SEATTLE UNIVERSITY COLLEGE OF NURSING

Graduate Student Handbook 2021-2022

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Seattle University College of Nursing
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Table of Contents

4

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Welcome to Seattle University College of Nursing

We look forward to having you as students and hope that doctoral education intrigues and challenges you. We are certain that the time spent here at Seattle University will be a productive learning experience.

The **College of Nursing Graduate Student Handbook** is designed to assist you during your experience as a student in the College of Nursing. Information provided includes what you need to know that may not be available in other Seattle University publications. **As a doctoral student in the College of Nursing, you are responsible for the information in this handbook as well as the Seattle University Graduate Catalog, and the Class Schedule (posted at SU Online each quarter). This document is a living document; changes are made as needed.**

- *All information found in this handbook is superseded by information contained in the most recent version of the Seattle University Graduate Catalog.*

- Pre-licensure refers to the first five quarters of the APNI year, enumerated as 5000 level courses.
- Post-licensure refers to those courses starting with enumeration of 6000 and higher.

Statement on Inclusion and Equity

Founded in 1891, Seattle University is the largest and among the most diverse independent universities in the Northwest. As set forth in the University's Mission Statement, Seattle University is dedicated to educating the whole person, to professional formation, and to empowering leaders for a just and humane world. Seattle University is committed to achieving excellence as the premier independent university of the Northwest in academic quality, Jesuit Catholic inspiration, and service to society. The Office of Institutional Equity was established to support the university's effort to promote and maintain an equitable and safe learning, living, and working environment. Their website can be found here.

In addition, the College of Nursing Equity and Justice Committee meets monthly and provides support for students and faculty around issues of equity and social justice. The committee welcomes all students and faculty at their monthly meetings and has a variety of helpful resources on their website:

Seattle University Statement on Diversity can be found here.

Statement on Disabilities

Seattle University is dedicated to educating the whole person, to professional formation, and to empowering leaders for a just and humane world. Students with disabilities are considered fully enfranchised members of the educational community. Seattle University recognizes that traditional methods, programs, and services are not always appropriate or sufficient to accommodate the limitations experienced by some students with disabilities.

If you have, or think you may have, a disability (including an 'invisible disability' such as a learning disability, a chronic health problem, or a mental health condition) that interferes with your performance as a student in class, you are encouraged to discuss your needs and arrange support services and/or accommodations through Disabilities Services.

Seattle University Nondiscrimination Policy

Seattle University does not discriminate on the basis of race, color, religion, sex, national origin, age, disability, marital status, sexual orientation, gender identity, political ideology or status as a Vietnam-era or special disabled veteran in the administration of any of its education policies, admission policies, scholarship and loan programs, athletics, and other school-administered policies and programs, or in its employment related policies and practices. In addition, the University does not discriminate on the basis of genetic information in its employment related policies and practices, including coverage under its health benefits program. Seattle University

Non-Discrimination Policy can be found here.

For a directory of College of Nursing personnel visit the SU College of Nursing website.

Program Overview

The Doctor of Nursing Practice (DNP) is a post baccalaureate or post master's program that prepares advanced practice nurses to meet the demands of complex health care systems, the rapidly expanding scientific knowledge needed for practice, and the increasing needs for interprofessional collaboration and leadership. Graduates will provide leadership for just and humane health care policies and promote access to high quality, culturally competent health care and healthcare systems for vulnerable individuals, families, communities and populations through regional, national and global engagement.

College of Nursing Mission and Vision

Vision
We are recognized as an engaged, creative and dynamic learning organization, committed to social justice, innovation, scholarship, teaching excellence, and the formation of professionals ready to meet the evolving health care needs of a global community.

Values
- Empowerment
- Innovation
- Caring
- Social Justice
- Integrity

Mission
We educate and inspire leaders to transform healthcare for a just and humane world.

Special Features of the Doctoral Nursing Program
Students bring their previous educational preparation and practice as a foundation for the doctoral learning experience. Exploration of nursing theory and education in translational research methods leads to new knowledge and alternative perspectives that can be applied to clinical practice and health care delivery system problems. The DNP project is an opportunity to critically examine current practice, develop

7

innovative ideas, approaches or policies, and translate research to improve programs, systems of care and health outcomes for individuals and populations.

Program Focus: Vulnerable Populations

In contemporary American society, many people face unique challenges related to exposure to physiological and psychosocial stressors, economic hardship, the heterogeneity and complexity of diverse cultures, and societal violence. These factors, in conjunction with personal, political or social vulnerabilities, create situations of high health risk in which nurses intervene to protect, promote, or restore high level wellness.

Graduates of the Seattle University Doctor of Nursing Practice (DNP) program are prepared to care for people who are vulnerable. These include families, individuals within families, as well as communities and populations who are at particularly high risk for incurring illness and decreased wellness. This includes people living on the margins of society, or those who are at risk of being forced into the margins because of illness, financial hardship, or discrimination.

Providing health care to vulnerable people is consistent with Seattle University's commitment to social justice, which leads to compassionate human service. Further, Seattle University's mission seeks to develop in its graduates a sense of responsibility and the leadership skills to impact the society and world in which they live.

The graduate faculty at Seattle University's College of Nursing believes that nursing care of vulnerable people requires both traditional and unique approaches of care. Doctoral students will consider the physiological, psychosocial, cultural, and spiritual dimensions of human responses to wellness and to the experience of illness. Students will design and implement nursing interventions based on critical analysis and synthesis of literature, which examine the multiple dimensions of vulnerability. Learning to care for vulnerable people will require an ability to expand the use of all senses in assessing needs, and an openness to the experiences of clients and care providers.

An important outcome of developing new and innovative nursing care strategies for vulnerable people is the efficient use of scarce resources. Resources can be used more wisely when health care providers focus on prevention of health alterations and employ effective management of chronic illness, rather than focusing on crisis care. Another outcome of the knowledge fostered by the DNP program is the opportunity for nurses to make a unique contribution to nursing's scientific knowledge by articulating new insights and translating research to improve the care of vulnerable people.

One of the primary approaches for nurses to intervene with vulnerable people is through partnership with those who are vulnerable. Essential dimensions of partnership include reflective listening, collaboration, empowerment, participatory decision-making and teaching, which are connected to the lives of the learners. Graduates will combine reflection and action to intervene with families, communities, populations and to advance societal changes. Partnership creates self-esteem, nurturing a sense of connectedness to others and promoting hope through the fulfillment of achievable goals by promoting health promotion campaigns, community organizing and strategies to influence social and health policy.

Partnership includes caring. Caring is a philosophy and a way of interacting with others that takes into account the worth and dignity of every individual. Caring creates an environment in which nursing care can be given and received, and teaching and learning can be maximized.

The ability to care, however, is hindered by an inability or unwillingness to understand the experience of another person, and is restrained by a lack of self-understanding. Graduate nursing education at Seattle University seeks to improve the level of understanding between clients and a nurse. A better understanding of others' experience, as well as oneself, is a goal for all graduate nursing students, regardless of how individual backgrounds or experiences relate to those of clients.

In conclusion, the Doctor of Nursing Practice program at Seattle University focuses on a multidimensional concept of vulnerability in the context of families, individuals within families, communities and populations. Doctoral study emphasizes the use of traditional and non-traditional approaches to understanding human responses to wellness and illness. In fulfillment of Seattle University's mission, DNP graduates are prepared to assume diverse clinical, educational, and leadership roles in service to vulnerable populations.

Graduate Program Learning Outcomes

Graduates of the Seattle University College of Nursing DNP Program will demonstrate the following in the care of individuals, families, and/or communities within culturally diverse and vulnerable populations:

- Synthesize knowledge from nursing and other disciplines in the provision of evidence-based advanced practice nursing care.
- Utilize information systems technology to improve health care access, quality, and outcomes.
- Demonstrate competence in an advanced nursing practice specialty.
- Exercise leadership through scholarship, advocacy, and community engagement to achieve just and equitable health care systems that improve health potential and reduce health disparities of vulnerable populations.
- Evaluate and influence health care systems and health policy at local, state, federal, and global levels.
- Demonstrate effective communication and inter-professional collaboration in the promotion of health care access, quality, and outcomes.
- Evaluate beliefs, values, and ways of knowing to foster lifelong personal and professional development.
- Apply principles of ethical decision-making in complex clinical situations.

APNI/BSN Program Leaning Outcomes and Curriculum

The learning outcomes for the BSN undergraduate programs and APNI BSN graduate program provide basis for the preparation of entry-level nursing practice and are congruent with the AACN Essentials (2008) and are presented in the Table below.

BSN Essential	BSN and APNI/BSN Programs Student Learning Outcome	BSN and APNI/BSN Clinical Evaluation Objectives*
I: A solid base in liberal education provides the cornerstone for the practice and education of nurses. II. Professional nursing practice is grounded in the translation of current evidence into one's practice	1. Integrate knowledge from liberal arts, nursing science, and related disciplines to promote well-being through a generalist practice. 3. Demonstrate critical thinking attitudes, skills, and abilities in clinical decision making and evaluation of evidence-based nursing practice.	Integrates knowledge from physical and social sciences, developmental theories, pharmacology, and health assessment to promote the wellbeing of clients experiencing altering states of health.
III. Basic knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.	6. Apply leadership principles and quality improvement techniques to influence health policy, regulations, and the provision of care to ensure quality and safety.	Applies leadership principles and management strategies in influencing and directing the care provided by others.
IV: Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.	4. Integrate technology and information management with relationship-centered nursing care across the health continuum in a variety of health care settings.	Integrates technological and relationship-centered nursing interventions in providing direct care to clients across health states and in care settings.
V. Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nsg practice VI. Communication and collaboration among healthcare professionals are critical to delivering high quality and safe patient care.	6. Apply leadership principles and quality improvement techniques to influence health policy, regulations, and the provision of care to ensure quality and safety. 5. Use interpersonal communication, collaboration, and organizational skills to work in partnership with clients, families, communities, and the health care team to promote health.	Applies leadership principles and management strategies in influencing and directing the care provided by others.
VII: Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.	2. Provide patient-centered care by applying the nursing process to maximize the health of clients. 5. Use interpersonal communication, collaboration, and organizational skills to work in partnership with clients, families, communities, and the health care team to promote health.	Applies the process of assessing, diagnosing, identifying outcomes, planning, intervening & evaluating to complex human experiences and responses for the health of clients across the lifespan.
VIII: Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	7. Demonstrate professional values through commitment to self-evaluation, lifelong learning, professionalism, service, respect for diversity, and social justice.	Demonstrates commitment to self-evaluation, life-long learning, professional behaviors, service, diversity, and social justice.
IXa. The BSN graduate nurse is prepared to practice with patients, including		Applies the process of assessing, diagnosing, identifying outcomes,

individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. IXb. The APNI/BSN Graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	2. Provide patient-centered care by applying the nursing process to maximize the health of clients.	planning, intervening, and evaluating to complex human experiences and responses for the health of clients across the lifespan.

*Note: Clinical Evaluation tools apply the clinical learning objectives for each clinical course and varies somewhat to align with course content (e.g. child development is emphasized in Care of Children).

APNI/BSN Curriculum and Concepts

The APNI/BSN Program curriculum at SUCON prepares graduates for a generalist practice in nursing. The graduates are equipped with skills to fulfill a variety of roles in healthcare. Achieving BSN competencies is the primary teaching foci of this program. The APNI/BSN curriculum assists learners to be independent thinkers and problem-solvers within the context of collaborative healthcare practice. The program develops nurses who are assertive, competent, confident, and able to articulate what nursing has to offer society.

The focus of the program is **health** of individuals, communities, and populations and nursing care. Concepts central to Nursing: Environment, health, person, health, and Nursing as defined by Swanson (Swanson, K.M. 1993, Nursing as Informed Caring, *Nursing Outlook, 23*(4), 1-6):

Environment

Environment is defined situationally. For nursing, it is any context that influences or is influenced by the designated client. Realms of influence are multiple, including the cultural, political, economic, social, biophysical, psychological and spiritual realms. When examining the influence of environments on persons, it is helpful to consider the demands, constraints and resources brought to the situation by the participant(s) and the surrounding environment

Person

What is considered client in some situations, may serve as context or environment in other circumstances. For example, in some nursing care situations the community may be the client (i.e., nurses acting politically about the need for safe play areas for inner-city children), at other times it may be the environment (i.e., nurse assessment of how the school system accommodates the needs of a specific child with a chronic health condition.) For heuristic purposes the lens on environment designated client may actually be further specified to the intra-individual level, wherein the "client" may be at the cellular level and the environment may be the organs, tissues or body of which the cell is a component.

Health/Well-being

Nurses focus on how clients are living with whatever illness or wellness condition they may be in. As nurses our focus is not so much on disease amelioration, per se, as it is on assisting clients to attain, maintain or regain the optimal level of living or well-being they choose given their personal and environmental demands, constraints and resources. Wellbeing is living in such a state that one feels integrated and engaged with living and dying. When nurses focus on health as well-being, our care must take into account what it means to be whole persons who are becoming, growing, self-reflecting and

seeking to connect with others. To experience well-being is to live the subjective, meaning filled, experience of wholeness.

