

Holy Names University Department of Nursing

2017-18



FNP Student Handbook

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Introduction

Overview of the Family Nurse Practitioner Program

Holy Names University Department of Nursing offers the Family Nurse Practitioner Program for nurses who want to develop advanced practice knowledge, skills and competencies in primary care of individuals, families and communities throughout the lifespan . Students who possess a baccalaureate degree in nursing may pursue the MSN degree, and those who already possess the MSN or MN degree or an MS or MA with a major in Nursing may pursue the post-master certificate.

Overview of the FNP Curriculum

The FNP program includes didactic courses and practice-based clinical or role performance courses. Each course is comprised of specific learning objectives, activities, and evaluation measures. The didactic courses present the nursing knowledge, theoretical concepts, models, and research that inform patient care and evidence-based practice. The clinical courses provide opportunities for students to apply knowledge; practice skills; plan, implement and evaluate interventions and programs; and learn the full scope of the FNP role for which they are preparing.

The FNP curriculum is composed of MSN core, advanced science and role-specific courses and 12 units of supervised clinical practice. Students in the post-master program do not participate in the MSN core classes, with the exception of NURS214/414 (Health Promotion and Risk Reduction) and the final FNP Professional Issues Seminar.

The MSN core curriculum comprises interpretation and management of professional issues, practice issues, legislative issues, certification issues, insurance issues, quality and safety issues, legal issues and ethical conflict resolution in advanced nursing practice in a model of interdisciplinary collaborative practice. MSN students also complete Research and Capstone

(NURS277A & B) courses which strengthen their skills in the development and assessment of new practice approaches based on the integration of research, theory, and practice knowledge.

Included in the FNP course of study for both master degree and post master certificate students are advanced health assessment, advanced pharmacology and advanced pathophysiology. In addition, courses in comprehensive assessment and management of common acute, chronic and complex health problems across the life span within a culturally diverse environment comprise the curriculum. To receive the MSN degree, FNP students must complete 35 units of didactic course work. Certificate students must complete 20 didactic units.

All students, both certificate and MSN, must complete a total of 12 units (624 clinical hours) of clinical preceptorship and must achieve success in their clinical site evaluations. Students collaborate with the Clinical Coordinator and Assistant Clinical Coordinator of the FNP program to secure a broad spectrum of across-the-lifespan preceptorship experiences with a variety of experienced ARNP, MD and DO preceptors.

Clinical hours must be in primary care and should provide approximately equal proportions of clients of all ages. These clinical experiences must address health promotion and the types of acute/ chronic psychosocial and physical health problems that are typically seen in a primary care setting. While clinical experiences build upon one another, as well as on students learning in the classroom, each has specific learning objectives to be achieved. The focus of the first clinical experience is comprehensive health assessment, health promotion and risk reduction. In the second clinical experience, students focus on primary care for acute, simple and episodic general health problems. The focus of the third clinical experience is primary care for complex and chronic health problems. In the final clinical experience the student is expected to assume full responsibility for patient care with preceptor support and direction, and to fully apply the theoretical knowledge gained in

classroom activities. During the clinical experiences, the student is expected to provide care to patients in women's health, pediatrics and obstetrics, as well as for conditions often found in adult internal medicine settings. Highly specialized clinical experiences are permitted for short periods during the last clinical terms as approved by the instructor. Some examples of these include: diabetes, orthopedics, dermatology or AIDS clinics; these may not be a major focus in the student's clinical experiences unless the student is performing common primary care functions in the specialty sites. Specialty sites must be discussed with the Clinical Coordinator and course faculty for approval on a case-by-case basis.

The FNP program, as part of the Master of Science in Nursing Program at HNU, is accredited by the Commission on Collegiate Nursing Education (CCNE). The University is accredited by the Western Association of Schools and Colleges (WASC). The FNP program meets the requirements of the California Board of Registered Nursing (BRN) and is a BRN-approved program. Graduates of this program are eligible to apply for certification as nurse practitioners in the State of California. Students who successfully complete this program meet the requirements to sit for a national certification examination as Family Nurse Practitioners.

I. PURPOSE OF THE FNP PROGRAM

The Family Nurse Practitioner (FNP) program prepares competent Advanced Practice Registered Nurses who build on the competencies of registered nurses (RNs) by demonstrating a greater depth and breadth of knowledge, a greater synthesis of data, increased complexity of skills and interventions, and greater role autonomy, to provide patient-centered primary health care. The Family Nurse Practitioner program's primary purpose is to produce a graduate who possesses advanced skills of physical diagnosis, psycho-social assessment, and management of health-illness needs in primary health care and is clinically competent to assume responsibility and accountability for continuity of care in health promotion and/or maintenance as well as the assessment, diagnosis, and management of patient physical and psycho-social problems in primary health care, which includes the use and prescription of pharmacologic and non-pharmacologic interventions. Graduates will possess the didactic and clinical experience required to meet California Board of Registered Nursing education requirements; and will be eligible to sit for national certifying examinations. It is the purpose of the FNP program to prepare competent ambulatory primary care family nurse practitioners who will practice as autonomous and collaborative members of the health delivery system delivering primary health care to patients and families across the lifespan within the scope of practice defined by the regulatory criteria of the State of California.

II. MISSION STATEMENT

MISSION OF HOLY NAMES UNIVERSITY

Holy Names University, an academic community committed to the full development of each student, offers a liberal education rooted in the Catholic tradition, empowering a diverse student

body for leadership and service in a diverse world. Holy Names University, a center of rigorous teaching and scholarship in the Catholic intellectual tradition, is...

- rooted in the charism of the Sisters of the Holy Names of Jesus and Mary and committed to social justice
- a student-focused community developing critical thinkers and transformational leaders
- a model of diversity promoting cultural competency
- a resource for study and impact on urban issues, particularly in Oakland.

MISSION OF THE DEPARTMENT OF NURSING

The mission of the Department of Nursing at Holy Names University is to prepare nursing graduates who are caring professionals with strong clinical reasoning skills, advocates for health and social justice who communicate effectively with clients of diverse cultures and provide, coordinate and design high quality, resource-efficient and safe nursing care in a complex, global health care environment.

III. PHILOSOPHY

The philosophy of the Department of Nursing at Holy Names University is to provide professional education for graduate students that is consistent with the philosophy of the University which is to produce a graduate who is able to (1) provide culturally sensitive care to individuals of diverse cultural backgrounds, (2) use critical thinking skills that are necessary for the delivery of quality care, (3) assume transformative leadership styles when necessary and appropriate, and (4) promote social justice. To accomplish these goals, the faculty of the Department of Nursing believe and base their teaching on the following:

- The healthcare environment in which professional nurses function is complex, political, and often confusing. In this environment, professional nurses must know how to function within a team, how to be an advocate for the patient, how to interpret the laws governing nursing practice, and the rules and procedures of managed care, and how to access information. They must also understand the ethics of healthcare and be ready to provide patient-centered care in the best interests of the patient and the family.
- Health is more than being free of health problems. Health is being able to function; it is a state of being able to cope regardless of the stressors or chronic health problems. Health encompasses physical, psychological, emotional, and spiritual well-being. To maintain health one must prevent health problems and use strategies to maintain wellness.
- Professional nursing is an important service for those needing primary, secondary, and tertiary interventions. Professional nurses act as caregivers and managers of care in hospitals and other healthcare facilities and programs. They function independently and collaboratively as members of healthcare teams. Professional nurses diagnose, plan and act, always cognizant of the need to evaluate the outcome of their actions.
- Professional nurses need an education that meets the needs of a diverse population in an ever-changing healthcare arena. Knowledge of cultural differences, healthcare conditions, community structures, the theories of nursing, research, economics, and the role of the professional nurse in a variety of situations and places are necessary for the professional nursing to function in this ever-changing arena.
- Professional nurses who are educated at Holy Names University as advanced practice registered nurses function as certified primary care nurse practitioners for the family/individual across the lifespan focus area to provide the full spectrum of health care

services. These include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care. The ARNP/FNP uses advanced health assessment skills to differentiate normal, variations of normal and abnormal findings, employs screening and diagnostic strategies in the development of differential diagnoses, prescribes medications within scope of practice, and manages the health/illness status of patients and families over time.

IV. LEARNING OUTCOMES

DEPARTMENT OF NURSING LEARNING OUTCOMES

Implicit in our mission, the following knowledge, skills, attitudes and behaviors are expected of all graduates of our nursing programs.

HNU Graduates from all programs are:

1. Caring professionals
2. Advocates for social justice
3. Strong clinical reasoners
4. Effective communicators
5. Collaborators with diverse cultures
6. Safe quality providers of care
7. Knowledgeable of the global healthcare environment
8. Strong leaders

Examples of Family Nurse Practitioner Program-Specific Outcomes

<u>Department of Nursing Outcomes</u>	<u>Family Nurse Practitioner Program-Specific Outcomes</u>
<u>Caring professionals</u>	<p>Use therapeutic communication and family theory to establish a caring and professional relationship with the client and family by recognizing client/family concerns and by facilitating client decision making and linking the care to the client/family's concerns. NURS 251A</p> <p>Plan and order palliative care and end-of-life care which incorporate concerns of family, significant others and communities. NURS 242</p> <p>Provide family-centered care and incorporate the family's identified community in the delivery of family-centered care. NURS 251A</p> <p>Evaluate the impact of life transitions on the health/illness status of patients and the impact of health and illness on patients (individuals, families, and communities) NURS 241</p> <p>Provide appropriate patient education, anticipate follow-up care, and provide on-going re-evaluation and management of health status over time. NURS 252</p>
<u>Advocates for Social Justice</u>	<p>Plan and implement interventions that are applicable for patients and families, which are current, comprehensive, culturally relevant, ethically determined, in conformity with state laws and congruent with national goals and priorities. NURS 274</p> <p>Develop an effective and appropriate evidence-based plan of care which takes into consideration personal history and health status, age, gender, life circumstances, and genetic, cultural, ethnic, and developmental variations NUR 241</p> <p>Incorporate core scientific and ethical principles in identifying ethical issues arising from clinical practice and the use of technologies, and assist patients or populations experiencing chronic or complex problems to address such issues NUSR 242</p> <p>Advocate for social justice, improved access, quality, and cost effective health care through effective communication with patients, clients and stakeholders of diverse cultural backgrounds NURS 276</p>
<u>Clinical Reasoners</u>	<p>Relate assessment findings to underlying pathology and physiologic changes to generate differential diagnoses and establish an accurate diagnosis. NURS 241</p> <p>Use advanced clinical reasoning to independently and collaboratively assess, diagnose, monitor, coordinate and manage the health/illness status of clients over time including special populations, such as infants and children, pregnant and lactating women, and older adults. NURS 253</p> <p>Critically evaluate and apply research studies pertinent to client care management and outcomes NURS 253</p> <p>Use advanced knowledge of illness and disease management to determine evidence-based care for patients and populations, perform risk assessments, and design plans or programs of care for diverse patients or populations experiencing chronic or complex illness or problems. NURS 252</p>

