



# DEPAUL UNIVERSITY

## COLLEGE OF SCIENCE AND HEALTH

*School of Nursing*

**RN to MS Nursing Program  
AND  
Nurse Practitioner  
Certificate Programs**

---

The Director and Associate Directors of the DePaul University School of Nursing reserve the right to change the information, regulation, requirements and procedures in this handbook. It is the personal responsibility of each student to acquire knowledge of all pertinent regulations set forth in this Nursing Student Handbook. The School of Nursing reserves the right to require the withdrawal of any student, at any time, who fails to give satisfactory evidence of academic ability, earnestness of purpose, or active cooperation in all requirements. The only official interpretation or modifications of academic regulations are those made in writing by the Director of the De Paul University School of Nursing.

Rev 07/13/2021



## **DePaul University School of Nursing Anti-racism and Commitment to Diversity Statement**

The DePaul University College of Science and Health and School of Nursing acknowledge the individual and structural racism embedded in our science, education, and healthcare systems. We recognize the culture of racial oppression and the deep history of European colonialism and white supremacy installed in all fields of science, including nursing, and all healthcare professions. The fields of science and health have largely ignored the needs of and contributions from Black, Indigenous, and People of Color and in some situations have used science and health systems to harm them. This has furthered healthcare disparities and contributes to the distrust of science and healthcare systems. Acknowledgement of these truths inspires a call for introspection, collective consciousness, and action. We must seek to unlearn, learn, and practice our commitment to combat racism daily. We recognize the painful history and ongoing racist misconduct of scientists and healthcare practitioners that overshadow and add to the challenge and importance of our anti-racism work. In response, we firmly commit to disarming racism by reasserting diversity, equity, and inclusion as core values of our college and coming together as one community of students, staff, faculty, and community partners in support of each and every one of our members of color, condemning racism in all of its forms.

Here at the DePaul University School of Nursing, we are committed to eliminating all forms of oppression resulting from socially and culturally constructed differences in race and ethnicity, sex and gender identity or orientation, language, disability, country of origin, citizenship, and religious beliefs among others. We recognize the complex intersectional relationships among these forms of oppression and how they impact the well-being of our community members. We are committed to actively embodying the values of diversity, equity and inclusion in our teaching, scholarship and service here at DePaul University.



## **Student Handbook Agreement**

I, \_\_\_\_\_, have thoroughly read and will comply with the policies included in the School of Nursing Student Handbook for my program of study. I understand that failure to comply with the policies included in the Student Handbook will result in dismissal from my program.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## Table of Contents

DePaul University School of Nursing Anti-racism and Commitment to Diversity Statement...	2
Student Handbook Agreement.....	3
Mission of the DePaul University School of Nursing .....	6
Philosophy of the DePaul University School of Nursing .....	6
Accreditation.....	7
Program Summary .....	7
Program Student Learning Outcomes.....	7
BS in Nursing.....	7
Core MS in Nursing:.....	7
Admissions Policies.....	8
Procedure for Admission .....	9
Transfer Credit.....	10
Portfolio Credit .....	10
Grading Scale.....	10
Retention Policies .....	11
Undergraduate Student Academic Policy .....	11
Graduate Student Academic Policy .....	11
Policy Regarding Encumbered Registered Nurse (RN) Licensure.....	12
Progression Policies.....	12
Enforcement of Retention Policies .....	14
Grievance Procedure.....	15
Grade Challenge.....	15
Appeals related to academic requirements .....	15
Appeals related to academic process .....	16
Academic Virtual Environment Policy.....	16
Academic Integrity Policy .....	16
Academic Integrity Policy Extension for Clinical and Service Settings .....	17
Student Advising/Program of Study.....	17
Clinical Guidelines.....	18
Mentor Selection for Graduate Students.....	18
Process for Establishing a Mentor .....	19
Unsafe Clinical Performance .....	19
Clinical Performance Limitation Related to Temporary Disability.....	21
Clinical Probation/Remediation.....	21

Clinical Failure.....	22
Confidentiality .....	22
Unprotected Exposures .....	23
Exposure at Outside Facility while Performing Duties within Student Role .....	23
Student Injury and Incident Policy .....	23
Student Clinical Requirements .....	24
Access to Student Records.....	29
Graduation.....	30
APPENDIX A: BS in Nursing CLINICAL PRACTICE EXPERIENCES .....	31
APPENDIX B: MS IN NURSING CLINICAL PRACTICE EXPERIENCES .....	35
APPENDIX C: STUDENT FACULTY CONTRACT.....	40
APPENDIX D: PROFESSIONAL DEVELOPMENT GUIDELINES .....	41
APPENDIX E: SCHOOL OF NURSING USE OF SOCIAL MEDIA POLICY.....	43
APPENDIX F: PRACTICUM CREDIT FOR PREVIOUS WORK CREDIT.....	44
APPENDIX G: COURSE AUDIO AND VISUAL RECORDING POLICY .....	46

## **Mission of the DePaul University School of Nursing**

The Mission of the School of Nursing is the preservation, enrichment and transmission of nursing science as a discipline and its application to promote the health and well-being of individuals, families and communities. The faculty pursues this mission through excellence in teaching as the primary focus of scholarship and research that has the potential to enhance nursing knowledge, scientific inquiry, teaching and health. The School of Nursing maintains a commitment to serving persons with diverse talents, qualities, interests and socioeconomic backgrounds in its education programs and professional practice. It seeks to provide accelerated, inquiry-based education that anticipates the rapid pace of change in health promotion and illness care.

## **Philosophy of the DePaul University School of Nursing**

Nursing is a learned profession with a distinct science and art. Students learn the practice of nursing through research and the study of diverse human and environmental patterns of health behavior as they affect individuals, families, and communities. Students incorporate scientific knowledge and the nursing process in their delivery of safe, ethical and quality care with deep regard for the differences along the dimensions of race/ethnicity, gender, class, sexuality, religion, heritage and language.

The focus of the faculty of the School of Nursing is the education and preparation of students for leadership roles in healthcare. Education is centered on providing care for persons and communities in both health and illness while conducting scientific research to generate knowledge that strengthens these endeavors. Critical thinking is emphasized, along with an insightful examination of society, thus affording students the opportunity to apply the science and art of nursing to promote and maintain health while upholding human dignity for the betterment of the community and society.

In keeping with the Vincentian values of DePaul University, students treat all human beings equally and with respect, and by doing so, are acting in the interest of the common good. The School of Nursing faculty is committed to education that will provide the foundation for a professional career as a caregiver, educator, leader, servant and scholar.

A professional level of nursing practice is best achieved through master's degree education in nursing and requires appropriate licensure through examination (NCLEX- RN). Advanced practice nursing education integrates specialization into the master's degree curriculum or at the post-master's level providing eligibility for professional certification as a nurse anesthetist; clinical specialist in community, acute or long-term care areas; nurse practitioner in primary care; or nursing scholarship in practice or the academy. The master's degree provides the foundation for doctoral education in nursing science.

## **Accreditation**

The Bachelor of Science in Nursing at DePaul University is accredited by the Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036, (202) 887-6791.

The Master of Science in Nursing at DePaul University is accredited by the Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington DC 20036, 202-887-6791.

## **Program Summary**

Designed for the Associate Degree or diploma registered nurse interested in completing a master's degree and earning a Bachelor of Science degree in Nursing along the way. This streamlined program is an innovative and interdisciplinary approach to nursing and clinical care. The non-nursing baccalaureate ADN student does not need to complete the BS in nursing but takes three undergraduate bridge courses to meet AACN Essentials of the Baccalaureate prepared Nurse before progressing to the graduate degree portion of the program. Both the Associate Degree/Diploma and Associate Degree nurse with a non-nursing baccalaureate degree will complete 80 hours of practice experiences integrated throughout the program. Appendix A outlines these practice experiences. The BSN prepared nurse immediately begins in the graduate portion of the program.

## **Program Student Learning Outcomes**

The RN to MS program is a multi-layered program encompassing two degrees (BS and MS), two tracks with two certificate options. Thus, the student learning outcomes are grouped accordingly as follows:

### **BS in Nursing**

1. Synthesize knowledge from the sciences, the humanities, and nursing science to assess, plan, and provide care for individuals, families, and communities using evidence-based and values-based modalities.
2. Develop a foundation for professional nursing practice emphasizing autonomy, integrity, change agency, and advocacy to social justice integrating Vincentian and altruistic values.
3. Design and deliver culturally appropriate nursing care services to diverse individuals, families, and populations, in coordination with appropriate multidisciplinary providers across the continuum of care.,
4. Demonstrate progression in life-long learning by applying critical thinking to analyze contemporary health care, including but not limited to social determinants of health, health inequities, serving high-risk populations, technological applications in healthcare, health care policy, and health care finance.

### **Core MS in Nursing:**

1. Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.

