings for practice VIII. Advanced Nursing Practice	Scientific foundation (1-4) Health Delivery System (1-7)	Communication and Relationship Building Knowledge of Health Care Environment Leadership Professionalism		Quality Improvement Safety Informatics

3.0 CURRICULUM REQUIREMENTS

The Holy Family University Doctor of Nursing Practice Program is designed to meet the academic needs of the professional nurses with either a bachelor's degree in nursing or a master's degree in nursing. As described in the Holy Family University Nursing Philosophy, the faculty believes that nursing, in partnership with consumers and other health team members, must assist in the development of healthy communities. Graduates of the DNP program are equipped with the knowledge, expertise, and leadership skills requisite to advance the profession and assist consumers in the management of care.

The DNP curriculum is based on *Essentials of Doctoral Education for Advanced Nursing Practice (*American Association of Colleges of Nursing, 2006*).*

Students applying to the DNP program with a Master's of Science in Nursing from another institution must demonstrate course equivalencies to Holy Family University's program of study. Any course that has not been completed or is deemed not appropriate for transfer must be completed prior to beginning the program.

Progression in the curriculum is dependent upon the student remaining in good standing. After successful completion of the DNP Program and fulfillment of exit requirements, the student's transcript will reflect completion of a Family Nurse Practitioner/Doctor of Nursing Practice Program or Doctor of Nursing Practice/Leadership.

4.0 DOCTOR OF NURSING PRACTICE TRACKS AVAILABLE AT HOLY FAMILY UNIVERSITY

1. **Bachelor of Nursing to Doctor of Nursing Practice/ Family Nurse Practitioner (BSN-DNP/FNP)**
   a. See Course Sequence
2. **Masters of Nursing to Doctor of Nursing Practice/ Family Nurse Practitioner (MSN-DNP/FNP)**
   a. See Course Sequence
3. **Master of Nursing to Doctor of Nursing Practice/ Leadership (Post MSN-DNP/Leadership)**
   a. See Course Sequence
4. **Advanced Practice Registered Nurse to Doctor of Nursing Practice/ Leadership (Post APRN-DNP/Leadership)**
   a. See Course Sequence

4.1 Doctor of Nursing Practice/Family Nurse Practitioner Track Requirements

BSN-FNP/DNP: The Students with a bachelor's degree in nursing will complete 74 credits to meet the DNP requirements of the Family Nurse Practitioner/ Doctor of Nursing Practice curriculum requiring a total of 1,046 clinical hours. All students are required to complete the 30-credit hour course requirement for the HFU MSN degree plus one (1) additional credit (NURS 708) prior to continuation into the Family Nurse Practitioner/Doctor of Nursing Practice Program. Students take an additional one credit course (NURS 708) that focuses on advanced assessment skills (Appendix P). A Master's degree will be conferred after completing the MSN core courses and NURS 708. Students are required to complete the remaining DNP/FNP course and practicum/residency requirements.

MSN-FNP/DNP: The students will complete 43 credits and BSN-FNP/DNP students will complete 74 credits to meet the requirements of the Family Nurse Practitioner/ Doctor of Nursing Practice curriculum requiring a total of 1,046 clinical hours. A minimum of 672 Family Nurse Practitioner specialty direct patient care practicum hours must be completed as well as a minimum of 374 Doctor of Nursing Practice residency hours must be completed. Progression in the curriculum is dependent upon the student remaining in good standing.

4.2 Doctor of Nursing Practice/Leadership Requirements:

Post MSN to DNP-Leadership (Online): Students with a master's degree in nursing who plan to pursue the Leadership track will complete 35 credits hours and a minimum of 1,000 clinical hours. Clinical hours earned in an MSN program will be reviewed at the discretion of the Associate Dean/Dean and Director of the DNP program.

Post APRN to DNP-Leadership (Online): Students with a master's degree in nursing who plan to pursue the Leadership track will complete 26 credits hours and a minimum of 1,000 clinical hours. Up to 500 clinical hours may be transferred in from a Post Masters-APRN or MSN-APRN program dependent upon each individual student.

4.3 Course Sequence Sheets

BSN-FNP/DNP			
Course #	Course Name	Credit	Clinical Hours
601	Theoretical Basis for Nursing	3	
606	Professional Ethics: Theory & Practice for Advanced Nursing Practice	3	
607	Health Promotion and Disease Prevention	3	
614	Health Policy Organization and Financing	3	
615	Quality Improvement and Safety in Health Care	3	
610	Advanced Patho	3	
609	Research for Evidence Based Practice	3	
608	Advanced Statistics for Health Care Professionals	3	
611	Advanced Pharmacology	3	
612	Advanced Physical and Health Assessment	3	
708	Advanced Physical and Health Assessment Lab	1	
Master's conferment after completing 31 credits above			
801	Advanced Practice Role for the DNP	3	
717	Informatics	3	
704	Advanced Pharmacology for Prescribers I	3	
804	Advanced Nursing Practice: Common/Acute I	3	
805	Advanced Nursing Practice: Common/Acute Practicum I	1.5	112
806	Advanced Nursing Practice: Common/Acute Practicum II	1.5	112
830	Population Focused System Evaluation and Implementation	3	
807	Advanced Nursing Practice: Acute/Chronic II	3	
808	Advanced Nursing Practice: Advanced Nursing Practice: Acute/Chronic Practicum I	1.5	112
809	Advanced Nursing Practice: Advanced Nursing Practice: Acute/Chronic Practicum II	1.5	112

810	Advanced Nursing Practice: Advanced Nursing Practice: Complex Chronic III	3	
811	Advanced Nursing Practice: Advanced Nursing Practice: Complex Chronic Practicum I	1.5	112
707	Biostats and EBP	4	
802	DNP Scholarly Project I	1	
812	Advanced Nursing Practice: Advanced Nursing Practice: Complex Chronic Practicum II	1.5	112
803	DNP Scholarly Project II	1	
901	DNP Residency I	2	150
903	DNP Scholarly Project III	1	
902	DNP Residency II	1.5	112
904	DNP Scholarly Project IV	1	
905	DNP Residency III	1.5	112
	Total Hours	**74**	**1046**

MSN-FNP/DNP TRACK			
Course #	Course Name	Min Credit	Max Credit
801	Advanced Practice Role for the DNP	3	
717	Informatics	3	
704	Advanced Pharmacology for Prescribers I	3	
708	Advanced Physical and Health Assessment Lab	1	
804	Advanced Nursing Practice: Common/Acute I	3	
805	Advanced Nursing Practice: Common/Acute Practicum I	1.5	112
806	Advanced Nursing Practice: Common/Acute Practicum II	1.5	112
830	Population Focused System Evaluation and Implementation	3	
807	Advanced Nursing Practice: Acute/Chronic II	3	
808	Advanced Nursing Practice: Advanced Nursing Practice: Acute/Chronic Practicum I	1.5	112
809	Advanced Nursing Practice: Advanced Nursing Practice: Acute/Chronic Practicum II	1.5	112
810	Advanced Nursing Practice: Advanced Nursing Practice: Complex Chronic III	3	
811	Advanced Nursing Practice: Advanced Nursing Practice: Complex Chronic Practicum I	1.5	112
707	Biostats and EBP	4	
802	DNP Scholarly Project I	1	
812	Advanced Nursing Practice: Advanced Nursing Practice: Complex Chronic Practicum II	1.5	112
803	DNP Scholarly Project II	1	
901	DNP Residency I	2	150
903	DNP Scholarly Project III	1	
902	DNP Residency II	1.5	112
904	DNP Scholarly Project IV	1	
905	DNP Residency III	1.5	112
	Total credit hours	**44**	**1046**

ONLINE DNP FOR ADVANCED PRACTICE NURESES - LEADERSHIP TRACK(Post APRN- DNP) Offered on a Part-Time (PT) and Full-Time (FT) Basis (26 credits; 500 clinical hours for DNP; 500 clinicals transferred in from APRN program)			
Course #	Course Name	Credit Hours	Clinical Hours
820	Leadership: Setting the Example	3	
802	DNP Scholarly DNP Project I	1	
703	Systems Leadership, Health Economics, and Policy	3	
901	DNP Residency I	1.5	125
717	Informatics	3	
803	DNP Scholarly Project II	1	
902	DNP Residency II	1.5	125
830	Population Focused System Evaluation and Implementation	3	
903	DNP Scholarly Project III	1	
707	Biostats and EBP for the DNP	4	
905	DNP Residency III	1.5	125
904	DNP scholarly Project IV	1	
906	DNP Residency IV	1.5	125
	Credit Hours	26	500

Post MSN-DNP ONLINE - LEADERSHIP TRACK (35 credits; 1000 clinical hours for DNP)			
Course #	Course Name	Credit Hours	Clinical Hours
820	Leadership: Setting the Example	3	
720	Nursing Leadership in Health Care Organizations I	3	
725 A	Nursing Leadership in Health Care Organizations Practicum I A*	1.5	125
725 B	Nursing Leadership in Health Care Organizations Practicum I B *	1.5	125
717	Informatics	3	
730	Nursing Leadership in Health Care Organizations II	3	
735 A	Nursing Leadership in Health Care Organizations Practicum II A*	2	125
735 B	Nursing Leadership in Health Care Organizations Practicum II B*	2	125
830	Population Focused System Evaluation and Implementation	3	
707	Biostats and EBP for the DNP	4	
802	DNP Scholarly DNP Project I	1	
901	DNP Residency I	1.5	125
803	DNP Scholarly Project II	1	
902	DNP Residency II	1.5	125
903	DNP Scholarly Project III	1	
905	DNP Residency III	1.5	125
904	DNP scholarly Project IV	1	
906	DNP Residency IV	1.5	125
	Credit Hours	35	1000

4.4 Communication

All students have an email account through Holy Family University. All email communication to faculty and staff **must** be through Holy Family email accounts. All communication to students from faculty and staff will be through the Holy Family University email exclusively. Students must use proper email etiquette when sending email. Emails should be composed utilizing the faculty's professional name and signed by the student. Abbreviations should not be used and

words should be written out to decrease the risk of miscommunication. Please allow two business days for faculty to respond to emails.

4.4.1 Change in Personal Information

Students must immediately notify the Nursing Office (Nursing Education Building, Room 115) of any changes in name, address, or telephone number.

4.4.2 Graduate Council

The Graduate Council is responsible for curricular issues, including the development, implementation, and revision of the DNP nursing curriculum. It develops policies and procedures related to admission, retention, and graduation of DNP students, and serves as a board of review for students in academic jeopardy. Graduate Council advises upon matters relating to DNP student welfare. The Council is composed of all faculty teaching in the DNP program and is chaired by the Vice Dean. A student representative participates as a non-voting member for curricular and student welfare issues.

5.0 ADMISSIONS CRITERIA FOR APPLICANTS

Admission policies are designed to encourage students to apply who possess a high level of critical thinking; clinical competence and curiosity; a record of academic success; and strong leadership potential. Applicants must possess the following qualifications for admission to the Doctor of Nursing Practice program. All entry points has the same criteria.