<p><u>Effective Communicators</u></p>	<p>Assess patients' and caregivers' educational needs and translate technical and scientific health information appropriate for various users' needs to provide effective, personalized health care. NURS 53</p> <p>Use communication technologies and information systems to document patient care, reduce risks, improve health outcomes and to practice within regulatory criteria and guidelines NURS 253</p> <p>Identify mechanisms to update knowledge base and clinical competencies and demonstrate information literacy skills in complex decision making. NURSF274</p> <p>Use self-evaluative information, including peer review, to improve care and practice. NURS 242</p>
<p><u>Collaborators with diverse cultures</u></p>	<p>Critically analyze the applicability of health promotion/disease prevention models as they relate to racial, ethnic, social, cultural, developmental and gender variables in health promotion and risk reduction for selected populations NURS 274</p> <p>Provide family-centered care and incorporate the family's identified community in the delivery of family-centered care. NURS 274</p> <p>Apply ethically sound solutions to complex issues related to individuals, populations and systems of care. NURS 272</p> <p>Facilitate the development of health care systems that address the needs of culturally diverse populations, providers and other stakeholders. NURS 276</p>
<p><u>Safe quality providers of care</u></p>	<p>Use advanced knowledge of illness and disease management to determine evidence-based care for patients and populations, perform risk assessments, and design plans or programs of care for diverse patients or populations experiencing chronic or complex illness or problems NURS 242</p> <p>Provide the full spectrum of primary health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care. NURS 253</p> <p>Evaluate the results of interventions using accepted outcome criteria, revise the plan accordingly, consult/refer when needed, and perform peer review of outcomes. NURS 253/453</p> <p>Furnish drugs and/or devices pursuant to standardized procedures and in conformity with applicable laws, codes and/or regulations. NURS 244</p>
<p><u>Knowledgeable of healthcare environment</u></p>	<p>Use current national criteria and standards to improve and promote the health of populations. NURS 242</p> <p>Evaluate strategies that influence regulatory, legislative and public policy in private and public arenas to promote and preserve healthy communities. NURS 274</p> <p>Critically assess resources for maintaining current clinical competence NURS 244</p> <p>Demonstrate an understanding of the interdependence of policy and practice. NURS 272</p> <p>Evaluate the use of technologies for diagnostic, therapeutic and educational interventions.</p>

	NURS 242
<u>Strong leaders</u>	<p>Practice independently and collaboratively under approved standardized procedures managing previously diagnosed and undiagnosed patients. NURS 253</p> <p>Collaborate and consult with other members of the health care team in the design, oversight and coordination of patient care and the evaluation of outcomes NURS 253</p> <p>Work collaboratively with decision making bodies to improve healthcare outcomes NURS 272</p> <p>Influence legislation to promote health and improve care delivery models through collaborative and/or individual effort NURS 272</p> <p>Interpret the nurse practitioner role to clients and other health care professionals. NURS 253</p> <p>Apply theories and evidence-based knowledge in leading, as appropriate, the healthcare team to design, coordinate, and evaluate the delivery and outcomes of care to diverse patients experiencing chronic or complex problems NURS 242</p> <p>Engage diverse health care professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific patient care needs. NURS 241</p>

GRADUATE LEARNING OUTCOMES FOR ALL MSN PROGRAMS

Based on AACN Essentials of Masters Education in Nursing (2011)

1. Synthesize and apply broad client-centered and culturally appropriate concepts of caring in diverse populations. (Essential VIII)
2. Evaluate the legal and ethical aspects of healthcare and advocate for social justice and health promotion. (Essential VI, VII & VIII)
3. Integrate clinical reasoning, critical reading of research and practice inquiry and EBP to improve patient population health outcomes. (Essential IV, VI & VII)
4. Incorporate situationally appropriate modes of inter-professional communication to improve practice outcomes. (Essential III, V, VII& IX)
5. Analyze quality improvement processes and data to promote culturally responsive, safe, timely, effective, efficient, equitable and patient-centered care. (Essential II, III, V, VII, VIII & IX)

6. Synthesize broad ecological, global and social determinants of health in the delivery of clinical prevention and promotion interventions and/or services to individuals, families, communities and aggregates/clinical populations. (Essential II, IV, VI, VII, VIII & IX)
7. Exhibit leadership strategies to influence decision making in complex healthcare systems. (Essential II, III, IV, VI, VII & IX)

TERMINAL OUTCOMES OF THE MSN PROGRAMS

The faculty of the Department of Nursing expects the graduates of the MSN program to be able to:

1. Function in a variety of arenas as professional nurses providing or directing/administering safe, effective, and cost-conscious high quality nursing care.
2. Address the cultural aspects of diverse populations seeking/needing healthcare
3. Be aware of healthcare changes, the community and its constituents, and the politics and economics of healthcare
4. Use leadership strategies in order to be more influential in current and future roles as professional nurses
5. Educate individuals, families and groups about their healthcare needs
6. Consider the ethical and legal aspects of healthcare and how to function as a professional advocate
7. Be critical readers of research, advocates for evidence-based practice, and beginning investigators
8. Communicate effectively in writing and when speaking

V. ADMISSION REQUIREMENTS

Students applying for admission to an MSN program at Holy Names University must have:

1. A current California license as a Registered Nurse.
2. Baccalaureate Degree in Nursing (BSN) from a program accredited by the National League for Nursing Accrediting Commission (NLNAC) or the Commission on Collegiate Nursing Education (CCNE).
3. Cumulative GPA of 2.8 or better and a GPA of 3.00 in the nursing courses from their baccalaureate program.
4. A TOEFL score of 550 or higher if English is the second language
5. Two letters of reference from previous professors or current/previous work supervisors.
6. A personal statement including the applicants' understanding of the Primary Care FNP role, their career goals as FNPs, and their specific plans for accommodating the demands of the FNP program for classes, class preparation and clinical experience within their existing schedules.

Students who have an RN license and have earned a bachelor's degree in a non-nursing field of study may meet the entrance requirements for the MSN program by completing the Pathway Program:

Pathway Family Nurse Practitioner Option (18 units)

NURS 131 Health Assessment

NURS 141 Nursing Research

NURS 142W & 142L Family and Community Health Nursing I and Practicum

NURS 152 Family and Community Health Nursing II

NURS 171 Pathophysiology

All students in the graduate nursing program must have Professional Liability insurance (\$1,000,000/6,000,000) in force before they can register in any clinical practice course, and must maintain this insurance in force while completing any clinical practice courses. The cost for this insurance will be the responsibility of the student.

All students admitted to the FNP program will be required to comply with all of the Health and Safety Requirements of the Nursing Department upon admission to the Nursing program. The required documents must be uploaded by the student to the online system, Castle Branch. The cost for using this system will be paid by the student.

VI. CURRICULUM

The FNP Program curriculum has been designed to meet the learning needs of students pursuing an advanced practice nursing role in primary care at the master's degree or post-master certificate level. Courses provide the knowledge necessary to prepare a safe and competent nurse practitioner for autonomous collaborative practice in ambulatory primary care in accord with the regulatory criteria of the State of California.

The FNP/MSN curriculum is composed of master's core, advanced science and role-specific courses which total 47 units. (the post master Certificate totals 32 units). The FNP program includes didactic courses and practice-based clinical or role performance courses. Each course is comprised of specific learning objectives, activities, and evaluation measures. The didactic courses present the nursing knowledge, theoretical concepts, models, and research that inform evidence-based patient care and legal, ethical and economically sound practice.

The clinical courses provide opportunities for students to apply knowledge; practice skills; plan, implement and evaluate interventions and programs; and learn the full scope of the FNP role.

Students must complete 624 hour of supervised clinical practice in four clinical classes. Each clinical class has specific objectives that must be met. Clinical practicum sites are selected collaboratively by the Clinical Coordinator and the student with a focus on obtaining a variety of primary care experiences with patients of all ages. Students may need to travel a significant distance to obtain the required practicum experience. Travel time is not part of the practicum hours. Students are responsible for arranging their own travel to and from practicum sites and for any overnight accommodations that may be needed. A student may be transferred to a different practicum site at any time if the site is not able to meet the learning goals and objectives of the clinical course, but a student may not initiate a change of practicum site except in consultation with the Clinical Coordinator.

Because of the nature of networks and geography, it is important for students to assist in this process by letting the Clinical Coordinator know about accessible agencies and the names of contact persons in those agencies. Please note that the Clinical Coordinator makes the final decision after a review of the potential preceptor's resume and evidence of an unencumbered professional license. With large healthcare systems, this process can take many months, and the earlier the search can begin the more likely placement will be established early in the semester.

Students are encouraged to propose the names and provide the contact information for potential preceptors to the Clinical Coordinator, but requests for placement must be made by the University, and not by individual students, as all potential preceptors must be evaluated by the Clinical Placement Coordinator for suitability. After a preceptor is approved by the Clinical Placement Coordinator and the student has been notified of an approved placement, the student must obtain copies of the preceptor's resume, a printout of the current CA BreZE license verification page for that practitioner

(<https://www.breeze.ca.gov/datamart/selSearchTypeCADCA.do?from=loginPage>), a signed

Letter of Agreement (see the **Student Clinical Handbook**) and the signature page of the clinical site's standardized procedures, bearing the signature of the preceptor.

Core Courses Required of all MSN Students (16 units):

NURS 271 The Theoretical Basis and Philosophical Foundations of Advanced Practice Nursing (3)

NURS 272 Healthcare Law and Ethics (3)

NURS 274 Health Promotion and Risk Reduction of Diverse Populations Across the Life Span (3)

NURS 276 Social Impact of Healthcare Economics in a Changing Healthcare Environment (3)

NURS 277A Scientific Inquiry in Nursing (3)

NURS 277B Capstone Course (3)

Requirements for the Family Nurse Practitioner Program (29 units):

Didactic

NURS 270 Advanced Health Assessment (3)

NURS 270L Advanced Health Assessment Lab (1)

NURS 241 Primary Care of the Family Through the Life Span I (4)

NURS 242 Primary Care of the Family Through the Life Span II (4)

NURS 243 Advanced Pathophysiology (2)

NURS 244 Advanced Pharmacology (3)

Clinical

NURS 251A Primary Care of the Family Through the Life Span: Role Performance I (2)

NURS 251B Primary Care of the Family Through the Life Span: Role Performance I (2)

NURS 252 Primary Care of the Family Through the Life Span: Role Performance II (4)

NURS 253 Primary Care of the Family Through the Life Span: Role Performance III (4)

