

The Mount Vernon Nazarene University
School of Nursing and Health Sciences
Nursing Department

Master of Science in Nursing Student Handbook



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MOUNT VERNON NAZARENE UNIVERSITY
DEPARTMENT OF NURSING

I. GENERAL INFORMATION

History of the School of Nursing and Health Sciences

The Bachelor of Science (BS) with a major in nursing, now Bachelor of Science in Nursing (BSN), began in 2005 after a comprehensive assessment identified the need for professional nurses in the city of Mount Vernon and surrounding communities. Hospital administrators were requesting more nurses with baccalaureate degrees to fill an increasing number of vacant positions. The nation's focus was on the most significant shortage of professional nurses in modern times. In addition, there were new studies released that cited the differences in the morbidity and mortality of patients when they were cared for by baccalaureate prepared nurses compared with nurses with less education.

The first nursing classes were in Regents Hall on the Mount Vernon campus. Faculty offices were located in the office suite of the School of Natural and Social Sciences (SNSS). As the program grew, and new faculty members were hired, the Nursing department moved from the SNSS to its own School. The School of Nursing and Health Sciences began in the fall of 2006. The location of faculty offices moved to the third floor of the Lakeholm building. By the third year, the nursing major became the largest major on campus. Faculty moved once again to a newly renovated space on the first floor of Regents Hall. It was from this location that the first graduate nurses became MVNU Alumni in the spring of 2010!

During the fall semester of 2010, the University received an anonymous \$2 million lead gift to renovate the former "Sewing Center" adjacent to Buchwald Center. The donor targeted the gift to give much needed space to the growing School of Nursing and Health Sciences. At the time, the donation was the largest gift in MVNU history. Renovation of the building began immediately on the new School located on Main Street in Mount Vernon. In recognition of Richard and Theresa Hunter and Maureen Hunter Buchwald, maternal grandparents and mother (respectively) to Karen Buchwald Wright, CEO of Ariel Corporation, the name of the building became Hunter Hall. Hunter Hall is a 26,000 square-foot facility. The design allows the structure to maintain the historic character of the building exterior, while completely renovating and updating the interior.

During the spring of 2011, MVNU approved the School's petition to offer a BS in Nursing completion program for RNs. The program's design is a cohort model to support the learning needs of adult students. Classes are scheduled to meet one night each week, allowing students to complete the nursing and cognate requirements in as little as 15 months. The program provides a much-needed service to working nurses in Mount Vernon and at off-campus sites.

On September 21, 2020, the first Master of Science in Nursing cohort began their classes. The initial focus of the MSN is Nursing Education, with plans to expand to additional concentrations as the program progresses. Classes are 100% online and can be completed in 19 months. Students complete practicum experiences in four courses, and a Capstone research project is integrated throughout the program.

MOUNT VERNON NAZARENE UNIVERSITY

DEPARTMENT OF NURSING

Mission

The mission statement of the MVNU Nursing Department is, “Educate nurse leaders to model Christ in meeting the healthcare needs of the community through the ministry of nursing”.

Philosophy

Mount Vernon Nazarene University is an intentionally Christian, liberal arts university within the Wesleyan evangelical tradition. The University commits to academic excellence inspiring students to achieve their highest potential spiritually, intellectually, socially, and physically as they prepare for careers and service to God and humankind. The faculty members of the Nursing Department support the philosophy of Mount Vernon Nazarene University. Faculty members believe in a holistic approach to faith and learning. Our Christian faith serves as the underpinning for the program and directs our vision, mission, and practices. Belief in a sovereign God guides the Department’s philosophy statement.

Advancement of nursing knowledge occurs through empirical testing, personal, ethical and aesthetic knowing. All truth, both objective science and subjective experiential truth comes from God. The faculty believes students must take part in the pursuit of knowledge and are responsible for actively engaging in their education. Nurses have a specialized body of knowledge. Even so, best nursing practice combines knowledge of behavioral and natural sciences and the humanities with nursing science to best care for patients. Learning is a lifelong endeavor. Continued learning is essential to safe quality nursing practice.

The principle concern of nursing is advocating for the health care needs of people and communities. Advocacy can take place through providing direct care for patients, coordinating care among members of the interdisciplinary health care team, speaking for equality in resource allocation, and by political activism aimed at improving health care delivery and access for all. Nurses must also take part in developing and encouraging future nurses toward excellence in and advancement of the profession. Within the context of promoting, restoring and maintenance of health, the Christian nurse is responsible for being a steward of the environment. Evidence for best practice guides actions targeted toward environmental stewardship, health care advocacy and nursing care. Students need to develop excellent communication with other members of the health care team to best meet health care goals. Spiritual care is primary to the health of individuals and society. The nurse must foster personal spiritual growth to efficiently guide patients in spiritual wholeness. Christian nurses receive power from the Holy Spirit to achieve the goals of Christian nursing practice. Godly living is essential to advancing spiritual growth.

The Nursing Department believes Christian nursing practice is an intentional act requiring spiritual discipline and a desire to minister to others as a response to God’s grace. The faculty members help students to grow in Christ by role-modeling godly living and Christian values in the practice of nursing. Through Christian nursing education students receive an invitation to enter Christian nursing practice which can result in a fulfilling, professional nursing career.

Conceptual Framework

Service and obedience to God are central to the practice of Christian nursing. Therefore, our faith in God serves as the underpinning for the nursing program. A biblical view of nursing forms the basis for the MVNU Nursing Department's conceptual framework. The MSN framework is organized around seven concepts that guide professional nursing practice. The Metaparadigm for nursing, written by Fawcett (1984) focuses on persons, environment, health, and nursing. In 1999, Shelly and Miller expanded Fawcett's work to develop a Christian framework for nurses by adding the three concepts of God, truth, and spiritual care. The resulting framework represents a biblical worldview describing the concepts of concern for nursing.

The conceptual framework's design includes a view of Christian nursing concepts found under the umbrella of God and a biblical worldview. Christian nurses, through the power of the Holy Spirit, have the ability to meet the health care needs of the community through the ministry of nursing. The concepts of truth and spiritual care come from the Christian nurses' relationship to God. We know who God is through the truth of the Holy Scripture and rely on that truth for direction for nursing care of clients and personal spiritual growth. Person, health, environment, and nursing make up the remainder of the major concepts of the framework. This framework aids students in identifying patterns of potential and actual health problems of concern to nursing.

Concepts and Conceptual Definitions

God: The faculty affirms the belief of a sovereign God and that He is the creator of everything (1Corinthians 8:5-6). The triune God is Father, Son, and Holy Spirit (Galatians 4:4-6; John 14:25-27). We believe in Jesus Christ the Son of the Living God, who died for our sins and was resurrected on the third day. Through this resurrection, we receive salvation from sin and everlasting life through the blood of Christ Jesus (John 6:43; John 14:6). As members of the body of Christ, we receive the gift of the Holy Spirit to guide us in obedience to His will (Acts 2:4; John 14:25).

Truth: Nursing knowledge comes about through empirical testing, personal, and ethical and aesthetic knowledge (Carper, 1978). All truth, both objective science and subjective experiential truth, comes from God.