Nursing

Nursing is defined as caring for the well-being of others or "a nurturing way of relating to a valued other toward whom one feels a personal sense of commitment and responsibility" (Swanson, 1991, Development of a middle range theory of Caring, *Nursing Research, 40*, 161-166). Key words in this definition include: nurturing (growth and health producing); way of relating (occurs in relationships); to a valued other (the one cared-for matters); toward whom one feels a personal (individualized and intimate); sense of commitment (bond, pledge, or passion); and responsibility (accountability and duty). Whereas this definition applies to all caring relationships, relationships of central concern for nursing include nurse to person, nurse to nurse, and nurse to self.

Nursing Values

Nursing values are defined as beliefs to which an individual is committed and which guide behavior. These are reflected in attitudes, person qualities, and consistent patterns of behavior. The values include those defined by the American Association of Colleges of Nursing (AACN), and integral to Jesuit education; the AACN (2008) Essential Values* are listed below.

- *Altruism*: Concern for the welfare and well-being of others. Altruism is demonstratedby the concern shown for the welfare of patients, other nurses, and other healthcareproviders. Examples of altruism include: demonstrates understanding of cultural differences, respect for the beliefs of others, advocacy for patients, takes risks on behalf of patients and co-workers, and assists the learning of other healthcare professionals.
- *Autonomy*: Right of self-determination. The nurse respects patients' rights to make decisions about their healthcare. Examples of a demonstration of a value for autonomy include: planning care in partnership with patients, honoring the rights ofpatients and families to make healthcare decisions, and giving information so that informed decisions can be made.
- *Human Dignity*: Respect for the inherent worth and uniqueness of patients, co- workers, groups, and populations. Examples of a value for human dignity include:providing culturally sensitive care, respecting confidentiality and privacy of all patients and co-workers and individualizes care.
- *Integrity*: Acting in accordance with an appropriate code of ethics and accepted standards of practice. The nurse is honest and provides care based on an ethical framework that is accepted within the profession. Examples of acting with integrity innursing include: giving truthful information to patients and groups, documents care accurately and honestly, tries to correct or address errors made by self or others, andis accountable for one's actions.
- *Social Justice*: Upholding moral, legal, and humanistic principles. The nurse works toensure equal treatment and access to healthcare. Examples include impartiality andnon-discrimination in care, supporting universal access to care, and supporting legislation that promotes improvement for healthcare.

*Reference: American Association of Colleges of Nursing (1998). The essentials of baccalaureate education of professional nursing practice (pp. 8-9). Washington, D.C: Author.

Students are expected to achieve key competencies necessary for entry level nursing practice:

- Clinical Reasoning/ Critical Thinking
    Students learn the elements of reasoning, the criteria by which to judge reasoning, multiple approaches to gathering information, and ethical standards. In addition, students will develop a habit of thinking critically, especially within ambiguous situations.
- Relationships/Communication Skills
    Students develop purposeful relationships with patients and other healthcare colleagues. The purpose of these relationships is to enhance patient's self-sufficiency and well-being. The relationships are characterized as assertive, respectful, and valuing human dignity. A key to building relationships is effective communication. Students will hone skills to be able to articulate clearly using verbal, written, and electronic forms of communication for a variety of audiences.
- Community and Population Health Nursing
    Students are mindful of the concepts of community functioning and community-based care in a variety of settings. Students will apply principles of public health and epidemiology to work on issues of health promotion in the communities and populations.
- Nurse Provider Skills
    Students focus extensively on health promotion, disease prevention, and treatment of disease in the three levels of care: primary, secondary, and tertiary. Care includes the provision of direct physical and mental care, teaching, counseling, and anticipatory guidance. Direct care includes, but is not limited to, assessment and interventions using hands-on care using modern equipment and technology.
- Care Management Skills
    In a variety of healthcare settings, the students will use leadership and care management principles to provide quality healthcare. The students learn and apply the principles of care coordination across the care continuum and develop the ability to document care accurately and succinctly.

Sequencing of the Nursing Curriculum

The first five quarters constitute the APNI sequence which builds on prior baccalaureate education and includes accelerated coursework based on the BSN Essentials, ANA Code of Ethics, and QSEN Competencies. Students take three DNP level courses as part of the APNI sequence (N6014 - Nursing Theory and Critical Inquiry I; N6120 - Population-based Health; and N6110 - Ethics for Social Justice). Upon completion of the APNI sequence, students are prepared as entry level professional nurses who will provide care through the lens of population health and social justice. APNI completers having met Seattle University College of Nursing BSN student learning outcomes and having accrued 600 clinical hours per Washington Administrative Code 246-840-531 earn the BSN degree and are prepared to take the NCLEX.

Courses are arranged so that nursing knowledge progresses from simple to complex concepts (See Table below for overview of APNI/BSN Curriculum). Therefore, certain nursing courses are prerequisite to subsequent courses. Nursing students are enrolled in a combination of theory and lab. Specialty theory courses are paired with clinical learning opportunities in the inpatient and ambulatory care,community settings and virtual and in-person simulations in the Clinical Performance Lab (CPL) to teach the students how to apply theory knowledge and skills while caring for individuals and communities. Therefore, both the theory and corresponding clinical courses must be successfully completed before a student may progress to the next courses in the sequence. During all clinical experiences, clinical faculty are available to students for consultation, collaboration, and supervision related to course objectives.

APNI/BSN Program of Study

Course #	Quarter	Course Title	Notes	Credits	BSN Essentials	DNP Essentials
Level I: Foundational courses for entry into professional practice						
N 5024	1	Pathophysiology		5	III, VII, IX	n/a
N 5141	1	Foundations of Nursing		3	I, II, III, IV, V, VI, VII, VIII, IX	n/a
N 5041	1	Foundational Skills Lab	Health assessment includes 30 hours of gerontology clinical	4	I, II, III, IV, VI, VII, VIII, IX	n/a
N 5005	2	Pharmacology		5	III, IV, V, VIII, IX	n/a
Level II: Application of nursing process across the continuum of care						
N 5108	2	Nursing Care of Children, Theory		3	I, II, III, IV, VI, VII, VIII, IX	n/a
N 5008	2	Nursing Care of Children, Clinical	90 hours clinical - pediatrics	3	I, II, III, IV, VI, VII, VIII, IX	n/a
N 5131	2	Promoting Population Health, Theory	introduces community and population health	3	II, III, IV, V, VI, VII, VIII, IX	n/a
N 5031	2	Promoting Population Health, Clinical	90 hours clinical – community based	3	II, III, IV, V, VI, VII, VIII, IX	n/a
N 5013	3	Leadership & Management		3	I, II, III, IV, V, VI, VII, VIII, IX	n/a
N 5212	3	Care of Childbearing Family, Theory		3	I, II, III, IV, V, VI, VIII, IX	n/a
N 5012	3	Care of Childbearing Family, Clinical	90 hours clinical – care of childbearing families	3	II, III, IV, VII, VIII, IX	n/a
Level III: Evidenced informed care of complex patients						
N 5121	3	Promoting Mental Health, Theory		3	I, II, III, IV, VII, IX	n/a
N 5021	3	Promoting Mental Health, Clinical	90 hours clinical – care of mentally ill individuals	3	I, II, III, V, VI, VII, VIII, IX	n/a
N 5025	4	Nursing Care During Altered Health, Theory	Includes care of adults and elderly persons	6	I, II, III, IV, V, VI, IX	n/a
N 5027	4	Nursing Care During Altered Health, Clinical	120 hours clinical in care of adults and elders	4	I, II, III, IV, V, VI, VIII, IX	n/a
N 6014	4	Nursing Theory & Critical Inquiry I*	DNP Foundational Course	3	III, VII	I, III, IV
Level IV: Social justice and population health role synthesis						
N 6110	4	Ethical Care for Social Justice*	DNP Foundational Course	4	VIII	III, V, VI, VII
N 6120	5	Population Based Health*	DNP Foundational Course Includes APNI Capstone Paper	3	III, IV, V, VII	III, VII
N 5051	5	Population Health Role Synthesis	90 clinical hours emphasizing health of populations	3	II, III, IV, V, VI, VII, VIII, IX	n/a
Total			**600 clinical hours**	**67**		

Admission Requirements

- Applicants to the DNP program must have a cumulative undergraduate or graduate GPA of at least 3.00 on a 4.00 scale. Applicants with less than a 3.00 may be considered on an individual basis given evidence of other achievements.
- Leadership and clinical scholarship are assessed, as well as fit with Seattle University and the College of Nursing mission and values.
- Two letters of recommendation (at least one from an academic source) who can speak to the applicant's potential for success in a doctoral level advanced practice nursing program.
- Completed Application for Graduate Admission and nonrefundable $55 application fee (fee waived for SU alumni).

For RN Applicants (post master's DNP or certificate, and BSN to DNP):

- Registered Nurses who are admitted must have a current unencumbered RN license. If applicant is a nurse practitioner or nurse-midwife, he/she must also have a current, unencumbered ARNP license.
- BSN and/or Master's degree in nursing or other health related field from a CCNE or NLNAC accredited nursing program and/or a regionally accredited college or university.
- Credit will be granted for up to 500 post-baccalaureate supervised academic clinical hours contributing to the 1000 total supervised clinical hours required for graduation from the DNP program. Individual plans for completion of the 1000 required practice hours will be developed with each applicant. (Link to information about evaluating the eligibility of 500 transferable clinical hours)
- Letter of interest and resume/curriculum vita demonstrating academic ability, potential for graduate study.

    Other specific admission criteria are described in Admission Policies.

Note: If English (ESL) is your second language, in order to fully engage in the program, you must submit official and sufficient English proficiency test scores from **an accredited program or language school.**

All applications are carefully reviewed, and selected applicants are typically invited to participate in a faculty interview process. A writing sample may be required as a part of the interview process.

DNP Program Requirements

The Pre-Licensure (APNI) program fulfills the AACN Essentials for Baccalaureate Nursing Programs. After successful completion of 5 quarters of study and a Population Health Capstone paper, a BSN is awarded to APNI students. The DNP program fulfills the AACN Essentials for Doctoral Education for Advanced Practice Nursing which form the foundation for the DNP Program curriculum and are embedded in the courses. Students must complete a DNP project to be awarded a DNP degree. The eight Essential areas of study include:

I. Scientific underpinnings for practice
II. Organizational and systems leadership for quality improvement and systems thinking
III. Clinical scholarship and analytic method for evidence-based practice
IV. Information systems/technology and patient care technology for the improvement and transformation of health care

V. Health care policy for advocacy in health care
VI. Inter-professional collaboration for improving patient and population health outcomes
VII. Clinical prevention and population health for improving the nation's health
VIII. Advanced nursing practice

See the AACN DNP Essentials for a more comprehensive overview.

Please see the SU DNP Project Guidelines for specific guidelines for the DNP Project

Graduate Course Credits

DNP Clinical/Internship Practica

APNI (pre-licensure) ratio: one credit hour = three contact hours
ARNP/DNP ratio: 1 credit hour = 3 contact hours per week
DNP Project Internship ratio: 1 credit hour = 5 contact hours per week

Advanced Practice Clinical Hours

Three contact hours are required for each credit hour for clinical courses/field work in the advanced practice portion of the Psychiatric Mental Health Nurse Practitioner option. Three contact hours are required for each credit hour for clinical courses/field work in the advanced practice portion of the program for the Family Nurse Practitioner, the Adult/Gerontological Primary Care Nurse Practitioner, the Adult/Gerontological Acute Care Nurse Practitioner, the Advanced Community Public Health Nursing and the Nurse-Midwifery options. The ratio of credit to contact hours for the advanced practice clinical practica is consistent with University policy.

Lecture Courses

These contact hours are considered to be both the minimum hours required and the maximum hours allowed per week.

5 credits	=	250 contact minutes (4hrs/10min)
4 credits	=	200 contact minutes (3hrs/20 min)
3 credits	=	150 contact minutes (2hrs/30 min)
2 credits	=	100 contact minutes (1hr/40 min)
1 credit	=	50 contact minutes

These contact hours are consistent with University Policy.

Graduate Transfer Credit

Rationale: This policy statement is based on the Seattle University Transfer Credit Policy Number 77-1. It is meant as a guide for faculty teaching graduate courses in the College of Nursing in order to determine whether or not courses are acceptable for transfer of credit in the graduate program. Currently there is no challenge mechanism available for required courses in the DNP program.

Seattle University Transfer Credit Policy: Regionally accredited colleges and universities in the United States are considered to have academic standards of sufficient quality to allow acceptance of their courses as transferable equivalents to Seattle University. Credits from all other U.S. schools are not usually accepted. International school transfer credit evaluations are done in accordance with nationally established norms.

The Seattle University transfer credit information can be found here.

Process:
1. Post-baccalaureate and graduate credits are used in admission evaluations but are not transferred until a request for consideration of the transfer credit is filed on a Petition for Exception to Policy, and approved by the course faculty, Program Director and Associate Dean.

2. The student requests in writing, using a "Petition for Exception to Policy" form, available from the Graduate Program Coordinator, that a graduate course they completed in the past be accepted and credits transferred. The student should complete the top portion of the form and submit to the Graduate Program Coordinator with the information listed in step three, below.