1. Completion of the Holy Family University Graduate Application form along with the Application Fee (fee is waived for alumni).
2. Current unencumbered license as a registered professional nurse in the State of Pennsylvania.
3. Bachelor of Science in Nursing and/or Master of Science in Nursing degree, if applicable, must be obtained from an accredited institution recognized in the directory of Accredited Institutions of Postsecondary Education published by the American Council on Education and by CCNE or ACEN.
4. An official transcript from all schools attended must be sent to the University.
5. BSN-DNP program candidate transcripts must include nursing research, statistics, nursing leadership, and community health nursing coursework.
6. MSN-DNP/FNP candidate transcripts must reflect: Advance Pathophysiology; Advanced Pharmacology; and Advanced Physical and Health Assessment course that includes baseline competency in diagnostic and therapeutic procedures performed by advanced practice nurses in the primary care setting.
7. A competitive candidate would have an undergraduate GPA of 3.0
8. Current resume or CV.
9. Personal interview may be requested.

10. Statement of goals and potential scholarly project essay. The candidate is to write an essay on a topic to include professional goals related to the DNP and a health care issue that could possibly serve as the inspiration for a future DNP scholarly project.
11. English language proficiency: If English is not your first language, or if English is not the primary language spoken in your home, submission of TOEFL results is required. Applicants must achieve the minimum score of 22 in all sections (writing, speaking, reading and listening).
12. All post-MSN students who apply must have evidence of meeting the core requirements of the HFU MSN plus one credit NURS 708.
13. All students who have received a Master's of Science in Nursing degree at another institution must have evidence of the HFU's MSN core requirements on their official transcripts.

> NURS 601 – Theoretical Basis for Nursing
>
> NURS 606 – Professional Ethics: Theory & Practice for Advanced Nursing Practice
> NURS 607 – Health Promotion and Disease Prevention
> NURS 608 – Advanced Statistics for Health Care Professionals
> NURS 609 – Research for Evidence-Based Nursing Practice
> NURS 610 – Advanced Pathophysiology
> NURS 611 – Advanced Pharmacology
> NURS 612 – Advanced Physical and Health Assessment
> NURS 614 – Health Policy, Organization, and Financing

5.1 GAP Analysis of Transfer Credit

All students who have received a Master of Science degree at another institution must have evidence of the HFU MSN core requirements plus one additional credit (NURS 708) on their official transcripts. At the time of application prior courses obtained at another organization will be reviewed through a gap analysis. This will be performed to ensure that the academic preparation for all graduates from the HFU DNP Program have equivalent outcomes.

In accordance with the *Holy Family University Graduate Catalog*, a student may request transfer of credit(s) at the time of application. A gap analysis will be performed. HFU considers awarding transfer credits from other regionally-accredited institutions. Students complete the programmatic transfer document that is provided to the student at the time of application. The plan represents all the required coursework from another institution. HFU considers awarding transfer credits from other regionally-accredited institutions on following conditions:

1. The official transcript is from an accredited institution recognized in the Directory Accredited Institutions of Postsecondary Education published by the American Council on Education.

2. The official transcript is from an accredited institution recognized by the CCNE or ACEN.

3. The course has comparable academic qualities that are defined as:

   a. Comparable transferring course descriptions

   b. Comparable transferring course learning objectives

   c. Comparable transferring academic/quality hours.

Acceptance of courses and credits deemed suitable for transfer are reviewed by the Vice Dean/DNP Director in consultation with the Dean of the SONAHS. The Dean makes a recommendation to the Vice President of Academic Affairs who issues the final determination or equivalency. Prior to registration, an individualized plan of study is created. This plan may not be altered throughout the curriculum.

6.0 Registration Status

Students register for courses on published dates (See the University's website, www.holy family.edu). Those who register early will be billed and will pay tuition according to the billing dates specified each semester by the Business Office. Students who register near the starting date for classes will be expected to pay tuition at the time of registration. Classes are closed when maximum enrollment is reached.

Additional sections of courses may/may not be made available during a given semester at the discretion of the School Dean. (Please see *Holy Family University Graduate Catalog*).

7.0   CONTINUOUS ENROLLMENT

Students admitted to the program are expected to enroll continuously until the program is complete. Continuous enrollment is defined as completing the defined credits per year, including Summer sessions, at Holy Family University. Failure to maintain continuous enrollment may affect progress toward degree completion. (Please see Holy Family University Graduate Catalog.

8.0   DEFINITION OF ACADEMIC STATUS

FULL-TIME
Full-time status is defined as being registered for 9 or more credits during the fall or spring semester. Students carrying 5 credits in summer session also are considered full-time.

PART-TIME
A student who in any semester or summer session is registered for study but who does not meet the criteria for full-time status is considered to be engaged in part-time academic work for that semester.

9.0 UNIVERSITY GENERAL POLICIES

> *All Holy Family University general policies are located in the Holy Family University [Graduate Handbook](). STUDENTS AND FACULTY ARE RESPONSIBLE FOR READING THE HOLY FAMILY UNIVERSITY ACADEMIC AND NON-ACADEMIC POLICIES. THESE ARE EASILY ACCESSIBLE ON THE HOLY FAMILY WEBSITE WWW.HOLY FAMILY.EDU.*

9.1 STUDENT ACADEMIC INTEGRITY STATEMENT

Holy Family University expects its students the highest standards of integrity in their academic performance.

Dishonesty in university work, whether it be in quizzes, laboratory work, term papers, clinical documents, practicum hours, examinations, etc., is regarded as a serious offense and may result in failure in the course and dismissal from the University. Anyone who willfully assists another in the breach of integrity is held equally responsible and subject to the same penalty. The University assumes the academic integrity of its students.

The University's policy on academic honesty is available for review in the current *Holy Family University Graduate Catalog, which* can be found on the University website at: **https://www.holyfamily.edu/academics-schools-of-study/course-catalog**). Violations of the University's standards in any form (including but not limited to plagiarism) as described therein or otherwise identified will not be tolerated. Responsibility for knowing and understanding the University's position and policies on academic integrity rests with each student.

9.2 Office of Accessibility Services

Holy Family University serves a variety of learning styles and needs and is committed to accessibility. If you have questions regarding accessibility services, please contact the office by calling 267-341-3388 or by emailing **accessibilityservices@holyfamily.edu**.

In accordance with the American with Disabilities Act of 1990 (ADA) and Section 504 of the Rehabilitation Act of 1973, Holy Family University's Office of Accessibility Services provides reasonable accommodations to qualified students with a disability (Physical, psychological, learning, ADHA, chronic health-related, etc.). Please note that accommodation plans will not be retroactively implemented. For additional details regarding the Office of Accessibility Services policies, please refer to the Graduate Catalog, which can be found on the University website at: https://www.holyfamily.edu/academics-schools-of-study/course-catalog)]

9.3 SUPPORT SERVICES: CENTER FOR ACADEMIC ENHANCEMENT

This Center is an academic support service available to students who are interested in improving their learning skills. Tutorial services are offered, and self-study materials are provided across selected educational content. The Center is located on the second floor of the Library on the Philadelphia Campus. Assistance is also available at the Newtown location in the Learning Resource Center (LRC). https://www.holyfamily.edu/about/administrative-services/center-teaching-learning/center-academic-enhancement

9.4 STUDENT ACADEMIC ADVISING

Meeting routinely with one's academic advisor is critical to successful completion of the program. Students are encouraged to meet with their academic advisor whenever they have questions or concerns.

Upon admission to the program all students are assigned an advisor who is a member of the graduate faculty. Students are required to communicate via Holy Family email or voice mail with their academic advisors. Prior to the first semester students are required to make an appointment to discuss the program and make plans for the sequencing of courses.

Thereafter, the academic advisor is available for guidance for academic and professional issues.

Students are responsible for registering for all courses and requesting any additional approval from their academic advisor.

9.5 COUNSELING CENTER

The Counseling Center is committed to providing professional services to our University Community for growth, development, health, and empowerment in life and academics. https://www.holyfamily.edu/current-students/student-resources/counseling-center

9.6 Academic Progression

Progression in the Doctor of Nursing Practice Program is based on satisfactory scholarship in required courses and adequate progress in the project. The policy related to academic progression in the FNP/DNP in nursing is based on the Holy Family University Graduate Catalog stating that one or more failing grades or a cumulative grade point average below 3.0 for any semester or combination of semesters may be considered as evidence of failure to maintain satisfactory scholarship and may result in the student being dismissed from HFU.

9.6.1 Grading Scale:

Grading Policy

Grade	Description	Percent Ranges	Quality Points
A	Outstanding Performance	94-100%	4.0
B+	Superior Performance	90-93%	3.5
B	Satisfactory Performance	86-89%	3.0
C+	Marginal competence Limited application to degree completion.	81-85%	2.5
C	Unacceptable toward completion of degree or certification requirements. Course must be repeated.	77-80%	2.0
F	Failure/No credit	≤ 76%	0.0
I	Work not completed within semester, with approval to complete later (*see related policy under Incomplete Grades*)		
W	Authorized withdrawal from course		

M   Missing grade not submitted by
      instructor

AU   Audit: carries no grade

P   Pass

Grades represent student achievement as evaluated by the instructor. All students are expected to maintain a GPA of B (3.0) to remain in good academic standing. A student may graduate from a program with one grade of C+. (**Exception:** a grade of B or higher is required in student teaching, internships, and clinicals in order to complete graduation requirements.) A second grade of less than B earned in any course must be repeated the next time the course is offered. If a third grade less than a B is earned in any course, the student will be dismissed from the program. When a course is repeated, both grades will appear on the transcript, but only the most recent grade will be used in calculating the student's GPA.

Academic Grievances-Academic Disputes and Grade Challenges: If a student has an academic grievance, the student should refer to the University's policy on Grievance Procedures: Academic Disputes and Grade challenges, which is available in the Graduate Catalog on the University website at: https://www.holyfamily.edu/academics-schools-of-study/course-catalog.

9.6.2 Incomplete Grades

Failure to complete course requirements at the end of a given semester may result in the assignment of a grade of I (Incomplete) at the discretion of the instructor. Incomplete grades can only be considered for extenuating circumstances. Grades of Incomplete must be removed; that is, all work must be completed, and the final grade submitted to the Registrar within 90 days of the end of the final examination period. If the student does not complete the course requirements or the final grade is not submitted by the instructor by the specified deadline date, an automatic failure will be recorded in the Registrar's Office. In unusual circumstances, extensions to the deadline dates may be granted at the discretion of the faculty member, who will convey that determination in writing to the School Dean and the Registrar. DNP Scholarly Project Courses (NURS 802, 803, 903, 904) are not eligible for Incomplete grades. Failure to meet the course requirements and objectives will result in repeating the course.