- a. NA competency: Integrate client-centered and culturally appropriate concepts and approaches in strategic planning to meet population needs for clinical prevention and appropriate care services for diverse populations.
  - b. NP Competency: Synthesize data from evidence and other disciplines to improve one's practice.
  - c. NP Competency: Utilize professional practice at the highest level of accountability to render care to patients while respecting patient wishes and maintaining culturally competency
2. Design, conduct, and evaluate scholarly inquiry in nursing science using nursing concepts and theories with a focus on translational science.
  - a. NE competency: Synthesize findings from health professions education research within the practice of nursing education to support competency development in learners.
  - b. NA competency: Apply scientific findings from nursing, physiological sciences, public health, quality improvement, and management science in an organization for the continual improvement of nursing care delivery.
  - c. NP Competency: Advocate for high quality, cost-effective care by working with healthcare teams, patients and policy advocates to improve health care.
  - d. NP Competency: Promote approaches to clinical practice that observes not only the interdependence of clinical practice and policy but also considers the ethics at both the legal and social context.
3. Evaluate health care systems in regard to the use of information systems technology, quality improvement, culturally relevant care models and tracking of performance outcomes.
  - a. NE competency: Use current technological tools to ensure the best quality interprofessional education foundation for nursing.
  - b. NE competency: Analyze current nursing education issues including but not limited to use of technology in teaching/learning, contemporary pedagogies, and measuring educational outcomes.
  - c. NA competency: Use current information systems technology, quality improvement concepts, and outcomes analysis to ensure effective health systems management.
  - d. NP Competency: Utilize clinical information systems in a way that allows for clinical documentation and evaluation to enhance patient safety.
4. Examine professional nursing practice roles of autonomy, integrity, social justice, and ethics in light of Vincentian heritage and values and other influences and value systems.
  - a. NA competency: Participate in health policy analysis and health policy formation relative to specific health care issues relevant to practice as an administrator.
  - b. NP Competency: Promote a culture of excellence by providing peer review and implementing improvement interventions proactively.
  - c. NP Competency: Translates new knowledge regarding clinical guidelines to improve patient outcomes both individually and in collaborative partnerships.

### **Admissions Policies**

1. Students must meet all admissions requirements of the University.
2. The School of Nursing is committed to the principles of non-discrimination and equal opportunity for all persons. Students are evaluated and admitted to the program without regard to race, color, religion, gender, sexual orientation, age, or national origin.
3. The School of Nursing is committed to providing equal access for all students with disabilities. Eligibility for services and accommodations is determined by the Office for

Students with Disabilities and/or the Plus Office. Students with disabilities who wish to receive services and accommodations at DePaul University must have their disability on record with either one or both of the above offices.

4. Applications are evaluated by the Assistant Director of the RN to MS Nursing Program in consult with select members of the Admissions, Progression and Retention Committee for selection of students for admission.
5. Admission criteria
  - a. An Associate degree or diploma in nursing from a ACEN or CNEA accredited nursing program or a Bachelor degree in nursing from a CCNE accredited nursing program.
  - b. Hold a current unencumbered license as a Registered Nurse from a U.S. state with eligibility to practice in the state where clinical will take place.
  - c. An official transcript showing completion statistics with a grade of “C” or better\*:
  - d. Cumulative GPA greater than 2.75.
  - e. Applications must include:
  - f. A personal statement (2-3 pages) that answers the following questions:
    - i. Why do you want to pursue a master’s degree in nursing at DePaul University
    - ii. How will this program further your academic and professional goals?
  - g. Two letters of reference from former faculty or employer
  - h. Curriculum vitae or resume
    - i. Please include professional activities (i.e. organization memberships, committee memberships, officer positions, etc.) and community service activities
6. Applicants may submit applications online at [www.depaul.edu/apply](http://www.depaul.edu/apply) with a \$40 application fee or through Nursing CAS with required DePaul \$40 application fee, an online centralizes application service for nursing programs nationwide (<http://nursingcas.org/>).
7. The student is responsible for meeting all conditions of admission and for notifying the School of Nursing once all conditions have been fully met.

\*Please note that statistics must be completed with a grade of 'C' or better and must be completed before the start of term in which the student plans to enroll in the first nursing course for the non-nursing baccalaureate ADN and the BSN applicant. The prerequisite courses do not have to be completed before submitting an application.

International students (those who were educated outside of the U.S. and/or require an F1 visa) must take additional steps to be considered for admission. Please visit <http://csh.depaul.edu/admission/graduate/Pages/international-student-admissions.aspx> for details.

### **Procedure for Admission**

1. Students are strongly encouraged to apply at least 4-6 weeks before the start of the academic quarter the student wishes to start the program.

2. Application materials are available on-line at the University web site. All forms, recommendations, test scores, transcripts, personal essays, and fees are required to complete the application process. Incomplete applications may result in delayed or denied admission for the current term. It is the student's responsibility to insure that all parts of the applications are submitted in a timely fashion.
3. Admission of transfer students requires completion of a formal transcript evaluation of all post-secondary schools attended. Students must supply official transcripts.
4. Completed applications are reviewed by the School of Nursing as they are received. Applicants are notified of their acceptance or non-acceptance by the Office of Graduate Admission. Qualified students are admitted on a space available basis.
5. Once accepted students must complete a brief online orientation for the school of nursing before making an advising appointment.
6. After completion of the orientation, students will schedule their academic advising appointment.

### **Transfer Credit**

This program builds on the strong theoretical and skills preparation in both nursing and general education that the associate degree/diploma prepared RN has completed. The learning outcomes achieved at the associate degree/diploma level are validated by the National Council Licensing Examination – Registered Nurse (NCLEX-RN), a nationally standardized exam considered to be a highly valid and reliable test of basic competence. Students will receive 79 quarter hours of block transfer credit for the associate degree/diploma. Please note that some liberal studies credit has been accounted for as part of the nursing program 79 transferrable hours. Only courses in excess of the required nursing program - and still within the restriction on the maximum number of allowable transfer credit hours - can be considered to fulfill the remaining requirements. In addition, students must meet the DePaul residency requirement. View the Undergraduate Student Handbook (<https://catalog.depaul.edu/student-handbooks/undergraduate>) to learn more about the restriction on the maximum number of allowable transfer credit hours and how to meet the residency requirement.

### **Portfolio Credit**

Portfolio credit accounts for the nursing courses taken in the associate degree/diploma program. It recognizes the nursing courses as upper division courses of a baccalaureate nursing program. 45 hours are kept in escrow until successful completion of NSG 330 and NSG 464 (the first quarter of the program) at which time these hours will be awarded as credit toward the BS in nursing degree. Successful completion is defined as a cumulative grade of B or higher.

### **Grading Scale**

Students enrolled in the RN-MS and certificate program will follow this grading scale:

Grade	Min	Max
A	93	100
A-	90	92
B+	87	89
B	83	86
B-	80	82
C+	77	79

C	73	76
C-	70	72
D+	67	69
D	63	66
D-	60	62
F	<59	

## **Retention Policies**

### **Undergraduate Student Academic Policy**

An RN to MS student with undergraduate standing who fails to maintain a 2.00 cumulative grade point average (C average) is on academic probation. A student is removed from academic probation when the cumulative grade point average reaches the required minimum of 2.00. A student's academic status is reviewed after any Autumn, Winter, Spring and Summer quarters in which the student was enrolled in at least 1 credit hour. A probationary student may be limited to 12 credit hours per quarter until a cumulative GPA of 2.00 is reached. A student who remains on probation for three sequential quarters of enrollment may be dismissed.

A student dismissed for academic reasons is not eligible for readmission to DePaul University for a period of two quarters. The readmission decision is made by the Office of Admission in consultation with the college or school.

A dismissed student may be required to demonstrate acceptable academic achievement at another regionally accredited college or university before readmission is approved. Courses to be taken elsewhere must be approved by the college advising office and a grade of C or better must be earned in all such coursework.

Credits and grades earned during previous enrollment at DePaul will remain a part of the student's records.

A student who earns more than one C or C- in a graduate-level nursing course will be prohibited from advancing to the MS portion of the RN to MS program and is expected to enroll in the School of Nursing Success Coaching program for mandatory remediation at this time. As long as all other undergraduate graduation requirements are met, the student will be permitted to graduate from the BS portion of the program.

### **Graduate Student Academic Policy**

An RN to MS student with graduate standing must maintain a cumulative GPA of 3.00 or greater to remain in good standing for all graduate level courses. A student will be placed on academic probation if the cumulative GPA dips below 3.00. The student is expected to enroll in the School of Nursing Success Coaching program for mandatory remediation at this time. If the cumulative GPA is raised to at least 3.00 at the end of the next academic quarter, the student is no longer on probation. If the cumulative GPA has not risen to 3.00 at the end of the next academic quarter, the student will be dismissed from the program.

If a student earns a C or C- in any graduate level course, the student is placed on probation. The student must enroll in the School of Nursing Success Coaching program for mandatory

remediation at this time. If the student is able to earn grades in all courses that are C+ or above AND earn a cumulative GPA of 3.00 or greater in the next academic quarter, the student is no longer on probation. If this does not occur, the student will be dismissed from the program. A student who earns a D+ or lower in any graduate level course will be dismissed from the program.

### **Policy Regarding Encumbered Registered Nurse (RN) Licensure**

1. If a student experiences an encumbered license (such as a RN license with stipulations or restrictions) during their graduate studies, he/she must notify the Assistant Director for the Program immediately upon receipt of the encumbrance.
2. The student will provide the appropriate Assistant Director with a copy of the Agreed Order.
3. Students may be allowed to take non-clinical courses with an encumbered license.
4. Students will not be allowed to take clinical courses with an encumbered license.
5. The student will notify the Assistant Director of the Program when the student's license becomes unencumbered and provide a copy of the Board of Nursing's notification letter.
6. Failure to notify the Assistant Director of the Program of an encumbered RN license will be considered academic misconduct and be treated as such.

