

Samuel Merritt University

College of Nursing

Doctor of Nursing (DNP)
Student Handbook

2022-2023

Message from the Department Chair

Dear DNP Students:

Welcome to Samuel Merritt University's Doctor of Nursing Practice Program! It is estimated that approximately 1% of nurses have achieved doctoral degrees. This means that you will join an elite group of nursing professionals who possess the distinction of the doctoral degree, but also that you have the responsibility to take the lead in transforming health care. As practice specialists, DNP graduates will be poised to take on that challenge by implementing evidence-based practice change – one setting, one project at a time.

At SMU, the faculty and staff are eager to support you in successfully navigating and completing the program. Although our program is primarily delivered online, support is never more than a phone call, text or e-mail away. Learning who to contact and where to find information when you need assistance is an important concept. This handbook is just one of many resources to help you acclimate to the online learning environment and SMU.

In this handbook, you will find the academic policies of the DNP Program. Please familiarize yourself with the contents of this program's student handbook, as it contains the behavioral and educational objectives upon which you will be evaluated. We encourage you to also review the *Samuel Merritt University Catalog and Student Handbook*, as we refer to both of these within this handbook. An electronic copy can accessed via the University website at: https://www.samuelmerritt.edu/catalog. Keep both amongst your important documents pertaining to your doctoral studies, as you will refer to these frequently throughout the program.

Beginning a doctoral program is equally exciting and anxiety-provoking. As we know, doctoral education is a substantial commitment and life's responsibilities will often compete for your time and attention. However, you are *NOT* alone. You will have a team of faculty and mentors working with you every step of the way. Please do not hesitate to reach out if ever/whenever you are experiencing difficulties. Again, the faculty and staff welcome you to our program. We are eager to partner with you in achieving your educational and practice goals.

Sincerely,

Dr. Mary Wyckoff, PhD, MSN, FNP-BC, ACNP-BC, NNP-BC, CCNS, CCRN, FAANP Professor, Interim DNP Program Director Doctor of Nursing Program Specialty DNP Director of Projects

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DNP Pre-Orientation Checklist:

Did you....

☐ Check the technology requirements (computer specifications, etc.) and obtain the necessary computer and software? (See https://www.samuelmerritt.edu/information-technology/tech-specs).
☐ Forward your SMU email to your personal email account? All email communication from the School of Nursing and the DNP Program will be sent using your SMU email address.
□ Register for classes?
☐ Purchase or rent any required course textbooks?
□ Complete the Online Orientation Course?
☐ Complete the requirements for student health?

If you have questions, please contact program Administrative Assistant Paige Baca at pbaca@samuelmerritt.edu

SMU College of Nursing Missing, Vision and Values

We are committed to educational innovation in theory and practice to prepare highly competent professional nursing leaders who are engaged in the advancement of nursing practice and the improvement of health for diverse populations.

Our Values

Social Justice: We believe in a fair, equitable, ethical, respectful, and dignified environment.

Evidence-based: We believe in the conscientious, explicit, and judicious use of current best evidence in guiding nursing education and clinical decisions about the care of individuals, groups, and communities.

Culture: We are committed to self-evaluation and self-critique to redress power imbalances and to develop and maintain mutually respectful and dynamic partnerships with individuals, groups, and communities. We recognize that culture matters in clinical care and in the Educational environment. Culture comprises multiple variables and is a process of meaning-making in which faculty and students are engaged with others.

Lifelong Learning: We are committed to life-long, continual self-assessment and the conscientious and diligent pursuit of excellence.

Compassion and Caring: We treat those we serve and one another with concern, kindness, and respect.

Collaboration and partnership: We continually seek to collaborate with a focus on merging the insights of persons with differing perspectives and recognition of other's concerns and expertise with a high degree of assertiveness and cooperation to jointly develop integrated solutions.

Student Opportunities for CoN Committee Participation

DNP students have opportunities to participate in any of the following CoN Governance Committees: Curriculum, Evaluation, Student Affairs, and Scholarship and Service. Student representatives will be selected by the Student Body Association (SBA). If the SBA fails to select a student, the respective committee chairperson will select a student representative. Student representatives are voting members. Student representation is a vital component of the CoN, either as a designated participating representative or as an interested attendee. For additional information or if you are interested in participating in any of these committees, please contact VP of Student Services for more information regarding the SBA.

Student Feedback and Suggestions

The DNP faculty, staff, Special Projects Director and Program Director welcome your feedback and suggestions. There are opportunities to provide this anonymously by way of the annual student and alumni surveys, as well as both mid-course and end of course evaluations each semester. Course concerns should first be addressed to the respective faculty of record, then to the Program Director if not resolved.

Graduate Academic Calendar

SAMUEL MERRITT UNIVERSITY ACADEMIC CALENDAR

(ABSN, Physical Therapy and Podiatry should use their specific program calendar)