9.6.3 Course Failure

In addition to the HFU Graduate academic requirements. HFU DNP Program also requires that students complete FNP Practicums, DNP Leadership practicums, and Residency within good standing. Good standing is defined as completed FNP Practicums, DNP Leadership practicums, and DNP Residency; progression in development is evidenced in serial evaluations. Failure to achieve a completed practicum or residency and/or lack of progression will result in student failure.

A student may be removed from the clinical setting up to dismissal from the program for the following:

1. Fails to demonstrate safe clinical practice.

2. Fails to meet the university or clinical agencies' policies for clinical compliance and health regulations.

3. Violation of the Alcohol/Drug Policy

4. Failure to notify the Director of DNP Program/FNP Coordinator of dismissal or revocation of practice privileges (within < 72 hours) at the healthcare organization.

5. State Board of Nursing suspending or revoking nursing license.

6. Failure of the student to notify the Director of the DNP Program if nursing license status changes.

7. Unprofessional behaviors that the clinical faculty and/or preceptor reports in violation with professional standards.

8. Unexcused absences without notification to the clinical faculty and the preceptor.

9. Any falsification of clinical/residency documentation or hours

9.6.4 Academic Standing and Retention

Academic standing for each student will be reviewed by the Vice President for Academic Affairs and the respective schools after each grading period. Students will be notified in writing if they do not meet program standards.

Required courses include prescribed courses as defined by the FNP/DNP Program Curriculum. The academic standards and grading scale are based upon Holy Family University. Students must complete all courses with a grade of B or higher. A grade of C+ or less for more than one course may be grounds for dismissal. If a DNP student receives a grade of C+, the student must repeat the course and receive a grade of B or higher.

9.6.5 Dismissal

Students are expected to abide by the regulations set forth by Holy Family University and the written policies and procedures of their respective programs. The University reserves the right to dismiss a student at any time for unsatisfactory academic performance or for conduct detrimental to the University or to the welfare of other members of the University community. The Director of the Doctoral Program and the School Dean can also recommend dismissal of a student. Dismissal proceedings will be conducted by a University committee and the student will have the option of presenting information at the dismissal meeting. The Director of the Doctoral Program and the School Dean can also recommend dismissal of a student if it is determined that a student's conduct is unprofessional or is not consistent with the Code of Ethics of his or her intended profession.

9.6.6 Academic Dispute and Challenges

Any academic dispute or grade challenge must be sought by the conclusion of the next semester and resolved within one year of receiving the grade. Any dispute or challenge older

than one academic year will not be considered. The policy in the *Holy Family University Graduate Catalog* will be followed.

9.6.7 Appeal Procedure

Please refer to the Holy Family University Graduate Catalog for the Appeal Procedure.

9.6.8 Academic Policies of Code of Conduct

In accordance with the mission and values of Holy Family University that include both rigorous intellectual inquiry and academic excellence a policy of academic honesty and integrity will be strictly followed in all graduate courses. Please see the *Holy Family University Graduate Catalog* for Academic Policies and Code of Conduct.

In accordance with HFU, to support the mission of the University and the academic goals of all students, the SONAHS community upholds the following standards of conduct:

1. Respect and equitable treatment for all individuals

2. Social responsibility and Christian moral behavior

3. Respect for lawful authority. The Student Code of Conduct judicial process can be accessed via the *Holy Family University Graduate Catalog.*

4. Examples of misconduct for which students are subject to disciplinary action by the University are:

    a. Violations of State or Federal law classified as felonies or misdemeanors

    b. Deliberate destruction of, or damage to, misuse of, or abuse of public or private property

    c. Assault and/or battery upon another person or the threat thereof, including harassment

    d. Discriminatory acts committed against anyone in the University community on the grounds of race, religion, national origin, gender or disability

    e. Violations of the Sexual harassment policy

    f. Alteration of University identification card or academic records; misrepresentation of one's identification when requested by a member of the University faculty, administration or staff

    g. Violation of campus safety regulations, including motor vehicle and fire safety regulations

    h. Loud, obnoxious or menacing behavior which infringes upon the rights of others

    i. Theft of public or private property including receipt of stolen property

    j. Lewd or indecent speech or conduct. Possession, use or sale of illegal drugs or drug paraphernalia

9.6.9 Final Grades and Transcripts

Final grades are available online to students without account holds. Paper grade reports are sent only upon request. Please see the Registrar's section of the website for information concerning paper grade report requests. The Registrar's Office issues transcripts. Students may request transcripts in person, by mail, or by fax. Telephone requests will not be honored. The request must be in writing and include the signature of the student authorizing the release of his or her records. There is a fee for each copy of a transcript and the payment in cash, check, money order, or credit card should accompany the request. Additional fees are charged for special processing or mailing requests. Please consult the Registrar's section of the website for the transcript request procedure and list of fees. The office will not release transcripts for individuals with outstanding debts or other holds until all accounts are settled. Ordinarily, official copies are mailed directly to the individual, school, or agency designated by the student. The Registrar's Office requires at least 48 hours' notice to process a transcript. During peak activity periods there may be a delay. Persons requesting transcripts during these times — two weeks prior to and following the beginning and end of semesters and Summer sessions — should anticipate a delay.

9.6.10 Degree Completion and Commencement

The degree completion date is determined by the filing deadline for the *Application for Graduation*. Once the petition has been filed, an exit audit will be conducted by the Graduate Academic Services Advisor. The student and the School Dean in the school of study will be notified of the results of this audit and the student's eligibility to graduate.

The responsibility for meeting the requirements for the degree rests with the student. The basic requirements for graduation are:

- The completion of all requirements specified in the particular program

- A cumulative GPA of 3.0 or better and no more than one course with a grade of C+ (see specific course exceptions requiring a grade of B or higher)

- Fulfillment of all University responsibilities: payment of bills, including graduation fees, return of equipment and/or library materials, and so forth

- Completion of the *Application for Graduation* via self-service within the application timeframe noted on the website. Graduate students are expected to submit graduation applications on time. Graduation applications received after deadline dates will not be considered for the filing graduation date. Therefore, students who submit applications late will not complete degree requirements until the next regularly posted completion date.

To participate in the Commencement ceremony and receive a diploma, students must have filed the required *Application for Graduation* by the appropriate deadline and fulfilled all academic and financial obligations. Students who have successfully completed all academic requirements are encouraged to participate in Commencement. Students who have not filed graduation applications and/or completed all degree requirements successfully will not be permitted to participate in Commencement.

10.0 COURSE/CLINICAL CANCELLATION POLICY

Holy Family University will make every effort to meet the academic needs of each graduate student by offering courses outlined in the catalog in a timely manner. However, the University reserves the right to change or cancel, without notice or obligation, any course offering and/or location published in the academic schedule because of insufficient enrollment or for any other reason. Cancellation can occur up to and including the first week of class.

Students are to follow the direction of the University regarding school cancellation in inclement weather. To ensure the security of Holy Family's two locations, the University has implemented a new "emergency alert" system. This voluntary system is designed to immediately notify the campus community, via cell phone or email, when an emergency situation occurs on campus. Up to (2) cell phone numbers and one email address may be registered per person. In addition to emergency situations, the new system will alert registered members when the University is closed due to snow or other weather-related events. To register, visit: *http://www.holyfamily.edu/about-holy-family-u/resources/hfu-alert-system*.

10.1 Advanced Practice Education Associates (APEA)

Completion of the Pre-Predictor Exam will be in NURS 810.
Completion of the University Predictor Exam will be at the end of the DNP program in NURS 905.

11.0 PRACTICUM & RESIDENCY GENERAL POLICIES

11.1 Clinical Compliances

All students must complete the following clinical requirements and receive approval before starting their clinical experiences. University approval will be granted each 8-week semester for FNP practicums from the FNP coordinator. These requirements must be current and filed in Typhon and/or American Databank (ADB) accounts before students can register or participate in clinical courses. Specific requirements and directions will be provided by the Graduate clinical coordinator in collaboration with FNP coordinator/DNP Director and Associate Dean.

11.1.1 Compliance Due Dates

Initial compliance due dates are provided at the beginning of the program by the FNP coordinator, Director, and/or compliance officer. Students are responsible to maintain compliances throughout the year and throughout the program. No compliance requirement is allowed to expire at any point. This ensures that the student is compliant throughout the entire academic year with no interruption in their clinical rotation time.

11.1.2 Evidence of current nursing license:

All students are required to present a valid state nursing license. Copy will be kept in Typhon.

11.1.3 CPR Certification

Students must maintain current Basic Life Support (BLS) certification throughout the clinical practicum courses. Current ACLS and/or PALS if required by clinical agencies. Students must have a copy of BOTH sides of the card uploaded in American Databank (ADB).

11.1.4 Immunization and Health screening requirements

1. Physical Examination

2. Provide documentation of immunization status via titers or immunization records to ADB for approval. Requirements are as follows:

    a. Measles/Mumps/Rubella: Laboratory evidence of immunity(titers).

    b. Varicella (Chickenpox): Laboratory evidence of immunity(titers)

    c. Tetanus, Diphtheria, Pertussis: Proof of a current TDAP vaccination is required

    d. Annual Tuberculin Testing, QuantiFERON Gold

    e. Hepatitis B: Laboratory evidence of immunity(titers)

    f. Annual Seasonal influenza: Proof of vaccination is required on October 1st each year.

    g. Drug Screen

    h. FBI Fingerprints & Criminal background

    i. Child abuse clearance

    j. Proof of Health Insurance

    k. HIPAA Training for Students

    l. COVID-19 Vaccination

11.1.5 Evidence of Clearance

All documents must be uploaded to American Data Bank (ADB) upon admission. It is the responsibility of the student to maintain their compliance requirements throughout the year. No compliance should expire at any time during a clinical/practicum rotation.

All students must have a criminal background check completed prior to enrollment in any nursing course with a practicum or residency component. Depending on the results of the criminal background check, a student may not be able to participate in nursing courses.

All students must have a child abuse clearance check completed

Depending on the results of the child abuse clearance check, a student may not be able to participate in clinical courses.

11.1.6 Health Insurance:

Contracts with clinical agencies require that all students provide evidence of health insurance coverage. If illness or injury occurs during a clinical experience, students are responsible for the cost of any required testing or treatment. Evidence of health insurance must be documented annually.

11.1.7 Documents

All documents must be kept updated to continue your clinical rotation throughout the academic year – this is the students' responsibility. If any item expires, the student may not complete any clinical time until it is updated. Students who attend clinical agencies with expired clearances are subject to disciplinary action and dismissal from the program.

Students should keep copies of these documents in a personal file, so they are available, if requested by their clinical agency. When sharing documents at clinical sites, write "copy" on any forms dispersed; this is a safety measure for the protection of your professional identification.

Affiliation agreements with clinical sites/organizations are required prior to beginning a preceptorship or mentorship. The Graduate Clinical Coordinator will facilitate and maintain these agreements.