Nursing: Nurses help people and communities respond to actual or potential changes in health status. Nursing has a unique body of knowledge gained through empirical testing, personal, and ethical and aesthetic knowing. Christian nursing is holistic and includes caring for physical, psychological, sociological, spiritual, and cultural dimensions of the person. Nurses speak for health of people and communities. The role of client advocate happens through multiple venues. Nurses advocate by providing direct care for clients, coordinating care among members of the interdisciplinary health care team, speaking for equality in resource allocation, and by political activism aimed at improving health care delivery and access. The role of nurses in education is essential. Nurses have a responsibility to educate and mentor future nurses. In addition, nurses educate clients and the public about issues which impact the health of people and the community. The act of Christian nursing is not merely a response to human need and suffering, but a direct

response to God's grace toward us. We have the ability to care for others through the power and wisdom given to us through the Holy Spirit.

Health: From a Christian worldview, health is the ability to function in harmony with God, self, others, and the environment. Inherent is the ability to forgive and receive forgiveness, to love others and accept love, and experience a sense of meaning and purpose in life. Multiple dimensions of health exist, including physical, psychological, sociological, spiritual, and cultural features.

Environment: The environment includes all creation, both physical and spiritual. God created the environment, but the environment remains separate from God. Included in this definition is the place in which nursing occurs. God entrusted human beings as stewards of the environment; therefore, nurses show support for environmental health and protection. The environment has significant impact on the health status of the individual and communities.

Persons: People are created in the image of God (Genesis 1:27) to have a relationship with God (Deuteronomy 6:4-6), through the person of Jesus Christ (Matthew 22:37-39). As people created of God's love, we affirm each person should be honored and served with dignity regardless of social, mental, or physical status. People are physiological, psychological, sociocultural, and spiritual beings. These characteristics are present within various developmental stages and have a wide range of potentials. The spiritual part of the person is always developing. This spiritual self permeates all other characteristics by supporting optimal health, even if the person does not recognize it. The spirit controls the mind and the mind consciously or unconsciously controls the body (Neuman, 1995). Spiritual needs of the person include the need to develop trusting relationships with God and others, recognition of the need for forgiveness and to forgive, and the need for meaning, hope, and purpose in life.

Spiritual Care: As Christian nurses, we affirm spiritual care as primary to the health of individuals and society. The nurse and client need spiritual care. Even so, we are aware of, and respect, spiritual beliefs that differ from our own. We believe that spiritual distress permeates all dimensions of a person's health and society; therefore, we help others recognize a need for God according to their openness to receive spiritual care. We share our commitment to Christ by living out a life of service to others.

MSN Student Learning Outcomes

Based on the MVNU Department of Nursing Conceptual Framework and the AACN Essentials, upon completion of the program the student will be able to:

God

1. Apply Biblical principles to develop ethical decision making, leadership skills, and professional relationships. (Essentials II, IX)

Truth

2. Integrate knowledge, best evidence, and technology to influence change and advance the quality of nursing care. (Essentials I, III, IV, V, VII, IX)

Nursing

3. Implement strategies to improve health outcomes through primary, secondary, and tertiary prevention practices. (Essentials I, II, III, IV, V, VI, VII, VIII, IX)

4. Advance excellence in nursing through effective communication, deliberate collaboration, quality education, and professional development. (Essentials I, II, III, IV, V, VI, VII, VIII, IX)

Health

5. Advocate for client-centered, holistic care through interdisciplinary collaboration to improve the health outcomes of diverse populations. (Essentials I, VI, VII, VIII, IX)

Environment

6. Analyze vulnerabilities of the individual and systems environments to improve quality and safety outcomes. (Essentials III, V, VI, VIII, IX)

Persons

7. Lead in the provision of client-centered, culturally appropriate care to individuals, families and populations. (Essentials II, VIII, IX)

Spiritual Care

8. Promote spiritual care of self and others through respectful and compassionate relationships. (Essentials VIII, IX)

MSN Program Outcomes

The goals of the MVNU MSN program are to:

1. Build upon baccalaureate nursing knowledge to expand concepts of nursing theory, nursing science, health information technology, and population health to meet the health needs of diverse individuals, families, groups, communities, and populations across various environments.
 - a. Benchmark: 80% of students who begin the program complete the program and are able to identify growth in baccalaureate knowledge by describing how each AACN Master's Essential has been met.
2. Facilitate life-long learning and the pursuit of continuing education.
 - a. Benchmark: 20% of students pursue additional education or begin doctoral studies within 5 years.
3. Foster evidence-based nursing skills through research application that reflects expertise in problem identification, data collection and evaluation, and analysis of findings.
 - a. Benchmark: 100% of graduates complete an evidenced-based capstone project with a Capstone course grade of B or higher.
4. Provide a program which meets the expectations and needs of students.
 - a. Benchmark: 80% of students express overall satisfaction with the MSN program in an exit survey.
5. Develop graduates who display high levels of professional integrity and self-motivation and who promote excellence in the workplace.
 - a. Benchmark: 80% of graduates report overall program satisfaction of professional preparedness through post-graduate survey.
 - b. Benchmark: 80% of employers report performance satisfaction in stakeholder employer survey.
6. Student completing the Nursing Education track are prepared to be leaders in nursing education.
 - a. Benchmark: 80% obtain certification as nursing educator within 6 months of graduation.

MSN Course Titles and Descriptions

NURS-6003 Theoretical Leadership in Nursing Practice – 3 credits

This course provides an examination of current theories and practices impacting various aspects of nursing practice and ethical leadership. The process of knowledge development within the practice of nursing is highlighted. The role of advancing evidence-based practice throughout nursing is emphasized.

NURS-6013 Nursing Research & Evidence-Based Practice – 3 credits

This course explores the integration of nursing research, theory, and practice. Students examine research methods, standards, and approaches of evidence-based practice for health professionals. Students evaluate research for quality and applicability in clinical practice.

NURS-6023 Current Trends & Issues in Nursing – 3 credits

This course provides insight into current issues affecting nursing and the health care system. Discussion topics vary each time the course is offered to ensure current trends are being considered. In-depth research topics are proposed by individual students in consultation with the professor.

NURS-6043 Advanced Nursing Concepts in Physical Assessment – 3 credits

This course integrates with physiological and pharmacological principles discussed in NURS6083, exploring the clinical manifestations of common pathological syndromes across an individual's lifespan. Integration of physical examination is explored. (Includes 24 practicum hours.)

NURS-6053 Health Policy & Advocacy – 3 credits

This course provides an overview of the health care system in the United States, including health care policy, financing, and professional issues. Policy analysis, policy making, and the political process are explored, with an emphasis on the role of nurses to advocate and influence health policy. (Includes 8 practicum hours.)

NURS-6073 Health Technology & Informatics – 3 credits

This course provides an overview of informatics and other technologies used to enhance quality and improve patient care and healthcare delivery. Emerging technologies, data management, and communication technology are examined for applicability to practice.

NURS-6083 Advanced Nursing Concepts in Pathophysiology & Pharmacology – 3 credits

This course expands the principles of physiological principles of common pathological syndromes across an individual's lifespan. Integration of pharmacological actions and effects of drugs related to disorders are also explored.

NURS-6103 Prevention & Health Promotion – 3 credits

This course investigates the role of the master's prepared nurse to influence health in diverse groups and populations. Emphasis focuses on culturally congruent health promotion, disease prevention, health education, and resource utilization for vulnerable populations. (Includes 8 practicum hours.)