### **Progression Policies**

1. All students must complete the orientation session before enrolling in the nursing program of studies.
2. All students must meet with their assigned academic advisor during the first quarter of the program to review their official program of studies for the current academic year.
3. Students must meet with their academic advisor at the end of the first academic year and at least once during each subsequent academic year to review progress in the program and plan for the following year. Advisors are not generally available during the months of July and August.
4. A student may not register for any course that has a prerequisite if that student has an incomplete in the prerequisite course.
5. Students may not attend classes in a course for which enrollment is blocked. No credit will be awarded for assignments completed when not officially enrolled in a course. This includes assignments previously completed and turned-in for courses taken in the past.
6. All required health records, evidence of CPR certification, criminal background checks, personal health insurance, and professional liability insurance must be kept on file in the SON. It is each individual student's responsibility to keep all of their records up-to-date. Drug screens are required for clinical placements. See Clinical Guidelines for further information. Failure to have all records present and up-to-date at the beginning of each course will result in inability to attend the clinical component of the course.
7. Leave of Absence:

- a. Students who need to interrupt their studies for personal, health or other reasons may request a leave of absence for up to one full year. The request should be made to the Assistant Director of the program and the Admission, Progression and Retention Committee should be notified. Depending on circumstances and estimated length of absence, the Assistant Director or student's academic advisor may recommend additional action to complete the request process.
  - b. Students who wish to return to the program following a leave of absence will need to submit a written request for resuming coursework to the Admissions, Progression, and Retention Committee. It is the student's responsibility to send a copy of such request to the Director of the School of Nursing, the student's faculty advisor, and the Assistant Director of the Program. This written request should demonstrate the resolution of the extenuating circumstances contributing to the original need to leave the Nursing Program. This request for reinstatement must be made no less than 6 weeks prior to resuming the nursing course sequence. Students will be notified in writing regarding the decision concerning their re-entry to the program. Individual assessment of current knowledge and clinical skills will be made prior to placement of the student in the appropriate level within the nursing program. Students who become "out of sequence students" due to withdrawal, or military/medical/family leave of absence will be placed into a clinical rotation upon re-entry based upon space available and cannot be guaranteed placement in the next available clinical course needed. "Out of sequence students" cannot displace in-sequence students from a clinical spot.
8. Students who have taken a leave of absence from the program for greater than 12 calendar months must re-apply to the university. Their application will then be considered with all other qualified applicants applying for admission to the nursing program.
9. A student who withdraws from a core nursing course while in good standing cannot progress in the sequenced nursing curriculum until that course has been successfully completed. In courses that contain both a clinical practicum and a lecture component, both course segments must be completed simultaneously. Exceptions may be identified and defined by the Admissions, Progressions and Retention Committee (APR) in consultation with both the Director of the School of Nursing and Assistant Director of the Program and the course faculty.
10. A student who withdraws from a core nursing course who is 'not in good standing' (with a grade of "C" or lower or on probation) at the time of withdrawal, will be referred to the Admissions, Progressions, and Retention Committee (APR). The APR will meet to review the student's past and current performance and to elicit recommendations from the course faculty. A representative of the APR committee may then meet with the course faculty and the Assistant Director of the Program and student to counsel the student and to establish a contract for academic improvement. Such students may not progress in the sequenced nursing curriculum until the course has been retaken and successfully completed. In courses that contain both a clinical practicum and a didactic theory portion, both course segments must be completed simultaneously.

11. A student may withdraw from a core nursing course 'not in good standing' (with a grade of "C" or lower) only once during their program of study. A second such withdrawal will result in dismissal from the program.
12. A student who has a grade of B- (86% or less) at mid-quarter may be placed on contract for academic improvement by the instructor. The student must satisfactorily fulfill all course and contract requirements by the end of the quarter of contract initiation in order to progress in the program.
13. A student currently enrolled in a degree program in which revisions are approved while their studies are in progress may elect to formally adopt the revised requirements.

### **Program Time Limitations**

The RN to MS program defines BS degree completion as 2.5 times the amount of time from the date of the first day of the term for the students' first term of enrollment in the program. It is a total of 7 quarters to complete the BS taking 2 courses/quarter

- 7 quarters X 2.5 = 17.5/4 quarters = 4.3 rounding up to 5 years to complete the BS degree

The RN to MS program defines MS degree completion as 2.5 times the amount of time from the date of the first day of the term for the students' first term of enrollment in the program OR the first day of the term the student has matriculated as a MS student from the BS component. It is a total of 9 quarters to complete the MS taking 2 courses/quarter for the ADN with a previous bachelor degree

- 9 quarters X 2.5 = 22.5/4 quarters = 5.6 rounding up to 6 years to complete the MS degree (congruent with University requirement)

### **Enforcement of Retention Policies**

The School of Nursing has designated the Admissions, Progression and Retention (APR) Committee as the administrative body responsible for enforcing the Retention Policies listed in the School of Nursing Student Handbook. Please consult those policies directly for more specific information. The procedures of the APR Committee regarding Retention Policies are as follows:

1. Instructors shall notify the APR Committee within one week of the end of the quarter of a student who will be receiving a final grade in a course that is a B- or lower. The APR Committee will be responsible to initiate the academic action to be taken and to notify the student of this.
2. If the Retention Policies indicate that the academic action taken is: a) inability to receive credit for a course, b) probation, c) suspension from the Program, or d) dismissal from the Program, the APR Committee shall notify the student in writing of the academic action. If the trigger for the academic action is academic performance, the APR Committee will notify the student in writing no later than two weeks after the end of the quarter in which the student received a final grade in any course(s) that has resulted in the academic action. If the trigger for the academic action is the conviction of a serious crime, the APR Committee will notify the student within two weeks of receiving notice of the conviction. If the trigger for the academic action is a decision by the Director of the School of Nursing upholding claims that the student has exhibited unsafe behavior in the clinical

setting or has acted in a manner deemed student misconduct (See policies for each in the Student Handbook), notification of the student by the APR Committee will occur no later than two weeks after the Director has communicated the decision to the student.

3. If a student wishes to appeal an academic action that the APR Committee has taken pursuant to the Retention Policies, the student must follow the Procedure for Appealing Grades and/or Decisions Made by the School of Nursing Admission, Progression and Retention Committee in the Student Handbook.

### **Grievance Procedure**

The School of Nursing adheres to the guidelines and procedures of the DePaul University Graduate Student Handbook in matters dealing with:

1. Student rights
2. Student responsibilities
3. Policies regarding grade challenges
4. Procedures for filing a grade challenge
5. Disciplinary procedures and other related matters covered in the handbook
6. The exception is that the School of Nursing requires filing of a grievance prior to the commencement of the next academic quarter

The Admission Progression and Retention Committee (APR) receives requests for consideration of exceptions related to academic program requirements and procedures related to the APR committee. The APR does not handle grade challenges. Students wishing to challenge a grade are directed to the DePaul University Graduate Student Handbook and follow the steps outlined there. The steps are summarized below.

### **Grade Challenge**

1. The student must make an appointment to meet with the course instructor.
2. If not resolved, the student meets with the Assistant Director of the RN to MS Program.
3. If not resolved the student meets with the Director of the School of Nursing and must send all documentation regarding the challenge prior to the meeting.
4. If not resolved, the student may submit a completed Grade Challenge Application to the Grade Challenge Review Board. The application can be found at <https://csh.depaul.edu/student-resources/Pages/General%20forms/grade-challenge-application.aspx>. Additional information about grade challenges can be found in the DePaul University Graduate Student Handbook.

### **Appeals related to academic requirements**

Students in the RN to MS Program who wish to make an appeal related to academic requirements must first consult the Admission, Progression and Retention Committee. If the issue is not resolved the candidate may then discuss the matter with the Director of the School of Nursing. The decision of the Director is final.

## **Appeals related to academic process**

Students in the RN to MS Nursing Program who want to request an exception to academic processes should contact the Admission, Progression and Retention Committee. If the request is denied the student may then meet with the Director of the School of Nursing. The decision of the Director is final.

## **Academic Virtual Environment Policy**

The School of Nursing expects a respectful environment conducive to teaching and learning from all students, faculty, and staff. Inappropriate conduct is defined as any action that interferes with the creation and maintenance of an effective virtual learning environment. Students are expected to display civility in all aspects of their educational experience at DePaul University. Appropriate student conduct is outlined in detail in *the School of Nursing Professional Development Guidelines* (Appendix D). Appropriate student conduct includes but is not limited to: being present on the discussion board; displaying courtesy; maintaining professional standards and safe practice in the clinical areas; fostering a positive learning environment by respecting the ideas and opinions of others; respecting others, including not making sarcastic or disrespectful remarks, using foul language or swearing; not threatening others on the discussion board.

Students displaying inappropriate conduct on the discussion board will be required to talk with their Academic advisor and may be placed on a performance contract. Inappropriate conduct will be documented with a written copy of the incident placed in the student's file. Such incidents of inappropriate conduct will then be reported to the Director of the School of Nursing, with copies sent to the Assistant Director of the Program, and the Admissions, Progression, and Retention Committee. Additional sanctions for inappropriate conduct may be imposed, including dismissal from the nursing program. For additional information, please see both the University Student Handbook-available on line

## **Academic Integrity Policy**

Violations of academic integrity in any form are detrimental to the values of DePaul, to the students' own development as responsible members of society and to the pursuit of knowledge and the transmission of ideas. Violations of academic integrity include but are not limited to: cheating, plagiarism, fabrications, falsification or sabotage of research data, falsification of clinical data, destruction or misuse of the university's academic resources, academic misconduct, and complicity. If an instructor finds that a student has violated the Academic Integrity Policy, the appropriate initial sanction is at the instructor's discretion. An instructor may choose to file an academic integrity violation with the university. Actions taken by the instructor do not preclude the college or the university from taking further action, including dismissal from the university. Conduct that is punishable under the Academic Integrity Policy could result in criminal or civil prosecution. The full Academic Integrity Policy can be found at <https://offices.depaul.edu/academic-affairs/faculty-resources/academic-integrity/Pages/default.aspx>.