3. The student must provide the syllabus and any additional supporting material to faculty responsible for teaching the course the credits will replace. The Associate Dean and appropriate faculty member will make a determination to establish whether the course is equivalent to the Seattle University College of Nursing DNP course. For some courses, faculty may also require previous coursework, a test of knowledge or a clinical skills check to assure competency and currency. Students need to submit all materials at least 8 weeks prior to the first day of the quarter in which the course requested for waiver is offered.

4. When a course is determined to be equivalent and is acceptable for credit transfer according to the criteria listed below, the course instructor and the Associate Dean will then sign the "Petition for Exception to Policy" and send it to the Office of the Registrar for further evaluation.

5. The requesting student sends an official transcript to the Office of the Registrar prior to the posting of the transfer credit. More often than not, your transcripts will already be on file. Grades are not transferred, only course credit.

Acceptable Courses for Credit Transfer:
The course must be from a U.S. regionally accredited institution.
The course must have been completed within the last five years.
The course must have been taken at the graduate or doctoral level and with graduate standing by the student at the time taken.
The grade must be at least 3.0 on a 4.0 scale.
Correspondence courses or extension courses are not acceptable.
On-line courses need additional review by the Associate Dean for Graduate Programs.

Credit Transfer Limits
Up to nine credits taken at the Master's or Doctorate level within the past 6 years may be applied to satisfy program requirements based on review of transcripts and course syllabi. Credit must meet the

criteria as outlined in the Transfer Credit Policy (Policy 77-1) and must be reviewed and approved by the College of Nursing and the University via a Petition for Exception to Policy.

Notes for Post Master's DNP Students:

A minimum of <u>45</u> credits must be taken post-masters and <u>36</u> DNP course credits must be taken from Seattle University in order to obtain a DNP degree from Seattle University College of Nursing.

Students who graduated from Seattle University with an MSN/ARNP degree:
Student should contact the Graduate Program Coordinator to check that a graduate course they completed in the past is accepted and credits are entered correctly on their student record. A Petition for Exception to Policy will need to be submitted to the Office of the Registrar in order for credits taken during the MSN degree to apply to the DNP degree.

Part-time Study: Individualized part time programs of study for post-master's students may be developed in consultation with DNP faculty and the Associate Dean. Students who seek approval for a part-time DNP program of study must realize that courses are not offered every quarter, and most courses are offered only once a year. This may affect the timing of DNP program completion

Notes for Post Graduate Certificate Students:

With the exception of the Adult Gero-Acute Care Nurse Practitioner program, applicants for post graduate certificates in specialty areas must hold a doctoral degree. Individualized programs of study are created based on a gap analysis of the applicant's prior education. Students must complete all courses for the advanced practice foundation and the specific specialty course requirements, including required advanced practice practicum clinical hours.

Seattle University Academic Policies for Graduate Students

Doctoral nursing students are subject to all of the academic policies set forth in the Seattle University Graduate Catalog of Information and the University's Academic Probation, Dismissal, and Appeal Policies and Procedures for Graduate Programs.
Academic Regulation" may be found on the Graduate Catalog website:

Seattle University's policies on Academic Probation, Dismissal and Appeal Policies and Procedures can be found here.

Progression
Progression through the nursing program of study is assured only when the student:
    A. Pre-licensure student achieves a grade of at least C (2.0) in all courses.
    B. Post-RN licensure student achieves a grade of at least B- in all courses required for graduation.
    C. Maintains a cumulative GPA of at least 3.00.
    D. Has not withdrawn from the University for any reason.

E. Takes the required nursing credits each quarter based on the assigned program of study, unless a change in the program of study is approved by the Associate Dean.
F. Students admitted into the APNI program must obtain RN licensure by the beginning of winter quarter of the second year of studies (DNP Year One).
G. Student remains in compliance with the American Nurses Association Code of Ethics

Progression is based on the sequential arrangement of the curriculum. Students may not take a succeeding level course without completion of the previous level course(s) or prerequisite courses, without recommendation of the progression committee and/or the approval of the Associate Dean.

The student whose conduct is judged unsafe, unethical, or unprofessional by faculty may not be allowed to complete the course(s). Unethical conduct includes academic dishonesty. Unprofessional or unsafe behavior, as documented by faculty, is the basis for a failing grade. The student will also be placed on academic probation or may be subject to academic dismissal or disciplinary sanctions.

When a curriculum change occurs, the student must complete their enrolled program of study within one (1) year of the last regularly scheduled course in the former curriculum, OR apply to be reinstated in the new curriculum.

As a condition for progression in the DNP program, and as a condition of placement in both clinical practice and DNP Project internship sites, students must maintain their RN license in good standing. Students who have any stipulation or encumbrance on their licenses will be suspended until all encumbrances are removed. Failure to report such stipulation or encumbrance to the College of Nursing will result in immediate suspension. Readmission to the program will be dependent upon space and recommendation from the Progression Committee.

Graduate students who have been absent from Seattle University for more than four consecutive quarters must complete a readmission application and have official transcripts of any interim academic work sent to the Graduate Admissions Office, meeting the individual program's application deadline. For additional information, please see Readmission Requirements.

Academic Probation, Dismissal, and Appeal Policy and Procedures for Graduate Students

Seattle University's policy on [Academic Probation Dismissal Appeal](#) GR (2005-3):

Academic Probation

1.   A student may be placed on academic probation in any of the following circumstances:
   a) In any quarter, a student earns a GPA of less than 3.00.
   b) The student's cumulative GPA falls below 3.00.
   c) The pre-licensure (APNI) student obtains a grade less than C (2.0) in any course required for the program of study.
   d) The post-licensure student achieves a grade lower than B- (2.75) in any course required for the program of study.
   e) The student withdraws from one required graduate nursing course.
   f) The student is found to have engaged in unsafe, unethical, or unprofessional conduct. Serious violations may warrant academic suspension or dismissal rather than probation.

2.   When a student is placed on probation, the Associate Dean and/or the Progression Committee may establish conditions for the student's continuing progression in the DNP program. If the student does not agree to the conditions or does not meet the GPA requirement in the quarter following the establishment of the plan, s/he will not be allowed to progress in the nursing program.

Repeating a Course

A pre-licensure (APNI) student who earns a grade lower than C in any 5000-series course must repeat that course; only once is allowed and is limited by space availability in the course.

A post-licensure student in 6000-level course must achieve a grade of B- (2.75) in any course required for degree completion. The student may repeat the course only once after receiving a grade lower than B- (2.75) and is limited by space availability in the course.

A new plan of study must be developed for the student in consultation with their nursing advisor for progression through the sequence of nursing courses, and a copy will placed in the student's academic file. Withdrawal from a course that is being repeated may result in dismissal.

Students repeating a clinical course may be required to audit or retake the paired theory course.

Students must pass both the theory and lab sections of the following paired courses in order to demonstrate both knowledge and application of knowledge in practice:

NURS 6001 and 6101 (Adv Hlth Assess)
NURS 6104 and 6204 (Mngmnt of GYN & Reprod Hlth)
NURS 6402 and 6412 (Acute Care I)
NURS 6404 and 6414 (Acute Care II)
NURS 6407 and 6417 (Acute Care III)

In other words, if a student fails one of the paired courses listed above, they must repeat *both* the lab and theory courses.

Seattle University's policy on "[Repeated Courses (77-2)"](#)

Withdrawing from a Course

A student may withdraw only once from the same nursing course.

A student may withdraw from a total of one (1) nursing course during the DNP program except in cases of hardship withdrawal. See policy on *Repeating a Course* above.

Seattle University's policy and procedures for Withdrawal (75-22)

Academic Dismissal

An academic dismissal may result from any of the following:

- A student on academic probation for any three (3) academic quarters (including summer, if enrolled) will be dismissed from the College of Nursing. Following this academic dismissal, the student may not apply for reinstatement for at least one quarter.
- Achievement of a grade lower than a C (2.0) in any 5000 level course, or B- (2.7) in any 6000 level course being repeated.
- Two (2) withdrawals from the same nursing course.
- Withdrawal from more than one (1) nursing course.
- Any combination of grades lower than C (2.00) in an APNI foundational course or a grade lower than B- (2.7) in a graduate specialty course and a withdrawal, totaling two (2) for the entire graduate program.
- Unsafe, unethical, or unprofessional conduct or behavior.
- Violation of the Seattle University Academic Integrity Policy 2011-03

Disciplinary Dismissal

A disciplinary dismissal may result from any of the following:

- Violation of the **Seattle University Code of Student Conduct**
- Violation of other University policies and procedures.
- Manifesting a pattern of unprofessional conduct that reflects poorly on Seattle University, the College of Nursing, or affiliated agencies. Examples of unprofessional conduct include, but are not limited to, boundary violations, speaking negatively about the University, its programs, or affiliated agencies in public, or harassment of faculty, staff or students. See RCW Chapter 18.79 (Washington State Nurse Practice Act) for information on boundary violations. Violation may be demonstrated in any University venue or experiences, including electronic media.

- Students may be suspended from the clinical setting and/or the DNP program, while an investigation is on-going for alleged unprofessional, unethical or illegal activities, and/or alleged behavior in conflict with the regulations of the Washington State Quality Assurance Commission for Nursing or the licensing board in the jurisdiction where clinical practice is occurring. If allegations are not substantiated, the student may request reinstatement through the Progression Committee.

Appeals

An appeal of academic penalty involving academic suspension, probation, or dismissal must be filed by the student in writing with the Associate Dean of the College of Nursing by the third Friday of the following quarter. The Progression Committee will review the appeal and make the presumptively final

decision regarding progression, dismissal, and readmission with academic and/or disciplinary difficulties. Students wishing to appeal other academic penalties are referred to the [Academic Integrity website](#) or the [Grade Grievance Policy](#).

A student who achieves a grade lower than C in any 5000-series course must repeat that course once. This is limited by space availability in the course. Students in 6000-level course must achieve a grade of B- (2.75) in any course required for degree completion. The student may repeat the course only once after receiving a grade lower than B- (2.75). This is limited by space availability in the course.

Students should also be aware of the academic grievance procedure which will guide the University's response to allegations of arbitrary and capricious behavior by any member of the teaching faculty in the evaluation of a student's academic performance and in the assignment of final course grades.

An appeal of disciplinary sanction involving a violation of University policies and procedures, including the Code of Student Conduct, will be processed according to the [Code of Student Conduct Appeal procedures](#), which are published in the Seattle University Student Handbook.

Reinstatement After Dismissal

1. After an absence (following dismissal) from Seattle University of one quarter or more (excepting summer quarter for students whose program does not require summer attendance), a student must formally apply in writing for readmission to the University and College of Nursing. A readmission application is subject to review by the Progression Committee, the Associate Dean, or their designee who may establish conditions for readmission. The student who agrees to and accepts the conditions for readmission will be required to meet both program and academic performance requirements in place at the time of readmission. Readmission to nursing courses is subject to space available.

2. If the student does not agree to or accept the conditions for readmission, the readmission will be rescinded. Future application may be made no sooner than one year from the time of dismissal and is made through the formal admissions process. The admissions decision is subject to review by the Associate Dean and Progression Committee, which may establish conditions for readmission. If readmitted, the student is required to meet program and academic performance requirements in place at the time of readmission. Readmission to nursing courses is subject to space available, and the student may not apply for readmission for at least one year.

3. After an absence of four or more consecutive quarters (excepting summer quarter for students whose program does not require summer attendance), a student must provide evidence of competence in nursing courses previously completed. Criteria for demonstrating competence are determined by the Associate Dean, Program Director of DNP Program in collaboration with course faculty and the Progression Committee as a condition of readmission.

4. Following readmission after an appeal of dismissal, a student must earn a grade of C (2.0) in all 5000 level courses, or a B- (2.75) in all 6000 level courses.

5. A student may be readmitted only once after having been dismissed for academic reasons.

Please refer to the [Seattle University Graduate Catalog](#) and/or the Office of the Registrar [Academic Policies](#) for information regarding the following policies

- Degree Requirements
- Time Limits for Completing Degree
- Transfer Credits for Graduate Courses Taken at another Institution
- Retaking of Courses
- Grading
- Academic Probation
- Academic Dismissal
- Readmission
- Simultaneous Enrollment
- Hardship Withdrawal
- Official Withdrawal
- Grieving a Course Grade

Seattle University Grading Policy

Seattle University [Grade Point Average Requirements](#) for Degree Completion (75-2)

Seattle University [Repeated Course Policy](#) (77-2)

The grading scale for all College of Nursing graduate courses is as follows:

A	4.0	94 and above
A-	3.7	90-93
B+	3.3	87-89
B	3.0	83-86
B-	2.7	80-82
C+	2.3	76-79
C	2.0	73-75
C-	1.7	70-72
D+	1.3	67-69
D	1.0	63-66
D-	.7	60-62
E	0	below 60

"C" is the minimum passing grade in the College of Nursing for 5000 level courses.
"B-" is the minimum passing grade in the College of Nursing 6000 level courses.