NURS-6113 Curriculum Development in Nursing Education – 3 credits

This course examines factors related to the process of curriculum development, including exploration of current trends impacting nursing education. Discussions include evaluation of regulatory, accrediting, and professional standards, that must be taken into account when critiquing and developing curriculum. Students are guided in articulation of their personal philosophies of education.

NURS-6133 Assessment & Evaluation in Nursing Education – 3 credits

This course guides students in the development of theoretical and applied knowledge regarding assessment and evaluation in education. Specific focus areas include test construction, establishment of validity and reliability in assessment, evaluation of non-test assessments, and strategies for evaluation learning outcomes.

NURS-6143 Nursing Education Practicum – 3 credits

The focus of this course is the practice role in nursing education. Role development of the educator includes the incorporation of professional standards, cultural diversity, and learning styles. The diverse role of the nurse educator is explored through supervised teaching practice in areas of higher learning, patient education, and/or staff development. (Includes 48 practicum hours.)

NURS-6193 Graduate Nursing Capstone – 3 credits

The course evaluates the strategies implemented in an evidence-based project. The major responsibility of the student is to make decisions based on an integrative perspective of the program curriculum, and to justify their decisions through oral and written communication. Specialized assignments focus on completing a manuscript for the Evidence-Based Quality Improvement Project. In addition, a synthesis of student learning is demonstrated through a portfolio. (100 cumulative hours related to project to be completed throughout the MSN program.)

MSN Practicum Guidelines

Practicum Courses

Four MSN courses have practicum components: NURS-6043 Advanced Nursing Concepts in Physical Assessment, NURS-6053 Health Policy and Advocacy, NURS-6103 Prevention and Health Promotion, and NURS-6143 Nursing Education Practicum. Only NURS-6043 and NURS-6143 require preceptors. Additional information regarding guidelines for preceptors follow.

MVNU Practicum Statement Regarding Preceptors

MSN students need an Advanced Nurse Practitioner to serve as preceptor for NURS-6043 Advanced Nursing Concepts in Physical Assessment. For the NURS-6143 Nursing Education Practicum, a preceptor is needed who has at least a Master's degree in Nursing, as well as experience in healthcare education. The preceptor's specialization may be in any of the following educational areas: academics, patient education, or staff education.

Students are encouraged to identify potential preceptors among nurses they already know. Suggestions for finding nurse preceptors include considering someone with whom you work or asking people within your social network for possible names of nurses who would meet the criteria. The advantage of finding your own preceptor is that they are more likely to be available within your local community. If, after you have tried to find a preceptor, you are unsuccessful, let your MSN mentor know, and the Nursing Department will facilitate the identification of a preceptor in Knox County.

Prior to the start of a practicum, an **Agency Affiliation Agreement** (Appendix A) must be in place with the facility and the MVNU School of Nursing and Health Sciences. In facilities where agreements are already in place, there needs to be verification that an addendum is not needed for MSN students.

Once a student has finalized who their preceptor is going to be, the student must provide the precepting nurse with the **Preceptor Qualification Form** (Appendix B) and **Clinical Practicum Log** and **Student Learning Contract** (Appendix C). If preceptors have questions about the course for which they will be precepting, or about the MSN program in general, they may contact Dr. Carol Dorough at carol.dorough@mvnu.edu or 740-397-9000 x 3261.

The Preceptor Qualification Form and Affiliation Agreement must be completed and submitted to the MVNU SNHS before students can begin their practicum hours.

Upon completion of a practicum, the **Preceptor Evaluation Form** (Appendix D) is to be submitted to the course instructor.

NURS-6043 ADVANCED NURSING CONCEPTS IN PHYSICAL ASSESSMENT PRACTICUM – guidelines

Students are required to complete 24 practicum hours with a goal of strengthening their history taking skills and physical assessment techniques. These hours will be completed with an Advanced Practice Nurse who regularly assesses patients. The focus is on assessment and interpretation of findings, not on diagnosing or treating illness. The practicum hours are integral to the completion of course assignments. Students will track their hours using the Clinical Practicum Log, and this form must be submitted at the end of the course as evidence that all hours were completed.

Student Learning Outcomes for Practicum:

1. Gather complete health histories.
2. Perform head-to-toe and focused physical assessments.

NURS-6143 NURSING EDUCATION PRACTICUM - guidelines (See Appendices A, B, and C for Nursing Education Practicum documents.)

Students are required to work with an MSN level RN to complete 48 practicum hours.

Student Learning Outcomes:

1. Explore the role of a nursing educator in higher education, patient education, and/or

- staff development through a precepted experience.
2. Analyze current trends and issues affecting nurse educators.
 3. Apply and demonstrate current best practices in the education role.
 4. Demonstrate responsibility for professional growth and development.

NURS-6193 GRADUATE NURSING CAPSTONE - guidelines

Objectives

Building on the evidence-based project begun and completed in previous coursework, the student will:

1. Evaluate completed evidence-based intervention.
2. Complete manuscript of evidence-based project and portfolio demonstrating mastery of student learning outcomes, Master's Essentials, and practicum hours.
3. Disseminate Evidence-Based Project findings.

Capstone Project

MSN Course	Capstone Project Suggested Guidelines
NURS-6003 Theoretical Leadership	Explore possible concepts and frameworks for Capstone Project.
NURS-6013 Nursing Research & EBP	Develop a Research Proposal (Appendix E) or a plan for an Evidence-Based Practice project (Appendix F).
Course 3	Collaborate with faculty mentor and community expert to develop timeline for the Capstone Project. Begin seeking facility and IRB approval.
Course 4	Finalize facility approval for Capstone Project and IRB approval (MVNU IRB information available at https://portal.mvnu.edu/mvnucomm/IRB/Pages/default.aspx)
Course 5	Initialize Capstone Project intervention.
Course 6	Continue implementation of Capstone Project intervention.
Course 7	Complete Capstone Project intervention.
Course 8	Analyze results of Capstone Project intervention.
Course 9	Write summary of key findings of Capstone Project intervention.
Course 10	Write interpretation and conclusions for Capstone Project intervention.
NURS-6143 Nursing Education Practicum	Begin writing draft of the Capstone Manuscript using SQUIRE guidelines . (See Appendix G.)
NURS-6193 Graduate Nursing Capstone	Write and submit the final draft of the Capstone Manuscript, following SQUIRE guidelines. Submit Portfolio (Appendix H), including the Capstone Practicum Log with AACN Essentials (Appendix I).

The Capstone Project is introduced in the first MSN course, NURS-6003 Theoretical Leadership. In Evidence-Based Research in Nursing, the second course of the curriculum, either a Research Proposal (Appendix E) or a plan for an Evidence-Based Practice project (Appendix F) is submitted. A mentor is assigned to each student to guide them through the Capstone project. In each subsequent course, the MSN student continues to work with the mentor to address assigned elements of the proposal, culminating in a completed EBP project and Capstone Manuscript for dissemination in the final Capstone course.

Each student and their MSN mentor participate in monthly meetings. During these meetings, conversations focus on progress being made on the Capstone Research Project, as well as any other concerns the student may have. Although the timeline below recommends what elements of the Capstone should be completed during each MSN course, students are not held to these specific activities. Faculty recognize there are times when students may need to adjust the pace of work on the project. However, 100 cumulative hours are required to be documented on the **Capstone Practice Hours Log** (Appendix G) for successful completion of the Capstone course.