The Preceptor files shall be kept housed in the Typhon Database. It is the responsibility of the student to submit the required preceptor file documents. These documents should be submitted to www.holyfamily.edu/preceptor. These documents include a copy of the preceptor's CV/resume, a copy of board certification, a copy of their nursing or medical license, and a signed preceptor agreement form. The blank preceptor agreement form can be found on www.holyfamily.edu/preceptor. These documents are reviewed, approved, and uploaded as a preceptor file to Typhon by the Graduate Clinical Coordinator. In addition, the Graduate Clinical Coordinator will review, approve, and create site files in Typhon.

The DNP residency or leadership preceptorship files shall be kept housed in canvas and/or in the Typhon Database. It is the responsibility of the student to submit the required mentor file documents. These documents should be submitted to www.holyfamily.edu/dnpscholarlyproject. These documents include a copy of the preceptor's CV/resume and a signed mentor agreement form. The blank mentor agreement form can be found on www.holyfamily.edu/dnpscholarlyproject. These documents are reviewed, approved, and uploaded as a mentor file to Typhon by the Graduate Clinical Coordinator. In addition, the Graduate Clinical Coordinator will review, approve, and create site files in Typhon.

All clinical or residency documents will be uploaded into Typhon.

11.1.8 Health Insurance Portability and Accountability (HIPAA):

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 mandates Federal privacy protection for individually identifiable health information. Standards have been set for health care providers (who transmit health care transactions electronically. While in clinical practice, most of the health care providers you will come in contact with will be under the HIPAA guidelines and requirements. In your studies, and during your clinical practice, you need to be aware of these requirements, and additionally, the health care provider will often train you on their HIPAA policies and practices. HIPAA Training is mandatory at the initial compliance deadline. The University will enroll the student in HFU's HIPAA training course.

Some of the pertinent requirements of HIPAA are:

1. Notifying patients about their privacy rights and how their information is used

2. Adopting and implementing privacy procedures for the practice or hospital

3. Training employees so that they understand the policies

4. Designating an individual as a Privacy Officer, who is responsible for seeing that the privacy procedures are followed

5. Securing patient records containing individually identifiable health information so that they are not readily available to those that do not need them.

While participating in clinical practice, you will be expected to comply with HIPAA requirements, and you need to conduct yourself in the following manner during your clinical practicum:

1. Use safeguards to prevent the use or disclosure of Protected Health Information (PHI) other than for your direct performance of services

2. Notify your supervisor or faculty member of any use of disclosure of PHI that is contrary to your service and its purposes

3. Ensure that fellow students do the same

4. Cooperate and abide by the training, policies and procedures of the health care provider.

5. The graduate programs utilize only those clinical training sites which comply with HIPAA standards and reserves the right to limit or curtail a student's clinical opportunities in the event that proof of program annual mandatory training is not provided

12.0   REPRESENTING HFU SONHS

Professional behavior and safety are valued as essential attitudes and actions for successful completion of the doctoral program and are evaluated by demonstration of the following:

Professional behaviors are evaluated by the following:

Active Learner

Assumes responsibility for own learning needs in all settings.

Attendance in accordance with the School of Nursing and Health Sciences policy

Attends all classes and clinical experiences.

Punctuality for all learning experiences

Arrives promptly and stays for the duration of time for classes and clinical experience. Zero tolerance for lateness in the clinical and lab areas.

Preparation

Prepares for all classes and clinical experiences.

Obtains all course required materials (textbooks, workbooks, clinical handbooks, electronic resources, etc.).

Completes readings and pre-class assignments.

Completes independent assignments (e.g. computer).

Checks bulletin board, course web site, canvas courses and electronic resources for additional information as needed.

Attentiveness

Participates in all classroom and clinical discussions and activities. Remains awake and alert during all class, clinical, and lab sessions.

Displays ability to think critically and engage in problem-solving in accordance with safe nursing practice.

Links previous knowledge to current Nursing courses.

Acknowledges that written examinations will contain questions of increasing complexity at each level.

Communication

Demonstrates characteristics of an attentive and engaged listener.

Uses appropriate verbal and nonverbal communication to professionally and effectively interact with patients, families, peers, faculty and staff.

Resolves conflicts maturely and appropriately by utilizing the appropriate chain of communication

Communicates ideas fluently and accurately using Standard English.

Prepares written materials free from mechanical, logical, and organizational errors, utilizing APA format whenever indicated.

Reads, views, analyzes, synthesizes, and interprets selected course materials.

Professionalism

Remains accountable and responsible for actions and behaviors at all times.

Completes all clearances and health data through American Data Bank as required and keeps all information current.

Complies with School of Nursing and Health Sciences dress code. o Maintains good personal hygiene and neatness in appearance.

Complies with all classroom and clinical course expectations, including completing assignments on time. o Demonstrates emotional maturity, cooperation, sound judgment, promptness, dependability, initiative, effort, and self-reliance.

Accepts and uses constructive input and/or reflections to modify behaviors/actions.

Responds in an appropriate manner to feedback given in the clinical and classroom settings.

Demonstrates a sincere desire and the necessary commitment to become an effective nurse.

Seeks assistance from faculty in a timely fashion.

Utilizes Academic Resource Center as needed. o Utilizes CAE as appropriate. o Follows the honor code of the University as well as the policies of the SONHS.

Does not falsify documents.

Avoids disruptions by turning off cell phones (ring or vibrate mode) during classroom or clinical experiences. Use of cell phones or any other smart device is not permitted during any examination. Use of cell phones or any other smart device is not permitted in clinical experiences.

Conducts self in a courteous, professional manner in classroom and clinical. o Is respectful of self, peers, faculty, and staff. o Upholds the values listed in the University Mission Statement.

Respects and maintains confidentiality of patients, families, peers, and faculty.

Examples of behaviors considered unprofessional include, but are not limited to:

Tardiness, absences, and inattention to make up requirements.

Lack of class or clinical preparation.

Disrespect

Abusive or profane language or behavior.

Dishonesty - including but not limited to cheating, plagiarism, fabrication, and misrepresentation as defined by the following:

> *Cheating* – using or attempting to use unauthorized materials, information, study aids, computer-related information, or other people.
>
> *Plagiarism* – representing the words, data, works, ideas, computer program or output, or anything not generated in an authorized fashion, as one's own.
>
> *Fabrication* – presenting as genuine any invented or falsified citation or material.
>
> *Misrepresentation* – falsifying, altering, or misstating the contents of documents or other materials related to academic matters, including schedules, prerequisites, and transcripts.

Disruptive behavior- Violence of any kind.

Use of or impairment by chemicals or alcohol (legal or otherwise).

Expiration of any required clearance (background screen, child abuse clearance, FBI clearance), CPR certification, insurance, or health requirement while enrolled in a clinical course.

13.0 FNP/DNP CLINICAL EXPERIENCE

The clinical portion of the Doctor of Nursing Practice Program is a critical component to the student learning new skills and knowledge while developing in a new advanced practice role. The Family Nurse Practitioner Practicums involve integration of the skills of gathering health history data, performing an appropriate physical examination, using critical thinking skills to arrive at differential diagnoses regarding the clients' diagnosis, health risks and problems, and developing and implementing a comprehensive health promotion and illness management plan. The Doctor of Nursing Practice Student Residency courses are designed to advance clinical practice, explore potential areas of project interest and/or gain practicum experience that supports coursework required in the FNP/DNP curriculum.

FNP/DNP students spend approximately two to three days a week over nine eight-week sessions in health care settings integrating their newly acquired advanced practice knowledge with practice as they participate in the primary care delivery process of Family/Individuals Across the Lifespan and develop the competencies articulated in the DNP Essentials.

During these clinical experiences, FNP/DNP students become increasingly able to blend their nursing knowledge and expertise with formalized medical therapeutics to bring about a more complete management plan for the patient. Learning to merge both caring and curing for the benefit of the health care recipient enables FNP/DNP students to become effective providers of primary health care. During each clinical practicum, students develop and nurture advanced practice clinical skills under the guidance and supervision of a graduate clinical faculty, as well as experienced on-site FNP or physician preceptor. For this reason, the selection of clinical sites and preceptors is a very important part of the student's plan of study that requires careful preplanning. Preceptors are volunteers and this means assuming a responsibility in addition to the rigorous demands of their health care provider role. Students will complete a clinical scholarly practice experience that further refines their clinical knowledge and skills (please see DNP Scholarly Project Section).

Therefore, both students and faculty need to demonstrate unfailing courtesy and consideration in their interactions with actual or potential preceptors. Both faculty and students are important ambassadors of HFU and the nursing profession in all their contacts with preceptors.

Each of these courses has associated fees in addition to the tuition per credit. The fees are to cover the additional costs associated with each course.

13.1 Student Placement and Academic Affiliation Agreements

Students identify preceptors by networking via their work environment, professional organizations or community contacts. All preceptors must possess the qualifications described above. The responsibility to identify preceptors and initiate the request to work with a preceptor is a shared responsibility between the student and the Graduate Clinical Coordinator. The FNP Coordinator/DNP Director and the Graduate Clinical Coordinator will

assist you as needed in choosing clinical sites. Students must receive permission for all preceptor placements. All preceptors and mentors receive a copy of the syllabus and evaluation tools. Any clinical hours accumulated under non-approved circumstances will not be counted toward clinical hours required for the clinical hour completion and the student may be subject to disciplinary action up to and including dismissal from the program. Students are permitted to use their place of employment.

Approval must be obtained from the University and clinical agency, and these items must be followed:

1. The student may not perform clinical hours while being compensated.

2. They may not be performed during a scheduled work day.

3. The student may not perform clinical hours on the unit that they are employed.

4. The student may not have a preceptor who is in direct line of report (i.e. Manager, Clinical Director)

5. The student must provide the preceptor or mentor required documentation, and adhere to the University and clinical site compliance requirements.

13.2 Family Nurse Practitioner Clinical Experience

Each practicum course (NURS 805, 806, 808, 809, 811, 812) is eight weeks in length and contains 112 practicum hours. During the first week of each practicum, the student submits their practicum hours schedule and discusses the plan with the preceptor. The student should submit a copy of the evaluation tools and syllabus with the course/program objectives, course requirements, and DNP essentials.

13.2.1 Course Specific Information

Each FNP Practicum course requires completion and verification of 112 clinical hours.

Each student must complete a minimum of *672 hours of clinical practice required in the Doctor Nursing Practice Program.*

112 hours in a women's health care setting, emphasizing health history and assessment skill development

112 hours of pediatric care in a primary care setting, focusing on developmental assessment, acute and chronic disease recognition, and management and health maintenance of the pediatric patient is best achieved in a primary care Pediatric Practice site or a busy Family Practice that sees children.

112 hours in a primary care setting, concentration on acute, episodic problems and health maintenance of the adult client.

112 hours in a primary care setting, concentration on chronic disease states, treatment and management of the adult population.

112 hours in a geriatric setting, applying Gero-pharmacology content to clinical decision-making for pharmacologic treatments, integrating facets of comprehensive geriatric

assessment into routine office visits and utilizing current clinical guidelines for health promotion with older adults and management of common acute and chronic health conditions utilizing current guidelines for management. Also, addressing elder maltreatment and implementing processes in support of advanced care directives.