Challenging a Course Grade

The ultimate responsibility for the integrity of the academic grading process belongs to the university as an institution. Individual faculty members routinely act as agents for the institution in evaluating the student's academic performance and in assigning final course grades. In the event of a student's challenge to a final course grade, the burden of proof lies with a student who claims a grievance. The

faculty member has an obligation to award course grades on the basis of standards set at the beginning of the course. The following process will guide the university's response to allegations that a faculty member acted arbitrarily and capriciously in assigning course grades. The procedure does not apply to mathematical errors in calculating the grade, academic dismissals from the university, or questions of professional judgment concerning course content, instructional methods and appropriateness of performance standards.

Seattle University's policy and procedures for [Academic Grading Grievances](#) (2004-7)

Petition to Change Advanced Practice Specialty Tracks

Students may only apply to change tracks from the **beginning of fall quarter of DNP 1 through the end of fall quarter of DNP 2**. The following is the process for requesting to change tracks:

1. The student begins by meeting with their current Program Director to discuss options. This meeting will include a discussion of reasons for wanting to change tracks including guidance on career goals. Should the student and the current program director mutually agree that a change in program is beneficial, proceed to step #2.
2. The students writes a letter to the Associate Dean for Graduate Programs, their current program director, the program director of the track they wish to join, and the Graduate Program Coordinator stating their request and the reason they want to change.
3. Track change requests will be reviewed once per quarter (fall, winter, and spring). Requests must be received by week 4 of the quarter and decisions will be made by the final exam week of the quarter.
4. Upon receipt of the letter, the Associate Dean will work with the appropriate Program Directors and Graduate Admissions Specialist to review the student's request. The student's file will be reviewed. Only students in good academic standing will be allowed to change tracks. The student will interview with the Program Director of the track to which the student would like to switch and another program representative (such as the assistant program director or a professor in that track).
5. After review of the file and the interviews, the Associate Dean for Graduate Programs, the appropriate Program Directors and the Graduate Admissions Specialist will evaluate the request based on qualifications of the student and space considerations. If the student is qualified but there is no space, they will be placed on a wait list.
6. It is not acceptable for a student to initially enter the program in one track with intention to switch to another once admitted.

Seattle University Student & Professional Conduct

As a Catholic and Jesuit university, Seattle University is a learning community that values the dignity and worth of persons. Consistent with its values, the University fosters the respect needed for students to live, work, study, and socialize together as a community. All members of the University community are expected to observe standards that reflect personal accountability and responsibility for the common good; demonstrate regard for the safety, security and health of others; maintain the atmosphere needed for study and reflection; show respect for individuals; and value truthfulness and personal integrity. This policy is referred to as the "Code of Student Conduct" or "Code." The entire Code of Student Conduct including Standards of Contact can be found [here](#).

Seattle University Professional Conduct Appeals

In preparation for their chosen professions, Seattle University students may work in direct contact with clients or patients as a part of their practice, clinical or field experiences. Due to the obligation to protect clients and patients, students in practice and other professional settings must demonstrate the requisite knowledge, skills, and judgment needed to be a competent practitioner. Additionally, students in practice and other professional settings must at all times conform to conduct that demonstrates the appropriate ethical, professional and social (behavioral) attributes expected of professionals in that practice. Professional conduct is, therefore, determined by the professional standards and codes of ethics of the profession for which the student is being prepared and educated.

These procedures apply to student violations of a school, college and/or program's professional standards of conduct that are considered to be so egregious by the school or college as to warrant dismissal from a professional program and/or denial of a certificate, licensure or degree for violation of professional standards.

Seattle University's Professional Conduct: Appeals Policy (2011-2) can be found [here](#).

Seattle University Academic Integrity Policy

Seattle University asserts that academic honesty and integrity are important values in the educational process. Academic dishonesty in any form is a serious offense against the academic community. Acts of academic dishonesty or fraud will be addressed according to the Academic Integrity Policy.

Seattle University's policy on Academic Integrity Policy (2011-3) can be found [here](#).

Graduation

A minimum 3.00 cumulative grade point average is required for graduation with a Doctor of Nursing Practice degree.
Seattle University's policy on [Grade Point Average Requirements for Degree Completion](#)
(75-2).

College of Nursing Policies and Procedures

Communication

The major means of communicating with students is through the Seattle University e-mail system. If you are new to Seattle University, you must establish your campus e-mail address as soon as you matriculate. **It is the Seattle University e-mail address that faculty and staff will use to communicate with you, not your personal server address.**

Each student is provided a Seattle University e-mail address free of charge. It is set up through the ITS office after receiving a Seattle University Student I.D. Card (Campus Card). Using your Seattle University e-mail account is that, while your mailing address may change throughout the course of your enrollment, your e-mail account may always be accessed via the "Current Students" page on the Seattle University website.

When your health record requires an update, notification will be sent to you by e-mail. In addition, faculty directs course information, assignments, discussions, and clarifications to you through e-mail. **Remember to check your Seattle University e-mail account daily, as you are responsible and accountable for messages and information sent to you through this means**.

Accurate current address and telephone number must be available on file in the Registrar's Office. An emergency contact phone number is also helpful.

To contact faculty, students should use instructor office telephone number/ voicemail or SU email to leave messages. Faculty may supply you with additional contact information.

Professional Behavior

Students are expected to maintain professional behavior at all times while participating in the CON programs. Consistent with the College of Nursing's mission, respect for clients, faculty, staff, and student colleagues is expected. Agreement with expressed opinions and facts may not always be possible or even desirable; however, respect for individuals to express those thoughts is the basis for professionalism. As we strive to work in cooperative teams, communication and evaluation of our behaviors and practice by others is inherent for growth. Therefore, willingness to listen to feedback in order to modify behaviors accordingly are expectations of the CON community. Goals of the CON are to nurture an atmosphere of collegiality among students and faculty in order to foster a positive learning environment.

Professional Appearance

Nurses are professionals, and professional clothing and behavior is expected at all times when representing the nursing profession or the College of Nursing to the public. Nursing faculty have the right to set standards for professional appearance in their courses, but general guidelines follow.

During the pre-licensure year, students typically wear scrubs with the SU CON logo attached. In ARNP clinical experiences, students are expected to present a neat, clean, professional appearance at all times. Guidelines for hair, jewelry, fragrances, and accessories should follow clinic or agency standards. Jeans, stretch pants, and sweats are never appropriate. Tops do not require collars, but low-cut tops

and those that expose the midriff are inappropriate. T-shirts should not be worn as outerwear in clinical settings.

Electronic Recording (Audio, video, or both) in class

Students who wish to record (audio or video) lectures or other classroom activities must obtain permission of the instructor. Instructors may require signed assurance that the recording is for personal student use only. Instructors have the right to refuse to permit recording in the classroom.

American Psychological Association Format for Papers

Formal papers submitted for all doctoral nursing courses should follow the writing and documentation guidelines of the most recent edition of the Publication Manual of the American Psychological Association.

Student Name Badge

Ensuring safety and security in clinical settings is of critical importance to health care agencies. Therefore, students wear a name badge identifying them as Seattle University students in all clinical settings. Name badges are ordered from supercopy@seattleu.edu. and should be obtained prior to beginning clinical experiences. Request a Nursing student badge.
You may email a photo to the supercopy folks, or they can use the one on file. Name badges should have the following information: Name (first and last – or first only if preferred), and Nursing Student underneath for the APNI year (see the Clinical Policies & Procedures for Advanced Practice name badge directions).

Technology Recommendations

It is advisable for doctoral students to have a computer with Wi-Fi capability. Software and Hardware may be purchased at a discounted rate through the SU ITS Technical Purchasing program if desired.

Microsoft Office is strongly recommended and is available at a discount to students. Additionally, the Seattle University Bookstore sells computers and some software.

Expectations for student computer skills
- Ability to input data via mouse and keyboard
- Ability to open, close, save, print, copy, cut and paste, and make attachments to files
- Ability to access and search the internet, send and receive e-mail, download, install and handle files and graphics.
- Ability to install programs and manage files
- Ability to word process documents and search databases
- Ability to use PowerPoint, WORD, and Excel programs

College of Nursing Social Media Policy

(Policy for use of social media by faculty, staff, and students)

Background

Seattle University and the College of Nursing recognize that social media sites like Facebook, Twitter, YouTube, and Flickr have become important and influential communication channels for our community (Seattle University, n.d). Organizations, including healthcare and educational institutions, are integrating use of social media into their education, outreach, and marketing strategies, as well as to investigate potential employees. Individuals are using them to keep abreast of the lives of friends, family members, and public personalities, as well as to research organizations for job opportunities.

Although there are many benefits to using social media, there are a number of risks associated with this practice in the context of healthcare practice and employment. The purpose of this policy is to provide direction for the use of social media by faculty, staff, and students in the College of Nursing.

What is Considered Social Media?

Social networks are "web-based services that allow individuals to
1) construct a public or semi-public profile within a bounded system,
2) articulate a list of other users with whom they share a connection, and
3) view and traverse their lists of connections and those made by others within the system" (Boyd & Ellison, 2007, cited in ANA, 2011a).

General Considerations
- When engaging in the use of social media, it is important to consider the Seattle University Social Media Policy & Guidelines to ensure that you are appropriately representing the University. Remember that, unless you are an official spokesperson for the University and/or the College of Nursing, you must have permission from your supervisor as appointed by your department head and notify Marketing Communications prior to engaging in any form of social media involving the University.
- Confidentiality and Privacy: Students, faculty, and staff must always uphold confidentiality and privacy standards and adhere to HIPAA and FERPA regulations during all interactions, including online communication, whether via E-mail or social media platforms. Remember that HIPAA violations are serious and may have serious consequences, including dismissal from the University, as well as civil and criminal penalties, including fines and jail time. HIPAA information is accessible here. FERPA protects student information and information can be accessed here.

Patient privacy and confidentiality can be breached inadvertently on social media in a variety of circumstances. Examples include comments in which patients are described with sufficient detail to be identified by someone reading the post, referring to patients in a degrading or demeaning manner, or posting videos or photos of patients (NCSBN, 2011). Any breach of privacy could undermine the College's relationship with the clinical site, damage the College and University reputations, and damage patients' trust in nurses.

Student privacy and confidentiality can be breached inadvertently on social media as well. Examples include referring to students in a degrading or demeaning manner or comments in which student information is shared regarding class performance. FERPA violations may result in loss of federal funding to the University, as well as termination of employment.

- The information you post online is NOT confidential. Even if you later delete it, the information stays in cyberspace and may be retrieved. Assume anything you post is visible to the public, and it may affect your professional reputation forever. Today, many employers and academic institutions search potential candidates' online presence. (University of Pennsylvania, nd)

Be aware that all postings can potentially be viewed by your colleagues, patients, University and College administration, other institutions, employers, professional contacts, and the general public. Even "private" conversations or postings can be forwarded, copied, or disseminated without the sender's knowledge. Screen-shots of private conversations often appear on public internet sites.

Policy
1. Confidential or proprietary information about Seattle University College of Nursing or its affiliates, students, employees, or alumni may not be posted on any social media site. As stated in the Seattle University Social Media Policy & Guidelines, "Seattle University logos and/or visual identity cannot be used for personal social media without university permission." If you need assistance or guidance with respect to this restriction, please do not hesitate to contact the Marketing Manager in the College of Nursing at (206) 296-2168.
2. Patient privacy must be maintained in all communications, whether by faculty or students. Do not share any information that may be used to identify patients or their health conditions and remember that, even de-identified information may be recognized by patients, their families, or their employers.
3. Students, faculty, and staff must uphold Seattle University and the College of Nursing standards for professional and ethical conduct while using social media sites.
4. Affiliates may not harass, libel, slander, or embarrass anyone. Do not post any material that is obscene, defamatory, profane, libelous, threatening, harassing, abusive, hateful, or embarrassing to another person or entity.
5. Unless you are serving as an approved, official spokesperson for Seattle University College of Nursing, online communications are your personal opinions and do not reflect the opinion of Seattle University College of Nursing or its affiliated entities. Each individual is personally responsible for their posts (written, audio, video or otherwise).
6. Faculty and students may not communicate over social media with patients, patients' family members or patients' legally appointed decision-makers.
7. When posting on a social media site, affiliates are advised to use disclaimer language. If you acknowledge your SU College of Nursing affiliation or you may be otherwise known or presumed to be affiliated with SU College of Nursing, include disclaimers in your online communications that indicate you are not speaking officially on behalf of the organization. (i.e., "The postings on this site are my own and do not represent the positions, strategies or opinions of my employer/school," or "This is a personal web site, produced in my own time and solely reflecting my personal opinions. Statements on this site do not represent the views or policies of my employer/school, past or present, or any other organization with which I may be affiliated. All content is copyrighted.")

College of Nursing Policy on Abortion

Because Seattle University is a Catholic University, faculty and students do not participate in elective termination of pregnancy procedures. Caring for a client before or after an abortion is not regarded as participating in an abortional act (rev. 1989).

Alcohol and Drug Use Policy

Seattle University takes seriously its commitment to provide a drug- and alcohol-free community. The manufacture, sale, possession, distribution, dispensing, consumption, or use of alcohol or drugs is subject to state and federal laws as well as University policies, including the following:

- *Code of Student Conduct*
- *Memorandum Regarding Marijuana Use or Possession*
- *Substance Abuse Policies and Prevention Program* (See Clery Act Annual Security and Fire Safety Report). Violations of state or federal law or any University policy may result in criminal charges or disciplinary sanctions described under the Code of Student Conduct or respective policy.