Nursing Department Admission, Progression, Graduation Policies

See MSN admission, progression, readmission, graduation, and dismissal policies in *Graduate and Professional Students* section of the *MVNU Catalog*.

Grading Policies

A	95-100%	C+	82-80%
A-	93-94%	C	79-76%
B+	91-92%	C-	75-73%
B	86-90%	D+	72-70%
B-	85-83%	D	69-65%
		F	<64%

Students must achieve a grade of **C (76%) or better** for the overall grade in any course in the MSN curriculum. Students not earning a grade of **C** must repeat the course. A grade of **C-** is **not** acceptable. A required MSN course may only be repeated one time, and no more than one course may be repeated.

Academic Advising Information

The MSN Program Chair guides students and monitors their progress through the graduate program. Students should notify the MSN Program Chair if they have difficulty in courses or other problems that might interfere with progress toward meeting objectives in the program. The Program Chair should be contacted by students to register for classes, add/drop classes, or to withdraw from the program. Students are responsible for notifying the Program Chair if assistance is needed.

American Psychological Association (APA)

All written work in the Nursing program must be submitted in APA format. The ability to write clearly according to the rules of English language is an essential quality of professional nurses and a liberal arts education. The student is responsible for improving writing skills throughout the program. All assignments will be graded for APA formatting, correct spelling, proper use of grammar, syntax, neatness, and legibility. All students in the Nursing program are expected to purchase and use the assigned APA Manual.

Attendance and Tardy Policies

See the GPS section in the current *MVNU Academic Catalog for Graduate and Professional Studies* for further details.

Change of Address

Students are responsible for reporting changes of address to the office of Academic Records and Registration Office as well as the Nursing Department Office. The Nursing Department requires students to provide updated email, telephone, and emergency contact information.

Chemical Abuse/Dependency

The Mount Vernon Nazarene University is a drug/alcohol free community. Use of tobacco, alcoholic beverages, and hallucinatory drugs is prohibited.

Code of Ethics

Students are expected to abide by the Code of Ethics established for nurses by the American Nurses Association. The Code for Nurses may be purchased online at the American Nurses Association website or can be downloaded at www.nursingworld.org/ethics/chcode.htm.

Communication with Faculty

Contact information for faculty is available on the cover page of the syllabus for each course.

Confidentiality/HIPAA

Each student in the MSN program is responsible for knowledge of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations. Any client information accessed during practicum must be treated as confidential. Release of confidential information (including verbal communication, written communication, or electronic mail) to any persons not in direct need of the information may result in dismissal from the program of nursing.

Credit Hour Policy for Online Courses (GPS Guidelines)

Online courses with all independent learning activity will operate within the following structure and guidelines:

5-week course: 23-25 hours per week of independent learning activity

6-week course: 19-21 hours per week of independent learning activity

8-week course: 15-16 hours per week of independent learning activity

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Evaluation of Students by Faculty

Student performance is evaluated in the classroom and practicum areas. A variety of evaluation methods may be used by faculty in the classroom. Final grades may be viewed on the MVNU portal.

Evaluation of Program by Students

Evaluation of the nursing program is an important professional activity. Each student is expected to provide thoughtful, constructive feedback with the aim of improving the program or specific courses. In addition to course evaluations, students are requested to participate in a post-graduate survey as a further means of assessing areas for program improvement.

Identification

Students must wear an MVNU ID badge when participating in practicum. Name badges will be provided through the Nursing office prior to the first practicum.

Library Services

The Thorne Library/Learning Resource Center provides a high-quality collection of materials in many formats. More than 5,000 electronic journals are available to students. The library and resource center are opened more than 83 hours a week during the school term to provide students with adequate access. The library participates in OhioLINK, a statewide network of libraries, which provide reciprocal interlibrary loan and direct user borrowing by college and university students throughout the state. More than 100 electronic databases and other on-line resources are available in the Library/Learning resource Center via the Internet.

Pre-Practicum Requirements

The following requirements must be met prior to participation in practicum experiences. (Malpractice insurance will be provided through MVNU.)

- Pass criminal background check with no report that would prohibit participation in practicum
- Health screening and immunizations required by practicum sites up to date
- Negative drug screen if drug screening is required by practicum sites
- Malpractice insurance

Program Governance

Students participate in program governance through the following mechanisms:

- Relay concerns and ideas to the MSN Program Director. These items are added to the MSN Faculty meeting agenda.
- Share concerns or ideas with the MSN mentor during the monthly meetings. This information is passed on to the MSN Program Director and included in the MSN Faculty agenda.
- Nominate a representative to serve on the MVNU Nursing Advisory Committee.
- Add comments to the open-ended questions at the end of each End-of-Course survey.

Student Notification of Program Changes

1. Students will be notified of changes in the MSN program through their MVNU emails with forced acknowledgement, updated resources on Moodle, revisions on the MSN page of the MVNU Catalog, and through updates in the *MSN Student Handbook*.
2. When changes are needed within courses, those will be communicated to students through MVNU email by course instructors and updated Moodle resources. Syllabi will be updated for future courses.

MVNU CATALOG – POLICIES

Academic Integrity

MVNU encourages personal integrity and maturity in its students. To that end, the University adheres to the principle of unquestioned honesty in its expectations of students, faculty, and staff. This standard should govern relationships and behavior in our residence halls, classrooms, chapel, and other campus entities. As a Christian community, faculty, staff, and students have a moral and ethical responsibility to uphold the principle of unquestioned honesty, and refrain from any activities or behaviors that would suggest academic dishonesty and lack of personal integrity. Academic dishonesty may involve attendance fraud, cheating, plagiarism, laboratory fraud, fabrication, or electronic media fraud. More information can be found at <https://www.mvnu.edu/uploads/Catalog>.

Attendance Fraud

The University strives to provide curricular and spiritual opportunities for students to develop and mature. In this process, it is essential for the student to be in attendance and to report that attendance honestly. Attendance fraud is misrepresentation of one's attendance at a required campus event. Specifically, attendance fraud includes, but is not limited to, the following:

1. writing another student's name on an attendance sheet;
2. asking or permitting another student to write one's own name on an attendance sheet;

3. writing one's own name on an attendance sheet and leaving the activity before it is formally dismissed;
4. making a false or misleading statement to an instructor as an excuse for missing class;
5. altering or forging a document submitted to an instructor from a physician, nurse, or university official as an excuse for missing class; or
6. providing false information about the amount of time worked on a time record.

Cheating

Cheating is the representation of someone else's work as one's own. In each course, the student is responsible for asking the faculty member which activities are authorized and permitted. Policies must be stated in the course syllabus. Cheating includes, but is not limited to, the following:

1. unauthorized entry to a faculty or secretarial office in search for examination-related material;
2. unauthorized use of materials from a faculty or secretarial office to prepare for an examination;
3. unauthorized use of a previously given examination to prepare for a present exam;
4. discussing any part of an exam that has not yet been completed with any person who has already completed the exam;
5. presenting a fraudulent excuse to seek permission to take an exam at a different time than the scheduled time, or submit work at a different time than due;
6. unauthorized possession of a copy of an exam;
7. giving assistance to or receiving assistance from another student during an exam;
8. looking at or attempting to look at another student's paper during an exam;
9. unauthorized use of published materials, notes, or "cheat sheets" during an exam;
10. unauthorized use of computing devices during an exam;
11. unauthorized use of tape recorders or other electronic devices during an exam;
12. unauthorized storage of information on an electronic calculator, computer or other media for use during an exam;
13. unauthorized use of pre-programmed computers or calculators during an exam;
14. unauthorized collaborating with or consulting another person to complete a project or homework assignment;
15. accessing an instructor's edition of a textbook or a test bank; or
16. the use of any electronic communication during an examination.