112 hours in a primary care setting or specialty outpatient setting, concentrating on refining skills, developing clinical decision making, gaining experience working with patients and in the NP, role caring for individuals.

These clinical hours are obtained in the 6 sequential courses.

1. NURS 805   Advanced Nursing Practice: Common/Acute Practicum I

2. NURS 806   Advanced Nursing Practice: Common/Acute Practicum II

3. NURS 808   Advanced Nursing Practice: Acute/Chronic Practicum I

4. NURS 809   Advanced Nursing Practice: Acute/Chronic Practicum II

5. NURS 811   Advanced Nursing Practice: Complex Chronic Practicum I

6. NURS 812   Advanced Nursing Practice: Complex Chronic Practicum II

The student is expected to collaborate with clinical course faculty on the types of experiences acceptable for the plan. These practicum hours are conducted in collaboration with a preceptor. Identifying a preceptor will be helpful in obtaining a meaningful practicum experience. Moreover, developing a potentially long term, collaborative relationship may lead to the identification of a preceptor who may meet the needs of the student in other FNP/DNP courses for which supervised practicum hours are required. The student develops a practicum plan that includes goals, objectives and proposed practicum activities. Throughout the course, the student maintains an electronic log (Typhon) which demonstrates the relationship between goals and objectives set by the student and completed activities. An electronic journal log is inclusive of the proposed practicum goals and objectives, and a description of all practicum activities with an evaluation of how the activity met the goals and objectives set by the student, and the number of completed hours are located in Typhon. The student must complete the Typhon weekly. Each time the log is submitted, hours are totaled cumulatively in the system that is accessible to the Clinical Course Faculty, Graduate Clinical Coordinator, FNP Coordinator/DNP Director and Assistant/Vice Dean.

At FNP practicum course completion, the student submits the completed final log (Typhon case logs, Typhon time logs, and other course requirements) and includes a self-evaluation that contains a summary of the overall practicum experience, identified areas of strength, areas for improvement and an action plan into Canvas and/or Typhon. In addition, the preceptor evaluates the student and the student evaluates the preceptor/site. The preceptor evaluation(s) of the student are submitted to the student or faculty directly. These evaluations are uploaded to Typhon and Canvas by the student. The student evaluation of the preceptor/site is completed electronically by the student in Typhon. All evaluations are reviewed by the faculty. The course faculty and preceptor verify the number of hours completed by the student. These hours/time logs must be signed off by the preceptor in the midterm and final week. These signed hours/time logs are required to be submitted by the student into Typhon and Canvas.

13.2.2 Student Documentation in Typhon

HFU utilizes The Typhon NPST™ - Nurse Practitioner Student Tracking System. This functions as a complete electronic student tracking system, including comprehensive collection of each student's patient encounter logs to include age, type of patient, and a comprehensive overview of clinical hours that need to be tracked during their clinical rotations. This will serve as the repository for evaluations and compliances. Students are required to upload into Typhon the documented total clinical hours, complete name and address of practice sites, site specialty, and preceptor's name, course number, and semester for each clinical course.

The system is web based, HIPAA compliant, and allows students to quickly and easily enter patient encounter information such as demographics, clinical information, diagnosis and procedure codes, medications and brief clinical notes.

As a student enrolled in the FNP/DNP program, you are required to purchase and install this product on their computer for use by graduate students in all clinical courses. Students may not enroll in NURS 805 without verification of Typhon membership.

Typhon NPST™ Instructions:

1. To facilitate your comfort with navigating within Typhon, students *are required* to watch all tutorial sessions.

2. At the completion, you should e-mail the FNP Coordinator/DNP Director.

3. Once your FULL NAME, PROGRAM, and HFU e-mail address is forwarded to the Typhon Administrator, you will be entered into the Typhon database system. You will then receive an email generated by Typhon to your HFU account with your specific login and password, along with a direct link to the login page.

4. You will then purchase access to Typhon. When you initially log-in, you are automatically directed to a credit card payment page where you pay the required Typhon fee. Once payment is approved, the system automatically activates your account and you can begin using the system.

5. Students can access the website on their handheld devices.

6. Students requiring additional technical support can access the Student Frequently Asked Questions(FAQ) found at: http://www.typhongroup.net/help/ or may complete an online support ticket through Typhon with a response time of approximately one (1) business day.

7. The "Support Tickets" page is available on your main menu when you log in to your online account. Press "Create New Ticket" and fill out the form completely, outlining your issue and any troubleshooting you have already tried.

Student Responsibility

1. It is the student's responsibility to keep and maintain an up-to-date clinical data base.

2. Expectations may vary from course-to-course.

3. Enter each day's encounters on the actual days, students have a maximum of 7 days to enter case logs and time logs from the date of the encounter.

4. Don't forget about printing and using the "blank case log worksheet" to help remind you of the data for each patient.

5. Don't forget to monitor your "missing information" screen. Clear it each day while the data is still fresh in your mind.

6. If you have a clinical question related to content entry requirements contact your clinical course faculty.

7. You are expected to provide a hard copy printout of your encounters (to date) at the time of your final clinical evaluations each semester. The students must upload print out of the total clinical hours on canvas.

13.2.3 Practicum Evaluations

Evaluation of the student in clinical practicum is completed by the student, preceptor and clinical faculty. The Clinical Performance Evaluation Tool is used throughout the program to document the progress of the nurse practitioner student. During the practicum semesters the focus is on Assessment, Diagnosis and management of acute and chronic as well as health promotion and well visits in the primary care setting. Meeting the expectations listed on the Clinical Performance Evaluation Tool occurs over the course of practicum semesters. It is essential that the faculty and preceptors expect to see continuing progress of clinical skills throughout the practicum semesters. Throughout the curriculum we expect to see continuing progress. Meeting the expectations listed on the evaluation occurs over the course of six sessions.

The expectations for a satisfactory level of performance change over time. This is a guide to help define expectations.

During each semester the student and clinical practicum preceptor complete a midterm (week 4) and a final evaluation (week 8) using the Clinical Performance Evaluation Tool. This is available on the Typhon site or Canvas. In addition to the evaluations a hard copy print out of all clinical hours will be verified by the preceptor and reviewed by the Clinical Faculty member.

13.2.4 Clinical Performance Evaluation Tool

Tools contains the following elements:

Assessment

1. Subjective Assessment

2. Objective Assessment

Diagnosis (Clinical Decision Making)

Management

1. Development and Implementation of Management Plan

    2. Treatment

    3. Demonstration of Ability to Manage Care

Evaluation

Communication

Interpersonal Skills

Two evaluation tools (a midterm and final evaluation tool) are used throughout the program to document the progress of the nurse practitioner student. Throughout six eight-week sessions the focus is on Assessment, Diagnosis, and Management of acute and chronic illness in the family/individual patient population across the lifespan in the primary care setting. The Faculty and the Assessment Committee of the University utilize the end of course, faculty and agency evaluations to evaluate the quality of the course.

13.3 Responsibilities within FNP Clinical Practicum

The following information is intended to serve as a guide for the student, Clinical Faculty, and Practicum Preceptor throughout the FNP/DNP curriculum.

13.3.1 FNP Coordinator/DNP Director

The FNP Coordinator is responsible for providing permission to each student and notifying the agency that the student is approved to start clinical practice hours.

The FNP Coordinator will notify the clinical agency and/or preceptor of any changes with the University approval or permission to conduct clinical.

The SONHS will provide Clinical Faculty site visits to preceptorship sites to evaluate the student and to assist the student and preceptor, as needed, in accomplishing the clinical learning objectives.

The FNP Coordinator is responsible for the assessment and revisions of clinical documents.

The FNP Coordinator serves as the liaison between the Graduate Clinical Coordinator and Faculty.

13.3.2 Graduate Clinical Coordinator

The Graduate Clinical Coordinator acts on behalf of the SONAHS

The SONAHS is responsible for processing and storing Preceptor Agreements, Preceptor requirements, and Affiliation Agreements with HFU University.

The Graduate Clinical Coordinator facilitates the full execution of affiliation agreements with the clinical agency. Copies of the fully executed affiliation agreements will be stored in the office of the Graduate Clinical Coordinator.

The Graduate Clinical Coordinator will verify the completion of the Preceptor Agreement Form, preceptor and/or site demographics, current curriculum vitae, copy of license, and a copy of the board certification. All documentation will be stored in Typhon.

The SONAHS will provide any required documentation or explanation per the request of the preceptor or clinical agency.

The Graduate Clinical Coordinator will partner with each student to identify clinical placements.

The Graduate Clinical Coordinator will serve as the liaison for current and new clinical sites.

13.3.4 Clinical Faculty

To serve in the role of Clinical Faculty for the FNP/DNP Program, each faculty member must have the following qualifications:

1. Must hold a current license to practice in the state where the practicum site is located.

2. FNP/DNP Clinical Faculty must have a terminal degree in nursing either academic or clinical from a NLNAC or CCNE accredited institution.

3. Must maintain a current board certification by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP) as a Family Nurse Practitioner

The clinical faculty, in collaboration with the preceptor, will arrange clinical experiences to optimize the student's personal and professional development. Specifically, the faculty will:

1. Identify clinical educational requirements and objectives with the preceptor and student.

2. Orient students and preceptors to the respective roles and responsibilities.

3. Assess the adequacy of appropriateness of clients within the preceptor environment to insure adequate student learning experiences and meeting learning objectives.

4. Ensure that appropriate agreements are signed with agencies and preceptors.

5. Respond to problems and concerns of preceptors and students.

6. Communicate periodically with the preceptor and student about progress in meeting goals and devise new strategies for attaining goals if needed.

7. Evaluate the student's clinical competency and meeting of clinical learning objectives through scheduled communication with the preceptor and in consideration of the written preceptor evaluations (midterm & final evaluations).

8. Schedule site visit as needed.

9. Evaluate the student's clinical competency via communication with student, preceptor, faculty, and through site visits as indicated.

10. Facilitate the student-preceptor-faculty relationship through continual constructive feedback.

13.3.5 FNP Practicum Preceptor

To serve in the role of Practicum Preceptor for the FNP/DNP Program must have the following qualifications:

Must hold a current license to practice in the state where the practicum site is located as a nurse practitioner (NP) or physician (MD/DO).

Must be currently practicing as a Nurse Practitioner or a Physician in a primary care or outpatient setting.

Must have a master's degree or terminal degree in their specialty.

Preceptors must maintain current board certification by a certifying body within their specialty area of practice as a NP, MD or DO (ie. American Nurses Credentialing Center [ANCC] or the American Association of Nurse Practitioners [AANP] as a Family Nurse Practitioner).

Preceptor must provide a signed Holy Family University preceptor agreement form.

The preceptor will support students by:

1. Assist the student by arranging opportunities and resources to obtain learning experiences appropriate to the course and individual learning objectives.