Master's Degree Program in Nursing
Family Nurse Practitioner Option 2017-18

Fall Semester
Summer Session
September – November
May-August

Spring Semester
January – April

<p>NURS 243 – Advanced Pathophysiology (2) 1:00 PM – 4:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 12:00-1:00 PM</p> <p>NURS 272 – Healthcare Ethics (3) – 8:00 AM – 12:00 PM (Thurs., Fri., Sat. Sun.)</p> <p>REQUIRED ORIENTATION FRIDAY EVENING 4-6 PM</p>	<p>NURS 270 – Advanced Health Assessment (3) 8:00AM – 1:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>NURS 270L – Advanced Health Assessment Lab (1) 8:00 AM – 1:00 PM (Sat. or Sun.)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 1:00-2:00 PM</p> <p>NURS 274 – Health Promotion (3) 2:00 PM – 6:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>1-2 REQUIRED PRACTICE SESSIONS scheduled by faculty</p> <p>REQUIRED CLINICAL ORIENTATION THURSDAYS 6-7PM</p>	<p>NURS 244 – Advanced Pharmacology (3) 8:00 AM – 12:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 12:00-1:00 PM</p> <p>NURS 241 – Primary Care of the Family I (4) 1:00 PM – 6:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>NURS 251A – FNP Clinical Course (2) 6:30 PM – 8:30 PM (Thursday only with one day of clinical practice a week)</p> <p>REQUIRED CLINICAL ORIENTATION FRIDAYS 6-7PM</p>
<p>NURS 271 – Theoretical Basis of Advanced Nursing Practice (3) 2:00 PM – 6:00 PM (Thurs. Fri. Sat. Sun)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 1:00-2:00 PM</p> <p>NURS 242 – Primary Care of the Family II (4) 8:00 AM – 1:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>NURS 251B – FNP Clinical Course II (2) 6:30 PM – 8:30 PM (Friday only with one day of clinical practice a week)</p> <p>REQUIRED CLINICAL ORIENTATION THURSDAY 6-7pm</p>	<p>NURS 276 – Healthcare Economics (3) 1:00-500 PM (Thurs., Fri., Sat., Sun.)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 12:00-1:00 PM</p> <p>: NURS 277A – Scientific Inquiry (3) 9AM-noon (Thurs., Sat, Sun.)</p> <p>NURS 252 – FNP Clinical Course III (4) 8:00 AM – noon (Friday only with two days of clinical practice a week)</p> <p>REQUIRED CLINICAL ORIENTATION FRIDAYS 5:30-7:30</p>	<p>NURS 277B – Capstone Course (3) 8:00 AM – 12:00 PM (Thurs., Fri., Sun.)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 12:00-1:00 PM</p> <p>NURS 253 – FNP Clinical Course IV (4) 8:00 AM – 12:00 PM (Saturday only with two days of clinical practice each week)</p> <p>Required Nurse Practitioner Professional Issues SEMINAR 1-4 PM (Thurs., Fri. & Sat.)</p> <p>REQUIRED CLINICAL ORIENTATION 4-6PM SATURDAYS</p>



Post-Master's Certificate Program in Nursing
Family Nurse Practitioner Option 2017-18

Fall Semester
Summer Session
September – November
May- August

Spring Semester
January – April

<p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 1:00-2:00 PM</p> <p>NURS 243 – Advanced Pathophysiology (2) 2:00 PM – 5:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>REQUIRED ORIENTATION FRIDAY EVENING 4-6 PM</p>	<p>NURS 270 – Advanced Health Assessment (3) 8:00A – 1:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>NURS 270L – Advanced Health Assessment Lab (1) 8:00 AM – 1:00 PM (Sat. or Sun.)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 1:00-2:00 PM</p> <p>NURS 274 – Health Promotion (3) 2:00 PM – 6:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>1-2 REQUIRED PRACTICE SESSIONS scheduled by faculty</p> <p>REQUIRED CLINICAL ORIENTATION THURSDAYS 6-7PM</p>	<p>NURS 244 – Advanced Pharmacology (3) 8:00 AM – 12:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 12:00-1:00 PM</p> <p>NURS 241 – Primary Care of the Family I (4) 1:00 PM – 6:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>NURS 251A – FNP Clinical Course (2) 6:30 PM – 8:30 PM (Thursday only with one day of clinical practice a week)</p> <p>REQUIRED CLINICAL ORIENTATION FRIDAYS 6-7PM</p>
<p>NURS 242 – Primary Care of the Family II (4) 8:00 AM – 1:00 PM (Thurs., Fri., Sat., Sun.)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 1:00-2:00 PM</p> <p>NURS 251B – FNP Clinical Course II (2) 6:00 PM – 8:00 PM (Friday only with one day of clinical practice a week)</p> <p>REQUIRED CLINICAL ORIENTATION THURSDAY 6-7PM</p>	<p>NURS 252 – FNP CLINICAL COURSE III (4) 8:00 AM – NOON (FRIDAY ONLY WITH TWO DAYS OF CLINICAL PRACTICE A WEEK)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 1:00-2:00 PM</p> <p>REQUIRED CLINICAL ORIENTATION FRIDAYS 5:30-7:30</p>	<p>NURS 253 – FNP Clinical Course IV (4) 8:00 AM – 12:00 PM (Saturday only with two days of clinical practice each week)</p> <p>REQUIRED STUDENT-FACULTY FORUM FRIDAY 1:00-2:00 PM</p> <p>Required Nurse Practitioner Professional Issues SEMINAR 1-4 PM (Fri & Sat)</p> <p>REQUIRED CLINICAL ORIENTATION 4-6PM SATURDAYS</p>

Holy Names University Pathway Family Nurse Practitioner Option Program

	Fall	Spring	Summer
Pathway Students	Nurs 171 Pathophysiology (3) Nurs 141 Research (3) Nurs 142 Community (1.5) Nurs 142 L Community (1.5)	Nurs 131 Health Assessment (3) Nurs 142 Community (1.5) Nurs 142 L Community (1.5)	Nurs 152 Community (3)
Total Credits	Total 9	Total 3	Total 3
Nurs 141 Research		Prerequisite Course 	Soc Statistics 105
Nurs 142 Community Health		Prerequisite Course 	BIO 180 Epidemiology

Students who have an RN license and have earned a bachelor's degree in a non-nursing field of study may meet the entrance requirements for the MSN program by completing the Pathway Program. Based on the desired concentration, students need to complete the above courses at the undergraduate level of nursing before admission to the MSN program. Note some courses have prerequisites that need to be met before registering for a course, therefore the student transcript needs to be evaluated by advisor.

VII. POLICIES

A. ACADEMIC HONESTY

The University considers honesty vital to its academic life. Therefore, it requires that students learn and abide by the standards of honesty expected in an academic community.

In general, academic honesty requires that students: (1) submit work that is clearly and unmistakably their own; (2) properly represent information and give adequate acknowledgment to all sources that were used in the preparation of an assignment; (3) neither seek, accept, nor provide any assistance on tests, quizzes, and/or assignments unless explicitly permitted to do so by the instructor. Examinations taken on-line outside the classroom may be subject to electronic proctoring by an outside agency.

Penalties and Reporting Procedures

Because they undermine the whole nature of academic life, all forms of cheating, plagiarism, and misrepresenting academic records are considered serious offenses in the academic community. In the event of violations, penalties will be imposed based on the degree of the offense. The individual instructor has the right and responsibility to make the course grade reflect a student's academic dishonesty. At the instructor's discretion, the student may receive a reduced or failing grade for a single piece of work or for the entire course in which there was academic dishonesty. In cases of suspected academic dishonesty, the instructor initiates a 'Confidential Suspected Violation of Academic Honesty Report', making every effort to reach student by phone, email, and other modes of communication in order to discuss the circumstances. After 15 working days, the instructor completes the report—with or without an accompanying discussion with the student—sending a copy to the student and the original to the

Academic Affairs Office, together with supporting documentation. These documents remain confidential in the Academic Affairs Office, unless a copy to the student's permanent academic file is indicated by the instructor. The Associate Dean of Academic Affairs shall endeavor to determine the extent of possible academic misconduct. If evidence of prior academic dishonesty is on record with the Academic Affairs Office, the student may be subject to suspension or dismissal from the University. All penalties may be appealed by the student, according to the procedures outlined below. In all cases the confidentiality of the students and or the faculty members shall be upheld.

Student Appeal Process

Step 1. Within fifteen (15) working days of receiving notification of the penalty by the instructor, the student may initiate a formal appeal process with the Chairperson of the Division or Department. In order to initiate this process, the student will direct a written appeal to the Chairperson. The Chairperson will investigate the matter, meeting—at his/her discretion—with those involved. Within fifteen (15) working days of the receipt of the written appeal, the Chairperson will report in writing to the student his/her findings and decision. A copy of this report will be sent to the Academic Affairs Office and placed in the student's file.

Step 2. The student may, within fifteen (15) working days following receipt of the Chairperson's decision, direct a written appeal, including supporting evidence, to the Vice President for Academic Affairs. The Vice President will investigate the matter, meeting—at his/her discretion—with those involved. Within fifteen (15) working days of receipt of the student's appeal, the Vice President will report in writing to the student his/her findings and decision. A copy of this report will be placed in the student's file.

The decision of the Vice President is final even if a decision against the student will mean that the penalty will result in academic disqualification or dismissal. There is no further University appeal.

Specific Violation of Academic Honesty

Specific violations of academic honesty include plagiarism, misrepresentation of sources, distortion of information, use of written work prepared by others, and multiple submission of papers without the permission of instructors.

To give students practical guidance in adhering to these requirements, below are noted the following specific violations of academic honesty and the ways in which they can be avoided:

Plagiarism

Plagiarism (which comes from the Latin word, *plagiare*, to kidnap) is using the distinctive words or ideas of another as if they were your own. This includes all categories of expression: literary, artistic, scientific, mechanical, etc. All forms of plagiarism are violations of academic honesty.

In scholarship, another person's distinctive words and/or ideas are regarded as his/her intellectual "property". Respect for this "property" is as essential as respect for any property, and this respect is ensured when a student properly acknowledges the contributions of others to his/her work. Awareness of debt to another person's work is essential in avoiding plagiarism, but it is not enough. Students must also be careful scholars. Therefore, to avoid plagiarism, students should:

1. Take accurate notes when reading. Quote accurately and paraphrase correctly.

Carefully write down the author, book or periodical title, and page numbers of quotes and paraphrases.

2. When using quotes or paraphrases in a paper, acknowledge specific sources by internal references or footnotes.
3. Carefully cite author, title, publication data, and page numbers (where appropriate) of all sources consulted.

In all subjects, some facts and ideas are considered general knowledge and need not be cited. Instructors can answer questions about whether or not information falls into this category. Remember: when doubt exists, cite the source. Note: Careful scholarship applies to oral as well as written reports. In giving an oral report, students should also be aware of debts to sources. They should write down references in notes, acknowledge these references where appropriate throughout the report, and cite all sources upon request at the end of the presentation.

Computer Assisted Plagiarism

Students are reminded that computer-assisted plagiarism—i.e., representing another person's work as their own—is still plagiarism. Student abuse of computer-assisted plagiarism is subject to the penalties stated in the Academic Honesty policy. The following are examples of computer-assisted plagiarism:

1. If a student copies a computer file that contains another student's assignment and submits it as his/her own work.
2. If a student copies a computer file that contains another student's assignment and uses it as a model for his/her own assignment.
3. If students work together on an assignment, sharing the computer files or programs involved, and then submit individual copies of the assignment as their own individual work.
4. If a student knowingly allows another student to copy or use one of his/her computer

files and then to submit that file, or a modification thereof, as his/her individual work.

Misrepresentation of Sources and Distortion of Information

All misrepresentations of sources and distortion of facts and/or ideas constitute a violation of academic honesty. This includes:

1. All misleading or inaccurate references to authors, titles, publishing data, or page numbers in footnotes, internal references, and bibliographies; and
2. Any alteration of facts or ideas which misrepresents the meaning or intent of the original source (i.e., taking words out of context or misrepresentations of data in graphs, statistics, lab reports, etc.).

In order to avoid unintentional misrepresentations of information, students should take careful notes and transfer them accurately to their papers or reports. Before submitting work, students must proofread to verify the accuracy of statements and citations.

Use of Written Work Prepared by “Ghost Writers” or Others

Submission of written essays, research papers, science reports, laboratory results, computer programs, or homework assignments, etc. prepared by a person other than the student submitting the assignment as his/her own work constitutes a misrepresentation of academic work and is a violation of academic honesty. Discussion of essay topics, problems, or lab projects with teachers or friends helps to generate and clarify ideas and is not only permitted but also encouraged (unless the faculty member states that the work is to be done independently).

However, the written assignment or report that is the product of these discussions must be the work of the student, a written expression of his/her final reflections on the subject.