Plagiarism

In the academic community, there is variation in how often and to what degree the sources of ideas need to be cited. Faculty members can provide guidelines within academic disciplines. When the work depends upon the contributions of others, students are expected to acknowledge their indebtedness to them.

Plagiarism is a special form of academic dishonesty that involves the failure to acknowledge the source of ideas or portray someone else's work as one's own. Academic integrity requires that a

student acknowledge ideas and expressions borrowed from others. Plagiarism includes, but is not limited to, the following:

1. looking at or copying another student's work on an assignment (e.g., written work, term paper, workbook, etc.);
2. unauthorized accessing and/or copying another person's computer file(s);
3. submitting written work obtained from commercial sources (e.g., on-line or Internet term papers) or submitting work based upon information from such sources;
4. submitting work prepared by another person whether for money or favor; or
5. unacknowledged quotation of a published work.

Fabrication

Students who commit academic fraud fabricate fictitious data for experiments and report them as real. Examples include, but are not limited to, the following:

1. submitting a report on an experiment or project that was not actually performed;
2. listing works that were not actually consulted in a bibliography; or
3. listing fictitious works in a bibliography.

Electronic Media Fraud

Computers and other electronic information technologies function as instruments to facilitate student learning. They can also be employed as means to bypass the discipline of personal learning and mastery, as well as other non-academic improprieties. Examples of electronic media fraud include, but are not limited to, the following:

1. use of digital cameras, cell phones or similar devices to capture, store and transmit part or whole examinations;
2. capturing another person's login and password information to gain unauthorized access;
3. unauthorized access to and altering of student grade information stored on the University's learning management system (Moodle), servers and/or computers;
4. unauthorized capture and distribution (e.g., peer-to-peer file sharing) of copyrighted materials, including music, videos, publisher text banks, and/or electronic textbooks, without permission of the publisher.
5. sending and/or accessing electronic messages or digital images of course-related materials during examinations;
6. malicious attacks on the University's computer system and/or network;
7. unauthorized or illegal data mining of University-owned records.
8. using electronic technology to misrepresent one's identity to others (i.e., electronic aliases); or
9. circumventing University network security systems to gain unauthorized access (e.g. hacking) to information records and/or websites.

Policies

MVNU endeavors to communicate clearly its positive expectations about the principle of academic integrity and to educate its members and handle academic integrity violations in a fair and consistent manner.

1. The penalty for any first offense shall be a zero on that particular assignment. No makeup examination or extra credit project will be permitted. If a faculty member uses a lowest grade dropped policy, then the zero may not count as the lowest grade to be dropped.
2. The penalty for any second offense shall be failure of the applicable course.
3. The penalty for any third offense shall be failure of the applicable course and immediate dismissal from MVNU. All other courses in the given term of attendance shall have the WP (Withdrawal Passing) or WF (Withdrawal Failure) grade administered.
4. More severe penalties may be levied (a) when the integrity offense is an organized group action, (b) when criminal actions result (e.g., unauthorized use of a master key or breaking and entering), or (c) when the action involves more than one course. MVNU reserves the right to prosecute alleged criminal offenses as well as involve its Human Resources and/or Student Life personnel in the investigation and discipline. In egregious cases, the action may be initiated by the Academic Affairs Office, Vice President for Academic Affairs, or VPAA's designee.
5. The rights of students, as outlined in the Student Handbook, will be upheld, except that the procedures in this section shall apply in academic integrity matters.
6. In cases of dismissal, the "dismissal" designation shall be entered on the student's transcript.
7. Schools and/or faculty may stipulate more stringent policies in the school policy and/or syllabi. The academic integrity decision (including any appeals) will be made on the basis of the more stringent policy.
8. In the case of dismissal, the dismissal will be no less than one full semester. A student may petition for readmission after the dismissal period. If re-admission is granted, the enrollment status for the first semester shall be academic probation. If no further incidences occur during the probationary semester, then the status will be changed to "good standing" at the beginning of the next semester.
9. The Assistant to the President for Effectiveness and Planning is responsible for maintaining all records of academic integrity decisions.
10. The maximum penalty that a school dean or faculty member can determine is failure for the course. Dismissal from the University is a decision that can only be made by the Academic Affairs Office.

Procedures

1. In alleged instances of academic dishonesty, the instructor shall address the issue with the student and, if necessary, investigate the incident. The instructor will determine the appropriate action to take based on the above policy and the course syllabus and report the matter to the school dean and the Academic Affairs Office.

The instructor may consult the department chair, school dean and/or the Academic Affairs Office during the investigation and decision process. If the matter is resolved at this level, the process will end when the Academic Integrity Incident Report is filed with the Assistant to the President for Effectiveness and Planning (a copy of the report will also be given to the school dean).

2. The student has the right to appeal the matter to the school dean. The appeal must be made in writing within five (5) working days of the time the student has been notified in writing of the decision. The appeal must include all correspondence and evidence related to all previous actions and appeals. The school dean will respond in writing to the appeal within five (5) working days of receipt of the appeal.
3. The dean's decision may be appealed only on procedural grounds (e.g. the stated process was not followed, relevant evidence was not considered, etc.). Such an appeal must be filed in writing with the Assistant to the President for Effectiveness and Planning within five (5) working days of the time the student has been notified in writing of the decision. The appeal must include all correspondence and evidence related to all previous actions and appeals.
4. The Assistant to the President for Effectiveness and Planning will convene the Academic Integrity Review Board to administer the appeal. The Academic Integrity Review Board is comprised of five members, all of whom are appointed by the VPAA, in consultation with the Academic Leadership Team. Three members will be full-time faculty and two members will be junior or senior students. The Assistant to the President for Effectiveness and Planning will chair the board but will only vote in the case of a tie. The Assistant to the President for Effectiveness and Planning is responsible for insuring that the matter has been handled fairly and that a written report of the Board's decision is sent to the instructor, department chair, school dean, student, and the Academic Affairs Office. The Board's decision is final and cannot be appealed.

Discrimination, Harassment, and Violence

In keeping with its religious heritage, ethical convictions, and legislation, the University values a teaching, learning, and working environment that is free from discrimination, harassment, and violence. This includes Title IX, viewable [here](#).

Discrimination is based on inequitable treatment of individuals. The University prohibits discrimination of its employees or students that is related to the individual's race, color, sex, national origin, age, disability, or military service. Title IX covers sexual discrimination at the link above.

Harassment includes, but is not limited to, any conduct that a recipient feels is offensive, unwelcome, demeaning, rude, or threatening. This conduct can take the form of slurs, jokes, bullying, cyber bullying, or stalking; be verbal, graphic, or physical; be directed at employees or students; occur in peer-to-peer or hierarchical relationships; and/or be perpetrated by employees, students, or non-employees. Title IX addresses sexual harassment at the link provided above.

Violence. The University prohibits violence of any sort against any of its members. Title IX

addresses sexual violence at the link provided above.