	2021/2022	2022/2023	2023/2024	2024/2025
FALL TERM	FALL 2021	FALL 2022	FALL 2023	FALL 2024
Classes begin	9/7/2021	9/6/2022	9/5/2023	9/3/2024
Add/drop period	9/7 - 9/17	9/6 - 9/16	9/5 - 9/15	9/3 - 9/13
Last day to register	9/17/2021	9/16/2022	9/15/2022	9/13/2022
Spring term advising	11/1 - 11/12	10/31 - 11/11	10/30 - 11/10	11/4 - 11/15
Spring term registration	11/15 - 11/19	11/14 - 11/18	11/13 - 11/17	11/18 - 11/22
Thanksgiving break	11/24 - 11/26	11/23 - 11/25	11/22 - 11/24	11/27 - 11/29
Commencement	Please	see SMU Comme	ncement page for	details
Last day of Fall term classes	12/10/2021	12/9/2022	12/8/2023	12/6/2024
Final examinations	12/13 - 12/17	12/12 - 12/16	12/11 - 12/15	12/9 - 12/13
Grades due in Registrar's Office	12/24/2021	12/23/2022	12/22/2023	12/20/2024
SPRING TERM	SPRING 2022	SPRING 2023	SPRING 2024	SPRING 2025
Classes begin	1/3/2022	1/3/2023	1/2/2024	1/2/2025
Add/drop period	1/3 - 1/14	1/3 - 1/13	1/2 - 1/12	1/2 - 1/10
Last day to register	1/14/2022	1/13/2023	1/12/2024	1/10/2025
Martin Luther King, Jr. holiday	1/17/2022	1/16/2023	1/15/2024	1/20/2025
President's holiday break	2/21 - 2/23	2/20 - 2/22	2/19 - 2/21	2/17 - 2/19
Summer term advising	3/7 - 3/18	3/6 - 3/17	3/11 - 3/22	3/10 - 3/21
Summer term registration	3/21 - 3/25	3/20 - 3/24	3/25 - 3/29	3/24 - 3/28
Last day of Spring term classes	4/8/2022	4/7/2023	4/5/2024	4/4/2025
Final examinations	4/11 - 4/15	4/10 - 4/14	4/8 - 4/12	4/7 - 4/11
Grades due in Registrar's Office	4/22/2022	4/21/2023	4/19/2024	4/18/2025
SUMMER TERM	SUMMER 2022	SUMMER 2023	SUMMER 2024	SUMMER 2025
Classes begin	5/2/2022	5/1/2023	5/6/2024	5/5/2025
Add/drop period	5/2 - 5/13	5/1 - 5/12	5/6 - 5/17	5/5 - 5/16
Last day to register	5/13/2022	5/12/2023	5/17/2024	5/16/2025
Commencement		see SMU Comme		details
Memorial Day holiday	5/30/2022	5/29/2023	5/27/2024	5/26/2025
Independence Day holiday	7/1 - 7/5	7/3 - 7/5	7/3 - 7/5	7/2 - 7/4
Fall term advising	7/11 - 7/22	7/10 - 7/21	7/8 - 7/19	TBA
Fall term registration	7/25 - 7/29	7/24 - 7/28	7/22 - 7/26	TBA
Last day of Summer term classes	8/5/2022	8/4/2023	8/9/2024	8/8/2025
Final examinations	8/8 - 8/12	8/7 - 8/11	8/12 - 8/16	8/11 - 8/15
Grades due in Registrar's Office	8/19/2022	8/18/2023	8/23/2024	8/22/2025

Doctoral Education in Nursing

The Doctor of Nursing Practice degree program enrolled the first cohort at Samuel Merritt University in the spring of 2011. The National Academy of Science in 2005 stated that "the need for doctoral prepared practitioners and clinical faculty would be met if nursing could develop a new non-research clinical doctorate, similar to the MD and PharmD in medicine and pharmacy, respectively." The American Association of Colleges of Nursing (AACN) issued a position statement stating that it has as a goal to transition all advanced practice nursing programs from the Master's to the DNP by 2025. Currently the AACN and all other NP accreditation bodies, agree that the degree for all NPs in the nation will no longer be a MSN but will be a DNP. At the 2019 National Organization of Nurse Practitioner Faculty (NONPF) conference, this statement was received with an overwhelming "yes!" by the almost 1000 attendees.

New models for education and practice in nursing are necessary due to many factors including new areas of knowledge such as genetics and environmental health, increasing chronicity in pediatric and adult populations, growing diversity, complexity of health systems, Social Determinents of Health (SDoH) and the need for enhanced knowledge of the global health care system. The nursing profession is the critical link in the delivery of high quality, safe, effective, and patient-centered health care. Doctorate in Nursing Practice (DNP) education in nursing (the DNP) will produce the leaders of the profession over the next decade. The vision and curriculum of the DNP program at SMU will empower and challenge the next generation of leaders in nursing to approach the resolution of health care delivery challenges systematically by applying evidence-based practice and ongoing evaluation. The potential outcome is improved nursing care that will transform the US health system.

The DNP offers an alternative to research focused doctoral programs, providing graduates with the knowledge and skills essential to the application of evidence-based practice in healthcare delivery settings and the development of leadership skills for advanced nursing practice. The PhD in nursing, by contrast, has traditionally prepared nurses for research for the purpose of knowledge or theory generation. The DNP program includes education components that are central to critical appraisal and application of evidence, organizational leadership, and health policy to provide a well-rounded understanding of the factors that influence practice change in healthcare settings.

DNP Program Overview

The Doctor of Nursing Practice (DNP) program currently offers two entry options. One is a 24-month post-MSN professional program and the other is a 44-month post-baccalaureate professional program for registered nurses with either a nursing or a non-nursing bachelor's degree. Both are designed to prepare graduates to practice at the highest level of advanced nursing practice. A graduate will demonstrate leadership in a clinical or administrative specialty area and a commitment to improve healthcare outcomes via practice, policy change, or practice leadership.

The post-MSN entry is designed for advanced practice nurses (nurse practitioners, nurse anesthetists, clinical nurse specialists, and nurse midwives) and nurses in organizational leadership positions who have a Master of Science in Nursing degree. Potential applicants with a non-nursing master's degree may undergo a portfolio review to demonstrate competency in the AACN Master's Essentials.

The SMU program curriculum offers a focus on either Organizational Practice or Clinical Practice. Students in either of these areas will register for the same courses. The curricular differentiation for these two practice areas will manifest in the student's DNP project. The curriculum will be offered almost completely through online courses using distributed learning technology. Students are admitted as a cohort and are strongly advised to progress sequentially through the courses designated in each semester.

Students will be required to attend an orientation session early in the program and once per year as part of the DNP project courses.

The Doctor of Nursing Practice degree offers an alternative to research-focused doctoral programs, providing graduates with the knowledge and skills essential for accountability in advanced practice. The nurse prepared in the SMU DNP program will be a valuable counterpart to the nurse prepared in a PhD nursing program. The DNP graduate will focus on developing systems of care based on research application, while the PhD prepared nurse conducts research to provide new knowledge.

Upon acceptance into the DNP program, and prior to enrollment in the program, the student must complete the on-line orientation course on the Samuel Merritt University Canvas site. Access will be provided upon acceptance into the program.

Admitted students may petition for a maximum of up to nine (9) transfer credits after submitting a formal request and supporting documents from previously completed Master's and/or doctoral courses.

Students must have 1000 clinical practice hours in their academic program completed by the end of the DNP program. These practice hours must be attained during supervised educational experiences (e.g., the clinical hours completed during the student's MSN program together with the clinical hours in the DNP program).

The post-baccalaureate entry is designed for nurses who are also seeking their Family Nurse Practitioner (FNP) certificate in addition to their DNP degree.

Applicants for both entry points must have a current RN license in resident state, successful completion of statistics within the past three years, demonstrate proficiency in computer word processing and internet skills and fulfill all other admissions requirements.