Specific Comments on Test-taking

Any assistance on in-class tests and quizzes is considered a violation of academic honesty. This includes verbal assistance from another student, sharing notes, sharing pre-coded computers, and the use of any books or notes not explicitly permitted by the instructor. (These rules also apply to take-home tests, unless the instructor gives explicit directions to the contrary.) In order to avoid any possible misunderstanding:

- Students should not bring books and notes into the classroom on a testing day unless otherwise advised by the instructor.
- Students should avoid any interaction with other students during a test unless they have the explicit permission of the instructor.

B. ACADEMIC RESPONSIBILITIES AND RIGHTS OF STUDENTS

Students are individually responsible for knowing and observing the regulations, policies and procedures listed in the university catalog and all modifications, revisions, or additions which may be published in the Schedules of Classes, HNU website, Blackboard classrooms, or HNU student email messages.

C. ACADEMIC APPEALS

For academic questions, as in all other areas of appeal, the intent of the University is to try first to reach a resolution informally among those involved; failing this, more formal steps may be taken. Academic appeals fall broadly into four categories:

1. Those concerning a grade or a requirement in a particular course.
2. Those concerning penalties resulting from violations of academic honesty.
3. Those concerning the interpretation or application of a general education or major/degree/program requirement.
4. Those concerning academic disqualification from the University.

The procedures and timelines for dealing with these various categories of academic appeals are described below. Once an appeals process begins, all University personnel will protect the privacy of the student and the confidentiality of the process.

Academic appeals concerning a grade or requirement in a particular course:

Step 1. The student will first contact the instructor who has assigned the grade in question or is responsible for determining course requirements. This step must be taken no later than the end of the academic term following the term in which the problem arose. Normally, students will resolve their concerns informally at this point.

Step 2. If the question remains unresolved, the student may initiate a formal appeal process with the Chairperson of the Division or Department. In order to initiate this process, the student will direct a written appeal to the Chairperson. The Chairperson will investigate the matter, meeting— at his/her discretion—with those involved. Within fifteen (15) working days of the receipt of the written appeal, the Chairperson will report in writing to the student his/her findings and decision.

Step 3. The student may, within fifteen (15) working days following receipt of the Chairperson’s decision, direct a written appeal, including supporting evidence, to the Vice President for Academic Affairs. The Vice President will investigate the matter, meeting—at his/her discretion— with those involved. Within fifteen (15) working days of receipt of the student’s appeal, the Vice President will report in writing to the student his/her findings and decision. The decision of the Vice President is final even if a decision against the student will mean that the grade or requirement under appeal will result in academic disqualification. There is no further University appeal.

Academic appeals concerning penalties resulting from violations of academic honesty:

Step 1. Within fifteen (15) working days of receiving notification of the penalty by the instructor, the student may initiate a formal appeal process with the Chairperson of the Division or Department. In order to initiate this process, the student will direct a written appeal to the Chairperson. The Chairperson will investigate the matter, meeting—at his/her discretion—with those involved. Within fifteen (15) working days of the receipt of the written appeal, the Chairperson will report in writing to the student his/her findings and decision. A copy of this report will be sent to the Academic Affairs Office and placed in the student's file.

Step 2. The student may, within fifteen (15) working days following receipt of the Chairperson's decision, direct a written appeal, including supporting evidence, to the Vice President for Academic Affairs. The Vice President will investigate the matter, meeting—at his/her discretion—with those involved. Within fifteen (15) working days of receipt of the student's appeal, the Vice President will report in writing to the student his/her findings and decision. A copy of this report will be placed in the student's file.

The decision of the Vice President is final even if a decision against the student will mean that the penalty will result in academic disqualification or dismissal. There is no further University appeal.

Academic appeals concerning the interpretation or application of a general education or major/degree/program requirement:

Step 1. The student will go first to the Program Director or Chairperson of the Department. Normally, students will resolve their concerns informally at this point.

Step 2. If the issue remains unresolved, the student may direct a written appeal, including supporting evidence, to the Vice President for Academic Affairs. The Vice President will investigate the matter, meeting—at his/her discretion—with those involved. Within fifteen (15) working days of receipt of the student’s appeal, the Vice President will report in writing to the student his/her findings and decision. The decision of the Vice President is final even if a decision against the student will mean that the requirement under appeal will result in academic disqualification or dismissal. There is no further University appeal.

Academic appeals concerning academic disqualification from the University:

Step 1. Graduate students should direct appeals of academic disqualification to their Program Director. Undergraduate students should direct appeals of academic disqualification to the Vice President for Academic Affairs. Appeals must be made in writing within fifteen (15) working days of receipt of the academic disqualification letter. The Program Director or Vice President will investigate the matter. Within fifteen (15) working days of receipt of the student’s appeal, the Program Director or Vice President will report in writing to the student his/her findings and decision. For undergraduate students, the decision of the Vice President is final. There is no further University appeal.

Step 2. Graduate students may appeal the decision of the Program Director to the Vice President for Academic Affairs. The student must direct a written appeal to the Vice President within fifteen (15) working days of the receipt of the Program Director’s decision. The Vice President will investigate the matter. Within fifteen (15) working days of receipt of the student’s appeal, the Vice President will report in writing to the student

his/her findings and decision. The decision of the Vice President is final. There is no further University appeal.

Student Handbook.

University Ombudsperson

Holy Names University's ombudsperson is a designated neutral or impartial dispute resolution practitioner whose major function is to provide confidential and informal assistance to students of the University community. Sister Carol Sellman, Vice President for Mission Effectiveness, serves in this capacity currently.

D. ADVISING

Chairpersons of each department or division assign an academic advisor to each graduate student. Advisors work with students to help them plan academic programs that fulfill the graduation requirements. Academic advisors are available to assist students in meeting their academic responsibilities; however, every Holy Names University student is expected to be proactive in his/her academic planning. To this end, students are encouraged to get to know their academic advisors and to become familiar with the graduation requirements. Faculty members in the FNP program hold weekly office hours by appointment, but because many students live at a distance from campus, most advising occurs via email and telephone contact. Students are **required** to use their HNU-assigned email accounts to communicate with the University and with their academic advisors and other faculty members.

Because FNP students have clinical responsibilities and there is a possibility that information may be needed from them that has bearing on a clinical situation, FNP students are expected to check the HNU email account frequently, and are required to respond to faculty communications within 48 hours at all times. Failure to respond as

required to all faculty communications which may be directed to the student's HNU email account and which require an answer, ask a question, or request information, is subject to penalty at the discretion of the faculty, up to and including failure of a class.

Per the HNU Catalog, **changes of name and address MUST be reported:**

Students are required to report immediately all changes of name, address, personal email, or telephone number to the Student Resource Center. Official documentation (marriage license, divorce documents) must be submitted to the Student Resource Center when changes of name are reported.

E. APA FORMAT

All papers submitted in the Department of Nursing must conform to APA format.

Frequent workshops are offered to facilitate students' understanding and use of the APA format when preparing written documents for a grade. The Department of Nursing has a dedicated library liaison librarian who is available to assist with questions about the use of APA format and other aspects of scholarly research and writing.

F. ATTENDANCE AT THEORY COURSES

- Students are required to be present in class for all didactic coursework.
- The courses are offered during a 4-day weekend, generally every 4 to 8 weeks. There are 8 or more didactic course hours on each of the four days depending on the term. Frequent breaks are given during class time. It is imperative that students be present in each entire class.
- Missing more than one class meeting or (or an equivalent number of hours in accumulated lateness) is sufficient to result in an **automatic failure** of the course **regardless of the circumstances.**

- If a student fails a prerequisite theory or clinical course it must be repeated before the student can advance to the next theory/clinical courses. A course can only be repeated once.
- Points will be deducted from students' grades, at the discretion of the instructor, for arriving late to class, returning late from breaks or for leaving the classroom outside of breaks prescribed by the instructor,.
- The FNP program is designed for working nurses, some of whom travel to Holy Names from all over California. Please do not plan to leave classes early or arrive late in order to accommodate travel schedules. Travel arrangements must be made so as not to interfere with class attendance.
- By being present in class, it is expected that students will devote their full attention to the activities of the classroom, and support the participation of others. Activities which distract from others' participation or disrupt the classroom atmosphere will result in a reduction of the course grade at the discretion of the faculty.
- Absences for emergencies are assessed on a case-by-case basis by the instructor and/or the FNP program director.
- The student must assume full responsibility for work missed because of absence, including any additional work assigned to compensate for the absence.

Leave of absence from the FNP program may be granted for a maximum of one academic year.

Students who receive leave of absence from the FNP program will have one year in which to rejoin the program, after which they must apply for re-instatement in order to continue in the program

Students who receive leave of absence from the FNP program may be required to repeat as auditors the classes which they have previously passed, at the discretion of the FNP program director.

G. ATTENDANCE IN CLINICAL COURSES

Attendance at clinical courses is mandatory. Students are requested to treat clinical assignments as they would assigned hours of employment. Students are not to provide direct patient care if symptoms of an acute illness or infection is present. Absences must be reported directly to the Clinical Coordinator and to the preceptor and the clinical agency at least one hour before the student is expected to report for duty. If a student is absent and does not report the absence prior to the scheduled clinical time, the student may receive a F for the clinical course. Any failed clinical course must be repeated before advancement to the next theory/clinical courses. A course can only be repeated once.

It is also important for students to report to the clinical area at least 5 minutes before the scheduled time. Tardiness is not acceptable behavior and a student may be asked to leave the clinical area if (s)he does not arrive on time. The student must be professionally dressed and prepared to deliver patient care, with all knowledge and equipment necessary to participate in the care of patients. Makeup opportunities will be made available for students who have notified the appropriate parties prior to the absence. All changes in clinical schedules, including makeup of absences must be approved by the Faculty of Record for the clinical class and/or by the Clinical Coordinator.

Students are expected to attend their assigned clinical site according to the schedule approved on E*Value. Any absence from an assigned clinical day requires **immediate** notification of the Faculty of Record for the clinical class and/or the Clinical Coordinator.

Students who are unable to complete assigned clinical hours for any of the following four reasons will be deemed to have an excused absence and may make up missed clinical hours by adding additional clinical days with the consent and assistance of the Clinical Coordinator until the deficit is corrected:

- 1) Preceptor is unavailable on scheduled clinical days (illness, vacation, meeting, etc.)
- 2) Assigned clinical day falls on an FNP class day
- 3) Delay in placement due to unforeseen credentialing or scheduling issues identified by the Clinical Placement Coordinator
- 4) Documented illness of the student

Any other absence from clinical assignments will be deemed to be for personal reasons

Students who are unable to attend an assigned clinical site for more than three weeks must withdraw from that clinical placement and will be re-assigned to a clinical placement when the difficulty has been resolved.

Students who are unable to attend an assigned clinical site for six or more weeks must request leave of absence from the FNP program.

H. ABANDONMENT OF A CLINICAL SITE

Clinical placements are crucial to a successful FNP Program. They require a great deal of time and energy to locate, develop, and maintain for current and future FNP students. Whenever a student abandons a clinical site, the facility and the preceptor are left with a negative impression of the FNP Program at HNU, and a negative impression of the student. The FNP Program does not tolerate abandonment. Students who abandon their clinical placements risk dismissal from the FNP Program.

For purposes of clinical experience, abandoning a clinical site will be defined as withdrawing completely, discontinuing or interrupting attendance at a clinical site without the knowledge or involvement of the Clinical Coordinator, course Faculty of Record, or Academic Advisor.

Students may not abandon a clinical placement regardless of whether the student or the Clinical Coordinator was responsible for locating the placement.