2. Assign patients as appropriate to the daily or course objectives.

3. Assign patients consistent with the education and experience level of the student.

4. Enable the student to perform comprehensive and focused history and physical exams, rechecking any history or physical assessment as necessary.

5. Guide the student in developing appropriate patient management plans including pharmacologic and non-pharmacologic management

6. Guide the student to develop differential diagnosis for patients

7. Encourage the student to investigate and participate in clinical inquiry or research.

8. Must be present in the agency during the student's clinical day. Remain on site when the student is on site seeing patients and be available for consultation.

9. Discuss the plan of management with the student.

10. Delegate gradually increasing levels of responsibility for patients in the identification of problems and in-patient management as student's clinical competence develops.

11. Assist the student in learning the consultation and referral process.

12. Provide ongoing verbal feedback on progress, and written midterm and final evaluations. Participate in clinical site visits, as indicated, to confer with faculty and discuss student progress. Provide appropriate charts and student materials for review.

13. Expect students to perform only those functions consistent with their role and skills.

14. Patient Records Preceptor Review and Countersignature: On each clinical rotation, it is the student's responsibility to ensure that ALL patients seen by the student are

also seen by the preceptor. The preceptor should also review all student notes written in medical records and countersign these documents.

15. Countersignature by a licensed preceptor is required before any student order may be executed.

   • Under no circumstances should a student initiate orders for any patient on any rotation without immediate consultation and countersignature of the clinical preceptor.

   • UNDER NO CIRCUMSTANCES SHOULD A STUDENT SIGN PRESCRIPTIONS. The only signature which should appear on a prescription is that of the clinical preceptor.

   • Under no circumstances may a student attend clinical without a supervising preceptor on site.

   • These guidelines must be strictly adhered to for the student's protection and the protection of the patients seen by students.

   • Notify the Director of the NP program should any problem arise that would prevent the preceptor from fulfilling the goals of the education experience for the student. It is the program's intention to have a completely open faculty-colleague relationship with the preceptor faculty.

   • Students are expected to comply with all applicable rules, regulations, policies and procedures of the clinical site. Failure to do so, may result in the student's removal from the clinical site that may cause the student to be unable to attain the required competencies and therefore result in failure of the clinical practicum which will result in a clinical failure for the course.

13.3.6 Responsibility of the Student

The Students are responsible for being self-directed in identifying initial and ongoing learning needs, for seeking learning opportunities to meet identified needs, and for being accountable for their performance in advanced practice nursing. The Student responsibilities include:

Understand and practice within the scope of advanced nursing practice as regulated by the Pennsylvania Nurse Practice Act.

Provide and complete any required agency documentation. It is the student's responsibility to discuss with Clinical Faculty, preceptor, and clinical agency contacts to assure validation prior to arrival.

Come to clinical prepared to assess clients, present information to preceptors and participate in clinical decision-making regarding client management.

Utilize resources on site to further your knowledge base as needed.

Discuss goals & objectives for fulfilling the clinical requirements with the preceptor.

Provide written documentation of educational and clinical experiences that meet goals and objectives in Typhon.

Maintain weekly clinical logs and Time logs in Typhon.

Maintain a collegial and professional relationship with preceptor and faculty.

Provide evidence of self-evaluation of clinical performance and the attainment of learning objectives.

Assume responsibility for individual learning needs through assessment of own strengths and limitations.

Report to the preceptor and clinical faculty immediately if unable to meet clinical experience commitment.

Communicate to the preceptor and faculty immediately about any problems that may arise during the clinical experience.

Supply preceptor(s) with copies of syllabi, course objectives, and clinical evaluation tools at the outset of the experience.

Establish a clinical schedule with the preceptor and notify him / her of any changes in a timely fashion.

Follow clinical agency policies and procedures.

Report all significant information regarding the patient and /or family to the preceptor.

Have a treatment plan approved by the preceptor prior to implementation.

Have the preceptor approve all written information prior to writing in the medical record, entering in the computer, or performing dictation.

Schedule the conference with the student, faculty and preceptor.

Provide a clear understanding of your role to all staff members. Remember you are a guest in the facility, so please try to be helpful when possible.

Initiate and arrange for a midterm and final evaluation conference with the preceptor.

Patient Records Preceptor Review and Countersignature: On each clinical rotation, it is the student's responsibility to ensure that ALL patients seen by the student are also seen by the preceptor. The preceptor should also review all student notes written in medical records and countersign these documents.

Countersignature by a licensed preceptor is required before any student order may be executed.

Under no circumstances should a student initiate orders for any patient on any rotation without immediate consultation and countersignature of the clinical preceptor

14.0 DNP LEADERSHIP PRACTICUM

Informed by The Essentials of Doctoral Education for Advanced Nursing Practice (2015), practice experiences for postmaster's entry students are designed for opportunities to expand on proficiency and mastery of APRN or systems competencies. Graduates are expected to collaborate with other professionals in complex health environments with diverse populations

to translate and apply evidence for clinical decision making. They are also leaders in developing, evaluating and disseminating standards of care while advocating for policy and initiatives that improve health outcomes and systems.

There are four DNP Leadership courses (725 A, 725 B, 735 A, 735 B) with practicum/clinical hours.

Students are responsible for identifying an appropriate location and preceptor for the practicum experience. Students must secure an acceptable site prior to the beginning of the practicum course.

Each student may select a preceptor with experience in leadership to provide guidance and direction for attainment of learning goals. In concurrence with the student's assigned faculty member, a learning agreement including expectations, student learning outcomes and means of measuring success will be executed. During the practicum, students must advise their preceptors of course requirements and personal learning objectives. Students are also responsible for submitting weekly activities log of the practicum experience including accurate reflections on activities and attainment of course outcomes and specialty competencies.

Each assigned faculty member is responsible for evaluating a student's performance and all associated assignments completed during the practicum experience. Students are responsible for making travel arrangements and incurring all related expenses.

Students must be scheduled and are responsible for completing a minimum of 125 hours of practical experience per session in an approved setting. HFU allows flexibility in scheduling these hours. The requirement may be met with full days, partial days or consecutive days as agreed upon with the preceptor.

All practicum experiences must be recorded in a clinical log, which includes verification of hours. Documentation must demonstrate activities related to course outcomes, AONE competency, DNP Essentials and the student's learning agreement. All documentation must be submitted to Canvas for successful completion. At graduation the student must have recorded all required leadership practicum hours and essential practicum work.

14.1 Criteria for Leadership Preceptor and Site Selection

Ensure there is an Affiliation Agreement. Collaborate with Graduate clinical coordinator regarding this.

The site must be a healthcare-related organization or nursing institution, according to the needs of the specialty (e.g., a hospital, outpatient clinic, long-term care facility, home care services, school or college of nursing).

Preceptor must hold a master's degree or above, but does not have to be in nursing

It is not required that the preceptor be a registered nurse

Selected preceptor cannot be a direct report or supervisor of the student

Preceptor cannot be a member of the student's family (immediate or extended)

Preceptor must hold a position that does not have the same roles and responsibilities as the student's current position (e.g., Nurse Manager ICU vs. Nurse Manager Surgical Services)

Preceptor must hold a leadership position in health care

The site may be in the institution where the student is currently employed, but must be outside of the normal work area.

Students must meet the institution's HIPAA compliance requirements prior to start of the practicum experience.

Students must have an active and unrestricted nursing license in the state where they wish to complete the practicum.

The site may request various requirements of the student. It is the student's responsibility to ensure all site requirements are understood and completed prior to the beginning of the practicum. This can include but is not limited to: background check, drug or urine screening, immunizations, proof of health insurance, etc.

An agreement or contract between HFU and the site are required. It is important that the student identify the proper point of contact at the site to assist in this matter in collaboration with Graduate clinical coordinator.

All agreements must be completed prior to the beginning of the practicum course and course registration. In the event an agreement is not completed, a delay in starting the practicum will occur.

Ethical Behavior Students are expected to present professional demeanor, behavior, appearance and communication at all times. Students are bound by the American Nurses Association Code of Ethics. Students also must agree to abide by all the rules and regulations of the practicum site.

14.2 Roles and Responsibilities

14.2.1 Faculty Role

During the course, the instructor should be available via email or telephone to provide support to the student and the preceptor.

It is incumbent upon the instructor to assure that the site is not misappropriating the student's time and/or utilizing the student as it would a full-time employee but instead, is facilitating learning

The instructor's role is to maintain ongoing and effective communication throughout the practicum experience.

The instructor is responsible for the final evaluation of the student's learning.

14.2.2 Graduate Clinical Coordinator Role

Contact the site and confirm all needed compliance forms

Confirm compliance agreement and needed requirements are in place between the site and the student prior to practicum registration

Contact preceptor, providing the course syllabus, preceptor manual, practicum information from the handbook and contact information of the faculty and practicum coordinator

Be a conduit if preceptor changes are requested by student

Follow up with preceptors, students and faculty about the overall practicum experience upon the completion of the course

14.2.3 Role of Practicum Preceptor

Cooperate with HFU faculty to promote student success in the practicum

Orient the student to the facility environment and policies

Design suitable experience situations as described in the course outcomes and student-learning agreement

Serve as preceptor for students in professional development

Participate in initial conference call with student and practicum-course instructor during the first week of the course

Provide constructive feedback to students about their performance in the practicum setting

Agree to not discriminate by race, creed, color, religion, sex or national origin

Respond to practicum-course faculty requests for updates during Weeks 4 and 8 as to the progress of the student

Provide feedback to HFU as requested

14.2.4 Responsibilities of the Student

Meet eligibility and course requirements.

Conduct oneself in a professional manner during the practicum assignment

Accept instruction from facility personnel as a learning opportunity

Maintain communication with the course faculty

Comply with all facility requirements (e.g., liability insurance, background screening, physical examination, drug screening and current immunizations)

Evaluate the practicum experience and perform a self-evaluation on the practicum assignment

Students should email a copy of this handbook to their mentors to ensure that both understand course requirements.

Students may direct all questions about the practicum to the FNP coordinator graduate clinical coordinator at graduateclinicals@holyfamily.edu

15.0 ACADEMIC TESTING

Faculty are not obligated to provide a pre-test review. Pre-test reviews are at the discretion of the course faculty. If faculty choose to conduct an exam review, the review will be student led.

If pre-test reviews are given, the pre-test review should focus on concept clarification and student questions. At no time will handouts, study guides, or worksheets, etc. be provided prior to or during a pre-exam review session. Content will not be re-taught during an exam review. No recording is permitted during a pre-exam review session.

Blueprints are provided by course faculty. The blueprint will be posted at least one week prior to the exam for students to use as a guide for exam preparation. The blueprint will include the category of content (i.e., topic) and the approximate number of questions (e.g., 3-5). This may be revised at any time, without notice, upon discretion of the faculty.

In taking an exam, the student agrees to abide by the SONHS Professional Behavior policy which is found in the DNP handbook and Graduate catalog.