Accreditation Statement

The DNP program is accredited by the WASC Senior College and University Commission (WSCUC) and the Commission on Collegiate Nursing Education (CCNE).

Program Learning Outcomes

Graduates of the DNP program will be prepared to:

- Continue clinical or organizational practice in their area of expertise, demonstrating specialized competencies as defined by the specialty organization, and using defined assessment and decision-making skills, systems thinking, collaborative teamwork models and outcomes evaluations to improve the delivery of care.
- Analyze and utilize scientific knowledge from nursing as well as other scientific disciplines, as the underpinnings for the highest level of nursing practice.
- Use analytic methods to critically appraise existing literature and current research to determine and implement best evidence for nursing practice.
- Support and improve patient care delivery and healthcare systems through the utilization of information systems and technology.
- Design, influence and implement healthcare policies that affect practice regulation, access, safety, quality, efficacy, financing, ethics and social justice.
- Develop and evaluate healthcare delivery methods within an organizational structure to meet current and future needs of diverse patient populations.
- Employ consultative and leadership skills with intraprofessional and interprofessional teams to create change in healthcare and complex healthcare delivery systems.
- Analyze epidemiological, biostatistical, environmental and other appropriate scientific data related to individual, aggregate and population health and develop strategies and/or care delivery systems using concepts related to community, environmental, and occupational health as well as the cultural and socioeconomic aspects of health.
- Assume leadership roles in nursing, education, and healthcare.

FNP DNP and PMHNP Handbooks

2022-2023 FNP DNP Handbook

Academic Handbook

SMU Student Handbook

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Accreditation

The SMU DNP Program is fully accredited by the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (WASC) and by the Commission on Collegiate Nursing Education (CCNE).

DNP Domains and Concepts & Program Learning Outcomes

Domains and Concepts (direct quote from AACN Essentials p.9-14)

Domains for Nursing Domains are broad distinguishable areas of competence that, when considered in the aggregate, constitute a descriptive framework for the practice of nursing.

These Essentials include *10 domains* that were adapted from the interprofessional work initiated by Englander (2013) and tailored to reflect the discipline of nursing. This document delineates the domains that are essential to nursing practice, including how these are defined, what competencies should be expected for each domain at each level of nursing, and how those domains and competencies both distinguish nursing and relate to other health professions. Each domain has a descriptor (or working definition) and a contextual statement.

The contextual statement (presented in the Domain, Competency, Sub-Competency Table found beginning on page 26of the AACN Essentials) provides a framing for what the domain represents in the context of nursing practice – thus providing an explanation for how the competencies within the domain 10 should be interpreted.

The domain designations, descriptors, and contextual statements may evolve over time to reflect future changes in healthcare and nursing practice. Although the domains are presented as discrete entities, the expert practice of nursing requires integration of most of the domains in every practice situation or patient encounter, thus they provide a robust framework for competency-based education.

The domains and descriptors used in the Essentials are listed below.

DNP (AACN, DNP The Essentials: Core Competencies for Professional Nurses, 2021)	Revised DNP Program Outcomes
*Domain 1: Knowledge for Nursing Practice Descriptor: Integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, as well as knowledge from other disciplines, including a foundation in liberal arts and natural and social sciences. This distinguishes the practice of professional nursing and forms the basis for clinical judgment and innovation in nursing practice.	PLO1: Integrate nursing science with biomedical knowledge and evidence-based interprofessional best practices for the highest level of nursing practice. (ILO3, ILO4, ILO5)
•Domain 2:	PLO2: Provide leadership for
Person-Centered Care	the organization, delivery, quality, safety, sustainability, accountability, responsiveness,

Descriptor: Person-centered care focuses on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate. Personcentered care builds on a scientific body of knowledge that guides nursing practice regardless of specialty or functional area.	and continuous improvement in healthcare. (ILO8)
Domain 3: Population Health Descriptor: Population health spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and non-traditional partnerships from affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes	PLO3: Translate evidence into practice, evaluate practice, improve outcomes of care, and participate in collaborative research. (ILO6)
Scholarship for Nursing Practice Descriptor: The generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care.	PLO4: Identify, appraise, implement, and evaluate information technology and systems to provide and improve care. (ILO3, ILO5, ILO7)
Quality and Safety Descriptor:Employment of established and emerging principles of safety and improvement science. Quality and safety, as core values of nursing practice, enhance quality and minimize risk of harm to patients and providers through both system effectiveness and individual performance.	PLO5: Design, advocate, and implement health care policy to support equitable and inclusive health care access, financing, regulation, safety, quality, and efficacy. (ILO4, ILO5)
•Domain 6:	PLO6: Provide leadership to facilitate collaborative team

Interprofessional Partnerships Descriptor:Intentional collaboration across professions and with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes.	functioning and interprofessional practice to improve healthcare outcomes. (ILO6, ILO8)
Systems-Based Practice Descriptor: Responding to and leading within complex systems of health care. Nurses effectively and proactively coordinate resources to provide safe, quality, equitable care to diverse populations.	PLO7: Analyze health risks within the biological, environmental, cultural, and socioeconomic determinants of health to develop, implement, and evaluate clinical prevention measures to improve population health. (ILO2, ILO3, ILO4)
•Domain 8: Information and Healthcare Technologies Descriptor:Information and communication technologies and informatics processes are used to provide care, gather data, form information to drive decision making, and support professionals as they expand knowledge and wisdom for practice. Informatics processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practice and professional and regulatory standards.	PLO4: Identify, appraise, implement, and evaluate information technology and systems to provide and improve care. (ILO3, ILO5, ILO7)
Professionalism Descriptor:Formation and cultivation of a sustainable professional nursing identity, accountability, perspective, collaborative disposition, and comportment that reflects nursing's characteristics and values.	PLO6: Provide leadership to facilitate collaborative team functioning and interprofessional practice to improve healthcare outcomes. (ILO6, ILO8)
•Domain 10:	PLO8: Practice in a specialty role using advanced levels of clinical judgment, systems

Personal, Professional, and Leadership Development	thinking, accountability, and innovation to
Descriptor: Participation in activities and self-reflection that foster personal health, resilience, and well-being, lifelong learning, and support the acquisition of nursing expertise and assertion of leadership	design, deliver, and evaluate evidence-based care to Improve healthcare outcomes. (ILO1, ILO2, ILO3, ILO4)

Concepts for Nursing Practice

In addition to domains, there *are featured concepts* associated with professional nursing practice that are integrated within the Essentials.