Students may not decide unilaterally that a clinical site is unsuitable. Even though most placements proceed without difficulties, on occasion students discover problems with their clinical placements. There could be conflicting personalities or resistance from the support staff. Perhaps the preceptor maintains a level of control that restricts students' access to patients. Regardless of the problem, students must communicate with the Clinical Coordinator before taking any other action. The FNP Program does not tolerate abandonment. Students who abandon their clinical placements risk dismissal from the FNP Program.

Students are required to notify the Clinical Coordinator of any distressing condition at their clinical sites. Students are to complete **two evaluation forms: Appendices F & G.**

Appendix F: Evaluation Of Preceptor By Student is completed for each clinical preceptor. This document is provided in the *Preceptor Handbook for FNP Students*. The student must upload the evaluation forms to E*Value within one week of completion. **This document is to be completed by the student at the time of the clinical site evaluation.**

Appendix G: Evaluation Of Clinical Site By Student and Site Evaluator is **completed TWICE: after the third clinical day and again with the site evaluator at the end of each rotation.** If a student encounters difficulties with a clinical site, this should be noted in these evaluations and brought to the attention of the Clinical Coordinator.

I. CLINICAL SKILLS LABORATORY

Students will be practicing numerous skills in the clinical skills laboratory on the HNU campus and at other designated sites for clinical lab experiences. The practice may involve simulations as well as real life models. Safety of all involved is the responsibility of all. Students attending clinical skills lab must dress as they would for clinical experiences, must be on time for the experience (5 minutes before scheduled time), and be prepared to participate. Faculty for lab experiences needs to be notified at least 24 hours in advance if there is a need to be absent.

J. CONFIDENTIALITY OF PATIENT/CLIENT RECORDS

In order to comply with HIPPA confidentiality regulations, all discussion about clients/patients must take place in a private setting with no identifying factors included in the discussion. Discussions about clients/patients must not be shared with others beyond the patient/client, family and caregivers. Faculty and students must comply with the confidentiality requirements designated by each healthcare facility.

K. CONFIDENTIALITY OF STUDENT RECORDS

The Family Educational Rights and Privacy Act (FERPA) and the California Education Code afford parents (of dependent students 17 years old and under) and students over 18 years of age (“eligible students”) certain rights with respect to the student’s education records. They are:

1. The right to inspect and review the student’s education records within 45 days of the day the University receives a request for access. Parents or eligible students should submit to the Registrar a written request that identifies the record(s) they wish to inspect. The Registrar will make arrangements for access and notify the parent or eligible student of the time and place where the records may be inspected.

2. The right to request an amendment of the student's education records that the parent or eligible student believes are inaccurate or misleading. Parents or eligible students may ask Holy Names University to amend a record that they believe is inaccurate or misleading. They should write the Registrar, clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading. If the University decides not to amend the record as requested by the parent or eligible student, the University will notify the parent or eligible student of the decision and advise them of their rights to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the parent or eligible student when notified of the right to a hearing.

3. The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent. One exception which permits disclosure without consent is disclosure to "university officials" with "legitimate educational interests". A "university official" is a person employed by the University as an administrator, supervisor, instructor, or support staff; a person serving on the Board of Trustees; a person or company with whom the University has contracted to perform a special task (such as an attorney, auditor, medical consultant, or therapist); a student serving on an official committee, such as a disciplinary or grievance committee; or a student assisting another university official in performing his or her tasks. A university official has a "legitimate educational interest" if the official needs to review an education record in order to fulfill his or her professional responsibility and/or clearly specified duties.

4. The University has designated the following student information "directory information", and at their discretion may release this information:

Category 1: name, address, email, telephone number, dates of attendance

Category 2: major field of study, awards, honors (including Dean’s List), degree(s) conferred (including dates).

Category 3: past and present participation in officially recognized sports and activities, physical factors (height, weight of athletes), date and place of birth.

As required by Section 99.37 of the FERPA regulations, this serves as annual public notice of this action. Students have the right to withhold any item in “directory information”, but must notify the University of such in writing (completion of university form, Request to Prevent Disclosure of Directory Information, available in the Student Resource Center), by the first day of their first term at the University. This hold will remain in effect until and unless changed subsequently by re-submitting a request form to the Student Resource Center.

5. The right to file a complaint with the U.S. Department of Education concerning alleged failures by the University to comply with the requirements of FERPA. The name and address of the office that administers FERPA is:

Family Policy Compliance Office
U.S. Department of Education
600 Independence Avenue, SW
Washington, DC 20202-4605

L. CREDIT

Credits are given in semester hours. The unit value of each course is noted in the description of the course.

Credit hour: A credit hour (unit) is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates **not less than** –

- (1) One hour of classroom or direct faculty instruction and a **minimum** of two hours of out of class student work each week for approximately fifteen weeks for one semester, or the equivalent amount of work over a different amount of time; or
- (2) At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

M. TRANSFER CREDIT POLICIES

With the approval of the Program Director, up to six semester units from another accredited institution may be accepted for transfer into a graduate degree program, and up to three semester units may be accepted for transfer into a certificate program. Transfer courses accepted for a program must have been taken within the established seven-year time limit, must have equivalent curriculum to the corresponding HNU course, and must have been at the same level of academic competency and performance as required by comparable course at Holy Names University. Official transcripts must be requested by the student and sent directly from the institution in the Registrar' Office.

Credit for Extension Classes

Graduate degree programs rarely grant credit for extension courses, and credential programs accept only regular HNU course credits. An extension course from another institution may be accepted as transfer course if the Program Director approves it as being a substantive addition to the student degree program if the course campus accepts the course in its own comparable degree program. Prior approval is required.

Time Limit

All courses, theory, projects and practica for the Master's Degree must be completed within seven calendar years. An extension of time will be granted only in exceptional cases and on the basis of written petition submitted by the student, with the approval of the Program Director, to the Vice President for Academic Affairs. Any grade of DE (Deferred), IP (In Progress), or I (incomplete) must be cleared by the date specified on the petition for deferred grading, however no deferred grade will be allowed to remain uncompleted for more than one year.

Credit for Military Training and USAFI

Holy Names grants credit for military training in accordance with the recommendations of the American Council on Education in the Guide to the Evaluation of Educational Experience in the Armed Forces. In order to receive such credit the student must present evidence by written certification from a recognized military authority, such as papers from a military separation center, AARTS transcript, an official copy of a diploma from a service school, or USAFI transcript.

N. DISABILITY SUPPORT SERVICES

Holy Names University is committed to creating a diverse community that includes students with documented disabilities—including mobility, visual, hearing, medical, psychological or learning disabilities. While HNU offers no academic programs designed exclusively for individuals with disabilities, the university is committed to providing support and accommodations to all students who have need and are legally entitled to them. At the same time, the university encourages all students to take responsibility for their own academic careers, to learn about themselves and their peers, and to appreciate and explore their considerable

abilities. The fundamental goal of services and support for students with disabilities is to empower those students and to create opportunities for greater independence and self-advocacy.

The Office of Disability Support Services can best assist students in the context of a partnership based on mutual responsibility and clear communication. Students are expected to maintain ongoing communication with DSS, with faculty, and with other staff on campus regarding their need for accommodations and special services. Staff and faculty can be expected to work with students to implement accommodations and to make every effort to find solutions to problems, provided they are made aware of a student's needs (and of any difficulties) in a timely manner.

For information about the kinds of accommodations and support that are available at HNU and about how to provide documentation in support of a request for accommodations, contact the Director of Disability Support Services at dss@hnu.edu.

O. DRESS CODE

All students must have an official ID badge and an HNU- identified lab coat to be worn during all clinical experiences. A student may not remain in the clinical setting if the student arrives wearing inappropriate attire or is without an ID badge. Name ID badges can be obtained from the HNU Department of Nursing. HNU lab coats are available in the Bookstore and should be purchased well in advance of the beginning of clinical experiences. All students in clinical settings must follow the dress code and behavioral expectations of the clinical facility. Generally, street clothes with the lab coat and name tag are considered appropriate

P. FINANCIAL AID AND SCHOLARSHIPS

The Financial Aid office in Hester Hall has information about financial aid and scholarships. Contact the Director of Financial Aid for information

Q. GRADING

A grade is given solely on the basis of the instructor's judgment as to the student's scholarly attainment. Students must maintain a term and overall grade point average of 3.0 for satisfactory progress in the FNP program. Instructors file course grade reports at the end of each term according to the following standard:

- A** Excellent achievement. The student performs at a superior level and more than satisfies all requirements of the course by being able to treat the course content with unusual skill, often creatively.
- B** Good work, better than satisfactory. The student does more than meet all requirements of the instructor for the course.
- C** Satisfactory work. The student completes all assigned work in an acceptable fashion.
- D** Poor work, barely passing. This grade represents work that is in some manner unsatisfactory.
- F** Unacceptable work
- AU** Designates audit. The student does the reading assignments, attends all classes, but does not submit written work or take examinations.
- CR** Designates credit.
- NC** Designates no credit.
- IP** Designates in progress.
- DE** Designates deferred grade
- P** Designates pass
- I** Designates incomplete.

Grades are sometimes modified by plus (+) or minus (-) with the following exceptions:
Grades of A+ and D- are not given. Quality of grade points earned for each credit hour (unit) completed are assigned to each mark as follows:

A = 4.0; A- = 3.7

B+ = 3.3; B = 3.0; B- = 2.7

C+ = 2.3; C = 2.0; C- = 1.7

Graduate students receiving a grade below a B- are subject to disqualification from the University, even if their cumulative grade point average is above 3.0. In rare circumstances, the Program Director may allow a student to repeat a course in which they received a grade below a B-. To be considered for this opportunity, a graduate student must write a letter of appeal to the Program Director. All requests for reinstatement after an initial appeal has been denied by the Program Director must go to the Vice President for Academic Affairs. Graduate students may **repeat a course one time** in which they earned a grade below a B- at the discretion of the Program Director. Only the grade points and unit credit of the repeated course are computed, and there is no penalty for the first attempt. However the letter grade of the first attempt does remain on the transcript and the student must pay again for the repeated units (financial aid will not be given for second attempts). When course grades are due, the faculty members are required to report a grade for each student in the class. If a student chooses not to complete some course requirement on time, the instructor will take this failure into account in determining the course grade. The extent to which the course grade is affected is determined by the instructor.

Incomplete for Graduates

A grade of I, Incomplete, indicates that some portion of the work for which the student has registered is incomplete as the result of an emergency situation beyond the student's control.

Graduate students who have completed 80% or more of a course, but are unable to complete all the coursework on time, may petition for an Incomplete. The student is responsible for obtaining a form in the Student Resource Center, completing it with the instructor, and filing it with a fee in the Student Resource Center.

The student must file for an Incomplete within one week after the last class. A student who fails to file the appropriate paperwork will receive an F in his/her course. Before filing the paperwork, the student and the instructor must determine a mutually agreeable deadline for the completion of the coursework. The normal time for completion of an Incomplete is the end of the following term. The Incomplete remains on the record until the contract is completed or time on the contract has expired without the work being accomplished.

Deferred Grade

This grading option is reserved for classes that are experiential in nature, requiring a certain number of hours spent in an experiential setting for completion. For example: internships, student teaching, **clinical placements**, fieldwork, or practica. A signed Deferred Grading contract must be filed by the student by the deadline and a grade change form by the faculty when the work has been completed. If the work is not completed by the deadline on the contract, the default grade of F is automatically entered.