## **Academic Integrity Policy Extension for Clinical and Service Settings**

DePaul University is committed to education that engages its students, faculty and staff in work within Chicago's institutions and communities. As DePaul representatives to our partner institutions and community organizations, we ask that you take seriously your responsibilities to these institutions during service and clinical experiences and internships. The community and its institutions are extensions of the DePaul classroom.

The University's Academic Integrity Policy and Code of Responsibility apply to professional interactions as well. See also The School of Nursing Professional Development Guidelines (Appendix D).

## **Student Advising/Program of Study**

1. A graduate student services administrator (GSSA) from the College of Health Office of Advising and Student Services (OASS) will be assigned as the primary advisor for students while they are pursuing the BS degree portion of the program. The GSSA will work closely with the RN to MS Program faculty, who will be assigned in Campus Connection, as the students' secondary advisor during this phase. The advisor will assist in developing an appropriate program of studies according to the student's preferences, abilities, and anticipated course availability. Students in the FNP or AGNP track will be advised by the Assistant Director for the Nurse Practitioner Programs for any concerns in the NP courses. Students are required to meet with their advisors during their first quarter in the program, at the end of the first academic year and once per academic year following. Students are encouraged to review the student handbook prior to meeting with their advisor.
2. The student is responsible for setting-up an appointment with the designated advisor to develop an individualized program of studies.
3. The student is responsible for obtaining a copy of the program of studies worked out during the faculty-student advising session.
4. The student is responsible for enrolling in classes in the sequence identified in the program of studies. Should circumstances interrupt or delay registering for the designated classes, students must notify the Assistant Director of the Program, the department administrative assistant, and faculty advisor for modification of the planned program of studies.
5. The student is responsible for meeting all prerequisites to courses for which the student is registering.
6. The student is responsible for scheduling periodic student-advisor, and student- instructor conferences.
7. The student may not register for any clinical course until all conditions of admission, undergraduate nursing prerequisites, and liberal arts and science requirements are completed. Students who are not in compliance will be withdrawn from the course(s) for which they are currently registered. Students will be denied progression in the program up to and including being denied graduation until all requirements are met.

STUDENTS WITH DISABILITIES

Students who require accommodations for learning can consult with the DePaul University's [Center for Students with Disabilities](#). Please see Appendix G for the policy on classroom recording.

## **Clinical Guidelines**

Clinical learning activity is defined as a planned activity occurring in a health care agency when the student is identified as a DePaul University student. The clinical learning activity may or may not include contact with patients.

In order for students to be eligible for clinical placement, they must complete the following:

1. All School of Nursing graduate clinical requirements
2. All School of Nursing graduate health requirements
3. Approval of clinical mentor/agency by the course faculty of record
4. Establish clinical affiliation agreements between the DePaul University School of Nursing and both the mentor and agency in which a student plans to complete clinical or practicum hours. Students will receive an email at the beginning of each term reminding them to start the process of procuring a clinical site and clinical mentor. Students can follow the procedure at <https://csh.depaul.edu/academics/nursing/student-resources/requests-policies-procedures/Pages/preceptor-mentor-request.aspx>.

Failure to meet health requirements will prohibit students from practice learning activities and may result in cancellation of course registration. Any clinical hours completed before health requirement clearance from the SON Compliance Officer will not count toward required clinical hours for the program. This could result in a student failing the course if the required clinical hours are not completed by the end of the quarter.

A student may be dropped from clinical coursework for not participating in clinical orientation.

All health requirements should be uploaded to Castle Branch the quarter prior to a student beginning a clinical/practicum course

The student acknowledges that all DePaul University and School of Nursing academic and conduct policies remain in place during clinical experiences. The student also agrees to comply with all of the policies set forth by the clinical site. The student understands that failure to comply with university or School of Nursing policies or the policies of the clinical site may result in sanctions, including removal from the clinical site and/or the course. The student understands that it is his/her responsibility to immediately notify his/her instructor in the event that the student encounters problems with his/her supervisor, preceptor, or staff at the site.

## **Mentor Selection for Graduate Students**

Students are responsible for selecting a mentor for practice experience courses. Criteria for graduate mentors include:

1. Unencumbered professional license and/or national certification
2. Documented current practice in the field
3. MSN practicing in chosen specialty track for graduate capstone course.
4. Commitment to high professional standards

5. Previous mentor experience is preferred
6. Interest in working with students with desire to foster student learning.

### **Process for Establishing a Mentor**

1. The student identifies an appropriate mentor for practice experience activities according to criteria and has a discussion with the mentor about their current standing in the program and practice experience needs. The student shall only put forward the names of mentors who agree to the experience.
2. The student submits a preceptor/mentor request form along with a curriculum vitae of the mentor. The Assistant Director of the program will review the resume for established criteria and the agency clinical affiliation agreement.
3. The School of Nursing will process the agency affiliation agreement and mentor letter.
4. The student uploads evidence of compliance with all health requirements.
5. The School of Nursing will notify the student and the course faculty member when all requirements have been met. Practice experience hours cannot be started until such time.
6. The course faculty member will advise the student when to begin the mentor hours.

Students are required to:

1. Identify the practice experience site and mentor they wish to complete their practice hours in NSG 596 or NSG 597.
2. Students in NSG 596 or NSG 597 will notify their academic advisor of their practice setting the term before starting the course.
3. Comply with additional requirements of the clinical setting including but not limited to drug screening.
4. Students may choose their place of employment as their practice experience site as long as the SON has a clinical affiliation agreement with the facility.

### **Practicum Credit Previous Work Credit Policy**

See Appendix F

### **Unsafe Clinical Performance**

A student is responsible for implementation of safe patient care during the supervised clinical practicum. Unsafe behavior can result in suspension from the clinical site, student remediation, failure of the course, and/or dismissal from the program. Unsafe practice is defined as behavior that has the potential to cause serious harm to a patient. Examples of unsafe clinical behavior in clinical practice include, but are not limited to:

Unsafe practice patterns include but are not limited to:

1. Violating HIPAA requirements
2. Violating OSHA requirements
3. Performing a procedure outside the domain of nursing
4. Performing a procedure in which he/she has not been prepared
5. Failing to use universal precautions

6. Administering treatments/medications in any form via any route without consent and/or supervision from the clinical instructor.
7. Advising patients about diagnosis or prognosis or referring patients to treatments, agencies, medications, without first discussing such with the clinical instructor.
8. Asking a staff nurse to supervise any procedure without consent of the clinical instructor.
9. Inability to correctly calculate math/medication problems
10. Knowingly exposing patients, colleagues, and others to actual or potential life threatening communicable diseases.
11. Stealing drugs, supplies, or belongings from an agency or patient.
12. Removing copies of patient care documents from healthcare agencies.
13. Removal of patient identification.
14. Failure to adhere to DePaul School of Nursing and/or clinical agency policies.
15. Falsifying patient records or fabricating patient experiences.
16. Neglecting to give appropriate care.
17. Providing patient care in a harmful manner or exhibiting careless or negligent behavior in the process of providing care to a patient.
18. Refusing to assume the assigned care of a patient, or failing to inform the instructor of an inability to care for a patient.
19. Willful or intentional physical or emotional harm to a patient.
20. Failure to report an error in assessment, treatment, or medication or failure to report an unusual occurrence or an adverse reaction.
21. Failure to comply with DePaul's Drug Free Campus policy.
22. Performance not in compliance with stated student expectations as outlined in lecture or course syllabi.
23. Failure to know proper vital sign ranges as well as failure to notify instructor or patient's nurse of critical vital sign value.

Any student whose pattern of behavior demonstrates unsafe clinical practice that endangers a patient, colleague, or self in the clinical area will be suspended immediately from the clinical experience. The faculty of record will meet with the student to discuss how the unsafe behavior came about and potential complications from said behavior and prepare written documentation of the event. This will be forwarded within 24 hours to the course coordinator. A copy of this document will be placed in the student file and forwarded to the Director of the School of Nursing, Assistant Director of the program, and Admissions, Progression and Retention Committee. If appropriate, an incident report will be filed at the clinical site.

If, in the clinical instructor's clinical judgment, a student is unsafe to continue in the clinical practicum, the clinical instructor will take the following steps:

1. Dismiss the student for the remainder of the clinical day. The instructor will follow institutional guidelines as appropriate.
2. Contact the course coordinator and the Assistant Director of the Program.
3. Submit a written report of the incident to the Assistant Director's office within one working day. The Assistant Director will contact the Registrar to put a hold on the student's grade; the student will not be allowed to withdraw from the course at this time. The clinical instructor will schedule a meeting with the student within 24 hours of the incident or as soon as is practical, and prepare a written report that describes the incident

that resulted in the student's dismissal from clinical. The student will be given a copy of the report at this time.

4. The clinical instructor will advise the student that he or she will not be able to return to clinical until the meeting with the Assistant Director takes place.
5. Within 3 working days, or as soon as is practical, a meeting will be held. In attendance at the meeting will be the clinical instructor, the student, the course coordinator and the Assistant Director of the Program. The student may have his or her advisor present at the meeting. A decision regarding the student's continuation in the program will be made. This meeting will determine whether the student will be administratively withdrawn with a grade of F or is allowed to return to complete the clinical. The clinical instructor initiating the meeting is not involved in the decision regarding the student's progression in the program. A decision is made at the meeting and communicated to the student.
6. The documentation related to unsafe clinical practice will be kept in a secured file within the SON offices.
7. The Admissions and Progression and Retention Committee (APR) reviews any administrative course withdrawal resulting in an F. The APR will determine if the student is dismissed from the program or may return in an appropriate quarter per the procedures of the APR. The student may elect to appeal this decision per procedures in the student handbook.