In addition, the College of Nursing enters into affiliation agreements with health care facilities that have their own respective drug and alcohol policies. In order to successfully complete clinical rotations at health care facilities, students are required to comply with all facility policies and procedures.

Consistent with nursing professional and ethical standards (ANA code of ethics section 3.6 & RCW 18.130.180) it is an expectation that Seattle University Nursing students will be free of all prescribed or recreational drugs which may impair their ability to provide safe patient care. These drugs include, but are not limited to, medical and recreational marijuana, prescription narcotics and sedatives, alcohol, and all illegal recreational drugs.

If a student is required to submit a urine sample for a toxicology/drug screen analysis for a clinical placement and the student tests positive for any substances, the student will be referred to the Dean's office for disciplinary review.

Academic Advising

Seattle University Graduate Advising Mission Statement

Seattle University recognizes that academic advising is integral to the achievement of our educational mission. Academic advising at Seattle University is guided by our values: care, academic excellence, diversity, faith, justice, and leadership. Please refer to the Seattle University CON Mission Statement for Advising.

All DNP students are initially assigned a faculty member as an academic advisor. The advisor is a resource for program information and advice. Students should meet with their advisor at the beginning of each academic year.

Advisor's Role/Context of Advising Relationship

An advisor's role is consultative in nature and is not one of granting or denying administrative approval to students for particular procedures or actions. The advisor assumes the following responsibilities, including, but not limited to:

- Faculty advisors will serve in the primary role as advocates for student welfare
- Assist students with the adjustment to school and maintain regular contact for the remainder of their academic career
- It is the advisor's responsibility to make the initial contact with their assigned student(s)
- Provide guidance in helping students identify and address academic and non-academic problems early
- Provide initial guidance and evaluation of the DNP Portfolio
- Serve as or provide guidance in identifying an appropriate chair for the student's DNP Project Committee
- Direct advisees to resources in the University including other faculty
- Address student issues in a confidential manner except in cases where there is concern about the welfare of the student or others
- Provide students with a positive professional role model

Questions to discuss with your advisor:
1. What, if anything, worries you about your doctoral program?
2. How can an advisor help you the most?
3. Policies
4. DNP Project and IRB guidance, if also serving as the DNP Project Faculty Mentor
5. Problems – personal, academic, financial
6. Information
7. Do you have concerns about adjusting to the program of study?
8. Are you aware of the resources available to you? (tutoring, writing center, counseling, career planning, etc.)
9. Are there special situations that may affect your participation in your program of study? For example, your job, family responsibilities, special provisions, or military obligations.

The advising process should move beyond directive practices to a more consultative approach. Such advising encourages student reflection upon and analysis of their DNP Project. The resulting advisor-advisee relationship would be implemented through a mentoring process featuring interactive communication, socialization into the academic community, and sponsorship into the profession.

Becoming an RN

Applying for the NCLEX and Licensure as an RN:

For those students enrolled in the Immersion Program, information on preparing, registering and sitting for the National Council Licensure Examination (NCLEX) may be found on the CON Information Page on Canvas and also on these websites:
National Council of State Boards of Nursing
Information on obtaining an RN license in the State of Washington may be found here.

Students will also receive an overview of the application process in spring quarter, prior to completing the Immersion year.

Safe Medication Administration by Nursing Students:

Administering medications safely is an important skill set for nursing students. In addition, education regarding safe administration is required by the [Washington Administrative Code](link) (WAC 246-874-070).

Please consult the CON Information Canvas page for information and required modules related to SafeMedicate resources.

Overview of the DNP Project

Demonstration of scholarship is an important difference between undergraduate and graduate education. **A key outcome of the DNP program at Seattle University College of Nursing is completion of a DNP project**. The DNP project should provide evidence of the student's critical thinking and ability to translate research into practice through problem identification, proposal development, implementation, and evaluation. The project also incorporates a systematic review and analysis of the literature on a topic of relevance to advanced nursing practice and vulnerable populations. The DNP project requires supervision by a faculty mentor and involves in-depth exploration of a topic with the expectation that the quality of the student work is at a level suitable for submission for publication in the scientific literature. See the [DNP Project Guidelines](link) on the CON Information Canvas site for more information on the DNP project.

DNP Internships and Clinical Practica

Clinical Practica Sites for Advanced Practice Nurse Specialty Hours

DNP students must accrue 1,000 total clinical hours to complete requirements for their DNP degree (600 clinical practice hours and 400 DNP project hours). Clinical placements for all students in the advanced practice rotations are made by the Clinical Placement Coordinator in collaboration with the Associate Dean of Graduate Programs and the coordinating faculty for the specialty tracks.   Students may not contact clinical agencies directly to arrange clinical practice sites. We understand that some of you may have a personal connection with or referral to a provider. We welcome the discussion of these opportunities and advise you to contact the Clinical Placement Coordinator to make a formal request. We have many agreements in place with affiliated agencies and may already have a contract with these sites. Other sites may not have an active affiliation agreement in place with Seattle University and may take several weeks to establish. Do not call any agency as a potential clinical practice site unless you have been given permission to move forward with establishing a placement opportunity with a personal or professional contact or a referral through a personal or professional relationship with a specific provider. "Cold calls" are strongly discouraged. You may provide contact information for a clinical agency or a specific provider to the Clinical Placement Coordinator for follow-up. We also ask that

students **not use a paid preceptor location service** as this action could jeopardize our accreditation status. These requests will be taken into consideration, but this does not guarantee that you will be placed at that site. The Clinical Placement Coordinator will be the liaison between Seattle University and the potential clinical agency and work directly with the clinical faculty to make the best decision for your learning needs.

Many clinics prefer or require fluency in Spanish, Vietnamese, Mandarin, or other languages. Please inform the Clinical Placement Coordinator and your faculty of your language competency to facilitate appropriate placements. Students will be surveyed regarding language skills, areas of interest, location desired, and a brief description of other work experience prior to advanced practice clinical rotations. This information enables the Clinical Placement Coordinator and faculty to obtain the best possible match for students and clinical sites/preceptors.

Please see the Advanced Practice Clinical Placement Policy and Procedures in the appendices for more information on clinical placements

DNP Internship (DNP Project) Hours

Arrangements for DNP project internships for all students in the DNP program are made by the student in collaboration with the DNP Faculty Mentor and the Agency. Post master's DNP students are encouraged to enter the program with firm options for internship placements and mentors.

Students complete the majority of their DNP Project internship experiences when they are enrolled in the DNP Project Seminar and Internship courses (NURS 6901, 6903 and 6905). As many as 500 hours may be counted from supervised clinical hours from previous Master's preparation for post master's students.

DNP project hours toward the required hours may include any of the following experiences DNP project planning meetings:
- Working with clients, administrators, other clinicians with a DNP project focus
- Community meetings
- Application of analysis and synthesis of the literature in a specific clinical context or with a patient population
- Collecting data
- Program evaluation or quality improvement activities within a clinical environment
- Working with your committee
- Policy Analysis and advocacy within a legislative or political action forum
- Interviews and in-depth work with other professionals in the practice environment

Please see DNP Project Guidelines on the CON Information Canvas site for more details about the DNP project requirements

Clinical Hours

Students may not engage in clinical practice hours with preceptors over quarter breaks, holidays, or on any day on which coverage by the clinical faculty cannot be assured, except by specific approval from the Associate Dean and/or Program Director with an the agreement for faculty coverage.

Transportation

Most didactic courses are held on campus or in the learning lab. The Clinical Performance Lab (CPL), which is within walking distance from campus, is located at the James Tower of the Swedish-Providence Cherry Hill campus and is used for simulation practice, some classes and skills practice. Many of the clinical facilities are some distance away from the College of Nursing. Although the Seattle bus system offers convenient access, you may prefer to use a personal vehicle. However, if you choose to use a personal vehicle for transportation, the University assumes no responsibility of liability.

Protection of Patient Health and Safety by Acting on Questionable Practice

As an SU CON student you are also obliged and responsible to document and report an impaired health professional's behavior to the employer or designated supervisor and to notify your nursing instructor.

Retrieved text from American Nurses Association Code of Ethics for Nurses:

"Nurses must be alert to and must take appropriate action in all instances of incompetent, unethical, illegal, or impaired practice or actions that place the rights or best interests of the patient in jeopardy. To function effectively, nurses must be knowledgeable about *ANA's Code of Ethics for Nurses with Interpretive Statements*; standards of practice for the profession; relevant federal, state, and local laws regulations; and the employing organization's policies and procedures.

When nurses become aware of inappropriate or questionable practice, the concern must be expressed to the person involved, focusing on the patient's best interests as well as on the integrity of nursing practice. When the practices in the healthcare delivery system or organization threaten the welfare of the patient, nurses should express their concern to the responsible manager or administrator or, if indicated, to an appropriate higher authority within the institution or agency or to an appropriate external authority.

When incompetent, unethical, illegal, or impaired practice is not corrected and continues to jeopardize patient well-being and safety, nurses must report the problem to appropriate external authorities such as practice committees of professional organizations, licensing boards, and regulatory quality assurance agencies. Some situations are sufficiently egregious as to warrant the notification and involvement of all such groups and/or law enforcement.

Nurses should use established processes for reporting and handling questionable practices. All nurses have a responsibility to assist whistleblowers who identify potentially questionable practices that are factually supported in order to reduce the risk of reprisal against the reporting nurse. State nurses' associations should be prepared to provide their members with advice and support in the development and evaluation of such processes and reporting procedures. Factual documentation and accurate reporting are essential for all such actions. When a nurse chooses to engage in the act of responsible reporting about situations that are perceived as unethical, incompetent, illegal, or impaired, the professional organization has a responsibility to protect the practice of nurses who choose to report their concerns through formal channels. Reporting questionable practice, even when done appropriately, may present substantial risk to the nurse; however, such risk does not eliminate the obligation to address threats to patient safety" (ANA, 2015).

Patient Protection and Impaired Practice

Retrieved text from American Nurses Association Code of Ethics for Nurses:

"Nurses must protect the patient, the public, and the profession from potential harm when practice appears to be impaired. The nurse's duty is to take action to protect and to ensure that the impaired individual receives assistance. This process begins with consulting supervisory personnel, followed by approaching the individual in a clear and supportive manner and by helping the individual access appropriate resources. The Nurse should extend compassion and caring to colleagues throughout the processes of identification, remediation, and recovery. Care must also be taken in identifying any impairment in one's own practice and in seeking immediate assistance.

Nurse must follow policies of the employing organization, guidelines outlined by the profession, and relevant laws to assist colleagues whose job performance may be adversely affected by mental or physical illness, fatigue, substance abuse, or personal circumstances. In instances of impaired practice, nurses within all professional relationships must advocate for appropriate assistance, treatment, and access to fair institutional and legal processes. Advocacy includes supporting the return to practice of individuals who have sought assistance and, after recovery, are ready to resume professional duties.

If impaired practice poses a threat or danger to patients, self, or others, regardless of whether the individual has sought help, a nurse must report the practice persons authorized to address the problem. Nurses who report those who job performance creates risk should be protected from retaliation or other negative consequences. If workplace policies for the protection of impaired nurses do not exist or are inappropriate –that is, they deny the nurse who is reported access to due legal process or they demand resignation—nurses may obtain guidance from professional associations, state peer assistance programs, employee assistance programs, or similar resources" (ANA, 2015).

HEALTH REQUIREMENTS FOR THE COLLEGE OF NURSING

ALL nursing students must have current and up-to-date documentation of meeting ALL health and safety requirements for their Clinical Passport on file with the online CastleBranch.com MyCB Tracker (formerly CertifiedBackground). All requirements must be met prior to participation in patient care/clinical experience and in order to maintain a status of good standing. Students will place their background check order on CastleBranch.com and then set up their MyCB Tracker. Students will be able to view all the requirements mandated by the College of Nursing for their online tracker and Clinical Passport. Upon completion of each requirement, students are able to upload, fax or mail in their documentation to their MyCB Tracker. Once completed the requirements will be reviewed and verified online. <u>Failure to meet the requirements and specified College of Nursing deadlines will prevent a student from entering or continuing in **any** nursing courses and thereby alter progression in the program.</u> As a nursing student, the requirements of the College of Nursing take precedence over any travel arrangements (including study abroad), job requirements, etc. In order to be eligible to participate in nursing courses, students must have a completed MyCB Tracker and Clinical Passport, be in good standing and meet all other nursing requirements and deadlines. Out of sequence students who may have completed a health packet previously, will need to complete a new packet to align with their new cohort. Prior to their return to the program of study, they should contact the Manager of Compliance to see which documents and immunizations are transferable, and which must be renewed.