All students will be held accountable for complying with the Testing Policy during each exam. Students who choose to not comply with the Testing Policy will not be permitted to take the exam and will receive a "0" for the exam.

The Canvas test is the official record of the student's exam. No credit will be given for work completed in any place other than the Canvas exam. No credit will be given for any questions skipped or missed for any reasons.

All examinations are timed.

No food is permitted in the room during an exam.

Electronic devices, including but not limited to, phones, earphones, headphones, air pods, and smart watches are not permitted to be on the student's person during the exam.

All devices must be turned to the OFF MODE and placed out of the student's view along with school bags, papers, books, notes, hats, jackets, hoodies, lunch bags, etc. The only item permitted on the student's head is a religious covering.

It is preferred that students use the bathroom prior to the start of an exam. Students may use the bathroom during an exam.

Students taking a bathroom break do not receive additional time to complete their exam.

 For online exams students must be actively testing within ten minutes of the assigned start time.

In the event of technical difficulties, students must email their professor immediately. If the student is not actively testing within 10 minutes of the exam start time, the course faculty will

create and schedule an alternate exam for the student. This exam may not follow the exam blueprint and may contain questions in alternate formats at the discretion of the professor.

Once a student elects to open an online exam, the student's examination effort cannot be rescinded. Once the online exam is accessed, the examination effort is considered to have begun.

Students are encouraged to use good judgment in deciding whether to access an examination.

15.1 Online Exams

The students are required to have access to a working laptop or desktop computer equipped with a microphone and a camera for all online exams. Neither a cell phone nor a tablet is not an acceptable device for testing. It is recommended, where possible, that the student have access to a second device that is suitable for online testing in the event the first device fails.

The student is required to adhere to the Academic Integrity policy during all online exams*.*

The SONHS graduate program uses Lockdown browser and Respondus Monitor, a remote proctoring system via canvas for all online exams.

Once the exam is complete, there is no opportunity to have any part of the exam reopened.

The responsibility for knowing and understanding the School of Nursing's position and policies on academic testing rests with each student.

Students must follow all the test-taking requirements to take the exams through an online format. Students must take the quiz/exam through Canvas quizzes with the use of the Lockdown browser and Respondus Monitor, a remote proctoring system.

In the event that a student experiences technical difficulty during an exam and loses access to the exam, the student must contact the IT/Help desk to troubleshoot the tech issue and must contact the Professor to have time added to the exam attempt. No time will be added after an exam is over and no additional attempts at an exam will be offered.

Students must be seated at a desk or table. Exams may not be taken while in bed, on the couch, or any other surface that is not a desk or a table.

Lighting must be sufficient in the room to view the entire workspace during the room scan.

The workspace must follow the requirements (free of papers/phones/calculators/electronic devices, etc.).

Students may not wear hats, hoodies with the hood up, blankets, or any other item that obstructs the view of the student's face during testing.

Lighting must be sufficient throughout the entire exam to easily see the student's expression and eye movement.

The student's entire face, shoulders, and upper arms must be visible on the entire recording.

Failure to follow any of the guidelines listed here may result in the student being awarded a "0" (zero) for the exam.

For online courses and online exams, post exam reviews will not be provided. Instructors will post an announcement regarding the general themes with which the class had difficulty on the exam. ***

15.2 Missed Exam

If a student is absent for a quiz or examination, the student is required to notify the course faculty before the scheduled exam. Failure to contact the course faculty may result in a grade of zero for the exam with no additional make-up exam being offered.

If a student fails to sit for an examination, a make-up exam is offered at the discretion of the course faculty

The student must contact the faculty member within 24 hours of the start of the exam to request a make-up exam. In the event a make-up examination is offered, the faculty member will determine the date, time, and format of the make-up examination. If a student misses both the regularly scheduled examination and the makeup examination, the student may earn a grade of zero for that examination.

The course faculty maintains records regarding makeup exams and quizzes. Students making repeated requests for makeup exams and quizzes will be required to meet with the course faculty to address academic progression issues.

No numerical adjustment (e.g., curve, questions eliminated, more than one answer taken, etc.) will be applied to a make-up exam.

All make-up exams will assess knowledge of the same nursing concepts as in the scheduled exam, consistent with the exam blueprint. The format and number of items on the make-up exam may vary.

16.0 THE DOCTOR OF NURSING PRACTICE SCHOLARLY PROJECT AND RESIDENCY

The goal of the DNP program is to prepare nurses for advanced practice roles and as clinical scholars skilled in the application of theory and research, evidence-based practice, advanced clinical practice, measurement of patient outcomes and transformation of health care systems to ensure quality and safety. The purpose of this section of the Program Handbook is to provide an overview and guidelines for the Doctor of Nursing Practice Scholarly Project and Residency.

The DNP curriculum culminates with a final project and clinical immersion experience. The DNP Scholarly Project and Residencies represent the results of independent scholarly inquiry and contributes to the nursing profession and the student's personal growth in nursing leadership, health policy, and evidence-based practice. Together with the final project, the immersion provides evidence of the student's advanced understanding of relevant literature and policy/practice issues, documents the outcomes of the student's educational experiences, implements and disseminates a scholarly project.

16.1 Doctor of Nursing Practice Residency

The DNP residency is designed to provide the DNP student with a comprehensive clinical experience individually designed to meet the professional and clinical goals of each DNP student. Residency provides an opportunity for further synthesis and expansion of learning. In addition to clinical practice the HFU DNP students are expected to identify evidence-based practice changes in a clinical setting. Students pursue independent study, such as participation in presentations, rounds and seminars. Students integrate literature review and clinical experience to increase complex and proficient practice.

Graduates of the DNP program are expected to demonstrate highly refined clinical and professional skills in conjunction with their mentor, content expert, and/or faculty. Proficiency may be acquired through a variety of methods, such as attending case conferences, practice contact hours, demonstrating experiential competencies, or a combination of these elements.

Graduates of the program will acquire and are expected to demonstrate proficient knowledge, skills and abilities that enhance advanced clinical practice including:

- Refined communication, reflection and scholarly skills

- Advanced scientific foundation

- Patient care expertise with emphasis on independent and inter-professional collaboration

- Analytic skills for appraising, implementing, and evaluating evidence and literature

- Direct and indirect patient care across populations and settings

- Advanced knowledge of health policy and health care delivery systems.

The essential components of residency courses are scholarly activities, reflective journaling combined with documented achievement of competencies, and submission of a scholarly paper based upon their Scholarly Project. The DNP student assumes an expanded scope of practice for patients; provides leadership to foster interprofessional collaboration, demonstrates skills in peer review that promote a culture of evidence, and apply clinical investigative skills to evaluate health outcomes.

Students must demonstrate the ability to write scholarly and influence evidence-based practice. The clinical experiences can include a wide variety of sites where the DNP student demonstrates autonomous practice, leadership, practice inquiry, and policy as part of the fabric of professional preparation for the NP with a practice doctorate (NONPF, 2010). Gaps in clinical experience and professional growth to meet DNP competencies are identified at regularly scheduled conferences with their faculty advisor and/or mentor. Individual

arrangements are made to enhance and expand the practicum. Experiences may include ambulatory, inpatient, outpatient, long-term, academic settings, rehabilitative, and subspecialty care.

16.1.1 DNP Residency Courses

The completion of the required clinical residency hours and the DNP Scholarly Project is achieved through the DNP Scholarly Project and the DNP Residency. Each DNP Scholarly/Residency course (NURS 802, 803, 901, 902, 903, 904, 905, 906) are eight weeks in length. Four courses (NURS 802, 803, 903, 904) are focused on the progressive development of practice inquiry knowledge and skills, ability to apply research, clinical practice, and leadership principles through the DNP scholarly project development. Four courses (NURS 901, 902, 905, 906[906- leadership track only]) are designed as residency hours with outcomes intended to demonstrate achievement of the DNP Scholarly Project and the DNP Essentials. Each DNP-FNP student completes a minimum 374 total residency hours. Each APRN-DNP Leadership student completes a minimum of 500 residency hours. Each MSN-DNP Leadership student will complete a minimum of 500 residency hours (Total of 1000 hours in the program). Residency and Scholarly Project courses can be repeated if the course objectives are not achieved.

16.1.2 Course Requirements

The DNP Residency course which require completion and verification of clinical hours:

- NURS 901 DNP Residency I- 150 hours (FNP track); 125 hours (leadership track)
- NURS 902 DNP Residency II- 112 hours (FNP track); 125 hours (leadership track)
- NURS 905 DNP Residency III -112 hours (FNP track); 125 hours (leadership track)
- NURS 906 DNP Residency IV- 125 hours (leadership track)

All hours are logged into a Residency log or Typhon by the student.

Each student maps the DNP Essentials in each residency course. All essentials must be mapped at the completion of your final residency course.

16.1.3 Doctor of Nursing Practice Residency and Academic Affiliation Agreements

Appropriate mentors for the DNP residency immersion experiences include a wide variety of potential experts from which the student may choose. These include, but are not limited to: providers, nurse executives, senior clinicians, skilled informaticists, leaders in health policy development, and leaders from other disciplines with expertise relevant to the DNP student's area of scholarly focus and objectives. All residency mentors must have a professional doctorate or a research doctorate.

The responsibility to identify residency mentors and initiate the request to work is a shared responsibility between the student and the DNP scholarly project faculty advisor/Associate Dean. Students must receive permission for all residency placements. Any residency hours accumulated under non-approved circumstances will not be counted toward residency hours

required for completion. DNP students may complete their residency experiences within their place of employment, as long as the experiences differ from their standard assignment.

No student may begin mentor residency hours until approved and notified by the FNP Coordinatot/Graduate Clinical Coordinator.

Affiliation Agreements are necessary for placements in clinical agencies. If the clinical agency is not listed on the affiliation agreement list, found on the DNP Scholarly Project site (www.holyfamily.edu/dnpscholarlyproject), the student is responsible for submitting a request for a new affiliation to the Graduate Clinical Coordinator. Please include the contact person, site, address, and contact information in your request. Affiliation agreements may take up to 90-120 days to secure and may not be guaranteed.

The DNP Director/FNP coordinator/Graduate Clinical Coordinator work in conjunction with the agencies to assure that valid affiliation agreements are in place.

Students have met all compliance and documentation requirements prior to placement.

Students are required to submit the mentor's CV/resume and completed and signed mentor agreement form to the DNP Scholarly Project site (www.holyfamily.edu/dnpscholarlyproject). Students will receive a confirmation email upon submission, and are required to save this document for future reference and course requirements.

16.1.4 Residency Documentation and the Time Log

All DNP Residency hours are documented in either Residency log or Typhon system. Typhon is a clinical data management system that will aide in the student clinical experience and job search after graduation. Students pay a one-time fee to register for Typhon and can use the system through the clinical courses and after graduation. Typhon will be used to log hours, residency and leadership experiences, create an electronic student portfolio, manage external documents (resume, clinical schedule), generate reports of residency experiences, administer evaluations, and store site and mentor information.