### **Clinical Performance Limitation Related to Temporary Disability**

A student who incurs an injury or has any other physical limitation of a temporary nature must notify course faculty and provide documentation from his/her health care provider that he/she is able to safely carry out the duties of a student in the practice experience setting. This must occur as soon as possible and prior to attendance at practice setting.

The final decision as to whether the student is allowed in the practice setting rests with the agency. If the student is unable to attend the practice experience, he or she will need to withdraw and meet with the Assistant Director of the program to explore options.

Students who are pregnant are advised that practice sites have individual policies and requirements related to pregnant students that may impact the student's ability to attend or complete the experience.

### **Clinical Probation/Remediation**

A student requires a contract when one or more course objectives are not being met. These behaviors, if not addressed, put the student at risk for receiving a non-passing final grade in the course. The process is initiated as soon as course faculty recognizes that a student's performance or behavior may jeopardize the successful completion of a course. The contract can be initiated at any time during the quarter.

The contract is documented on the Student Faculty Contract form (Appendix C) and is completed by the course faculty. The faculty will document, in writing, on the contract form, the areas of deficient student performance and identify behaviors the student will need to demonstrate in order to receive a passing grade. The student will receive a copy of this contract. The student's academic advisor will be notified as will the Assistant Director of the Program. The academic advisor will follow-up with the course coordinator regarding the student's

remediation progress. By the end of the quarter (or completion of the course in the event of a withdrawal), the student must demonstrate satisfactory remediation of all areas of concern noted in the contract without further additional deficits or risk failing the course. Once the contract requirements have been met, the instructor should document this on the form and both student and instructor should sign the form. A completed copy can be given to the student; another copy is sent to the Coordinator of Data Management for tracking purposes; another copy is placed in the student's file.

### **Clinical Failure**

In the event that a student does not receive a passing grade in the practice experience component of a course, the student's grade for that course will automatically become an F.

### **Student Dress Code**

1. The student is to be well groomed at all times presenting a professional image. The rationale behind this and the following requirements comes from the belief that it is the client who is the focus of the nurse-client relationship.
2. Hair must be kept off the face and above the collar or pulled back and secured. Natural hair tones only. Sideburns, moustaches, and beards must be neatly trimmed. Make-up, if worn, must be minimal and conservative. Personal care products may only be lightly scented. Other fragrances are not to be worn.
3. Nails may not extend beyond the tip of the finger. NO artificial nails or nail polish is permissible.
4. The ONLY acceptable accessories are: One single or pair of stud earrings-one on each lobe; one plain ring/ring set on one finger; NO other body jewelry or accessories is acceptable. Note: in some clinical areas all jewelry must be removed.
5. Tattoos are to be covered.
6. When giving direct patient care, in the office or clinic setting, students must wear their white lab coat with DePaul School of Nursing patch, their SON student name pin, and professional dress consisting of a shirt, sweater, and/or blouse with pants or a skirt, closed toe shoes in good repair with a low heel and in neutral color, with neutral hosiery or socks. No high tops or bare foot sandals.
7. Inappropriate clothing would include: sweatshirts; sweat pants; tight or sleeveless tops; shirts with lettering, pictures or hoods; stirrup pants; leggings; Capri pants; shorts; blue jeans; tight or revealing clothing; visibly worn, torn, or faded clothing; midriff tops; low necklines; open-backed clothing; cleavage or underwear showing; or flip-flops.
8. These guidelines are subject to modification by the clinical instructor, based on the instructor's judgment, individual student religious or cultural practices, the sensibilities of the population, and the dress code of the particular office or clinic setting or event where the student is in attendance or practicing.

### **Confidentiality**

Patient/Client Privacy

1. The student is expected to adhere to the American Nurses Association Code for Nurses and act in accordance with the Patient's Bill of Rights.
2. Confidentiality is the protection of a client's privacy through careful use of oral and written communications. The client's right to privacy is safeguarded by judicious protection of confidential information. The student should adhere to the School of Nursing Social Media policy (Appendix E) regarding maintenance of confidentiality and protection of privacy as it relates to communication via social media.
3. A client's chart is a legal document. Information from the client and chart is confidential and cannot be disclosed to those not caring for the client. All entries must be accurate and legible. No part of the client's Medical record can leave the hospital. Students are not allowed to access the records of patients for whom they are not providing direct care.
4. Information communicated by clients to students may not be repeated to anyone outside of the direct care team. Care should be taken when in the corridors, lounge, classroom, dining rooms, or other public areas, so that conversations are not overheard.
5. An individual can withhold any information about himself/herself that he/she desires. Nursing students must be especially careful regarding the invasion of the client's privacy.
6. Students should use only the initials of the client when filling out history forms, care plans, and any other documents which are a part of their educational experience.

## **Unprotected Exposures**

In the event of any unprotected exposure to blood or body fluids, the student is to follow the procedures of the DePaul University School of Nursing Bloodborne Pathogens Exposure Control Plan: <http://csh.depaul.edu/departments/nursing/student-resources/Pages/Bloodborne-Pathogens-Exposure-Control-Plan.aspx>

### **Exposure at Outside Facility while Performing Duties within Student Role**

Any student incurring such an exposure should follow both DPU's post exposure policy as well as the institution's policy where the exposure occurred. All student exposure incidents while conducting learning or training activities under the SON must be reported to the Safety Officer or his/her designee as soon as possible, but no later than one business day after the incident.

Students are encouraged to speak with their health care provider about any additional follow-up post-exposure prophylaxis that may be recommended.

When possible, the Safety Officer, his/her designee, or institution where the exposure took place, will look into testing the exposure source individual for HIV, hepatitis B, and/or hepatitis C. Testing of the source individual's blood does not need to be repeated if the source individual is already known to be infected with HIV, hepatitis B, and/or hepatitis C.

### **Student Injury and Incident Policy**

In the event that a student is injured (or involved in an untoward incident\*) while in the clinical setting, the student should immediately notify the clinical instructor. The clinical instructor should assist the student to seek immediate health assessment and response following all policies

and procedures of the clinical setting that pertain to the type of injury sustained. The clinical instructor must notify the course coordinator of the event by the end of the clinical day.

If a student is injured (or involved in an untoward incident) on the campus while conducting learning or training activities, the student must notify the instructor or faculty member in charge of the activity immediately. The instructor or faculty member in charge must call 911 if the injury is serious. The instructor or faculty member is to notify DePaul Public Safety and follow university policy for all injuries.

All student injuries (or untoward incident), whether they occur at DePaul University or off campus while conducting learning or training activities under the School of Nursing require that DePaul Public Safety is notified, that a public safety report is filed and the DePaul Environmental Health and Safety Incident Report form (DEHSIR), which can be found at <http://offices.depaul.edu/environmental-health-and-safety/forms/Pages/incident-report.aspx>, is completed. All must be completed within 1 business day of the incident. The incident must also be reported to the School of Nursing Safety Officer or the SON Safety Officer designate as soon as possible but no later than one business day after the incident. When reporting to the SON Safety Officer, the student is to include a copy of the completed DEHSIR.

If a student reports an incident in which the harm to student is not physical but rather psychological or emotional, clinical faculty should notify the associate director of the program who will direct the student to appropriate DePaul University resources.

Once the student has been seen by a health care professional for the injury (or untoward incident) and completed all reporting processes required by the university and clinical setting, the student should contact his/her health care provider for any further treatment or health care follow-up that is needed. The student may wish to contact the DOS office if the student has concerns or questions.

## **Student Clinical Requirements**

It is mandatory that all students have all of their clinical requirements completed and uploaded to their **Student Immunization Tracker** through **Castle Branch** prior to attending clinical. It is the responsibility of the student to insure that all clinical requirements are kept current. Students must submit copies of renewed coverage, updated lab results, and renewed skills **PRIOR** to the anniversary of the expiration date. Students who are non-compliant with clinical requirements will not be permitted to attend clinical. Non-attendance of clinical due to non-compliance with clinical requirements will be treated as an unexcused absence that may not be made up. This may put the student at risk for failing the course.

The student must submit **COPIES** (NOT ORIGINALS) of the following:

1. Tuberculosis Screening:

All students that will provide patient care in the clinical setting are required to submit proof of not having active tuberculosis prior to the first day of the clinical rotation. Documentation must be

uploaded into Castle Branch and approved to fulfill this requirement. This can be done by completing one of the following:

A. Two-step Tuberculin Skin Test.

- a. The student will be required to have two separate tuberculin skin tests placed 1-3 weeks apart. The results of both tests must be uploaded into Castle Branch.

B. Quantiferon Gold Test

- a. The student will be required to have this blood test drawn and upload the results into Castle Branch. ***Please note: some clinical sites will only accept this as proof of not having active tuberculosis.***

Students With Positive TB Results

- A. Students with a history of having positive TB results or has received the BCG vaccination prior to admission into the nursing program at DePaul University must complete the following:

- a. Submit certification from a healthcare provider that the student is currently free of the signs and symptoms of active tuberculosis. This certification must be renewed every 6 months.

**AND**

- b. Submit a negative chest X-ray from the time of the initial positive TB results. In the event that a chest X-Ray was not completed, the student will be required to obtain one prior to the first day of the clinical rotation.

**OR**

- c. Complete a Quantiferon Gold test.

**AND**

- d. Submit certification from a healthcare provider that the student is currently free of the signs and symptoms of active tuberculosis. This certification must be renewed every 6 months.

- B. Students found to have positive TB results while completing pre-clinical screening requirements for DePaul University must complete the following prior to the first day of the clinical rotation:

- a. Obtain a chest x-ray and submit the results.