When discrimination, harassment, or violence is reported, the University will take prompt and remedial action. Violation of this policy by any of its members shall subject the individual to disciplinary action, up to and including discharge. Any GPS student who wishes to submit a non-Title IX claim that involves discrimination, harassment, and/or violence must follow the procedures outlined in the [Academic Policy Decision Appeals](#) portion of the "Academic Standing" section of this Catalog.

Grievances

Students in GPS programs at Mount Vernon Nazarene University have the right to appeal any grade or academic decision in accordance with the published Academic Grievance Policy in the GPS section of the *MVNU Catalog*.

Pass/Fail Options

Students may not use the pass/fail option in any required MSN courses. Courses taken as pass/fail will not be considered for transfer credit.

Student Behavior and Rights

As a Christian liberal arts university, MVNU is committed to moral and spiritual values. Where these values imply restrictions of conduct, they are in the interest of a richer experience of community life. Each member of the MVNU community is expected to behave honorably, considerately, and peacefully while enrolled at MVNU. The standards of behavior are those of the Church of the Nazarene, which is the sponsoring church and which provides substantial financial and moral support.

GPS students are expected to assume responsibility for unquestioned honesty and for choosing morally-enhancing forms of recreation, entertainment, and interpersonal relationships. GPS students are also encouraged to refrain from the use of alcoholic beverages, tobacco, and other habituating drugs.

The Christian value system espoused by the School of Graduate and Professional Studies does not condone offensive pictures or literature, or other inappropriate materials; expressing lack of self-respect and respect for others in public display of affections, swearing and profane or obscene language; and all forms of gambling.

MVNU affirms the biblical teaching that sexual intimacies are to be shared as God's gift within the context of a committed marriage relationship between a man and a woman, and to do otherwise is to distort the holiness and beauty that God intended. As members of a Christian community, we are admonished to avoid certain sexual activities held to be incompatible with God's will for our sexual integrity, including, but not limited to, fornication, sexual promiscuity, adultery, homosexual acts, homosexual behavior, public expression and/or promotion of a homosexual lifestyle, and viewing/ participating in pornography.

Students who are admitted and who continue to be enrolled must give evidence of the ability to function in the total university environment, meeting financial, emotional, academic, and behavioral criteria. Inability to so function will call for review at various official levels for continuation of enrollment.

In the event of a behavioral offense, MVNU has various responses, including, but not limited to the following: withdrawal, suspension, dismissal, or expulsion. In each of these cases, the student is not permitted on any MVNU campus.

Student Rights

It is important that students at MVNU understand the limits or parameters of their rights.

First, MVNU is a private church university. This indicates that MVNU students are in a different category than students at a public, state-supported university. Comparisons between both must take this into consideration.

Second, MVNU students are in a "contractual" relationship. As voluntary attendees, students agree to accept the responsibility to fulfill MVNU community rules, regulations, policies, and procedures.

Third, MVNU may dismiss a GPS student if it deems the student's behavior to be incompatible with its standards. Students may be suspended, dismissed, expelled, or withdrawn on either academic and/or behavioral grounds.

Fourth, MVNU subscribes to federal regulations protecting student privacy. The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. It is codified at 20 U.S.C. section 1232g. The United States Department of Education has issued regulations to implement the law.

Right to Privacy (FERPA)

In accord with the Family Educational Rights and Privacy Act (FERPA) of 1974, each student has these privacy rights:

- The right to inspect and review information contained in the student's educational records.
- The right to challenge the contents of the student's educational records.
- The right to a hearing if the outcome of the challenge is unsatisfactory.
- The right to submit an explanatory statement for inclusion in the educational record if the outcome of the hearing is unsatisfactory.
- The right to prevent disclosure, with certain exceptions, of personally identifiable information.

The University may release directory information without the student's consent unless the student requests that such information not be disclosed. With the exception of directory

information, the University cannot release any information to third parties or non-University personnel (including academic information) about a student without an electronic waiver on file in the University Registrar's Office. When waivers are filed, they pertain to all terms of enrollment at the university until the student rescinds the permission.

Students will need to complete the Information Release Form. In the Information Release Form the student will be able to select the type of information to be released and which individuals are permitted to have access to that released information. The federal law may be accessed at: <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>. The federal regulations may be accessed at: <http://www.ed.gov/policy/gen/guid/fpco/ferpa/leg-history.html>.

Students with Special Needs

Qualified students who have a physical and/or mental impairment that substantially limits one or more major life activities may receive assistance at MVNU as provided in Section 504 of the Rehabilitation Act of 1973 and in the applicable provisions of the Americans with Disabilities Act of 1990. More comprehensive information is available at <http://mvnu.edu/undergraduate/academics/css/accessibilityservices>.

Any qualified GPS student must meet the requisite academic and technical standards required for admission and participation due to the nature of our Graduate and Professional Studies programs. As such, GPS students who have questions about receiving appropriate accommodations for a documented disability should contact Amy Brown (Academic Success Coach for the School of Graduate and Professional Studies) as soon as possible via phone (877-431-9610, ext. 6009) and/or email at GPS.AcademicSuccess@mvnu.edu.

Appendix A

MOUNT VERNON NAZARENE UNIVERSITY AGREEMENT FOR AGENCY SERVICES

This is an agreement between **Mount Vernon Nazarene University**, herein referred to as MVNU, and, herein referred to as the Agency, for the purpose of providing precepted experiences for RN student related to the **Master of Science in Nursing** in the above named Agency.

WHEREAS, MVNU, is an Ohio not for Profit institution of higher education; and

WHEREAS, the Agency provides services related to nursing and health care, and is agreeable to providing educational opportunities for MVNU Health Sciences students that will enhance the educational experience;

IT IS THEREFORE AGREED TO AS FOLLOWS:

I. General provisions:

The University agrees:

- 1.1 To provide an individual responsible for representing the University in matters related to precepted student experiences. The responsible individual shall be the MSN Program Director or designee who shall represent the University in matters related to student field experiences.
- 1.2 MVNU, through its MSN Program Director, shall coordinate with the Agency to arrange a preceptor in advance of the start of the preceptorship experience.
- 1.3 The name of the MSN student to be placed at the Agency and relevant information concerning the student will be provided to the Agency by the MVNU Nursing Department.
- 1.4 MVNU MSN program shall provide all evaluation materials and be solely responsible for determining the student's final grade for the experience.
- 1.5 MVNU, through the MSN Program Director or designee, shall serve as liaison throughout the precepted experience.
- 1.6 MVNU, through the MSN Program Director or designee, shall communicate relevant information regarding educational standards, philosophy, and student expectations to the Agency.
- 1.7 MVNU shall alone be responsible for final actions regarding the student. This information will remain confidential to the University pursuant to the Family Education Right to Privacy Act (FERPA), unless such information must be reported according to FERPA or other applicable law.
- 1.8 MVNU shall place only students that are currently enrolled in the MVNU MSN program and do not have legal limitations for placement.
- 1.9 Students shall not appear on the experience site until they have appropriate fingerprint and appropriate criminal background checks and verification.

II. **The Agency agrees:**

- 2.1 The Agency shall provide its facilities and resources as necessary to provide field experiences and study for MVNU MSN students.