A concept is an organizing idea or a mental abstraction that represents important areas of knowledge. A common understanding of each concept is achieved through characteristics and attributes. Many disciplines, like nursing, have numerous concepts.

The featured concepts are well-represented in the nursing literature and thus also are found throughout the Essentials and verified through a crosswalk analysis. Specifically, the featured concepts are found in the introduction, across the domains (within domain descriptors and contextual statements), and within the competencies and sub- competencies.

Although not every concept is found within every domain, each concept is represented in most domains – and all domains have multiple concepts represented. The featured concepts found within the Essentials are not of 'lesser importance' than a domain. Each of these concepts serves as a core component of knowledge, facts, and skills across multiple situations and contexts within nursing practice. Each concept functions as a hub for transferable knowledge, thus enhancing learning when learners make cognitive links to other information through mental constructs.

The integration of concepts within the competencies and sub-competencies is essential for the application throughout the educational experience. As an example, can you imagine delivering person-centered care without also considering diversity, equity, and inclusion? Can you imagine having a conversation about population health without considering ethics and health policy? These concepts truly are interrelated and interwoven within the domains and competencies, serving as a foundation to students' learning.

The featured concepts are:

•Clinical Judgment

As one of the key attributes of professional nursing, clinical judgment refers to the process by which nurses make decisions based on nursing knowledge (evidence, theories, ways/patterns

of knowing), other disciplinary knowledge, critical thinking, and clinical reasoning (Manetti, 2019). This process is used to understand and interpret information in the delivery of care. Clinical decision making based on clinical judgment, is directly related to care outcomes.

Communication

Communication, informed by nursing and other theories, is a central component in all areas of nursing practice. Communication is defined as an exchange of information, thoughts, and feelings through a variety of mechanisms. The definition encompasses the various ways people interact with each other, including verbal, written, behavioral, body language, touch, and emotion. Communication also includes intentionality, mutuality, partnerships, trust, and presence. Effective communication between nurses and individuals and between nurses and other health professionals is necessary for the delivery of high quality, individualized nursing care. With increasing frequency communication is delivered through technological modalities. Communication also is a core component of team-based, interprofessional care and closely interrelated with the concept Social Determinants of Health (described below).

•Compassionate Care

As an essential principle of person-centered care, compassionate care refers to the way nurses relate to others as human beings and involves "noticing another person's vulnerability, experiencing an emotional reaction to this, and acting in some way with them in a way that is meaningful for people" (Murray & Tuqiri, 2020). Compassionate care is interrelated with other concepts such as caring, empathy, and respect and is also closely associated with patient satisfaction.

Diversity, Equity, and Inclusion (DEI)

Collectively, diversity, equity, and inclusion (DEI) refers to a broad range of individual, population, and social constructs and is adapted in the Essentials as one of the most visible concepts. Although these are collectively considered a concept, differentiation of each conceptual element leads to enhanced understanding. Diversity references a broad range of individual, population, and social characteristics, including but not limited to age; sex; race; ethnicity; sexual orientation; gender identity; family structures; geographic locations; national origin; immigrants and refugees; language; any impairment that substantially limits a major life activity; religious beliefs; and socioeconomic status. Inclusion represents environmental and organizational cultures in which faculty, students, staff, and administrators with diverse characteristics thrive. Inclusive environments require intentionality and embrace differences, not merely tolerate them (AACN, 2017; Bloomberg, 2019). Everyone works to ensure the perspectives and experiences of others are invited, welcomed, acknowledged, and respected in inclusive environments. Equity is the ability to recognize the differences in the resources or knowledge needed to allow individuals to fully participate in society, including access to higher education, with the goal of overcoming obstacles to ensure fairness (Kranich, 2001). To have equitable systems, all people should be treated fairly, unhampered by artificial barriers, stereotypes, or prejudices (Cooper, 2016). Two related concepts that fit within DEI include

structural racism and social justice (See the glossary for definitions structural racism and social justice).

•Ethics

Core to professional nursing practice, ethics refers to principles that guide a person's behavior. Ethics is closely tied to moral philosophy involving the study of or examination of morality through a variety of different approaches (Tubbs, 2009). There are commonly accepted principles in bioethics that include autonomy, beneficence, non-maleficence, and justice (ANA 2015; ACNM, 2015; AANA, 2018; ICN, 2012). The study of ethics as it relates to nursing practice has led to the exploration of other relevant concepts, including moral distress, moral hazard, moral community, and moral or critical resilience. • Evidence-B ased PracticeThe delivery of optimal health care requires the integration of current evidence and clinical expertise with individual and family preferences. Evidence-based practice is a problem-solving approach to the delivery of health care that integrates best evidence from studies and patient care data with clinician expertise and patient preferences and values (Melnyk, Fineout-Overhold, Stillwell, & Williamson, 2010). In addition there is a need to consider those scientific studies that ask: whose perspectives are solicited, who creates the evidence, how is that evidence created, what questions remain unanswered, and what harm may be created? Answers to these questions are paramount to incorporating meaningful, culturally safe, evidence-based practice (Nursing Mutual Aid, 2020).

Health Policy

Health policy involves goal directed decision-making about health that is the result of an authorized public decision-making process (Keller & Ridenour, 2021). Nurses play critical roles in advocating for policy that impacts patients and the profession, especially when speaking with a united voice on issues that affect nursing practice and health outcomes. Nurses can have a profound influence on health policy by becoming engaged in the policy process on many levels, which includes interpreting, evaluating, and leading policy change.

•Social Determinants of Health

Determinants of health, a broader term, include personal, social, economic, and environmental factors that impact health. Social determinants of health, a primary component of determinants of health "are the conditions in the environment where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes and risks." The social determinants of health contribute to wide health disparities and inequities in areas such as economic stability, education quality and access, healthcare quality and access, neighborhood and built environment, and social and community context (Healthy People, 2030). Nursing practices such as assessment, health promotion, access to care, and patient teaching support improvements in health outcomes. The social determinants of health are closely interrelated with the concepts of diversity, equity, and inclusion, health policy, and communication.



https://www.cdc.gov/pu blichealthgateway/publichealthservices/essentialhealthservices.html



https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health

https://www.cdc.gov/publichealthgateway/publichealthservices/pdf/ten essential services and sdoh.p df

Full and Part-Time Study Curriculum

Full and part time study are available for the DNP courses only. The FNP DNP is full time only.