- b. Submit certification from a healthcare provider that the student is currently free of the signs and symptoms of active tuberculosis. This certification must be renewed every 6 months. If the student shows signs and symptoms of active tuberculosis during the provider evaluation, the student may not begin the clinical rotation until documentation of a completed course of prophylactic therapy and certification of currently being free of the signs and symptoms of active tuberculosis has been completed.
2. Titers for Rubeola, Mumps, Rubella, Varicella. A **TITER is MANDATORY** to document immunity. (Note: Vaccination or history of the disease is necessary to develop immunity). The titer **MUST** contain the titer value as well as the reference norm. The required titers are as follows:
  - a. Rubeola IgG
  - b. Mumps IgG
  - c. Rubella IgG
  - d. Varicella IgG

If titers indicate no immunity for Rubeola, Mumps, Rubella, and Varicella, immunization is required (for Rubeola, Mumps or Rubella, this will be a booster series of 2 MMR immunizations). Follow-up titers will need to be drawn after re-immunization for both MMR and Varicella.

Students must sign a waiver if no immunity is detected on follow-up titer. The waiver states that you understand the risk associated with continuing in the nursing program, specifically that if you contract the disease to which you are not immune, the school is not liable and that you want to continue in your studies, knowing the risk. Once you have documented your immunity or signed a waiver, you will not need to furnish any further documentation.

3. Proof of immunity to Hepatitis B must be confirmed through bloodwork. Immunity may be achieved through vaccination or previous exposure\*. You may submit test results and documentation of immunity from your provider in lieu of receiving vaccination. The following documents will be accepted as proof of immunity:
  - a. Positive Hepatitis B surface antibody (anti-HBs) indicates immunity from previous vaccination.
  - b. Positive anti-HBs and positive Hepatitis core antibody (anti-HBc) indicate immunity due to infection; a negative Hepatitis B surface antigen (HBsAG) is needed to determine whether acute or chronic infection exists, and the student will need to follow up with his or her health care provider.

If immunity is not documented, the student must receive the Hepatitis B immunization series and post-vaccination bloodwork as outlined below.

If the series has been started but has not been completed prior to beginning clinical attendance, it is the student's responsibility to supply documentation of the vaccine dates and the date when the final Anti-HBs bloodwork is drawn. The student must have completed a minimum of one of the series of three vaccines prior to the first clinical day and upload documentation for this to Castle Branch.

If bloodwork following completion of the series of three vaccines does not show immunity, further vaccination is necessary. If, after completion of a second series, no immunity is detected, the student must sign a waiver. The waiver states that you understand the risk associated with continuing in the nursing program, specifically that if you contract the disease to which you are not immune, the school is not liable and that you want to continue in your studies, knowing the risk. Once you have documented your immunity or signed a waiver, you will not need to furnish any further documentation.

\* The Centers for Disease Control (CDC) recommend that persons who fall into either of the following categories for increased risk for Hepatitis B infection should see their health care provider and request a blood test for Hepatitis B surface antigen (HBsAg) and Hepatitis B surface antibody (Anti-HBs) as you may not need the vaccination if the results are positive.

#### CDC Categories of Persons at Increased Risk for Hepatitis B Infection

1. Persons born to mothers in or from countries in which Hepatitis B is endemic.
2. Sexually active men who have sex with men.
  
4. Tetanus-Diphtheria-Pertussis Booster: Must be within the last 10 years. Documentation can be in the form of a signed immunization card or statement from your healthcare provider or health department that documents the date the tetanus booster or Tdap were administered. Please note that a tetanus booster alone is not adequate and you must demonstrate immunization for diphtheria and pertussis within past 10 years.
  
5. Yearly influenza vaccine is required. Incoming MENP students will receive Standard Precautions/Universal Precautions Training as part of their initial coursework.
  
6. **Current CPR Certification:** Current American Heart Association (AHA) certification in Basic Life Support (BLS) for Healthcare Provider is required for all entering and current students. Only the AHA certification will be accepted.

Content covered in AHA BLS class:

- Critical concepts of high-quality CPR
- The American Heart Association Chain of Survival
- 1-Rescuer CPR and AED for adult, child and infant

- 2-Rescuer CPR and AED for adult, child and infant
  - Differences between adult, child and infant rescue techniques
  - Bag-mask techniques for adult, child and infant
  - Rescue breathing for adult, child and infant
  - Relief of choking for adult, child and infant
  - CPR with an advanced airway
7. Professional Liability Insurance: Each **MENP and BSN completion** student must obtain their own **student nursing professional liability insurance** policy against claims arising from real or alleged errors or omissions. Their policy must have minimal limits of coverage of \$1,000,000 PER claim and \$5,000,000 aggregate. This insurance must be **renewed annually**.
  8. Evidence of Current Health Insurance: All nursing students must submit proof of continuous comprehensive health insurance on a yearly basis. Please note that the name on the health insurance must match the student's name.
  9. A signed HIPAA-FERPA authorization must be uploaded to Castle Branch by the start of the first quarter. This form must be signed in order for the School of Nursing to release any student health information related to clinical requirements to clinical sites.
  10. Blood Borne Pathogens Exposure training must be completed online prior to the first clinical day. The training can be found at [go.depaul.edu/bbp](http://go.depaul.edu/bbp).
  11. A signed Acknowledgement of Mandated Report Status must be uploaded to Castle Branch, indicating that the student understands that while in the clinical setting, the student becomes a mandated reporter under the Abused and Neglected Child Reporting Act.
  12. Criminal Background Check: Nursing students must submit to a criminal background check via Castle Branch prior to their initial clinical experience. Criminal background checks must be completed by August 1<sup>st</sup> for Fall Quarter or December 1<sup>st</sup> for Winter Quarter and will remain in effect unless: a.) a clinical agency determines it necessary to require more frequent or more detailed background checks, b) OR a nursing student interrupts his/her program of study for one quarter or longer. In the above cases, it is mandatory for the student to have another criminal background check performed.

**The School of Nursing may not be able to place students in a clinical setting if there are positive findings on the criminal background check. As a result, a student will not be able to complete the requirements of the program.**

13. Drug Screening: Nursing students are required to have a ten-panel drug screen as required by clinical institutions. Some institutions may require a new drug screen each year. The test may be obtained from any health care agency, or from Castle Branch through Quest Diagnostics Lab. The drug test MUST follow a “Chain-of-custody” procedure. The student

should sign a release to have the results sent to School of Nursing Coordinator of Clinical Placements. See below for the School of Nursing Policy on Drug Use and Testing.

**The School of Nursing may not be able to place students in a clinical setting if there are positive findings on the drug screen. As a result, a student will not be able to complete the requirements of the program.**

## **Drug Use and Testing**

In accordance with De Paul University policies, the School of Nursing will impose disciplinary sanctions upon any student found to be in violation of laws or policies relating to the unlawful possession, use, or distribution of drugs or alcohol. Nursing students may be required to have a ten-panel drug screen based on clinical affiliates' requirements. Release forms must be signed to have the results sent to the Clinical Placement Coordinator.

If a student's drug test is positive, secondary or confirmatory testing will be performed and the student will be expected to cooperate with interviews and follow-up procedures to ascertain and endeavor to confirm whether there was an explanation for the positive test result that did not involve illegal conduct, e.g., ingestion of lawful drugs, food, or beverages that could cause positive results.

If the positive test is confirmed and no sufficiently credible explanation of relevant lawful conduct is forthcoming, clinical placement in a clinical course and successful completion of the program will be jeopardized due to failure to qualify for placement and/or successful completion of the program. Students with confirmed positive tests and/or no sufficiently credible explanation of relevant lawful conduct will be advised that the De Paul University School of Nursing cannot place them in a clinical setting. As a result, a student would not be able to complete the requirements of the program.

## **Access to Student Records**

1. A student may have access to his/her personal student record upon request. Confidentiality is maintained with all student files. Release of information is granted upon written request by the student.
2. No specific or detailed information concerning specific medical diagnoses will be provided to faculty outside the department, administrators, or even parents, without the expressed written permission of the individual in each case. This position with respect to health records is supported by amendment to the Family Education Rights and Privacy Act of 1974. Health officials and other institutional officers must remember that all confidential medical/health care information is protected by statutes and that any unauthorized disclosure may create legal liability.

## **Audio Recording Lectures/Material for Personal Use:**

Students may use a tape/digital recorder, Smartpen (records as student writes) or record from their laptops. Students are instructed to (1) not share or distribute the recording and (2) discard once a course grade is received. Student understands that he/she may be in violation

of DePaul policies, including the Academic Integrity policy or the Code of Student Responsibility if recording is done prior to obtained agreement. Course Professor has full authority to pursue any intellectual property rights, or other rights, flowing from the Agreement and policy regarding recording. *If you desire to record lecture or any material, please see me for a signed agreement. See Appendix G.*

## **Graduation**

DePaul University awards the both the Bachelor of Science and Master of Science degree with a major in nursing to students who successfully complete RN to MS program. All requirements of the University, College, and School of Nursing must be met as outlined in the current Bulletin.

The student is responsible for completing the application for degree conferral and commencement by the deadline posted in the academic calendar.

Students are responsible for changes reflecting new program requirements if the department gives sufficient notice.

## **Legal Limitations for NP Licensure**

Requirements for certification licensure may vary from state to state. Those students wishing to take their certification exam outside of Illinois are advised to check with that state's licensure requirements early in the academic program.