Practice immersion experiences afford the opportunity to apply, integrate, and synthesize the DNP Essentials necessary to demonstrate achievement of desired outcomes in an area of advanced nursing practice. Students must have a mentor in the clinical area and must keep a log of residency and leadership hours. Clinical hours may consist of mentored learning that provides a broad range of activities; in addition to autonomous clinical hours such as leadership, practice inquiry, and policy, Essentials Competencies (AACN, 2006).

Residency hours which counts:

Time spent with a mentor in an area of specialization (hours dedicated to DNP level experience and beyond the student's current role).

Special projects related to advanced nursing practice specialization.

Time spent in a clinical agency's committees.

Time spent in formal skill building to develop, implement, or evaluate scholarly project (such as tutorials, meetings, consultation with experts, professional, or community conference attendance).

Time spent participating in a health initiative in the agency, healthcare system, state or national agency.

Time in the healthcare organization working on some aspect of the scholarly project.

Residency hours do not include:

Time spent in activities required for another FNP/DNP course.

Time spent in conferences that are counted toward a course in which you receive credit.

Time spent traveling to and from conferences.

Time spent during hours of work in current position.

Time spent in CE programs will be applied to DNP clinical hours on a case-by- case basis (faculty approval required).

Students are responsible and required to document all residency hours and the alignment to the DNP Essentials. Hours that are not documented do not count!

16.2 DNP Residency and Essentials Map

All graduates will demonstrate the competencies delineated in *DNP Essentials* I through VIII. Each residency goal should be mapped to *Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006). Students must demonstrate achievement of each *DNP Essential* through the cumulative residency experiences (NURS 901, 902, 905, (906-Leadership tracks) and DNP Scholarly Project (NURS 802, 803, 903 and 904) for successful completion of the program.

Each DNP Essential should have a minimum of at least one activity completed to meet that Essential. Each objective must be directed towards the student's area of focus. As defined in The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006), there are two general categories/roles that specialize as an advanced practice nurse (APN) with a focus on care of individuals, and roles that specialize in practice at an aggregate, systems, organizational level.

The Leadership track focuses on health of the populations, systems (including information systems), organizations, and state or national policies. The indirect provider is required define actual and emerging problems and design aggregate level health interventions. These activities require that DNP graduates be competent in advanced organizational, systems, or community assessment techniques, in combination with expert level understanding of nursing and related biological and behavioral sciences. In addition to identify aggregate health or system needs, DNP graduates should develop competencies needed for working with diverse stakeholders for inter- or intra-organizational achievement of health-related organizational or public policy goals and designing patient-centered care delivery systems or policy level delivery models.

16.2.1 Guidelines

At the completion of each Residency course, students must submit the DNP Residency and Essentails Map to the DNP faculty advisor. The map is a cummuliative expereince of the DNP Porgram.

In collobration with the clinical mentor, the minimum requirement is one activity completed to accomplish an Essential (all Essentials should be achieved)

You may not repeat an activity from a the previous course in the series (NURS 901, 902, 905, 906)

17.0 DNP SCHOLARLY PROJECT

The essential components of the DNP program are scholarly activities, reflective journaling combined with documented achievement of competencies and submission of a scholarly paper based upon their Scholarly Project. The DNP student assumes an expanded scope of practice for patients; provides leadership to foster interprofessional collaboration, demonstrates skills in peer reviews that promote a culture of evidence, and apply clinical investigative skills to evaluate health outcomes.

17.1 Project Overview

The final scholarly project in the Doctor of Nursing Practice (DNP) program is called the DNP Scholarly Project (not capstone or dissertation). The DNP project integrates the practice and scholarship elements of the DNP degree. It is a practice-based project and aligns with the DNP residency specific requirements. It is designed to address a practice issue affecting groups of patients, health care organizations, or health care systems. Students will work with clinics, inpatient units, hospitals, urgent care, long-term facilities, governmental agencies, academic settings, community organizations, advocacy groups, or health care systems to assess, plan, implement, and evaluate a practice problem or policy issue of local, national, or global significance. DNPs must demonstrate through knowledge synthesis, skill refinement and the completion of the scholarly project that are prepared for doctoral nursing practice.

The DNP Scholarly Project is a culmination of knowledge gained through the DNP coursework. Students have the opportunity to focus their project with support from coursework. It is expected that students will collaborate with stakeholders to influence health care quality and negotiate successful change in care delivery processes for individuals, groups or populations across a broad spectrum of healthcare delivery systems. The project should exemplify advanced clinical judgment and expertise in a defined content area; critical thinking and accountability in designing, delivering, and/or evaluating evidence-based care to improve health care quality, safety, and outcomes; and leadership in the development and implementation of patient-care policy.

Each DNP student will develop and execute the DNP Scholarly Project to include the purpose, plan, implementation, evaluation and/or outcomes, and dissemination of findings. The project will allow the student to utilize and apply the concepts and skills attained throughout the program. The student will identify a problem or need within their practice area. They will develop an in- depth understanding of the issue through a review of the research

literature and examination of the aspects significant to the problem. The project will be developed in partnership with the targeted system or community. Students must also take into consideration and involve the system and stakeholders.

All DNP Scholarly Projects should (American Association of Colleges of Nursing, 2015):

- Focus on a change that impacts healthcare outcomes either through direct or indirect care.

- Have a system (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)

- 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.

17.2 RESPONSIBILITIES WITHIN THE DNP SCHOLARLY PROJECT

17.2.1 Primary Faculty Advisor

The primary faculty advisor serves as leader of the student's DNP Project, advises the student, assists in narrowing and focusing the study topic, and guides the student in the project's development, implementation, evaluation, and timely completion. Specifically, the primary faculty advisor responsibilities are to:

- Review and critique the student's DNP Project paper and provide feedback to them regarding any further revisions that you recommend.

- Assume the role as the Principal Investigator (PI) for the student's study when submitting to IRB. Sign the IRB application as the Principal Investigator. The student, however, is responsible for completing and submitting approved IRB proposals and forms to HFU and external IRB(s).

- Assume the role of primary advisor for students. Review and grade all assignments.

- Meet with the student on a regular basis for study oversight. Student should schedule monthly meetings (or as necessary) with the primary faculty advisor to ensure that the study and data collection are following IRB approved guidelines, discuss updates, and

- identify and solve problems encountered

- Oversee the student's study progress to ensure they are complying with project deadlines necessary for study completion according to the timeline.

17.2.2 Doctoral Team

The Doctoral Team will consist of the student's primary faculty adviser and the DNP Team lead.

The Team serves in an advisory capacity to the student and assures that the project is feasible in scope and of sufficiently high quality to demonstrate the student's competence as a leader in the healthcare system. The DNP faculty in conjunction with the DNP Team Lead will work with the student in developing the initial plan for the project and will provide final approval.

Advise and ultimately approve the proposed DNP Scholarly project.

To be available to the student for consultation regarding the project.

Review and approve the final poster presentation of the DNP scholarly project.

17.2.3 Student

Communicating regularly with the DNP Team regarding programs, goals and plans.

Communicating with DNP Team (Faculty advisor and DNP Team Lead) on a regular basis regarding progress, scheduling meetings, including comprehensives/ proposal hearing, and final oral presentation.

Becoming familiar with and complying with all relevant policies and procedures as set forth by the School of Nursing and Health Sciences.

Reporting problems that delay progress in completing the degree requirements to the faculty advisor and the DNP Team Lead.

It is the student's responsibility to complete all components of the DNP scholarly project and paper, including data analysis and dissemination of the scholarly project.

17.3 INSTITUTIONAL REVIEW BOARD (IRB) & HUMAN SUBJECTS PROTECTION

Any use of human subjects, animals, biohazardous materials, or radioisotopes for research purposes must be reviewed and approved by the IRB before the research is conducted. This approval cannot be obtained retroactively and cannot be granted by the advisers or doctoral committees. The mission of the Institutional Review Board at Holy Family University is to encourage the formation of persons of integrity by upholding high ethical and professional standards in the use of human subjects in scientific research. Mindful of service to human needs, the IRB will instill in our campus community a passion for truth, which is rooted in a Judeo-Christian worldview. Grounded in this Judeo-Christian tradition, research on human subjects will support the contemporary development of knowledge and a vision for the future

This review is part of the HFU policy on ethics in research. It provides legal assurance for the commitment that the HFU has made to the federal government regarding the protection of human and animal subjects. Violations of the policies on these matters are a serious breach of the trust placed in researchers by the scholarly community and society. All IRB forms and instructions are located on the Holy Family Website. https://www.holyfamily.edu/about-holy-family-u/our-campuses-in-philadelphia/research-irb

17.4 DNP SCHOLARLY PROJECT TEMPLATE

The DNP Scholarly Project Paper should be in the current version of APA-Professional format. The final submission should combine all sections written for the DNP scholarly paper and include the following:

Section I. Title and Abstract

a. Title
b. Acknowledgments
c. Dedication (optional)
d. Abstract

Section II. Introduction

a. Introduction to the paper
b. Background and significance to health care
c. Needs assessment
d. Problem
e. Purpose Statement
f. PICO(T) Question
g. Aims & Objectives

Section III. Methods

a. Review of Literature
   1. Literature Review Methods
   2. Literature Review of the Evidence
   3. Analysis of Central Concepts of Project
   4. Evidence Summary and Practice Implication
   5. Evidence Based Model: Conceptual and Theoretical Framework
b. Gap Analysis
c. Context.
   1. Key definitions
   2. Key Stakeholders
d. Methodology: Study of Intervention
   1. Project Design and Setting
   2. Population
   3. Inclusion/Exclusion Criteria
   4. Analysis of organization readiness for change
   5. Ethical aspects and protection of participant rights
e. Methodology: Study of Implementation

   1. Description of Intervention
   2. Data Collection Process
   3. Data Collection Logistics
      a. Implementation Timeline
      b. Proposed Budget, Time, and Resources Plan
      c. Responsibility and communication plan

<div style="text-align: center">d. Cost benefit analysis</div>

f. Evaluation Plan

Section IV. Discussion

    a. Relation to other evidence
    b. Barriers to Implementation
    c. IRB approval and Process discussion
    d. Interprofessional collaboration

Section V. Results

a. Program Evaluation/Outcomes
b. Summative and Discussion
c. Significance or implications
d. Interpretation
e. Plans for future scholarship
f. Impact of Results on Practice
g. Recommendations for practice
h. Mapping to the Essentials

Section VI. References

Section VII. Appendices

17.5 DNP PROJECT PRESENTATIONS AND DISSEMINATION

As the final requirement of the DNP Scholarly project, students will disseminate their project findings to the University. The students are expected to do a poster presentation as part of their dissemination. Poster guideline and template will be provided by the primary faculty advisor during the final DNP scholarly project course. All DNP poster presentations will be scheduled by the Vice Dean/DNP Team Lead and Director.

Revised/Updated Effective Fall 2023 JM/EM/DM