- 2.2 The Agency shall make available such facilities and resources necessary for the accomplishment of the field observation activities.
- 2.3 A wide range of activities are appropriate for field observation assignments, but none shall place the student in activities apart from their educational value.
- 2.4 The Agency in compliance with all applicable rules, regulations and laws shall notify MVNU through its Dean or designee of any accident or other exposure which might affect the health of the student, including exposure to communicable disease, chemical substance, radiation, or active biochemical agent. This information will also be relayed by the Agency to the Student.
- 2.5 The Agency shall comply with the Family Educational Rights and Privacy Act (FERPA) in relations to student records.
- 2.6 The Agency shall provide emergency care to the Student and report the same to the University.
- 2.7 The Agency shall instruct students about Agency policies and regulations concerning the confidentiality of client information and medical records.
- 2.8 The Agency agrees to keep all student information provided by Mount Vernon Nazarene University confidential. All student records will be stored consistent with the Agency policy for securing confidential employee files.

III. Discipline/Removal of Students:

- 3.1 Either MVNU or the Agency may request withdrawal of a student if there is sufficient cause. Sufficient cause means, but is not limited to, unethical behavior, violation of client rights, excessive absences, gross lack of proper motivation, lack of fit in an agency-student match or implementation of a student plan, a breach of confidentiality, sexual harassment or sexual abuse of a patient. The student may be suspended immediately from the clinical site by the Agency for sufficient cause. The Dean shall be notified of this suspension within Twenty-Four (24) hours.
- 3.2 In lieu of requesting the withdrawal of a student for violating Agency policy or procedures or for any behavior explained in the above paragraph, the Agency or the Dean may impose conditions on the student as a requirement for continued placement at the Agency. Any unacceptable behavior or impending disciplinary action must be immediately reported to the Dean. The Dean will work jointly with the student and the Agency in determining action. However, MVNU, through its published disciplinary procedures shall be responsible for final decisions concerning disciplinary action regarding the student as such discipline relates to the student's status with the University. Prior to any disciplinary conditions being applied to students by the field Agency, the issues must be reviewed and approved in writing by the Dean and an Agency representative. All disciplinary action or requests for withdrawal of a student will be documented in the student's file kept at the University for a period of four years and may be considered as part of the University's recommendation for graduation or licensing.
- 3.3 Students shall not receive remuneration from the Agency for services performed when acting in the capacity of a student nurse.

IV. Scheduling:

- 4.1 MVNU shall submit in as far in advance as possible the requested schedule, which students will follow in terms of dates, days of the week, and number of students.

- 4.2. MVNU and Agency shall both be entitled to alter schedules for experiences, should it become necessary.
- 4.3. MVNU will consult with the Agency to determine appropriate experiences for each student.

V. General Educational Expectations:

- 5.1. MVNU, the Agency and the Students shall carry out their responsibilities under this Agreement in accordance with all applicable laws, regulations, and professional standards, including but not limited to Health Information Portability and Accountability Act of 1996 (HIPAA) requirements and the Family Educational Rights and Privacy Act (FERPA) in relations to student records. Both parties agree: 1) not to use or disclose any confidential information for any purposes other than as stated in this Agreement, 2) not use or disclose confidential information in a way that would violate privacy; 3) maintain appropriate safeguards to protect confidential information. This is not a HIPAA Business Associate Agreement and neither is a business associate of the other.

VI. Liability Issues:

- 6.1. The Agency shall have no obligation to provide Worker's Compensation Insurance on the students or MVNU representatives.
- 6.2. MVNU shall maintain and assure malpractice insurance over the MSN student covering their acts during the instruction period.
- 6.3. Students shall prior to placement receive proper training in all applicable OSHA standards for potential exposure to blood-borne pathogens. MVNU shall maintain and Exposure Control Plan based on Center for Disease Control (CDC) guidelines and OSHA standards.
- 6.4. The Agency shall provide all required protective equipment at the Agency location.

VII. Review:

- 7.1. This agreement shall continue until further notice. It may be terminated at the request of either party. The agreement may be terminated for the balance of any academic year provided that no student shall be prevented from completing the field experience and notice of such impending termination is given six weeks before the effective date.

For the Agency: (Type name of agency here)

Agency Official

Date

For the University:

Carol Dorough, EdD, MSN, RN
Dean, MVNU School of Nursing and Health Sciences

Date

Appendix B

PRACTICUM PRECEPTOR QUALIFICATION FORM

Mount Vernon Nazarene University – School of Nursing and Health Sciences

Preceptor Name: _____

Facility/Employer Name: _____

Education:

Terminal degree: ___PhD ___EdD ___DNP ___Other

Institution		Year		Field	
-------------	--	------	--	-------	--

Master's degree: ___MS ___MA ___MBA ___Other

Institution		Year		Field	
-------------	--	------	--	-------	--

RN Licensure:

RN License Number	Expiration Date
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Certifications:

Experience as a Registered Nurse:

Location	Specialty Area	Years and Months

Appendix C
Nursing Practicum Documents
Clinical Practicum Log

Student Name: _____ Course: _____

Total Hours Required: **See syllabus for hours required in each course**

Date	Setting	Activity	Hour(s)	Preceptor/Mentor Initials
Total Hours				

Week 6 Signatures

Submitted by: (Student) _____ Date: _____
Signature/Electronic signature:

Accepted by: (Faculty) _____ Date: _____
Signature/Electronic signature:

Student Learning Contract

Student Learning Outcomes	Student Identified Goals to meet student learning outcomes.	Description of specific, measurable steps of how the goal will be met	Evidence of accomplishment
1. Apply Biblical principles to develop ethical decision making, leadership skills, and professional relationships. (Essentials II, IX)			
2. Integrate knowledge, best evidence, and technology to influence change and advance the quality of nursing care. (Essentials I, III, IV, V, VII, IX)			
3. Implement strategies to improve health outcomes through primary, secondary, and tertiary prevention practices. (Essentials I, II, III, IV, V, VI, VII, VIII, IX)			
4. Advance excellence in nursing through effective communication, deliberate collaboration, quality education, and professional development. (Essentials I, II, III, IV, V, VI, VII, VIII, IX)			
5. Advocate for client centered, holistic care through interdisciplinary collaboration to improve the health outcomes of diverse populations. (Essentials I, VI, VII, VIII, IX)			

6. Analyze vulnerabilities of the individual and systems environments to improve quality and safety outcomes. (Essentials III, V, VI, VIII, IX)			
7. Lead in the provision of client centered, culturally appropriate care to individuals, families, and populations. (Essentials II, VIII, IX)			
8. Promote spiritual care of self and others through respectful and compassionate relationships. (Essentials VIII, IX)			

Week 1 Signatures

Submitted by: (Student) _____ Date: _____

Signature/Electronic signature:

Accepted by: (Faculty) _____ Date: _____

Signature/Electronic signature:

Week 6 Signatures

Submitted by: (Student) _____ Date: _____

Signature/Electronic signature:

Accepted by: (Faculty) _____ Date: _____

Signature/Electronic signature

Appendix D

Practicum Preceptor Evaluation

MOUNT VERNON NAZARENE UNIVERSITY – School of Nursing and Health Sciences

Preceptor _____ Course _____

Facility _____ Semester/Year _____

Please respond to each question by placing a circle around the appropriate answer.

SA = strongly agree, A = agree, N = neutral, D = disagree, SD = strongly disagree.

Your comments are important to us. Please provide a comment regarding choices N, D, or SD. Feel free to comment on any or all responses.