**APPENDIX A: BS in Nursing CLINICAL PRACTICE EXPERIENCES**

<b>Course</b>	<b>Clinical Experience</b>	<b>Care</b>	<b>Clinical Practice Hours</b>	<b>Clinical Objective</b>	<b>Course Objective/SLO</b>	<b>AACN Essential</b>
NSG 376	Windshield Survey	Direct	6 hours with 12 CBSL service hours	Analyzes data gathered from a CBSL site windshield survey to develop community health education needs	Analyze the community as client within the context of professional nursing practice and a multi-cultural health care environment. SLO #3 Design and deliver culturally appropriate nursing care services to diverse individuals, families, and populations, in coordination with appropriate multidisciplinary providers across the continuum of care.	Essential VII: Clinical Prevention and Population Health
NSG 377	Final Community Health Promotion Project	Direct	5 hours with 12 CBSL service hours	Develop a specific project to address health promotion and/or disease prevention in the care of families, aggregates, and communities across the continuum of care. (SLO3). Evaluate health promotion, health maintenance and risk reduction initiatives and programs targeting identified health risks in a community-based agency. (SLO2). Utilize the nursing process in	Evaluate and reflect on the role of a community health nurse in the provision of health education and/or health related information in the community. (SLO3). Apply knowledge of the roles, functions, and concepts of community/public health nursing in response to the health needs of families, aggregates, and communities. (SLO1).	Essential VII Clinical Prevention and Population Health; Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes

				providing nursing care to communities, by demonstrating critical thinking, cultural sensitivity, professional communication and collaborations. (SLO4, SLO5)		
NSG 431	MI simulation	Direct	0.5 Hours	Uses MI communication skills to assist patient with health behavior change Analyzes MI to plan create a HP plan	Demonstrate critical thinking by communicating the identification and analysis of evidence-based strategies, trends and issues impacting the health of individuals, families and communities SLO#3 Design and deliver culturally appropriate nursing care services to diverse individuals, families, and populations, in coordination with appropriate multidisciplinary providers across the continuum of care.	Essential VII Clinical Prevention and Population Health
NSG 431	Care Coordination Discussion board assignments	Direct	2 Hours	Works collaboratively with other students in planning a HP plan for a patient/family	Demonstrate critical thinking by communicating the identification and analysis of evidence-based strategies, trends and issues impacting the health of individuals, families and communities SLO#3 Design and deliver culturally appropriate nursing care services to diverse individuals, families, and populations, in coordination with appropriate multidisciplinary providers across the continuum of care.	Essential VI Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
NSG 431	Health Promotion teaching simulation	Direct	5 Hours	Integrates a health promotion technology in the HP care plan Develops a health promotion lesson plan for a family	Develop a health promotion program involving principles cultural competency and relevant social and cultural determinants of health for	Essential IV Information Management and Application of Patient Care Technology and Clinical Prevention and

				Provides health promotion education for a family	individuals, families, and communities. SLO#1 Synthesize knowledge from the sciences, the humanities, and nursing science to assess, plan, and provide care for individuals, families, and communities using evidence-based and values-based modalities	Essential VII Population Health
NSG 431	Community Outreach Agency Interviews: <ul style="list-style-type: none"> <li>• Lifespan x2</li> <li>• Refugee Resettle ment</li> </ul>	Indirect	1.5 Hours	Collaborates with a community leader addressing gaps in healthcare within that community	Integrate interprofessional team members in the care of individuals, families, and communities using healthcare technology and informatics. SLO#3 Design and deliver culturally appropriate nursing care services to diverse individuals, families, and populations, in coordination with appropriate multidisciplinary providers across the continuum of care.	Essential VI Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
NSG 464	Simulated Comprehensive Physical Assessment	Direct	25 Hours	Performs a comprehensive physical assessment using advanced assessment skills and techniques; Interpret health assessment data and demonstrate documentation of appropriate findings; Engages in peer review of conducted video-recorded advanced physical assessments.	Conduct advanced physical assessments and document appropriate findings./SLO #1 Synthesize knowledge from the sciences, the humanities, and nursing science to assess, plan, and provide care for individuals, families, and communities using evidence-based and values-based modalities.	Essential IX: Baccalaureate Generalist Nursing Practice
NSG 380	QSEN Synthesis Project	Indirect	15 Hours	Develop a QI project that addresses a quality issue in a healthcare facility	Develop a quality improvement plan or policy revision recommendation using current evidence focused on	Essential II Basic Organizational and Systems Leadership for

					safe patient outcomes for individuals, families, and communities. SLO#1 Synthesize knowledge from the sciences, the humanities, and nursing science to assess, plan, and provide care for individuals, families, and communities using evidence-based and values-based modalities.	Quality Care and Patient Safety and Essential III Scholarship for Evidence-Based Practice
NSG 540	Policy Development at CbSL site ad Community-based Service Learning (CbSL)	Indirect/Direct	12 CbSL practice hours	Works with leaders in the community agency to revise/edit/develop a policy that will improve the health to the community the agency serves	Analyze a health policy issue and develop a policy position paper. Integration of relevant ethical, social, and cultural implications is required./ SLO #4 Demonstrate progression in life-long learning by applying critical thinking to analyze contemporary health care, including but not limited to social determinants of health, health inequities, serving high-risk populations, technological applications in healthcare, health care policy, and health care finance.	Essential V: Health Care Policy, Finance, and Regulatory Environments

**APPENDIX B: MS IN NURSING CLINICAL PRACTICE EXPERIENCES**

<b>Course</b>	<b>Clinical Experience</b>	<b>Care</b>	<b>Clinical Practice Hours</b>	<b>Clinical Objective</b>	<b>Course Objective/Student Learning Outcome (SLO)</b>	<b>AACN Master's Essential</b>
NSG 431 Health Promotion for Families and Communities	A simulated telehealth clinical learning experience in which students practice Motivational Interviewing (MI) skills with a patient from a vulnerable population. Motivational interviewing is a patient-centered, evidence-based communication technique that assists patients to change to healthier lifestyles (Miller & Rollnick, 2013).	Direct	0.5 Hours	Uses MI communication skills to assist patient with health behavior change  Analyzes MI conversation to plan create a health promotion plan	Demonstrate critical thinking by communicating the identification and analysis of evidence-based strategies, trends and issues impacting the health of individuals, families and communities  SLO Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.	Essential V: Informatics and Healthcare Technologies  Essential VIII: Clinical Prevention and Population Health for Improving Health

NSG 431 Health Promotion for Families and Communities	Virtual Care Coordination Meetings	Direct	2 Hours	Works collaboratively with other students in planning a health promotion plan for a patient/family	Demonstrate critical thinking by communicating the identification and analysis of evidence-based strategies, trends and issues impacting the health of individuals, families and communities  SLO Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.	Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes  Essential VIII: Clinical Prevention and Population Health for Improving Health
NSG 431 Health Promotion for Families and Communities	Health Promotion teaching simulation	Direct	5 Hours	Integrates a health promotion technology in the health promotion care plan  Develops a health promotion lesson plan for a family Provides health promotion education for a family	Develop a health promotion program involving principles cultural competency and relevant social and cultural determinants of health for individuals, families, and communities.  SLO Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.	Essential V: Informatics and Healthcare Technologies  Essential VIII: Clinical Prevention and Population Health for Improving Health
NSG 431 Health Promotion for Families and Communities	Interviews leaders in community outreach organizations to discuss health disparities and interventions	Indirect	1.5 Hours	Collaborates with a community leader addressing gaps in healthcare within that community	Integrate interprofessional team members in the care of individuals, families, and communities using healthcare technology and informatics.  SLO	Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes

	addressing those disparities <ul style="list-style-type: none"> <li>• Lifespan x2</li> <li>• Refugee Resettlement</li> </ul>				Evaluate health care systems in regard to the use of information systems technology, quality improvement, culturally relevant care models and tracking of performance outcomes.	
NSG 464 Physical Assessment for Advanced Practice	Simulated Comprehensive Physical Assessment	Direct	25 Hours	<p>Performs a comprehensive physical assessment using advanced assessment skills and techniques.</p> <p>Interprets health assessment data and demonstrate documentation of appropriate findings.</p> <p>Engages in peer review of conducted video-recorded advanced physical assessments.</p>	<p>Conduct advanced physical assessments and document appropriate findings.</p> <p>SLO Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.</p>	Essential IX: Master's-Level Nursing Practice
NSG 540 Culture, Ethics, and Policy Analysis	Policy Development at Community-based service learning site	Indirect/Direct	12 CBSL service hours	Works with leaders in the community agency to revise/edit/develop a policy that will improve the health to the community the agency serves	<p>Analyze a health policy issue and develop a policy position paper. Integration of relevant ethical, social, and cultural implications is required.</p> <p>SLO Distinguish between levels of the roles of autonomy, integrity and social justice in a professional nursing leader's career.</p>	<p>Essential V: Health Care Policy, Finance, and Regulatory Environments</p> <p>Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes</p>
NSG 597 Capstone in Nursing	Clinical supervision of nursing students	Direct/indirect	105 hours	Uses leadership skills to teach, coach, and mentor pre licensure nursing students in the clinical setting	Develop a philosophy of pedagogy that will inform future teaching in nursing	Essential IX: Master's-Level Nursing Practice