RN Post-MSN DNP – Full Time Option

DNP		
Semester 1		Units
N 772	Nursing & Healthcare Science for Advanced Nursing Practice	3
N 774	Population Health & Clinical Prevention	3
		6
Semester 2		
N 700	Evidence-based Translation for Advanced Practice Nursing	3
N 720	Advanced Nursing Practice Project Conceptualization & Design	2
		5
Semester 3		
N 702	Policy & Advocacy for Advanced Nsng Practice	3
N 721	Advanced Nursing Practice Project Management	2
		5
Semester 4		
N 705	Leadership, Quality, Safety & Improvement Science	3
N 730a	Advanced Nursing Practice Residency 1	1
		4
Semester 5		
N 706	Information Systems & Technology for Adv Nsng Practice	3
N 730b	Advanced Nursing Practice Residency 2	2
		5
Semester 6		
N 701	Interprofessional Practice	3
N 730c	Advanced Nursing Practice Residency 3	2
		5

^{*}Includes 475 DNP practice hours units

Total

30

RN Post-MSN DNP – Part-Time Option (4 years)

DNP		
Semester 1		Units
N 772	Nursing & Healthcare Science for Advanced Nursing Practice	3

Semester 2		
N 700	Evidence-Based Translation for Advanced Practice Nursing	3
Semester 3		
N 702	Policy & Advocacy for Advanced Nsng Practice	3
Semester 4		
N 705	Leadership, Quality, Safety & Improvement Science	3
Semester 5		
N 706	Information Systems & Technology for Adv Nsng Practice	3
Semester 6		3
N701	Interprofessional Practice	
Semester 7		
N774	Population Health and Clinical Prevention	3
Semester 8		
N720	Advanced Nursing Practice Project Conceptualization and Design	2
Semester 9		
N721	Advanced Nursing Practice Management	2
Semester 10		
N730a	Advanced Nursing Practice Residency 1	1
Semester 11		
N730b	Advanced Nursing Practice Residency 2	2
Semester 12		
N730c	Advanced Nursing Practice Residency 3	2

^{*}Includes 475 DNP practice hours units

Total 30

RN Post-Baccalaureate and Masters DNP/FNP - Full Time Format Only

the contract of the contract o		
DNP/FNP	All Coursework is online except for those courses indicated that require demonstration of skills	
Semester 1		Units
N 772	Nursing & Healthcare Science for Advanced Nursing Practice	3
N 773	Ethical Foundations and Role Development of the Advanced	3

	Practice Nurse		
N 774	Population Health & Clinical Prevention	3	
		9	
<u>Semester 2</u>			
N 700	Evidence-based Translation for Advanced Practice Nursing	3	
N 701	Interprofessional Practice	3	
		6	
<u>Semester 3</u>		3	
N 706	,		
N 720	Advanced Nursing Practice Project Conceptualization & Design		
N 7xx	Health Protection, Promotion, & Screening in the Individual, Family, & Community		
		8	
Semester 4			
N 702	Policy & Advocacy for Advanced Nsng Practice		
N 719	Advanced Pathophysiology		
N 777	Advanced Pharmacology	3	
		9	
Semester 5			
N 705	Leadership, Quality, Safety & Improvement Science	3	
N 721	Advanced Nursing Practice Project Management	2	
N 775	Care of Acute Medical Conditions		
N 775L	Care of Acute Medical Conditions Lab (requires a 3-day intensive on campus to demonstrate lab skills)	1	
		9	
Semester 6			
N 770	Advanced Physical Assessment	2	
N 770L	Advanced Physical Assessment Lab (requires a 3 day intensive on campus to demonstrate lab skills)		
N 776	Care of Chronic Medical Conditions	3	
		7	
Semester 7			
N 730a	Advanced Nursing Practice Residency 1*	1	
N 778L	FNP Clinical I (175 hours)	4	
		5	
Semester 8			
N 730b	Advanced Nursing Practice Residency 2*	2	
N 779L	FNP Clinical II (175 hours)	4	
		6	
<u>Semester 9</u>			
N 730c	Advanced Nursing Practice Residency 3*	2	
N 781L	FNP Clinical III (175 hours) (requires a 3-day intensive on	4	
	campus to demonstrate competency for completion)		
		6	

*Includes 525 FNP practice hours (minimum) & 475 DNP practice hours Total 65 units

Course Descriptions

Please refer to our University Catalog and handbook to view DNP Course Descriptions. You may access the catalog here: https://www.samuelmerritt.edu/catalog/course-descriptions

Transfer Student Credit Policy

Transfer of doctoral level courses into the student's program of study can include coursework that substitutes for required courses or meets the requirements of elective coursework. Consistent with the SMU institutional policy, all coursework to be considered for transfer into the DNP Program must be at the doctoral level from nationally accredited academic institutions and must be completed after the student is enrolled in the DNP Program. Students are allowed to transfer in up to 9 units of equivalent doctoral level coursework upon approval of the DNP Program Director. The transfer credit petition and supporting documentation can be submitted to the DNP Program Director for consideration and found at: https://www.samuelmerritt.edu/registrar/forms.

Advisement and Faculty Roles

Recognizing that doctoral education and teaching in an online modality requires exceptional qualifications of faculty, the School has determined that faculty selection for the DNP program will typically require the following qualifications: An earned terminal doctoral degree (DNP, PhD, DNSc, EdD, DNP or comparable credential. In rare cases, an MS degree with other exceptional qualifications may be considered for appointment to the doctoral faculty.) would remove this

An ongoing record of scholarship as evidenced by a record of peer reviewed publications or presentations. Evidence of exceptional practice expertise and recent practice activity sufficient to guide students at the highest level of clinical inquiry. National certification in a nursing specialty is highly desirable. Prior teaching at the graduate and preferably the doctoral level.

Active involvement in nursing leadership within a national or international nursing organization. Demonstrate proficiency in instructional approaches appropriate for distributed education including asynchronous and synchronous teaching and learning online.

SMU DNP Advising Roles

Initial DNP Academic Advisor

Upon admission to the DNP program, each student will be assigned an initial advisor. The initial DNP academic advisor may be a graduate program director, the DNP program director, an instructor in the DNP program, or another graduate faculty member. All initial DNP academic advisors will be familiar with the DNP program, will have an area of clinical

expertise, and will be a member of the graduate faculty. The initial DNP academic advisor will generally provide student direction during the first several semesters of the program and until the DNP Project Chair and the DNP Project Committee members have been identified. Contact the Program Director for initial advising concerns.