Credit/No Credit For Graduates

Credit/No Credit courses are not accepted in graduate programs.

Pass/Fail Grades

Pass/Fail grading is used for selected coursework, such as clinical courses in nursing. A passing grade in the clinical courses requires a minimum of 80/100 points on the class scoring

rubric for the presentation of appropriate and timely documentation, and a score of 3 or more on each item in the Preceptor and Site Evaluations.

R. GRADUATION

Degree Completion

All candidates for Bachelor's or Master's degrees, certificates and credentials must complete a Candidate for a Degree form (available in the Student Resource Center) and pay a graduation fee **well in advance** of their intended date of graduation. The deadlines for filing the Candidate for a Degree form are listed in the Schedule of Classes. (June 30 for December candidates; December 1 for May or August candidates.) The purpose of this notification is to provide time to verify with the advisor and the Registrar that all requirements have been met. Diplomas and certificates will be ordered only if this form has been completed and submitted to the Student Resource Center.

Posting of Graduation

Degrees are officially recognized by the Registrar only three times each year: in May, August and December. In order to be eligible for a graduation audit, ALL of required course work, clinical hours and all clinical paperwork must be complete by about 2 weeks prior to the official deadline date for graduation. This varies from year to year, but in the past, FNP students needed to be complete before the date of commencement for a May degree (awarded in June), by August 15 for an August degree (awarded in September) and by December 20 for a December degree (awarded in January). Students ARE NOT eligible to have their degree officially recognized until they have completed all clinical hours and had them validated by the relevant preceptor, all of the relevant evaluations are in the student's files, and the student has passed all of the required

FNP courses and grades are posted for them. Nothing can be missing from the student's files, and nothing can be incomplete or in deferred grade status.

Degrees are publicly conferred only in May. Degrees are officially posted, and diplomas are prepared and ordered after all grades are received, a final check of requirements is done by the Registrar, and the degrees have been recorded on the transcript. Degrees are posted on the students' transcripts approximately four to six weeks after official degree completion. **No official paperwork for licensure may be submitted for signature until degrees have posted.**

Diplomas and final transcripts are available approximately four months after the degrees are posted. Note that all financial obligations must be cleared before diplomas and transcripts can be released

Ceremonies

Public ceremonies take place in May for undergraduate and graduate students completing their degrees during the academic year. Only those graduate students who have a grade point average of 3.0 at the time of the ceremonies, and have completed **all** culminating theses, projects, recitals, and practica are eligible to participate in the ceremonies in May. Diplomas and transcripts will record the actual date when degrees are completed. Since the modal FNP program ends in August, FNP students who wish to participate in the University's formal public graduate Commencement ceremonies are encouraged to plan for participation in the May ceremony following their completion of the FNP program requirements.

S. INJURY/ACCIDENT/INCIDENT

Student Accidents/Incidents are reported and documented as soon as possible after the student accident/incident occurs.

Purpose

1. To provide necessary timely intervention for students involved in accidents/incidents.
2. To facilitate timely, accurate and complete documentation of all student accident/incidents.
3. To implement a quality assurance monitoring system for student accident/incidents.

Procedure

1. All student accidents/incidents are reported immediately to the clinical instructor and as soon as possible to the Program Director.
2. Students who have sustained an injury that required immediate medical care with the ER may be seen in that facility if consistent with the student's health coverage.
3. Students who have sustained a life-threatening injury and are in a facility where emergency treatment is not available may activate emergency call system (911) and arrange for immediate transport to the closest ER.
4. The student and clinical instructor/preceptor document all student accidents/incidents on a Student Accident/Incident Report form.
5. Completed Student Accident/Incident Report forms are submitted to the Program Director for review, investigation, corrective action, documentation and signature.
6. Completed and reviewed Student Accident/Incident Report forms are placed in the College's Accident/Incident Administrative file.

If a student is injured while performing clinical duties, the student must report injuries immediately to the Preceptor, to the Emergency Clinic at the clinical facility, or call 911. Please check with the Preceptor and the facility regarding specific student injury protocol. Injuries which occur in the clinical setting should be reported as soon as practical to the Clinical Coordinator and to the Faculty of Record for the clinical class.

T. NON-DISCRIMINATION

Holy Names University does not discriminate on the basis of race, creed, sex, handicap, age, color, sexual orientation, or national and ethnic origin in administration of its educational or admissions policies, scholarship and loan programs, athletic and other University-administered programs. In accordance with the Family Educational Rights and Privacy Act of 1974, each student has the legal right to examine and challenge the record maintained for that student.

This handbook constitutes the department of nursing's document of record. **While every effort is made to ensure the correctness and timeliness of information contained in this document, the faculty and staff cannot guarantee that changes will not occur after publication.** Policy changes affecting FNP students will be circulated to them using the HNU email system. Additional information may be found in the University catalog, and the Schedule of Classes. It is the responsibility of the individual student to become familiar with the announcements and regulations of the University that are printed in the Catalog and in other campus publications. **Students are expected to check the HNU email account frequently, and are required to respond to faculty communications within 48 hours at all times. Failure to respond as required to all faculty communications which may be directed to the student's HNU email account and which require an answer, ask a question, or request information, is subject to penalty at the discretion of the faculty, up to and including failure of a class. Students are responsible for announcements, regulations and notices which are communicated to them using their HNU-provided email account**

U. PROGRESSION

Students are expected to progress through the program as it is designed (see page 7 for the outline of the program). However, if the student becomes ill or must for financial reasons

drop out of the program, s/he may reenter at the point of exit if the GPA is 3.0 or better so the progression is kept intact. If a student is dismissed and reinstated and must repeat a course because of a grade lower than a B- (or F in a clinical course) a one time repeat of the course is allowed at the discretion of the Program Director. If more than one course must be repeated because of a poor grade, the student will be dismissed from the program.

V. REMEDIATION

Any problems in achievement should be discussed with the academic advisor before a failure is the only option. There are many services available on campus for reading, math, and writing assistance, as success is the focus of HNU. Tutors are available at the Student Resource Center which the advisor can easily reach. There are also study groups and a variety of other options if the student needs help.

VIII. Nurse Practitioner Scope of Practice

The nurse practitioner (NP) is a registered nurse who possesses additional preparation and skills in physical diagnosis, psychosocial assessment, and management of health-illness needs in primary health care, who has been prepared in a program that conforms to Board standards as specified in California Code of Regulations, CCR, 1484 Standards of Education.

Primary health care is defined as, that which occurs when a consumer makes contact with a health care provider, who assumes responsibility and accountability for the continuity of health care regardless of the presence or absence of disease CCR 1480 (b). This means that, in some cases, the NP will be the only health professional to see the patient and, in the process, will employ a combination of nursing and medical functions approved by standardized procedures.

Section 2725 of the Nursing Practice Act (NPA) provides authority for nursing functions that are also essential to providing primary health care which do not require standardized procedures. Examples include physical and mental assessment, disease prevention and restorative measures, performance of skin tests and immunization techniques, and withdrawal of blood, as well as authority to initiate emergency procedures.

Standardized procedures are the legal authority to exceed the usual scope of RN practice.

Without standardized procedures the NP is legally very vulnerable, regardless of having been certified as a RN, who has acquired additional skills as a certified nurse practitioner.

IX. STANDARDS OF COMPETENT PERFORMANCE

A registered nurse shall be considered to be competent when he/she consistently demonstrates the ability to transfer scientific knowledge from social, biological and physical sciences in applying the nursing process as follows:

1. Formulates a nursing diagnosis through observation of the client's physical condition and behavior, and through interpretation of information obtained from the client and others, including the health team.
2. Formulates a care plan, in collaboration with the client, which ensures that direct and indirect nursing care services provide for the client's safety, comfort, hygiene, and protection, and for disease prevention and restorative measures.
3. Performs skills essential to the kind of nursing action to be taken, explains the health treatment to the client and family and teaches the client and family how to care for the client's health needs.

4. Delegates tasks to subordinates based on the legal scopes of practice of the subordinates and on the preparation and capability needed in the tasks to be delegated, and effectively supervises nursing care being given by subordinates.
5. Evaluates the effectiveness of the care plan through observation of the client's physical condition and behavior, signs and symptoms of illness, and reactions to treatment and through communication with the client and the health team members, and modifies the plan as needed.
6. Acts as the client's advocate, as circumstances require by initiating action to improve health care or to change decisions or activities which are against the interests or wishes of the client, and by giving the client the opportunity to make informed decisions about health care before it is provided.

Authority Cited: Business and Professions Code, Section 2715. Reference: Business and Professions Code, Section 2725 and 2761

X. PROFESSIONAL BEHAVIOR

How we conduct ourselves at HNU is indicative of how we conduct ourselves with our patients and families. Respect for others is foremost in the Code of Ethics for Nurses, and the most important aspect of HNU's mission and philosophy. We require professional practice at all times both in and out of the classroom and clinical settings. Students are expected to behave professionally as mature adults and as licensed professionals. Hallway and elevator speech should demonstrate ethical care and competency, as should email and verbal communications. Rudeness, tardiness, failure to respond timely to University communications and harassment of faculty and staff are violations of the nursing professional code of conduct. Students in violation of the professional code of conduct will receive a first warning from the faculty involved, and a second warning from the Department Chair. If students continue to demonstrate unprofessional conduct, they will be asked to leave the program. (See Code of Ethics for Nurses, and Essential Features of Professional Nursing, American Nurses Association).

XI. GUIDELINES FOR SUITABILITY AND CAPACITY TO PRACTICE AS AN ADVANCED PRACTICE REGISTERED NURSE

The following expectations are used as guidelines for assessing suitability and capacity to practice as an Advanced Practice Nurse Practitioner. Students applying to and continuing in the Family Nurse Practitioner Program at Holy Names University are expected to:

- Demonstrate honesty, integrity and ethical principles.
- Represent HNU in any setting where they are identified as a HNU nursing student.

- Relate to people with warmth and empathy, communicating feelings appropriately.
- Have an accepting attitude toward their total selves, including responsibility for meeting physical and emotional needs.
- Be open to change in themselves and others and take responsibility for their own actions.
- Recognize the essential worth and dignity of all human beings. Appreciate the value of human diversity.
- Identify personal strengths, limitations, and motivations, especially as related to a decision to work with people.
- Express thoughts with clarity in both written and verbal form.
- Serve, in an appropriate manner, all persons in need of assistance regardless of unique characteristics—for example, those related to race, religion (or lack of religion), gender, disability, political affiliation, sexual orientation, and value system.
- Follow the code of conduct for nursing students at HNU, follow instructions and adhere to expectations and objectives outlined in the syllabus for each theory and clinical course.

If a faculty member identifies inappropriate behavior on the part of a student, the behavior will be discussed with the student. A Performance Improvement Plan (PIP) will be developed with the student, describing the inappropriate behavior and expected corrective action within a timeframe, and placed in his/her record.

The student may be asked to leave the program if the PIP has not been satisfactorily completed within the specified time frame.

Inappropriate behavior includes but is not limited to:

- Refusal of a clinical assignment, abandonment of a clinical site, repeated lateness, failure to reply to communications from faculty and staff within the required time period, and failure to comply with Health and Safety requirements.

If the student obtains more than one PIP anytime during the program the information will be forwarded to the Suitability for Practice Committee. This committee will consider whether the student's performance is indicative of suitable progress in role development as a Family Nurse Practitioner. Students may be placed on a probation contract or may be dismissed from the program at the discretion of the Suitability for Practice Committee.