Preceptor Experiences:

1.	The Preceptor assisted in the identification of learning opportunities that assisted with achievement of course outcomes.	SA	A	N	D	SD
2.	The Preceptor was helpful, knowledgeable, and approachable.	SA	A	N	D	SD
3.	The Preceptor provided constructive feedback.	SA	A	N	D	SD
4.	Working with the Preceptor was valuable for expanding nursing practice experience.	SA	A	N	D	SD
5.	Please rate your overall satisfaction with the Preceptor experience.					
	Excellent	Good	Fair	Poor		

Additional Comments:

Appendix E

Research Project Guidelines

1. Problem identification
 - Describe a problem or issues needing a solution.
 - Provide support that the problem or issue is one that is important to solve.
 - State specific, realistic, measurable research objectives or a research question.
2. Evidence of Support (Literature Review/Available Knowledge)
 - Provide sufficient and compelling research supporting the proposed solution.
 - Summarize research articles in a concise manner, including a discussion of internal and external validity.
 - Describe the essential elements of each article.
3. Methods and Implementation
 - Details of the methodology
 - Research design
 - Sample or Population
 - Setting
 - Ethical considerations
 - Method of collecting data and rationale for use
 - Implementation of the proposed solution
 - Resources required to implement proposed solution
 - Barriers to implementation and how barriers overcome
 - Confounding variables
4. Results
 - Methods of evaluation
 - Analysis of findings
 - Plans for monitoring implementation of solution
 - Plan for determining success of the implementation: short-term and long-term
5. Discussion
 - Interpretation of findings
 - Identification of limitations
 - Suggestions for future studies

Appendix F

Evidence-Based Practice Project Guidelines

Step 1: Identify and define a problem.

Step 2: Identify, review, and evaluation relevant research studies.

Step 3: Design a practice change based on evidence, keeping patient preferences in mind.

(PICO)

P (Patient or population that will be the focus of the study)

I (Intervention or treatment researcher plans to use)

C (Comparison of one intervention to another)

O (Outcome that is anticipated)

<https://www.ebsco.com/sites/g/files/nabnos191/files/acquiadam-assets/What-is-the-PICO-Process-Handout-A4.pdf>

Appendix G

Revised Standards for Quality Improvement Reporting Excellence (SQUIRE 2.0)

Notes to Authors	
<ul style="list-style-type: none"> • The SQUIRE guidelines provide a framework for reporting new knowledge about how to improve healthcare. • The SQUIRE guidelines are intended for reports that describe system level work to improve the quality, safety, and value of healthcare, and used methods to establish that observed outcomes were due to the intervention(s). • A range of approaches exists for improving healthcare. SQUIRE may be adapted for reporting any of these. • Authors should consider every SQUIRE item, but it may be inappropriate or unnecessary to include every SQUIRE element in a particular manuscript. • The SQUIRE Glossary contains definitions of many of the key words in SQUIRE. • The Explanation and Elaboration document provides specific examples of well-written SQUIRE items, and an in-depth explanation of each item. • Please cite SQUIRE when it is used to write a manuscript. 	
Title and Abstract	
1. Title	Indicate that the manuscript concerns an initiative to improve healthcare (broadly defined to include the quality, safety, effectiveness, patient-centeredness, timeliness, cost, efficiency, and equity of healthcare)
2. Abstract	<p>a. Provide adequate information to aid in searching and indexing</p> <p>b. Summarize all key information from various sections of the text using the abstract format of the intended publication or a structured summary such as: background, local problem, methods, interventions, results, conclusions</p>
Introduction	<i>Why did you start?</i>
3. Problem Description	Nature and significance of the local problem
4. Available Knowledge	Summary of what is currently known about the problem, including relevant previous studies
5. Rationale	Informal or formal frameworks, models, concepts, and/or theories used to explain the problem, any reasons or assumptions that were used to develop the

	intervention(s), and reasons why the intervention(s) was expected to work
<u>6. Specific Aims</u>	Purpose of the project and of this report
Methods	<i>What did you do?</i>
7. Context	Contextual elements considered important at the outset of introducing the intervention(s)
8. Intervention(s)	<ul style="list-style-type: none"> a. Description of the intervention(s) in sufficient detail that others could reproduce it b. Specifics of the team involved in the work
9. Study of the Intervention(s)	<ul style="list-style-type: none"> a. Approach chosen for assessing the impact of the intervention(s) b. Approach used to establish whether the observed outcomes were due to the intervention(s)
10. Measures	<ul style="list-style-type: none"> a. Measures chosen for studying processes and outcomes of the intervention(s), including rationale for choosing them, their operational definitions, and their validity and reliability b. Description of the approach to the ongoing assessment of contextual elements that contributed to the success, failure, efficiency, and cost c. Methods employed for assessing completeness and accuracy of data
11. Analysis	<ul style="list-style-type: none"> a. Qualitative and quantitative methods used to draw inferences from the data b. Methods for understanding variation within the data, including the effects of time as a variable
12. Ethical Considerations	Ethical aspects of implementing and studying the intervention(s) and how they were addressed, including, but not limited to, formal ethics review and potential conflict(s) of interest
Results	<i>What did you find?</i>
13. Results	<ul style="list-style-type: none"> a. Initial steps of the intervention(s) and their evolution over time (e.g., time-line diagram, flow

	<p>chart, or table), including modifications made to the intervention during the project</p> <p>b. Details of the process measures and outcome</p> <p>c. Contextual elements that interacted with the intervention(s)</p> <p>d. Observed associations between outcomes, interventions, and relevant contextual elements</p> <p>e. Unintended consequences such as unexpected benefits, problems, failures, or costs associated with the intervention(s).</p> <p>f. Details about missing data</p>
Discussion	<i>What does it mean?</i>
14. Summary	<p>a. Key findings, including relevance to the rationale and specific aims</p> <p>b. Particular strengths of the project</p>
15. Interpretation	<p>a. Nature of the association between the intervention(s) and the outcomes</p> <p>b. Comparison of results with findings from other publications</p> <p>c. Impact of the project on people and systems</p> <p>d. Reasons for any differences between observed and anticipated outcomes, including the influence of context</p> <p>e. Costs and strategic trade-offs, including opportunity costs</p>
16. Limitations	<p>a. Limits to the generalizability of the work</p> <p>b. Factors that might have limited internal validity such as confounding, bias, or imprecision in the design, methods, measurement, or analysis</p> <p>c. Efforts made to minimize and adjust for limitations</p>

<p>17. Conclusions</p>	<ul style="list-style-type: none"> a. Usefulness of the work b. Sustainability c. Potential for spread to other contexts d. Implications for practice and for further study in the field e. Suggested next steps
<p>Other Information</p>	
<p>18. Funding</p>	<p>Sources of funding that supported this work. Role, if any, of the funding organization in the design, implementation, interpretation, and reporting</p>

Retrieved from <http://www.squire-statement.org/index.cfm?fuseaction=Page.ViewPage&page>

Appendix H

Capstone Portfolio Guidelines

The following documents, which incorporate data compiled throughout the MSN program, must be included in the complete portfolio.

- Self-reflection on how *AACN Master Essentials*, Student Learning Outcomes, and course objectives were met throughout the program
- Clinical Practicum Log (100 hours completed throughout the program for Evidence-Based Practice project; culminating in Capstone course)
- Practice Hours Log (88 total practicum experience hours accumulated throughout program).
- Copy of completed Capstone manuscript, using SQUIRE guidelines