DNP Project Team Chairperson and Team

The DNP student will be assigned a DNP Chair at the beginning of N720 and their proposed project will be developed during N720, Advance Nursing Practice Project Conceptualization and Design. The person who is your Chair is part of the team with the faculty who teaches your courses, however, your chair will facilitate and guide your project progress through all project courses. You may also have supportive members of your committee. They may be experts in the topic of interest or someone whom you feel would be beneficial to your project.

The DNP Project Team is comprised of a minimum of two (2) members. The DNP Project Chair must be a SMU faculty member and the other member will be the DNP scholar. You may also involve a DNP Project Practice Mentor, preferably from the site in which the DNP Project will be implemented.

The student is free to add additional members to the DNP Project Committee as needed. Additional members may include a non-SMU faculty member or other individual(s) with specialized knowledge and expertise relevant to the DNP Project.

DNP Project Hours

The DNP program requires completion of 1000 hours of graduate practice/DNP Project work. For NP DNP students, the hours of NP clinical need to be transferred from the Masters' program and the DNP project hours must total a minimum of 1000 hours. During this time, the student will develop, implement, and evaluate a project approved by both the DNP Project Chair and DNP Special Project director.

DNP Project Reimbursement

The DNP student may spend up to \$1000 to go towards their DNP Project and request a reimbursement. Students will keep receipts and submit them to the DNP Chair upon completion of their DNP Project.

Attendance and Participation

Time spent logged into Canvas and posting assignments meet the attendance and participation requirements for courses delivered online.

Students are expected to participate in all coursework and classroom activities, and complete all assignments by the posted due date and time.

The faculty recognize that events may occur that interfere with participation and/or the completion of coursework by the assigned due date. It is imperative that students communicate with the course faculty as soon as they are aware of any conflict that interferes with the above stated expectations (preferably PRIOR to due dates).

SMU - Confidential Data

Below should be an exact replica of the SMU student hand book

Academic Performance

Academic integrity is expected of all faculty, staff and students in order to promote a productive and safe environment for learning. Key components of academic integrity are communication and mutual respect among the members of the Samuel Merritt University community. Faculty, staff, and students are expected to abide by the codes of conduct and ethics of this University, as well as the code of ethics of their respective professions, which includes reporting misconduct to the appropriate authorities. Lack of academic integrity includes, but is not limited to, plagiarizing, cheating, deception, breach of confidentiality, failure to report a clinical error, falsifying research results, and failure to confront and/or report misconduct of others.

Faculty members reserve the right to evaluate individual cases of academic dishonesty by a student and to take appropriate action, which may include failure on a paper or exam or failure in the course. Faculty may also recommend censure, probation, suspension or dismissal to the Academic Vice President. A written report of any action will be placed in the student's file in the Office of the Registrar. If the student's status in the program is affected, a permanent notation will be made on his/her transcript.

Regardless of any action taken by the course faculty member, lack of academic integrity constitutes grounds for suspension or dismissal from Samuel Merritt University through the Office of the Academic Vice President.

Academic Honesty and Plagiarism Policy

Individual Assignments

Graded assignments that are the students' original work. No portion of any assignment submitted may be the work of any other student in this course, or any other course.

Group Assignments

Graded assignments that are the work and collaboration of a group of students (as assigned by instructor), that cumulatively is submitted as one assignment and will be graded based on the submission of the group. No portion of any assignment submitted may be the work of any other student in this course, or any other course. Group assignments must have a page added to the submitted assignment that indicates the students' names and the work designated and completed by each student in the group.

Collaboration

Students speaking with one another, or otherwise working on assignments together, in discussion settings. Collaboration is allowed only on a case-by-case basis, as allowed by the Instructor. All students involved in any collaboration will be named on all assignments submitted.

Cross-course Collaboration

No students will be allowed to work together on assignments between courses, i.e. ELMSN-Hybrid-MSN ONL. Because each individual course is taught by different SMU faculty, there will be no cross-course collaboration allowed based on multiple faculty involved in teaching courses.

Course Expectation

All assignments will be either individual or group (please refer to syllabus). Collaboration is allowed at the Instructors discretion and with clear instruction to students, otherwise all students must work individually or in their group. No student may submit any assignment that is not original, and completely their own work. Please refer to SMU Academic Student Handbook and Course Policies regarding academic dishonesty and plagiarism.

Communication, Professionalism and Conduct

We recognize that students in the DNP program have overcome many challenges to get to this level in their education. It is our desire to support you in your learning processes and to support the reputation and quality of the SMU DNP program at the highest caliber. We further recognize that our DNP students are mature, responsible, competent at studying and learning, and are hard-working adults with many duties and responsibilities outside of the SMU DNP experience. In order to support you and ensure the mutually beneficial reputation of the SMU DNP program, we will clarify expectations between us.

As your DNP administration, faculty and staff, you can expect:

- We will strive to be current in our academic, political, and professional knowledge in advanced practice nursing.
- We will be prepared for your learning in all DNP courses.
- We will "set the bar high" in our expectations of you in the DNP student role.
- We will strive to communicate effectively orally and in writing, in a timely manner.
- We will strive to provide feedback on papers and assignments to you within 7 days of receiving them.
- We will strive to answer your emails and phone calls to us within 72 hours.
- If we are unavailable to you during these time frames for any reason, we will contact
 you at a minimum of two weeks in advance and inform you either through Canvas or
 email and provide the name of a reliable contact person that can return your emails and
 phones in our absence.
- We will use graduate level wording, and proper English composition, spelling and grammar in our communications to you.
- If we change our class, lab or schedule in a way that impacts your classes or your clinical rotations, except in an extreme emergency, we will give you a minimum of a two week notice.
- We will strive to be DNP role models for you.
- We will work together to see every adverse or challenging situation as an opportunity to learn.