XII. PROGRESSION POLICY

For students in the nursing program, the following grade scale will be utilized:

A = 96 – 100	C = 74-76
A- = 91 – 95	C- = 70-73
B+ = 87 – 90	D+ = 67 – 69
B = 84-86	D = 64 – 66
B- = 83-80	D - = 60 – 63
C+ = 77 - 79	F = Below 60

Faculty will review students' clinical and didactic performance at the end of each course and/or whenever deemed necessary using the Guidelines for Suitability and Capacity for Practice, syllabus grading scale for didactic courses, and clinical evaluation forms. Students must achieve a passing grade in all courses within the FNP Program.

Satisfactory progress and continued progression through the nursing program requires passing all courses within the FNP program

Students will not be allowed to withdraw from a course after the University withdrawal period if they are failing that course.

Students must maintain current certification in CPR for the Health Provider (American Heart Association) as a departmental requirement for admission/progression and graduation.

Faculty reserve the right to change student registration in clinical and laboratory groups as needed.

XIII. NATIONAL CERTIFICATION

All graduates of the FNP program are strongly encouraged to sit for one of two national certification examinations. Success these examinations demonstrates that graduates meet national requirements for recognition to practice as a Nurse Practitioner (AANP 2016)

<https://www.aanp.org/component/content/article/9-education/1060-certification-for-entry-level-nps>)

Certification is required by many employers, as well as for reimbursement for many NP services.

National Board Certification

- While not required to practice in CA national certification is STRONGLY recommended
 - This **will** change through future legislation.

It is best to take the examination soon after completion of the program

- Required for Medicare & Medi-Cal (Medicaid) Reimbursement
- Required for most major health plan credentialing processes
- May be required by employers
- Purpose
 - Verification of professional knowledge in a specialty
 - Maintain continued competency through an established recertification process.

<http://www.aanpcert.org/ptistore/control/certs/purpose>

• “Certification is a process by which a nongovernmental agency validates, based upon predetermined standards, an individual nurse’s qualifications for practice in a defined functional or clinical area of nursing.”

• “validates...in areas beyond the scope of RN licensure.”

• “...certification exam **may be used as a proxy measure for APRN licensure or designation and therefore would not be voluntary, but a requirement for licensure.**”

<http://www.aacn.org/WD/Certifications/Content/consumer-whatiscert.pcms?menu=Certification>

The American Association of Nurse Practitioners makes the following statement about the necessity of national certification:

National Certification Expectations for Entry-Level NPs:

As NP students approach the end of their academic program, **they must prepare to achieve national certification by an accredited NP certification body.** Certification indicates that certificant NPs have successfully passed an assessment of professional knowledge in their population focus. **Certification is further used by regulatory bodies as a major consideration that a graduate of an accredited NP academic program meets the requirements for recognition to practice as an NP.**

In 2008, AANP and other organizations participated in a process through which the Consensus Model of APRN Regulation was developed. The Consensus Model provides definitions of APRN practice, titles, and specialties, as well as describing the relationships between licensure, accreditation, certification, and education.

The Consensus Model (2008) defines **certification** as "**the formal recognition of the knowledge, skills, and experience demonstrated by the achievement of standards identified by the profession**", differentiating it from **licensure**, the "**granting of authority to practice**" (AANP 2016)

<https://www.aanp.org/component/content/article/9-education/1060-certification-for-entry-level-nps>

To obtain National Certification, graduates apply to take the examination of one of the two national certifying bodies: **American Nurses Credentialing Committee (ANCC)** or **American Academy of Nurse Practitioners Certification Program (AANPCP)**.

American Nurses Credentialing Committee (ANCC):

<http://nursecredentialing.org/FamilyNP>

Fees: ANA Members: \$270 Nonmembers: \$395

- ANCC (Pass/Fail) → 5-Year Certification
- 175 Questions + 25 additional; 4 hour limit
- On-site testing results
- Certification start date is the date of successful completion of exam
- If application is pending degree conferral, exam result retained and certification effective on date documentation is received and eligibility met.
- Retesting
 - 60 days; no more than 3 x/12 months; + fee

The ANCC Family Nurse Practitioner board certification examination is a competency based examination that provides a valid and reliable assessment of the entry-level clinical knowledge and skills of nurse practitioners. This certification aligns with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education. Once you complete eligibility requirements to take the certification examination and successfully pass the exam, you are awarded the credential: Family Nurse Practitioner-Board Certified (FNP-BC). This credential is valid for 5 years. You can continue to use this credential by maintaining your license to practice and meeting the renewal requirements in place at the time of your certification renewal. The National

Commission for Certifying Agencies and the Accreditation Board for Specialty Nursing Certification accredits this ANCC certification. . .

Candidates may be authorized to sit for the examination after all coursework and faculty-supervised clinical practice hours for the degree are complete, prior to degree conferral and graduation, provided that all other eligibility requirements are met. Please note, the Validation of Education form and official/unofficial transcripts showing that coursework (and faculty-supervised clinical practice hours) is completed are required **before authorization to test will be issued. ANCC will retain the candidate's exam result and will issue certification on the date the final, degree-conferred and official transcript are received, all other eligibility requirements are met, and a passing result is on file.*

(ANCC will accept unofficial transcripts, which ANCC defines as either a photocopy of a transcript, a comprehensive record of your academic progress or a print out of all work completed, to date, including coursework, grades and degree(s) earned or in progress – which will allow ANCC to process and review your application. ANCC reserves the right to reject any unofficial transcript that appears to be altered.). (ANCC 2016)

OR

American Academy of Nurse Practitioners Certification Program (AANPCP)

[https://www.aanpcert.org/resource/documents/2016%20Certificant_Candidate_Handbook%20\(Final\)%2001%2004%2016.pdf](https://www.aanpcert.org/resource/documents/2016%20Certificant_Candidate_Handbook%20(Final)%2001%2004%2016.pdf)

Fees: AANP Members: \$240 Nonmembers: \$315

AANP (Pass/Fail) – 5-Year Certification

- 135 Questions + 15 additional; 3 hour limit
- Preliminary results (P/F) at test site
- When all requirements for certification have been met an official score letter with certification number, personalized certificate, wallet card, and lapel pin will be prepared and mailed to the Certificant within 2 weeks of score release; a printable wallet card with certification status will be viewable on the individual's Online Account; and requested State Board of Nursing Verification and Primary Source Verification requests will be processed and sent one business day following score release.

Application Process

- Applicants enrolled in MSN or post-masters certificate program may begin the application process 6 months before completion of their program.
- An interim transcript showing completed academic “coursework-to-date” or a final **Official transcript** showing degree and date awarded (conferred) is required to initiate processing of an application.
- Candidates may not sit for an examination until after they have completed their NP program.
- Once verified, AANPCB will notify PSI Exams Online (PSI) when a candidate becomes eligible to test.

- Upon notification, PSI will email the candidate their authorization to register for the examination. This authorization email grants the 120-day testing window, and provides important instructions for scheduling a testing appointment at PSI Testing Centers.
- Candidate's names must match on their application, testing site registration, and forms of identification required by the testing center for an applicant to sit for their scheduled examination. (AANPCP 2017)

It is advisable to take the examination as soon as possible after completion of the program or once eligibility is established. **Focused preparation for the examination is desirable and necessary.** Taking a certification review course is excellent preparation for the exam, and the **faculty strongly recommend that students plan to take a formal exam review course before taking the examination.** The department will attempt to notify students of some available courses as they are scheduled throughout the year, but students should investigate the available resources for exam preparation well in advance of planning to take the exam.

There are several excellent exam reviews available, including:

Live classes:

Advanced Practice Education Associates: <http://www.apea.com>

Fitzgearld Health Education Associates: <https://www.fhea.com>

Home study package:

Barkley: <http://www.npcourses.com/specialty/family-nurse-practitioner>

Please read these two California BRN Advisories:

General Information for Nurse Practitioners Regarding National Certification:
<http://www.rn.ca.gov/pdfs/regulations/npr-i-28.pdf>

AND

MediCal Billing Certified Nurse Practitioner Nationally Certified in a Specialty:
<http://www.rn.ca.gov/pdfs/regulations/npr-i-34.pdf>

XIV. LEGAL REQUIREMENTS FOR CALIFORNIA

Please do not take a job or agree to work as a nurse practitioner immediately after graduation without making it clear that you still have quite a few **legal** requirements to fulfill and that the time lines for some of these may not be under your control nor under that of HNU. We cannot expedite this process, nor may the Registrar post degrees on dates other than the three mentioned here. Remember, you can't say that you are an NP to ANYONE until you have your state certificate!!!

ONLY after your degree has posted, may you apply to the State Board for your NP certificate. Your documentation of completion CANNOT be signed (and should not be submitted for faculty signature) until your degree has posted. Your forms will be returned to you in a sealed envelope. Your portion of the application and any fees required should be submitted along with these signed forms.

You will need to wait until the state receives the signed certification paperwork and confirms that you are eligible to be certified before you receive the Nurse Practitioner endorsement on your current RN license. This may take from 1 week to 3 months. Until you have the endorsement certificate from the state, you **cannot “hold out” as an NP, that is: use the title of Nurse Practitioner**, practice as an NP, or identify yourself as an NP in ANY way (you can't introduce yourself as an NP, can't have an NP business card, nor an email address that says "yolandafnp@someplace", etc. etc. etc). **You cannot work or be paid as an NP until you have your state certificate.** THIS IS MORE THAN HAVING THE SCHOOL SAY THAT YOU GRADUATED!!!

APRN Application & certification: CA

- State Licensure & Certification

- Licensure: Registered Nurse

- Continue to maintain licensure bi-annually

- California State Nurse Practitioner License Endorsement: Nurse Practitioner

- Population/ specialty = Family/Across the Lifespan

- Re-certification bi-annually with RN licensure

- <http://www.rn.ca.gov/pdfs/applicants/np-app.pdf>

- Prescriptive Authority

- Furnishing Number Application

- Re-certification bi-annually with RN licensure

- <http://www.rn.ca.gov/pdfs/applicants/npf-app.pdf>

- Timing

No paperwork may be submitted for HNU faculty signature until the Registrar has performed a degree audit and notified you that you have officially completed your degree or certificate. This usually takes 2-4 weeks after the “official” date of graduation.

- Questions

- BRN: 916-322-3350 Ask for the “Advanced Practice Unit”

When you submit your application for license endorsement from the state, you can also submit your application for a Nurse Practitioner Furnishing Number. This is a separate application from the one for your NP endorsement on your license. You submit it to the Program Director. The **Nursing office will return the signed form to you.** You must submit your portion of the application and any fees along with this signed application.

Only when you HAVE a license endorsement as an NP and a furnishing number can you write prescriptions according to your standardized procedures and formulary, and sign them yourself. You are REQUIRED to have a FORMULARY which lists exactly what drugs you may furnish. You are REQUIRED to do any furnishing that you do under physician supervision. You are REQUIRED to collaborate in developing a Standardized Procedure for furnishing with your supervising physician, and to have this physician approve your SP. Your supervising physician must be available to you (at least by telephone) when you are functioning under your furnishing authority (but need not be physically present)

Prescriptive Authority

- Statutes & Regulations
 - Business & Professions Code Section 2836.1
 - In accordance w/ standardized procedure
 - Restricted: educational preparation and clinical competency
 - Must apply for a BRN-issued “Furnishing Number”
 - Must register with the DEA for CS Authority
 - Controlled Substance prescribing has additional SP requirements
 - Formulary required as part of the SP
 - CBP Section 2836.1 (c) (1):
 - “...The standardized procedure or protocol covering the furnishing of drugs or devices shall specify ... which drugs or devices may be furnished or ordered...”
 - <http://www.rn.ca.gov/pdfs/regulations/bp4018.pdf>
 - <http://www.rn.ca.gov/pdfs/regulations/npr-i-16.pdf>

DEA Number

If you want to furnish any controlled drugs, you will also have to get a DEA number from the Federal Government. You can only apply for this AFTER you have done everything described above.