Students are to keep all health records current and up to date in their online MyCB Tracker for CON Compliance and in order to complete their Clinical Passport. These documents must be available at all times in order to provide immediate verification to clinical agencies, employers and other parties as required. Students have 24/7 access to their online MyCB Tracker for convenient management. **Agencies conduct zero tolerance compliance audits throughout the program and will not accept records that expire during a quarter. As a result, students are required to renew requirements months in advance of any mid-quarter expiration dates.** <u>**Failure to meet the requirements and specified College of Nursing deadlines will prevent a student from entering or continuing in any nursing courses and thereby alter progression in the program and their good standing.**</u>

Washington State Registered Nursing License

RN-DNP students are required to have an unencumbered current Washington State Registered Nursing License for online verification by the College of Nursing prior to participation in clinical experiences. APNI-DNP students must have a current Washington State Registered Nursing License for online verification by the College of Nursing upon receipt of licensure and prior to entrance into the advanced practice portion of the curriculum. Annual RN License updates are verified online.

DNP students are required to have an unencumbered current Washington State Registered Nursing License, Washington State Advance Registered Nurse Practitioner License, and certification in their area of specialty as appropriate for online verification by the College of Nursing prior to participation in clinical experiences.

Professional Liability Insurance

Registered Nurses in the DNP program are required to carry Professional Liability Insurance. Students enrolled in the Primary Care Nurse Practitioner track must carry professional liability insurance as a Nurse Practitioner Student. Students in the PSYCH track must carry liability insurance at the NP level. Students in the AGNP track need to select the Adult NP category. Students in the ACPHN track are allowed to obtain the required liability insurance at the RN level. Students enrolled in the Nurse-Midwifery track must carry professional liability insurance through Contemporary Insurance Services. APNI students must obtain such insurance prior to entrance into the advanced practice **clinical portion** of the curriculum (typically DNP year III). Evidence of current coverage must be on file with the online CastleBranch MyCB Tracker.

Background Check

You will be expected to undergo a background check through CastleBranch.com and Washington State Patrol and provide the report results before you are accepted for assignment to a clinical training site. In addition, your clinical site will require you to provide it with a satisfactory criminal background check before you begin your clinical assignment or may require you to undergo a criminal background check of the agency's choice prior to beginning a clinical experience in that agency. It is the student's responsibility to meet all deadline requirements specified by the College of Nursing in order to participate in any nursing courses and remain in good standing.

CPR Certification

Students must hold current certification in: **American Heart Association - Healthcare Professional BLS Course** (2 year certification). **Other CPR courses are not accepted**.

The AHA Healthcare Professional BLS Course is designed to teach the skills of CPR for victims of all ages (including ventilation with a barrier device, a bag-mask device, and oxygen); use of an automated external defibrillator (AED); and relief of foreign-body airway obstruction (FBAO). It is intended for participants who provide health care to patients in a wide variety of settings, including in-hospital and out-of-hospital.

Students must show evidence of proper certification prior to starting clinical practice. Any lapse in coverage will render the student ineligible for participation in classes and in clinical nursing courses. It is the student's responsibility to meet all deadline requirements **specified by the College of Nursing** in order to participate in any nursing courses and remain in good standing.

Health Assessment/Physical Examination

Each student is required to obtain a physical examination from a licensed health care provider who, in turn, is requested to verify the student's health status based on professional judgment as to the student's eligibility to fully participate in the educational program of study with clients of all ages, stages of development, and who present many varied conditions/diagnoses. The clinical assignments require color recognition by testing as well as corrected vision and hearing

to normal range. The extent of the physical examination is the responsibility of the health care provider. The history and physical examination report may be submitted on a form utilized by the provider and attached to the completed health assessment / physical examination form required by the College of Nursing. Any condition which may interfere with the provision of care in the clinical setting should be discussed with the student's clinical instructor(s) and the Associate Dean. In most instances, this physical examination will fulfill requirements through graduation or for two calendar years. Under no circumstances will a student be allowed to progress into clinical nursing courses without meeting this requirement.

Health and Accident Insurance

Students are required to carry comprehensive health and accident insurance. Information on the Seattle University student insurance plan is available through the Seattle University Student Health Center. Students must show evidence of current health insurance coverage by providing a copy of their current health insurance card.

Students are expected to maintain continuous insurance coverage data. Evidence of current coverage can be required at any time during the program of study. Lapse of insurance coverage will restrict clinical participation, the consequences of which are the sole responsibility of the student.

NOTE: The College of Nursing is required by clinical agencies to provide evidence of coverage by a comprehensive health and accident plan which will provide continuous coverage during participation in clinical.

Immunization / Testing Requirements

This information outlines the immunizations and testing requirements while in the nursing program of study. All records must have student name, full date of birth and agency name with address or agency signature. Students will place their background check order on CastleBranch.com and then set up their online MyCB Tracker. Students will be able to view all the requirements mandated by the College of Nursing. Upon completion of each requirement, students are able to upload, fax or mail in their documentation to the online CastleBranch.com MyCB Tracker. Once completed the requirements will be reviewed and verified online.

Students are to keep all health records current and up to date in their online CastleBranch MyCB Tracker for CON Compliance and their Clinical Passport. These documents must be available at all times in order to provide immediate verification to clinical agencies, employers and other parties as required. Students have 24/7 access to their online CastleBranch MyCB Tracker for convenient management. Agencies conduct zero tolerance compliance audits throughout the program. Failure to meet the Clinical Passport requirements, specified College of Nursing deadlines or agency audits will prevent a student from participating in patient care/clinical experience and thereby alter their good standing and progression in the nursing program.

Tuberculosis Screening

REQUIRED RECORDS: **DATES OF ADMINISTRATION AND INTERPRETATION, RESULT OF TESTING WITH SPECIFIC INDURATION FINDINGS; AGENCY NAME OR HEALTH CARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

Must be completed annually by the specified College of Nursing deadline. 2 step TB Skin test: **Two** TB skin tests (each test involves two visits – one for the placement of the test and one to have the results read 48-72 hours later) within the past year OR QuantiFERON TB Gold test required.   Measurement of induration, if present, must be reported in millimeters along with the lapsed time between test and reading, usually 48-72 hours. The reading must be done by the same Health Care Provider (HCP). If the student's history or physical condition indicates the need to retest, despite negative results, a second test should be done within three weeks. If a student tests positive, a follow-up examination, chest x-ray and treatment are indicated. Reports of treatment plan and use of prophylactic drug therapy, if prescribed, must be documented. Absence of clinical disease must be verified by HCP with Annual Review and Education on symptoms of active TB form updated and kept on file.

Hepatitis B Vaccine

REQUIRED RECORDS: **DATES OF EACH INJECTION AND POSITIVE ANTIBODY TITER RESULTS; AGENCY NAME OR HEALTH CARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

Both of the following are required: 3 vaccinations AND a positive antibody titer (lab report required). The series of three injections must be spaced as follows: Dose one and two, one month apart; dose three, six months after dose one. A positive titer is required after all three doses (lab report required). If the titer is negative or equivocal, you must repeat series and provide a 2nd titer. If you cannot provide vaccination documentation and can demonstrate

a positive antibody titer, a negative surface Antigen Titer is required IN LIEU of vaccination documentation.

Tetanus-Diphtheria-Pertussis (Tdap)

REQUIRED RECORDS:	**DATE OF IMMUNIZATION; AGENCY NAME OR HEALTH CARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

Tdap Immunization or booster within the last 10 years. (Td is not accepted.)

Measles / MUMPS / Rubella (MMR)

REQUIRED RECORDS:	**DATE OF TWO IMMUNIZATIONS OR POSITIVE ANTIBODY TITER FOR ALL THREE COMPONENTS; AGENCY NAME OR HEALTH CARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

One of the following is required: 2 vaccinations OR positive antibody titer for all 3 components (lab report required). If any titer is negative or equivocal, you must receive 1 booster shot and provide a 2nd titer.

Chickenpox / Varicella

REQUIRED RECORDS:	**DATE OF TWO IMMUNIZATIONS OR POSITIVE ANTIBODY TITER; AGENCY NAME OR HEALTH CARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

One of the following is required: 2 vaccinations OR positive antibody titer (lab report required). If the titer is negative or equivocal, you must receive 1 booster shot and provide a 2nd titer. (History of disease is not accepted.)

INFLUENZA

REQUIRED RECORDS:	**DATE OF IMMUNIZATIONS OR APPROVED DECLINATION WAIVER; AGENCY NAME OR HEALTH CARE PROVIDER SIGNATURE IS REQUIRED AS WELL AS STUDENT NAME AND BIRTH DATE.**

One of the following is required: documentation of a flu shot administered during the current flu season OR a declination waiver. Declination waiver must be completed on school form. Flu Declination Forms are available by permission only.

ADDITIONAL IMMUNIZATIONS

Additional immunizations may be required based on the agency or program of study. It is the student's responsibility to meet all requirements specified by the clinical agency as well as the College of Nursing in order to participate in any nursing courses and remain in good standing. If students participate in international field experiences, additional immunizations may be required. The Center for Disease Control and Prevention Travel Advisory Guidelines for the specific region or country will be used to determine requirements.

Seattle University Student Services

IT HELP DESK
(206) 296-5571 or e-mail: helpdesk@seattleu.edu
Visit the [Information Technology Services](#) website for helpful information, including access to free Office 365 and other software.

Lemieux Library
The [Lemieux library](#) supports the DNP program with its collection of printed materials and computer databases. The print collection of more than 200,000 volumes has a strong concentration of nursing and related disciplines. The library may be accessed from the CON computers, the library computer workstations, the campus network, or from off-campus via the internet. The library has access to many databases and inter-library loan systems, as well as computer access to other libraries. A tutorial on the libraries services is also available on the website. The new, renovated library opened fall 2010.

Center for Digital Learning and Innovation
Visit the [CDLI website](#) for assistance with Canvas, Zoom and other digital learning resources.

Copy Machines
Coin operated copy machines are available for student use in the Library, the Student Union Building, and Reprographics. There are also student ID card print stations on campus, and in the CPL by the Reception area.

The McGoldrick Collegium
The McGoldrick is the home for graduate, non-traditional, undergraduates (25 years and older), and military veteran students from all academic programs.

The McGoldrick is a space that offers a quiet, comfortable, engaging, and fun location for our members. It is located on the first floor of the Hunthausen building.

Members of the McGoldrick Collegium can enjoy an outdoor patio, and proximity to shops and restaurants on 12th Ave such as The Chatterbox Café (perfect for some bubble tea), Café Presse (for some yummy French cuisine) and Stumptown (for a quality cup of java).

The [McGoldrick Collegium](#) is open Monday – Friday (check website for hours).

Counseling & Psychological Services

The counseling center offers individual, couple and group counseling for those students who may be experiencing issues such as anxiety reactions, depression, relationship stress or life changes. Various workshops are offered during the academic year on subjects related to issues such as self-esteem, conflict and assertiveness. Counseling is free of charge to enrolled students and confidentiality is maintained except by written consent or if required by law. Call (206) 296-6090 for an appointment.

Student Health Center

Staff at the Seattle University Student Health Center offer primary care services to graduate students Monday through Friday during regular business hours. Most services are free, although nominal fees are charged for physical examinations and laboratory tests. Appointments are required, and are usually available on a same-day basis. The Student Health Center is open during Fall, Winter, and Spring quarters. Hours are limited during summer quarter. For an appointment, call (206) 296-6300.

Learning Assistance Center/Writing Center

The Learning Center offers academic support to all Seattle University students. Opportunities are provided to refine strategies so that study and learning are more effective. Workshops on test taking and study techniques are offered quarterly. Peer tutoring and critique of term papers are available for no charge through the Writing Center. Telephone # is (206) 296-5740.

Sigma Theta Tau

Sigma Theta Tau is the International Nursing Honorary Society, with chapters in universities and colleges throughout the world. Acceptance for membership is based upon the individual's record of scholarship, excellence in clinical practice, and potential for leadership in nursing. Eligibility for doctoral student membership is based on the by-laws and addresses scholarship and completed credits in your specific program of study. For membership in the Alpha Sigma Chapter, Sigma Theta Tau, contact the assigned faculty counselor within the College of Nursing. Doctoral students are eligible to apply for the Eileen Ridgeway Scholarship awarded each year by Alpha Sigma Chapter.

Scholarships and Financial Aid

Financial assistance is available to new and continuing students to help with education and living expenses. To qualify for financial aid, students must file a Financial Aid Form with the College Scholarship Service each year. There are essentially four types of financial aid given to students: scholarships, grants, loans, and work-study opportunities. Details for all financial aid can be obtained through the University Financial Aid and Student Employment Office and online at Student Financial Services.

Campus Store

The Campus Store is located at 12th and Madison. Here you will find textbooks, supplies, snacks, greeting cards, and Seattle University logo items, such as lab coats, sweatshirts and bumper stickers. It is open until 7:00 p.m. several nights per week to accommodate graduate students. Check the bookstore website for current hours of operation.

The Redhawk Service Center

The center's primary goal is linking people with information and resources. Conveniently located in the first floor of the Student Center, the CAC is accessible to both day and evening students. The Internet link to this resource is [here](#).

Dining

[Food service](#) is provided on campus in the Student Center. Café service is available in the Student Center, Pigott Atrium, Library and in the Law School. A variety of other establishments are within walking distance.

International Student Center

The [International Student Center](#) coordinates student clubs, international dinners and other special events. It also provides emergency assistance, immigration information, counseling and much more. International students are responsible for maintaining contact with the ISC (206) 296-6260.