As SMU FNP students, we expect:

- You will be prepared when coming to DNP courses. This means, you have read the
 required material, when appropriate, and have a positive, "I am here to learn with you"
 attitude, will commit to show up on time, be engaged, and attend and participate during
 the full time scheduled.
- You will demonstrate an effective meaningful professional communication manner, both orally and in writing, in a timely manner. You will use graduate level wording and proper English composition, spelling and grammar in your communications to us. When you receive an email or written communication from us, we expect an acknowledgement of that communication in a timely manner written within 72 hours.
- You will to strive to "set the bar high" in your expectations of us in DNP administration, faculty and staff roles.
- If you change your attendance schedule to a class, lab, clinical or other University based activity, except in an extreme emergency, you will give us a minimum of a two week notice.
- You will strive to be role models and mentors for other DNP students.
- You will strive to see each adverse or challenging situation as an opportunity to learn.
- You will keep your clinical hours current and documented, and respond rapidly to requests related to potential or current clinical sites timely.
- You will notify the Registrar of any changes to your home address and updates to your RN license.

Late Submission of Assignments

Up to 50% point deduction will occur for assignments submitted late. Assignments are not accepted beyond the fifth day past the due date, unless *prior* arrangements are made with the course faculty. A student who does not attend required course meetings/activities will receive a lower grade for the course.

Grading Policy

Graduate students of nursing are required to attain a cumulative score of 80% in order to pass a course and the program. The grade scale is as follows and found in all course syllabi:

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94 - 100\% = A

90 - 93\% = A - 87 - 89\% = B + 83 - 86\% = B or B

80 - 82\% = B- is this the final determination?

< 80\% unsatisfactory completion of the course and/or program 75 - 79\% = C

72 - 74.9\% = C - 69 - 71.9\% = D

< 68.9\% = F
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If a student does not pass a course with an 80% or higher they have one opportunity to repeat the course to pass. If two or more courses are not passed at 80% or higher then this is considered a failure and thus dismissal from the program. Please see the general academic policy regarding progression in the SMU catalog:

https://www.samuelmerritt.edu/academic affairs/catalogs.

DNP Program Grade Appeal Policy

General Information

The primary authority of the instructor in the assignment of grades must be respected. An instructor's evaluation of a students work and performance in that instructor's course must not be over-ridden merely because of a difference of opinion or evaluative judgment, provided it is formed in accordance with the generally accepted canons of the relevant discipline and academic institution. The university presumes that every instructor wants and tries to be nonprejudicial, objective, and consistent in the assignment of grades. This presumption, however, may be over-ridden by weight of evidence to the contrary.

Steps of the Appeal Process

The burden of proof rests on the student and can only concern the final grade. The appeal process must be completed within a two week time frame from the final submission date for the grade.

- Within two days of final grade submission, the student must submit an appeal in writing to the instructor who submitted the grade. The student must use the form supplied and document supporting proof of why the grade needs changing.
- The instructor in question must respond within two days of the submitted paper work.
- If the student remains dissatisfied with the decision then they must submit to program Chair/Director within 48 hours.
- If the student remains dissatisfied with the decision, they must submit to the Associate Dean of the graduate programs and if they are not available to the Dean of the School of Nursing within 48 hours of denial for change.
- If the student continues to feel dissatisfied with the decision they may appeal the denial of the grade change following the guidelines of the grievance process in the University catalog. This is in accordance with Samuel Merritt University Academic Policy on Grade Changes found in the University catalog.
 - https://www.samuelmerritt.edu/academic affairs/catalogs

Incomplete and In Progress Grades

Please follow the link for more information regarding Incomplete and In Progress Grades: SMU - Confidential Data

Leave of Absence

Please follow the link for more information regarding Incomplete and In Progress Grades: https://www.samuelmerritt.edu/catalog/academic-policies

DNP Degree Requirements and Graduation

Successful completion of all coursework and completion of the full requirement of 1000 graduate hours. These must be completed within the timeframe of the program unless otherwise noted as an In Progress, Incomplete or Leave of Absence. If any of these aspects are in place, then the program completion is delayed to accommodate. Please refer to the University Catalog for other graduation requirement (insert hyperlink).

Dispute Resolution

In the case a student and faculty member have a difference of opinion on educational matters, such as when a student disagrees with the substance or conclusion of a faculty member's educational assessment; it is expected that the informal resolution of this dispute be completed using the School of Nursing chain-of-command prior to invoking the University-wide grievance policies and procedures. In all circumstances, professional communication is expected.

Resolution procedure begins at the most basic level of the dispute between two parties. Advisors, university staff, other faculty, and higher authorities will not hear a complaint unless the person(s) bringing the dispute have made every effort to reach resolution with the other involved party. Students are encouraged to consult with Academic Support Services or the university counseling service for assistance with preparing effective communication strategies. Should the issues involve multiple members of the same class or course section, students will name one to two class representatives who will meet with the faculty to communicate discussions and decisions to the class.

Although initial contact may be made by phone or e-mail, a face-to-face meeting (when possible) may be necessary to ensure that all issues are completely addressed and documented adequately. Written documents may be provided only to those with a direct need-to-know.

Faculty and students(s) must meet to discuss the issues. Either party may request that another person be present as a witness, but not a participant. Faculty will document the communication in a counseling note. The document will include the resolution reached or a list of next steps, responsibilities, and timeline.

On-line course disputes: Physical meetings between parties may be difficult due to physical location constraints. Parties may choose the most appropriate method of communication. If the issue is unresolved with the faculty member, the student should next present to the Program Director and then to the Dean.

In the case of failure to reach consensus, the decision regarding final action will be Made by the Dean unless substantial evidence supports a claim of arbitrary or capricious treatment of the student(s) warranting escalation to the university grievance process as described in the University catalog (needs a hyperlink to SMU catalog).

Technical Standards

For additional information related to the ADA Guidelines, definitions, affective learning skills and psychomotor skills required by the University and academic programs (including the DNP Program), please visit the following web site: https://www.samuelmerritt.edu/college-nursing/doctor-nursing-practice-online or the SMU Student Handbook: http://www.samuelmerritt.edu/academic affairs/catalogs.

Computer Requirements and Support Services

For technology requirements for online students, see: Minimum System Requirements | Samuel Merritt University

Scholarly Writing in Graduate Nursing

The expectations of doctoral study include scholarly and rigorous written communications. As a result, all students are required to participate in a series of learning modules: *Basic and Scientific Writing Skills for Graduate Students*. There are ten modules. The first six are required in orientation and the following seven through ten are Incorporated into the DNP Project course series. See the DNP Online Resource Course for the full set of modules that are available to you at all times for convenience and repeat use:

https://samuelmerritt.instructure.com/courses/1109540/modules If you have concerns related to your writing abilities, seek assistance early in the program and develop a plan to address needs for development as additional resources and support are available through our Academic Support Services Department:

http://www.samuelmerritt.edu/academic_support/writing-support.