Education	Capstone project at clinical site			Develops and implements a capstone project that addresses a QI need at the clinical site	SLO Examine professional nursing practice roles of autonomy, integrity, social justice, and ethics in light of Vincentian heritage and values and other influences and value systems.	
NSG 483 Practicum in Population-Based Nursing Practice I	Clinical supervision experiences for nurse practitioner students	Direct	180 hours	Uses application of health assessment and examination skills in the clinical setting to identify health risks and manage common illnesses.	Analysis and application of current research for decision-making in performing the health history and physical assessment, contributing to interdisciplinary treatment planning, and teaching for health promotion and illness prevention.  SLO Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.	Essential I: Master's-Level Nursing Practice  Essential III: Master's-Level Nursing Practice
NSG 487: Practicum in Population-Based Nursing Practice II	Clinical supervision experiences for nurse practitioner students	Direct	200 hours	Demonstrate increasing comprehensive practice of primary care in the context of specialty practice for selected populations.	Nurse practitioner student readings, assignments, and clinical experiences in primary care: family, adult, pediatric, or women's health with an emphasis on health promotion and disease prevention.  SLO Develop an advanced level of patient and family care management with emphasis on	Essential IV: Master's-Level Nursing Practice  Essential VIII: Master's-Level Nursing Practice  Essential IX: Master's-Level Nursing Practice

					interdisciplinary population health focused on a culture of safety and quality that prevents harm.	
NSG 490: Practicum in Population-Based Nursing Practice III	Clinical supervision experiences for nurse practitioner students	Direct	220 hours	Integrate professional roles of the advanced practice nurse while increasing skills in the comprehensive practice of primary care and/or specialty practice for selected populations.	<p>Implement health promotion and disease prevention with unitary human beings in mutual process with their environment in the management of health and illness, teaching and health counseling and organizational and role competencies.</p> <p>SLO Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.</p>	<p>Essential II: Master's-Level Nursing Practice</p> <p>Essential IV: Master's-Level Nursing Practice</p> <p>Essential VI: Master's-Level Nursing Practice</p> <p>Essential IX: Master's-Level Nursing Practice</p>



## **APPENDIX D: PROFESSIONAL DEVELOPMENT GUIDELINES**

### Professional Development Guidelines

Preparation for the professional practice of nursing requires more than the acquisition and application of knowledge. Therefore, in addition to the academic criteria listed in the progression and retention policies in the nursing student handbook and the university graduate student handbook, the student must demonstrate:

1. Appropriate and respectful interpersonal relations and communication with clients, peers, faculty and other health care personnel.
2. Responsible fulfillment of class and practicum obligations, including timely, safe provision of nursing care in the practicum setting based on sufficient knowledge.
3. Honesty and integrity in all academic and professional matters.

These expectations are minimally essential to professional nursing practice and should be met in both classroom and clinical settings. However individual instructors may stipulate other rules for professional behavior as appropriate to the course or clinical setting and as outlined in the syllabus. The following are examples of behavior that may hinder maximum professional growth and competence as a professional nurse and are specifically discouraged:

**Late work** is a reflection of poor organizational habits as well as being unprepared for the online learning environment. All late work must be negotiated well in advance of the assignment due date. Simply informing the instructor that you intend to be late with an assignment is not acceptable. Any late work submission not negotiated in advance with the instructor or any two instances of late work in a course will result in a student faculty contract.

**Disrespectful behavior** is defined as inappropriate verbal or non-verbal behavior that is offensive, argumentative, ill-informed, or lacking in sensitivity to the dignity of any individual. In the on academic online environment, it creates a hostile environment and is a violation of academic integrity. Because of its serious consequences, one instance of disrespectful behavior will result in a student faculty contract.

**Dishonesty** is a violation of professional ethics and standards is defined as the intentional falsification or omission of information that has the potential to mislead, harm, or take unfair advantage. Dishonesty may take many forms including plagiarism, documentation of inaccurate or unverified patient data, or

failure to report unethical or unsafe professional practice. Dishonesty is most serious and can result in failure of a course or suspension or dismissal from the program.

A **student faculty contract** specifies the exact professional behavior that is in need of development and the specific sanction that will be applied with current or subsequent violations of professional guidelines. A pattern of late work, or disrespectful behavior may be considered unprofessional and result in **dismissal from the program**. Other less severe sanctions may include compulsory makeup assignments, grade reduction, or special assignments involving library research and scholarly analysis of the problem behavior or missed material.



## **APPENDIX E: SCHOOL OF NURSING USE OF SOCIAL MEDIA POLICY**

The School of Nursing (SON) acknowledges the growing use of social media by faculty, staff and students as well as the increasing use of social media for educational and clinical purposes. Regardless of the social media platform, the intent of this policy is to protect sensitive and confidential information and the reputations of all persons involved with the SON. Students, staff and faculty should be thoughtful about how they present themselves as members of the DePaul University SON community and be aware that posted information may be public for anyone to see, may be posted or forwarded by others, and may remain available for public viewing for many years.

The SON follows DePaul University's Social Media Guidelines, which can be accessed at [http://brandresources.depaul.edu/vendor\\_guidelines/g\\_socialmedia.aspx](http://brandresources.depaul.edu/vendor_guidelines/g_socialmedia.aspx), and recommends that all faculty, staff and students be aware of these guidelines. In addition, when communicating via email, voicemail or a social networking site, students, staff and faculty will adhere to HIPAA and FERPA guidelines at all times and refrain from the reference or representation of confidential or sensitive patient or student information through print, audio, or photographic media. They will refrain from stating or posting any material that is obscene, defamatory, profane, libelous, threatening, harassing, abusive, hateful, or embarrassing to another person within the SON or settings or agencies associated with the SON.

No student, staff or faculty member will photograph or videotape any other person for personal or social media use without express written permission of the person. When SON faculty or students are in another agency or clinical setting, they will follow the guidelines of the agency or clinical setting related to the use of social media and communication of confidential or sensitive information.



## APPENDIX F: PRACTICUM CREDIT FOR PREVIOUS WORK CREDIT

### Practicum Credit for Previous Work Experience Policy

Policy: Students are eligible to receive up to 50 clinical hours or 25% of credit towards their 200 required clinical hours in NSG 596 or NSG 597. Credit will be applied for direct care core, which is essential to provide direct patient services at an advanced level. These hours may not be related to the area of specialization; nursing education or healthcare administration.

Procedure:

- Students requesting prior work experience for clinical practicum credit must align their patient care experiences to [The Essentials of a Masters Education](#)
- Students must consult with their practicum faculty within the first week of the practicum course. Students will communicate
  - The number of credited hours under consideration
  - Provide examples of the current/previous work roles/responsibilities meeting *The Essentials of a Masters Education*
- Practicum faculty will formally evaluate the work experience and make their conditional approval for the credit including the number of hours that can be credited towards the students' required 200 hours in NSG 596 or NSG 597.
- If approved, students must complete the Request for Practicum Credit Form (see page 2) in its entirety, including documentation from their manager.
- Students must submit the Request for Practicum Credit Form before the end of the practicum course.
- Practicum faculty will provide a summative evaluation of the practice experiences on the Request for Practicum Credit Form
  - It is encouraged to turn in the Request for Practicum Credit form as early in the practicum as possible.
    - This will allow students know in advance if they will need to add additional practicum hours to meet the 200 required hours in the practicum term.
    - If students cannot complete the required 200 required hours in the practicum, students will need to take an incomplete and complete the remaining hours of the required 200 hours in the next quarter.
  - If practicum faculty approve the requested work credit, students will have those hours added to their clinical practicum hours.

Name: \_\_\_\_\_

Master Essential	Advance Role/Responsibility and how it meets Master Essential	Healthcare Facility	Start/End Date	Requested Hours to be Credited	Manager Initials	Faculty Approved Hours

Nurse Manager Name: \_\_\_\_\_

Nurse Manager Initials: \_\_\_\_\_

Nurse Manager Name: \_\_\_\_\_

Nurse Manager Initials: \_\_\_\_\_

Nurse Manager Name: \_\_\_\_\_

Nurse Manager Initials: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_

Total Number of approved hours: \_\_\_\_\_



## APPENDIX G: COURSE AUDIO AND VISUAL RECORDING POLICY

This Agreement concerns recordings of \_\_\_\_\_ (COURSE) (Online and in-class), taught by \_\_\_\_\_ (INSTRUCTOR) (hereafter "Instructor") at DePaul University during \_\_\_\_\_ (QUARTER) (hereafter the "Academic Quarter"). The recordings include original tapes, as well as any related electronic versions of the original recordings and electronic and hard-copy transcripts created from the recordings (hereafter referred to as "the Recordings"). The Recordings were created by or for \_\_\_\_\_ (NAME), a student at DePaul University (hereafter "Student"). All DePaul University Nursing Students must read and agree to the terms of this policy.

Student acknowledges, understands, and agrees to the following:

1. The Recordings are prepared solely for the educational benefit of Student in Student's participation in the Course. Any distribution or use of the Recordings for any other purpose is expressly prohibited.
2. Student must get express and written approval from each Instructor to record.
3. Student will not distribute the recordings, excerpts, or course documents to any other person or any media platforms.
4. Student will destroy or delete all versions of the Recordings no later than one week after Student receives a final grade for the Course. Such destruction and/or deletion shall be carried out in a reasonably secure manner. Student will promptly notify Professor that the Recordings have been destroyed and deleted.
5. In the event that Student fails to fulfill his/her obligations under this Agreement, Student understands that he/she may be in violation of DePaul policies, including the Academic Integrity policy or the Code of Student Responsibility. Moreover, Student understands that if he/she fails to fulfill his/her obligations under this Agreement, Instructor has full authority to pursue any intellectual property rights, or other rights, flowing from this Agreement or from an interest in the Recordings and the contents thereof.

**BY SIGNING THIS AGREEMENT, I UNDERSTAND & ACKNOWLEDGE THE RESPONSIBILITIES THEREIN.**

\_\_\_\_\_  
NAME—*Student*

\_\_\_\_\_  
Date

\_\_\_\_\_  
NAME—*Instructor*

\_\_\_\_\_  
Date