Office of Multicultural Student Affairs

The [Office of Multicultural Student Affairs](#) promotes an understanding and appreciation for cultural diversity in the university community. It advocates for the personal, academic and social success of American ethnic students. In addition, the office sponsors programs such as Martin Luther King, Jr. Week, Cinco de Mayo celebrations, and a Native American Powwow. Telephone (206) 296-6070.

Campus Ministry

The [Campus Ministry](#) team develops faith community, provides pastoral care, reaches out to serve others, promotes social justice, and celebrates God's presence through worship and fellowship. Campus Ministers foster opportunities for personal and spiritual growth through educational offerings, international service experiences, and a variety of retreat programs. Telephone (206) 296-6075.

The Chapel of Saint Ignatius provides a spiritual home for the university's Catholic faith community, with daily and Sunday liturgies.

Recreation / Sports

All graduate students are invited to use the Redhawk Complex, which includes the William F. Eisiminger Fitness Center. This center has two full gymnasiums, two swimming pools, a weight room, an astrogym for indoor tennis and soccer, racquetball courts, and two squash courts. The Center also rents recreational equipment. The Internet link to this resource is [here](#).

Parking

Fees are charged for use of on-campus parking facilities at Seattle University. Parking permits can be purchased daily or by the quarter from the [Department of Public Safety](#) in the University Services Building (206) 296-5990:

Public Safety Department

The Public Safety Department located in the University Services Building, provides 24 hour security for the University campus community and its facilities. The staff are trained professionals who are available to assist the community in a variety of safety and security related areas, including:

- CPR/First Aid
- Safety Escort Services
- Crime Prevention Information
- Crime Statistics
- Hazardous Materials Communication
- General/Occupational Safety Information
- Criminal Incident Reporting and Investigation
- Personal Property Identification
- Bicycle Registration
- Lost and Found
- Other Areas of General Assistance to the Campus Community

PUBLIC SAFETY DEPARTMENT COMMUNICATION CENTER: **(206) 296-5990**
PUBLIC SAFETY DEPARTMENT EMERGENCY: **(206) 296-5911**

SELECT APPENDICES

(Other DNP-Project specific information is located on CON Canvas Information Webpage and in the DNP Project Guidelines)

Clinical Rotations and Facilities

Clinical experiences occur in a planned sequence which allows for integrating theory with clinical practice. **The College of Nursing contracts with numerous healthcare agencies in the greater Seattle area to provide clinical learning opportunities in inpatient acute care settings and community based agencies across the specialty courses**. This allows students to interact with multi-disciplinary healthcare professionals and to care for a wide variety of patients and families. Different clinical sections may have varying hours depending on the goals for the experience, the clinical setting, and guidelines set by the facility. Clinical hours may include evening, night, and weekend hours. Some clinical sites that are regularly used are some distance from the university. While travel to some sites may present a challenge, SU is privileged to have many options for clinical placements of students.

All CON students are required to keep their health records, vaccinations, certifications, and background checks up to date at all times. These items are detailed in the section on health requirements. Students are required to update all requirements according to the important dates in the academic planning calendar. The dates are as follows:

Clinical Quarter	Vaccinations Due By
Fall	August 31st
Winter	Week Seven of Fall Quarter
Spring	Week Seven of Winter Quarter
Summer	Week Eight of Spring Quarter

Students who do not meet these deadlines will be placed on academic probation effectively immediately, and may be withdrawn from the next quarter's clinical rotation.

Seattle University College of Nursing is very fortunate to have the ability to place students in a variety of quality clinical sites. However, class sizes are large and clinical sites are limited. DIUS clinical sites are negotiated annually through the DIUS clinical internship coordinator, while PRE-LICENSURE YEAR clinical sites are negotiated each year in coordination with all nursing programs in the area and with each clinical facility through the Northwest Clinical Placement Consortium. The clinical facilities then assign placements to each nursing school for a certain number of students in specific units on certain days and Seattle University must abide by these decisions. The clinical placement decisions are communicated to Seattle University College of Nursing at varying dates for the following quarter. There is no specific deadline by which they

must communicate the placements. Seattle University College of Nursing expects undergraduate students to exercise patience and understanding with the process.

It is understood that there are many important reasons students prefer certain clinical sites. However, it is not realistic that every student will have their first choice or the most desired clinical placement. Therefore, the College of Nursing retains the right to assign students to clinical sections. Following PRE-LICENSURE YEAR clinical assignments, nursing students will be notified of a period of time in which they may negotiate a change/trade with a fellow student (except for senior practicum). Both students must agree in writing that the change in assignment is satisfactory to both parties before the change will be effective, and the clinical placement coordinator will approve of the change. After this period, the clinical placements become final. DIUS students request changes through the DIUS clinical internship coordinator. Students are expected to make arrangements to attend clinical at the time scheduled and at the site assigned. Regardless of clinical placement assignment, **each student is expected to assume responsibility for transportation to the clinical sites, and to resolve conflicts with work schedules, childcare, etc.** Students may not participate in student clinical experiences on a unit at an agency in which the student is employed because of the possible conflict of interest with changing roles.

Transportation

Regardless of clinical placement assignment, students are responsible for their own transportation to/from clinical sites. Students are expected to meet their own transportation needs that may include travel to distant clinical sites such as Bremerton, Marysville, Tacoma, and Issaquah for nursing, and out-of-state sites for diagnostic ultrasound. Theory and lab courses are held on campus or in the Clinical Performance Lab (CPL), which is within walking distance from campus. Although the Seattle bus system can offer convenient access to some agencies, students may need to use a personal vehicle. Students may arrange a carpool, but the College of Nursing does not make clinical assignments based on individual or carpool needs. If you choose to use a personal vehicle for transportation, Seattle University assumes no responsibility or liability. A student without a vehicle is not guaranteed a clinical placement within walking distance of campus. Students who carpool are not guaranteed clinical placements at the same clinical agency or on the same shift.

Clinical Dress Code

In uniform, students represent themselves, the Seattle University College of Nursing, and the healthcare profession. Students begin wearing the Seattle University College of Nursing uniform when participating in lab courses at the Clinical Performance Lab (CPL) or Ultrasound Lab, and later when at clinical agencies. The uniform consists of regulation navy blue scrubs and a lab coat, both with the SU logo on pocket. These items must be purchased at the Seattle University Bookstore. Additionally, professional shoes with non-perforated leather or rubber uppers are required (no canvas or crocs). Shoes should have closed toes (for safety with liquid spills, bodily fluids, and sharp instruments), offer good support, and should be reserved for clinical use only. At all times the uniform should be clean and pressed, and shoes clean and in good repair. Any

questions about the appropriateness of attire will be resolved at the discretion of the clinical faculty.

CON students are required to wear a name badge identifying them as Seattle University students at all times in all clinical settings. A CON student photo ID badge is available in addition to your Seattle University ID card. Some internship sites may issue site-specific ID badges.

Additional College of Nursing dress code considerations:
- Students must be personally clean and well-groomed to minimize odor. Healthcare professionals are expected to maintain good personal hygiene.
- Perfume, cologne, aftershave and lotions with fragrances should not be worn. Strong odors may cause nausea, and many patients are allergic to perfumes. The CPL is a scent free zone.
- Hair should be gathered to the back and long hair pulled back for cleanliness and safety. Men should shave daily, and any facial hair should be well trimmed.
- Makeup should be worn with discretion and moderation.
- Nails should be kept short, clean, and in good repair. If nail polish is worn, it should be neutral and not chipped. Acrylic or artificial nails are not allowed, as they promote bacterial growth and put patients at risk for infection.
- Jewelry should be minimal (ex: a wedding band; small, plain, non-dangling earrings limited to one per ear). Some clinical agencies and units require students to remove all jewelry. If this is the case, clinical faculty will inform students of this restriction.
- Students must adhere to the agency's dress code in accordance with jewelry and tattoos.

The Seattle University lab coat with a Seattle University College of Nursing name badge over professional clothes (no denim jeans) should be worn when in the hospital to review charts, interview patients, in labs at the Clinical Performance Lab (CPL) or Ultrasound Lab, or to obtain a clinical assignment prior to the actual clinical day. This modified uniform may be required on other occasions such as office and clinic visits, as indicated by the instructor. Additionally, some clinical experiences such as the mental health nursing rotation and at some of the outpatient or community-based clinical sites may require the modified uniform. Guidelines for appropriate attire will be provided by the clinical instructor and questions on attire should be directed to them as well.

Clinical Preparation Attendance Policy
Workshops, laboratories, and orientation to the clinical facility are essential to student success. Attendance is mandatory at all learning activities that prepare students for clinical experiences. A student may be required to produce documentation if an absence is due to extenuating circumstances such as illness or family death. If a student is absent from a mandatory learning activity, without prior written permission of the clinical faculty and course coordinator, the student may be denied progression to clinical experiences. A copy of the written denial will be forwarded to the Progression Committee.

Expectations for Patient Care

Safety of both patients and students is a priority concern for the faculty in the clinical setting. Guidance will be provided by the faculty to assist the student in applying theory and in developing requisite skills and confidence for giving professional nursing care. However, students are expected to be self-directed and accountable for preparation prior to patient care and in seeking learning opportunities in the clinical setting. It is also expected that each student engages in self-evaluation and be open to feedback from faculty and nurses in the clinical setting to maximize the learning process.

Students are expected to care for all patients and families, respecting the dignity of each person in accord with the philosophy of the College of Nursing and Seattle University. Confidentiality is of paramount importance, and each student is responsible for knowing agency rules for HIPAA and confidentiality statements. All patient data as well as other agency specific proprietary data must be respected. Photocopying of any agency/patient record is not allowed for any reason. Student conduct judged unethical or unprofessional in the clinical setting, including but not limited to breaches of confidentiality, may result in sanctions as outlined in Policy 75-3.

Acute Illness

Students should not attend clinical sites with any illness which may be transmitted to a patient, other students, and faculty, or if the student is unable to fully participate in care. The number of clinical days missed due to illness or other extenuating circumstances and arrangements for make-up time are at the discretion of the clinical faculty. In some cases, there may not be sufficient time within the quarter for the student to meet clinical objectives, and as a result the student may not pass the clinical course. Students are encouraged to identify a primary care provider in the Seattle area who will be available for treatment of acute illnesses in a timely manner in order to limit absences for clinical practice.

If a student must be absent from clinical for any reason, the student must be responsible for advanced notification of the clinical instructor and the clinical or community agency according to the procedure described in course syllabi.

Emergency care

If injury or illness occurs while a student is at a hospital providing patient care, the hospital will provide emergency care. The student is responsible for payment of any charges accrued during any medical visit.

Nurse Technician License Requirements

Students who are currently enrolled in a registered nurse program are eligible to apply for a Nurse Technician license in the State of Washington.

ADVANCED PRACTICE CLINICAL PLACEMENT
POLICIES AND PROCEEDURES (10-4-21)

The College of Nursing coordinates clinical placements on behalf of all students. Typically, we are identifying clinical sites 1 to 3 quarters ahead of the projected needs. Matching students to clinical sites is a complex process that requires input from the Program Directors, clinical faculty and the clinical coordinators. As you progress through your program, Program Directors review your placements to determine learning needs and placements. We also send your resume out to prospective clinical preceptors to give them input into the placement process, thus the need for an updated resume. We sometimes assign students to more than one site, particularly if they are rotating through a specialty area such as cardiology.

The Deans, graduate faculty and clinical placement staff are committed to:

1. Finding clinical rotations that enhance student learning experiences and contribute to their role formation as Advanced Practice Nurses.
2. Placing students in a variety of clinical experiences, including rural and urban sites.
3. Matching students to sites within their specialty population area of focus.
4. Providing a safe learning environment for students.
5. Notifying students as early as possible regarding their clinical placement for the following quarter(s).
6. Responding to student queries about their placements in a timely fashion.

Student Responsibilities:

1. Review the Canvas Clinical Placement website and fill out all required forms.
2. Check your email regularly and respond to emails promptly;
   a. When you receive an email about a potential clinical placement, please respond by email within 48 hours.
   b. When you are given information about your final site and preceptor, complete all on-boarding requirements as quickly as possible to expedite onboarding.
   c. When introduced to your assigned preceptor by email, contact the preceptor to introduce yourself and ask about their schedule.
   d. **Always, always** use your SU email when responding to clinical sites and preceptors as some agencies will not respond to non-university emails.
   e. Refrain from going around the established process by emailing agencies directly (unless asked or given specific permission!).
3. Comply with all site requirements, including but not limited to:
   a. On-boarding requirements, which may include a drug screen and/or an additional background check.
   b. All vaccination, CPR and other **CastleBranch** documents must be up to date as onboarding will not progress if these are not fully complete.
   c. Required training in documentation and other areas, such as EPIC.
   d. Acquire an SU ID badge through: supercopy@seattleu.edu   Request a NURSING student badge.