Scholarly writing is the product of thought and analysis, and the act of writing can often uncover unanticipated insights and analysis that make a writer's work unique and valuable. This section discusses graduate writing expectations, emphasizing the challenges and opportunities that graduate level writing presents.

Exemplary papers tend to have the following characteristics:

- They fully address the related research, potential arguments inherent in the issue, and the assigned task.
- They have a well-developed position with key ideas that are fully illustrated with specific examples. The exemplary essay presents a coherent whole, thereby complementing the writer's personal and professional experiences with the research provided. Exemplary papers go beyond a simplistic restating of the research.
- The writing demonstrates a variety of sentence structures, strong and precise word

choice, and no errors in mechanics, usage, and sentence structure. The essay's structure relies on the writer's key ideas and examples rather than a trite or predictable composition structure (which *might* include, but is *not* limited to a formulaic five-paragraph essay).

- They analyze and critique the issue by examining the issue's contexts in addition to the
 writer's personal biases. In other words, these papers ask difficult questions of
 commonly accepted research and assumptions about specific educational issues.
- They identify complex implications that follow logically from the key ideas that the writer offers.
- The writers of exemplary papers clearly communicate their own perspective through a strong, confident, and distinctive voice.
- The writers adhere to the standards of APA format including appropriate citation.

APA Format

The SMUDNP program requires students to use APA, 6th Edition style in their written work. The style requires a specific format for in-text and reference list citations, as well as for structure including: headings, line spacing, and abbreviations, etc. The APA manual and the Purdue OWL Online Writing Lab at: https://owl.english.purdue.edu/owl/resource/560/01/ are useful resources.

Expectations for Professional Behavior

The faculty at SMU understand that there are personal situations that arise that might interfere with meeting deadlines or course expectations. In these situations, it is expected that the student communicate with the faculty before the deadline:

The rationale for missing the deadline Negotiate an acceptable submission date

Notify the faculty if there are additional consideration that might prevent meeting the negotiated deadline

We expect that the need for the request for deadline extensions will be limited, but are willing to work with students who require additional time to meet course requirements. Thank you for your consideration of faculty time and commitments.

Clinical Contracts for DNP projects

For New Contracts (with Uncontracted Facilities), or Renewal Contracts (or contracts expiring before/during your clinical rotation) – A Contract Request must be submitted at least 90 days/60 working days prior to the start of the semester. If submitted after this, the Clinical Coordination team cannot guarantee that the contract will be processed in time for the upcoming semester. Contact Dr. Jessica Eads:

SAFE AND PROFESSIONAL PRACTICE IN CLINICAL SETTINGS Policy

A student whose pattern of behavior is found to be unsafe and/or unprofessional may be excluded from a clinical practicum at any time and could receive a failing grade in the course. The student is referred to the department chair and may be subject to further disciplinary action.

Guidelines

The student will demonstrate patterns of healthcare professional behavior which follow the legal and ethical professional codes; promote the well-being of clients, healthcare workers, and self in the biological, psychological, sociological, and cultural realms; demonstrate accountability in preparation, documentation and continuity of care; and show respect for the human rights of individuals.

Indicators to be used as guidelines for evaluating safe and professional practice are:

Regulatory

The student practices within the boundaries of the applicable State Practice Act, the guidelines and objectives of the department, and the rules and regulations of the healthcare agencies. Examples of safe and/or professional practice include, but are not limited to the following:

- Notifying the agency and/or instructor of clinical absence.
- Adhering to the dress code.
- Presenting for clinical practicum free from the influence of un-prescribed psychoactive drugs, including alcohol.
- Demonstrating accountability by making up missed clinical experiences, as designated by faculty member.
- Arriving promptly for clinical assignments.
- Meeting obligations in a timely manner.

Ethical

The student practices according to the relevant professional association's Code of Ethics, Standards of Practice, and the State Practice Acts. Examples of safe and/or professional practice include, but are not limited to the following:

- Accepting assignments in keeping with the University's policy of non-discrimination.
- Appropriately performing any activity related to clinical practice.
- Reporting unethical behavior of other healthcare providers, including other students.
- Demonstrating honesty in all aspects of clinical practice.

Biological, Psychological, Social, and Cultural Realms

The student's practice meets the needs of the human from a biological, psychological, sociological and cultural standpoint. Examples of safe and/or professional practice include, but are not limited to the following:

- Displaying stable mental, emotional and physical behavior.
- Following through on referrals or interventions to correct own areas of deficiency in clinical practice which, if ignored, may result in harm to others.
- Building interpersonal relationships with agency staff, coworkers, peers and/or faculty that result in clear, constructive communication, promoting quality client care and/or unit functioning.
- Being physically capable of carrying out essential procedures.

Accountability

The student's practice demonstrates accountability in the responsible preparation, documentation and promotion of continuity in the care of clients. Examples of safe and/or professional practice include, but are not limited to the following:

- Communicating concisely both orally and in writing.
- Documenting client behavior accurately and comprehensively.
- Reporting questionable professional practices.
- Undertaking activities with adequate orientation, theoretical preparation and appropriate assistance.
- Demonstrating honesty in all aspects of practice.

Dress code

Students are expected to dress professionally in appropriate clothing for their clinical setting. The following serves as a guideline for the DNP program and is in conjunction with the clinical agency's expectations.

- It is expected that compliance with the dress code of each individual clinical agency will be respected.
- Appropriate attire and a neat personal appearance are required when interacting with faculty and peers in classroom situations.
- Appropriate attire and neat personal appearance are required during interactions with patients and clinical colleagues
- Lab coats should be worn with SMU name tags during every clinical rotation.
- Attire to be worn under lab coat should be either causal professional or more formal professional attire depending on the setting.
- Scrubs are **not** proper attire for most nurse practitioners, unless they are consistent with other practitioners in the assigned clinical setting, or are covered with a lab coat.
- Ties for men are optional.
- Closed toed and low-heeled shoes should be worn in clinic (clogs are the exception but no high- heeled mules). Shoes should be appropriate for the clinical setting (No flip-flops, sandals or open toes).
- Hair should be arranged so as not to interfere with patient care and safety.
- Nails should be clean, short and maintained to ensure patient safety. Artificial nails are not permitted for patient care.

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• Perfumed or scented products should not be worn, as many patients are intolerant.

Jewelry should not interfere with patient care or safety.