DEA Registration: <http://www.justice.gov/dea/index.shtml>

- Required to prescribe CS II – V
- <http://www.deadiversion.usdoj.gov/drugreg/index.html>
- Some pharmacies will not fill **any** Rx unless your DEA number is available
- NPs are **not** authorized to furnish Schedule I controlled substances, including medical cannabis
- NPs are not authorized to prescribe methadone (CS II) for purposes of addiction management
 - Requires a specific DEA registration
 - “Mid-level providers” are not authorized to register for this use

DEA Registration <http://www.justice.gov/dea/index.shtml>

- Registration: New Applications Form 224

<https://apps.deadiversion.usdoj.gov/webforms/jsp/regapps/common/newAppLogin.jsp>

- Practitioner’s Manual

- <https://www.deadiversion.usdoj.gov/pubs/manuals/pract/index.html>

- NP Authorization by State

- *Under the CSA, the term "practitioner" is defined as a physician, dentist, veterinarian, scientific investigator, pharmacy, hospital, or other person licensed, registered, or otherwise permitted, by the United States or the jurisdiction in which the practitioner practices or performs research, to distribute, dispense, conduct research with respect to, administer, or use in teaching or chemical analysis, a controlled substance in the course of professional practice or research. Every person or entity that handles controlled substances **must** be registered with DEA or be exempt by regulation from registration.*

- Fees: \$731 x 3 Years

CA Controlled Substance, Utilization, Review & Evaluation System (CURES) Registration

- All licensed prescribers must register for access to CURES 2.0 upon issuance of a DEA Registration Certificate
- Registration: http://www.dca.ca.gov/licensee/cures_update.shtml
- User Role: “Prescriber”
- Issued by: “CA Department of Consumer Affairs”
- Email Address required
- CURES 2.0 FAQs: <https://oag.ca.gov/cures/faqs>

XV. NIPN (National Provider ID Number)

You should also NOW obtain an “NPIN” number.

Search any web browser for "National Provider ID Number" and you will find

<https://nppes.cms.hhs.gov/#/>

From this page select: Create or Manage an Account

XVI. Consensus Model for APRN Regulation

APRN Regulation includes the essential elements: licensure, accreditation, certification and education (LACE).

- Licensure is the granting of authority to practice.
- Accreditation is the formal review and approval by a recognized agency of

educational degree or certification programs in nursing or nursing-related programs.

- Certification is the formal recognition of the knowledge, skills, and experience

demonstrated by the achievement of standards identified by the profession.

- Education is the formal preparation of APRNs in graduate degree-granting or postgraduate certificate programs. The graduate of the Primary Care Family Nurse Practitioner program at Holy Names University is prepared to care for individuals and families across the lifespan. The FNP role includes preventative healthcare, as well as the assessment, diagnosis and treatment of acute and chronic illness and preventative health care for individuals and families. Family nurse practitioners demonstrate a commitment to family –centered care and understand the relevance of the family’s identified community in the delivery of family- centered care.

Note that this is a DIFFERENT focus from the patient population served by the Acute Care Adult Geriatric Nurse Practitioner, which includes patients who are: physiologically unstable, technologically dependent, require frequent monitoring and/or are highly vulnerable to complications. Primary Care Family Nurse Practitioners may follow patients in an acute care setting for their Primary Care needs, but are neither trained nor qualified to care for the acute care patient. Insurers will not cover activities outside the scope of practice for which students receive training, and students should not expect to accept employment serving acute care populations unless they obtain further formal education and credentialing.

For more details on the Consensus Model, please see the official report at

<http://www.aacn.nche.edu/education-resources/aprn-consensus-process>

XVII. SOME BRN PRACTICE DIRECTIVES

Explanation of RN Scope of Practice and Nurse Practitioner Scope of Practice

The Nurse Practice Act authorizes a Registered Nurse:

Direct and indirect patient care services that ensure the safety, comfort, personal hygiene, and protection of patient; and the performance of disease prevention and restorative measures.

Direct and indirect patient care services, including, but not limited to, the administration of medications and therapeutic agents, necessary to implement a treatment, disease prevention, or rehabilitation regimen ordered by and within the scope of licensure of a physician, dentist, podiatrist and clinical psychologist.

The performance of skin tests, immunization techniques, and the withdrawal of blood from veins and arteries.

Observation of signs and symptoms of illness, reactions to treatment, general behavior, or general physical condition, and determining of whether the signs, symptoms, reaction, behaviors, or general appearance exhibit abnormal characteristic; and implementation, based on observed abnormalities, of appropriate reporting, or referral, or standardized procedure, or changes in treatment regimen in accordance with standardized procedures, or the initiation of emergency procedures.

Nurse Practitioner Practice.

Nurse practitioners are registered nurses who are prepared by advanced education to provide primary care including medical procedures that may be required for a specialty area. Clinical competency is required when treating medical conditions utilizing approved standardized procedures (see Standardized Procedures).

Standardized Procedures

Standardized procedures are the legal mechanism for RNs and NPs to perform functions which otherwise would be considered the practice of medicine. Standardized procedures guidelines are to be adhered to by RNs and NPs when performing medical functions. The guidelines are described in the California Code of Regulations, Section 1474. The standardized procedures must be developed collaboratively by nursing, medicine, and administration in the organized health care system where they will be utilized.

The Medical Practice Act includes diagnosis of mental or physical conditions, the use of drugs in or upon human beings and severing or penetrating tissue of human beings. As a general guide the performance of any of these functions by a RN or NP requires a standardized procedure.

Following are the standardized procedure guidelines jointly created by the Medical Board of California and by the Board of Registered Nursing:

- (a) Standardized procedures shall include a written description of the method used in developing and approving them and any revision thereof.
- (b) Each standardized procedure shall:
 - (1) Be in writing, dated and signed by the organized health care system personnel authorized to approve it.
 - (2) Specify which standardized procedure functions registered nurses may perform and under what circumstances.

- (3) State any specific requirements which are to be followed by registered nurses in performing particular standardized procedure functions.
- (4) Specify any experience, training, and/or education requirements for performance of standardized procedure functions.
- (5) Establish a method for initial and continuing evaluation of the competence of those registered nurses authorized to perform standardized procedure functions.
- (6) Provide for a method of maintaining a written record of those persons authorized to perform standardized procedure functions.
- (7) Specify the scope of supervision required for performance of standardized procedure functions, for example, immediate supervision by a physician.
- (8) Set forth any specialized circumstances under which the registered nurse is to immediately communicate with a patient's physician concerning the patient's condition.
- (9) State the limitations on settings, if any, in which standardized procedure functions may be performed.
- (10) Specify patient record keeping requirements.
- (11) Provide for a method of periodic review of the standardized procedures.

For more details, refer to the BRN link: <http://www.rn.ca.gov/pdfs/regulations/npr-b-20.pdf>

Some BRN Links and Practice Directives

General Information on NP Practice

<http://www.rn.ca.gov/pdfs/regulations/npr-b-23.pdf>

Frequently asked questions about NP Practice

<http://www.rn.ca.gov/pdfs/regulations/npr-i-25.pdf>

California Nursing Practice Act

<http://www.rn.ca.gov/pdfs/regulations/npr-i-15.pdf>

California State Board of Pharmacy Rules and Regulations

<http://www.rn.ca.gov/pdfs/regulations/bp4018.pdf>

Criteria for Furnishing Number Utilization by Nurse Practitioners

<http://www.rn.ca.gov/pdfs/regulations/npr-i-16.pdf>

Explanation of RN and Nurse Practitioner Scope of Practice

<http://www.rn.ca.gov/pdfs/regulations/npr-b-19.pdf>

Nurse Practitioners Laws and Regulations

<http://www.rn.ca.gov/pdfs/regulations/bp2834-r.pdf>

Clinics Eligible for Licensure

<http://www.rn.ca.gov/pdfs/regulations/npr-i-39.pdf>

APPENDIX A

Twelve Things You Need to Remember About Clinical Placements

When you begin the clinical portion of your advanced practice training, it should become a priority in your life. You will learn the professional role, develop skills in history taking, physical assessment, diagnostic reasoning and formulation of a treatment plan. You will learn how to work in the clinical environment, interact professionally with patients and their families, and provide support and education as they navigate the challenges of illness and injury or the requirements of health maintenance. Here are a few reminders about the requirements of these clinical courses:

1. Clinical schedules (usually Monday-Friday) and travel requirements for clinical site locations will require flexibility and adjustments on your part, including adjustments of your work schedule. You may request a particular clinical day, but if that day is not available at your clinical site, you will need to flex around the clinical site's schedule. **We are not able to change clinical sites based on day and time preferences. Do not ask your preceptor to change their available days or times.**
2. You must complete the Health and Safety requirements of the program as soon as you are enrolled, including your immunizations, American Heart Association CPR, an up-to-date resume, student malpractice insurance and a background check. This allows up to begin considering what clinical sites you may be eligible to attend. Students who delay in completing

the Health and Safety requirements will, of necessity, not be considered first for the available clinical placements.

3. If you have identified a potential preceptor on your own, you must provide that MD or NP's contact information to the Department of Nursing immediately, so that the credentialing process can be completed before your clinical hours can begin. Do not begin your clinical hours before your preceptor has been properly credentialed (approved).

4. Do not begin your clinical hours before all the requirements of the particular site have been met.

5. Arrive on time (preferably early) and **notify both your preceptor and your clinical faculty for any unexpected absences.**

6. Be rested and prepared for the clinical.

7. Bring appropriate resources and references to your clinical site and be familiar with accessing information from them (particularly with electronic resources). Know where the clinic's formulary and NP standardized procedures are kept.

8. Dress professionally. Wear a clean HNU lab coat with your HNU name tag and professional (business) clothing..

9. Treat office staff courteously.

10. Remember that you are a guest. Consider your clinical placement as a privilege, and your preceptor's time mentoring you as a gift.

11. Contact the Clinical Coordinator for any questions or problems in your placement. The Clinical Coordinator will confer with your academic advisor or the faculty of record for the clinical course as needed.

12. You must attend your clinical site as planned. If there are problems with the site, the preceptor or the placement, you must notify the Clinical Coordinator immediately to discuss the problems. **Failure to attend a clinical site where you have been placed or changing your schedule without prior approval could disqualify you from the FNP Program.**

Remember that you jeopardize your progression in the FNP Program, your future professional reputation, the reputation of the Department of Nursing, and the future training of the advanced practice nurses who follow you into the clinical setting, if you do not represent yourself and your school well. When clinical sites refuse to continue to take students because a student in an earlier semester was rude, unprofessional in their dress, unprepared, or chronically late or absent – everyone is affected.

Acknowledgment of receipt



Acknowledgement of Receipt

I, _____, acknowledge that I have received and reviewed the FNP Handbook.

I am aware that these policies may be amended at any time and I will be notified of any changes in a timely manner.

I will hold myself accountable for the new directives.

Furthermore, I am aware that it is my responsibility to adhere to these policies for the duration of the program.

Signature

Date