You may email a photo to the supercopy folks, or they can use the one on file. During Covid, arrange a time to pick up your ID. When ordering your ID, let them know which track you are in and how you want your name stated. Nancy Nurse, RN
then underneath your name:

- CNM student
- FNP student
- AGNP student
- PMHNP student
- ACNP student

4. Maintain accurate and current patient encounter logs using Typhon software. Include sufficient documentation of the nature of each patient encounter, however, **do not include any patient identifiers** that may be in violation of the Health Insurance Portability and Accountability Act (HIPAA). Include the population foci (i.e., pediatrics, women's health, etc.) as this information is essential in verifying preparation for board certification. (see separate procedure/guidelines on entering Typhon data)
5. Complete an evaluation of the clinical site and an evaluation of your preceptor by the end of the quarter.

Working with your Preceptor

Preceptors provide direct clinical oversight, mentorship, and essential formative (ongoing) and summative (end of quarter) feedback to students. Clinical preceptors volunteer their time and are not compensated monetarily for their clinical teaching and evaluation. It is important to recognize and appreciate the generosity of their time and professional commitment to training future clinicians.

Faculty will provide course specific objectives and requirements for progression in the clinical course. After the initial introduction between the student and the preceptor by the Coordinator, it is the responsibility of the student to communicate challenges and concerns with the site or preceptor to course faculty. Throughout the course, clinical faculty will evaluate the student and discuss their clinical progress with the preceptor.

A note about graduate clinical training: The clinical training of advanced practice nurses is substantively different from undergraduate nursing. Graduate nursing students need to be prepared for the complexity of clinical training that is based in a more apprenticeship model, requiring self-direction, independent work and professionalism.

Expectations of Students in the Clinical Area:

1. Introduce yourself to your preceptor with the information provided by the Coordinator *(see sample email at the end of this document).*
2. Exercise professional communication skills and be prepared with paperwork and documentation when determined by the clinical site.
3. Schedule your clinical hours in accordance with their preceptor's schedule and availability. Students are expected to coordinate all external activities, including work schedules, social events and family needs, to meet the availability of the clinical site and preceptor (with the

exception of scheduled class time at the College of Nursing). All required supervised practice hours must be completed by the end of the quarter.

4. If possible, prior to starting your clinical rotation, ask the preceptor about the population and common clinical problems you are likely to see in the clinical setting. Read pertinent reference material in preparation for the clinical experience; review the site's website. In addition to any material provided or suggested by the preceptor, you are expected to independently study and prepare at home throughout your clinical experience.

5. Ensure your preceptor has a Preceptor Handbook for your specific specialty. If not, send them one (can be found on the Canvas Clinical Placement site).

6. Conduct yourself in a manner that demonstrates respect for the preceptor's time. Arrive at the clinical site on time and come prepared. If you will be delayed or absent for any reason, notify the preceptor and arrange a time to make up the missed hours.

7. You are expected to establish personal learning objectives for the quarter and for each clinical day. Share these objectives with their preceptor and revise them appropriately. If possible, discuss learning objectives before the day begins. Also talk with your preceptor about past clinical experiences and areas you hope to focus on that quarter.

8. Please express gratitude to your preceptor and site staff who share their time and expertise in support of student learning. A card or note expressing your gratitude is always appreciated.

Some Questions to Ask Before Starting a Clinical Rotation:

- What is the preferred method of communication for the preceptor?
- What schedule will work based on their availability?
- What documentation requirements must I complete before starting at the site?
- What is the dress code of the site?
- What travel logistics should I be aware of? (i.e., parking, alternate locations)

Other Useful Information

Transportation:

 Be prepared to travel to clinical sites outside Seattle during any quarter. Student clinical placement locations are geographically widespread, and at some point, you may be assigned to a clinical which requires you to travel up to 150 miles one-way. (We do try to place students in a 'close to home site' the next quarter if they traveled some distance the previous quarter). You are responsible for your own transportation to clinical sites and associated costs when calculating and planning for educational expenses and scheduling demands. Travel time does not count toward clinical hours.

Student Requests for Clinical Placements:

If, through your contacts, you know of a potential preceptor who we are not currently using, please do let us know! We ask that you:

- Submit a *Student Request for Clinical Placement* form to the Canvas Clinical Placement website, or
- Let your Program Director/Faculty Clinical Placement Specialist know of your lead

Please note:

- Please *do not* contact the preceptor and/or site directly – allow the Clinical Coordinators to perform this step.
- You may not work with a preceptor who is related to you or is a close family friend.
- Clinical placements are ultimately up to the *Program Directors and Faculty Placement Specialists.* Faculty weigh several factors in making clinical assignments, including but not limited to student learning needs and goodness of fit.
- We do take your geographic requests into consideration but cannot guarantee sites close to your home.
- Requests to go out of state must be submitted two quarters in advance and may or may not be possible:
  - Factors we consider when reviewing an out of state request:
    - Is the clinical rotation necessary for this particular specialty or student?
    - Do we have a contract with the facility? The out of state contract process can take 2-3 months and entails considerable time and effort on the part of staff.
    - Are any of our clinical faculty licensed in that state? Many states require this.
    - Is the student in good standing and are they able to work independently?

Note: Please do not engage a paid preceptor matching agency! This action may put our accreditation status at risk.

Declining Clinical Placement Assignments:

Before you say, '*no I am not going to that site*!', talk with your Program Director about their rationale for recommending you for a specific site/preceptor. There is usually a good reason! Declining a clinical placement may impact your ability to complete the course and proceed in your program of study. If you decline a clinical placement, you may be responsible for finding a replacement site.

Thank you for reading through this document on clinical placements – we welcome your feedback and suggestions!

By signing below, you are stating that you have reviewed this document.

_____   _____

Student name & Signature   Date

Centers for Disease Control and Prevention. (2001). Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis.
Morbidity and Mortality Weekly: 50(RR11):1-42. Retrieved online May 11, 2010 from
http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm

Synopsis (selected, from the MMWR Recommendation):

"Recommendations for HBV postexposure management include initiation of the hepatitis B vaccine series to any susceptible, unvaccinated person who sustains an occupational blood or body fluid exposure. Postexposure prophylaxis (PEP) with hepatitis B immune globulin (HBIG) and/or hepatitis B vaccine series should be considered for occupational exposures after evaluation of the hepatitis B surface antigen status of the source and the vaccination and vaccine-response status of the exposed person.

Immune globulin and antiviral agents are not recommended for PEP of hepatitis C. For HCV postexposure management, the HCV status of the source and the exposed person should be determined, and for HCP exposed to an HCV positive source, follow-up HCV testing should be performed to determine if infection develops.

Recommendations for HIV PEP include a basic 4-week regimen of two drugs (zidovudine [ZDV] and lamivudine [3TC]; 3TC and stavudine [d4T]; or didanosine [ddI] and d4T) for most HIV exposures and an expanded regimen that includes the addition of a third drug for HIV exposures that pose an increased risk for transmission.

In addition, this report outlines several special circumstances (e.g., delayed exposure report, unknown source person, pregnancy in the exposed person, resistance of the source virus to antiretroviral agents, or toxicity of the PEP regimen) when consultation with local experts and/or the National Clinicians' Post-Exposure Prophylaxis Hotline is advised.

Occupational exposures should be considered urgent medical concerns to ensure timely postexposure management and administration of HBIG, hepatitis B vaccine, and/or HIV PEP" (CDC, 2001).

Summary of Actions:

According to the CDC, "avoiding occupational blood exposures is the primary way to prevent transmission of hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV) in health-care settings. However, hepatitis B immunization and postexposure management are integral components of a complete program to prevent infection following bloodborne pathogen exposure and are important elements of workplace safety" (CDC, 2001).

Occupational exposure is an urgent medical condition and should be dealt with immediately after each occurrence. For some types of prophylaxis, treatment must begin within four (4)

hours of the exposure. As a part of facility/course orientation, faculty members must talk with students about the need to report bloodborne pathogen exposures (and other incidents) immediately when they happen. The same urgency applies for faculty (and staff) exposures – ALL exposures should be dealt with immediately.

For all exposures, the exposed person should IMMEDIATELY remove soiled clothing and wash the affected area with soap and water.

When made aware of an exposure incident, the faculty member should *immediately* initiate the procedures outlined below and complete forms for both the agency and the College of Nursing whether for a student or their own exposure incident.
1. Complete form entitled Report Form for Occupational Exposure to Bloodborne Pathogens. (can also be found on the CON Nursing Hub). Every question is important, as the answers will help determine the best course of postexposure follow-up for the exposed individual. Please make every effort to be thorough.
2. Link to institution/agency system for immediate management of exposure by one of the following agency designates: unit manager, infection control coordinator, or other designated manager of OSHA Standards compliance. The procedures and regulations of the hospital, clinic, or health care agency will prevail.
3. Immediately provide copies of report form to the exposed person, the facility contact (as above), and the SUCON Associate Dean for the relevant program level (undergraduate or graduate).
4. Give informed consent to have your own blood drawn as soon as possible after the exposure for baseline information. (Note – you may postpone consent to HIV serologic testing, but it is vitally important that you consent to the immediate blood draw so that the option for later serologic testing is preserved.)
5. Link to your primary health care provider as soon as possible. If you do not have immediate access to your private health care provider, you may identify yourself as SUCON faculty/student with a possible HIV/HBV exposure and access
    a) The emergency services at the site of incident.
    b) SU Student Health Center (SHC). Notification of the exposure needs to be as soon as possible if the student has SU health insurance or if it is decided to seek care at the SHC. If the SHC is not the primary care provider, there will be an out-of-pocket expense.

Resources:

- Seattle/King County Public Health HIV/AIDS Control Program – Postexposure Prophylaxis
  - Primary Contact during business hours: 206-296-4649
  - After-hours: Call 206-726-2619 to be directed to the after-hours provider
  - Website:http://www.kingcounty.gov/depts/health/communicable-diseases/hiv-std.aspx
- National HIV/AIDS Clinicians' Consultant Center (run by UCSF)
  - Post-Exposure Prophylaxis Hotline: 888-448-4911
  - Website: http://www.nccc.ucsf.edu/
- Clinicians evaluating healthcare workers with occupational exposures will use the detailed guidelines outlined in the full MMWR document to determine appropriate the course(s) of postexposure prophylaxis for the situation, and in consultation with the healthcare worker's history, medical status, and preferences. See above for full citation.

Students who are injured or become ill in the clinical area should notify the clinical instructor immediately. In the case of a clinical site-related injury, the student should follow the procedure (if one exists) prescribed by the institution or agency for students who are injured. In the case of an unusual occurrence concerning a patient, student does the following:

When a student is involved in an unusual occurrence concerning a patient, during their clinical experience in a hospital or public health agency, the following steps must be followed once the immediate needs of the situation have been met:

1. The policy of the agency for reporting an incident will be followed.
2. The student and instructor/mentor will complete a CON Student Clinical Incident/Injury Form and send to the appropriate Associate Dean.
3. The Associate Dean should be notified by phone within 24 hours of the incident.

Students who become ill at the clinical site should, along with their clinical instructor, determine if their illness is communicable and a risk for their patients, or determine if the illness will impair the student's judgment to safely carry out their responsibilities. Treatment of any illness would be done at the student's expense.

Health Insurance

All Health Sciences students are required to have personal health insurance, or to join a health care plan, to cover the expenses of their health care, treatments in case of an injury, and/or care for a catastrophic illness or serious chronic condition within or outside the clinical setting.

Graduate Student Rights & Responsibilities

Preamble: Seattle University College of Nursing represents a diverse group of students, faculty, and staff committed to upholding the highest standards of academic achievement, clinical practice, and Jesuit traditions and values. The College of Nursing stives to educate and inspire leaders to transform healthcare for a just and humane world. We are a creative and dynamic learning organization, committed to social justice, innovation, scholarship, teaching excellence, and the formation of professionals ready to meet the evolving health care needs of a global community. This document is not legally binding, but it is designed to embody a set of principles to support and inform students of recognized rights and responsibilities as a student in the College of Nursing. This document was created in consultation with students and faculty. The College of Nursing may update and revise the document as needed. An underlying tenet of this document is the assumption of good-will, community values, and that faculty, staff, and students are continually engaged in efforts to enrich the College and enhance the student learning experience.

SECTION 1

General Principles

Rights:

- Students have a right to a learning environment that is respectful, free from discrimination, and provides them with the tools and resources they need to achieve success in their specified program.
- Students have a right to a fair grievance process as outlined within university and CON policies and procedures.
- When students are requested to meet with faculty members to address academic or other concerns, students have a right to know who will be present at the meetings. If the faculty member determines that the subject matter of the meeting will not include sensitive/confidential information, the faculty member may approve a student's request that a support person be present for the meeting.
- Students have a right to form groups and develop communities of learners.
- Students have a right to receive current information about their academic programs. This applies to communication with faculty and staff, program changes, clinical placements, and DNP projects.
- Students have a right to know where to find information, who to contact if they have questions regarding any aspect of their experience, and what to do if they identify an issue or concern during their time as a student.

Responsibilities:

- Students have a responsibility to be actively engaged and participate in creating a learning environment that is respectful and enhances the student experience.
- Students have a responsibility to communicate with faculty or staff if they would like to have a support person join a meeting scheduled between the student and the faculty/staff.
- Students have a responsibility to engage in discussions with faculty if the learning environment they find themselves in is not conducive to their learning or if there are areas where the learning environment could be strengthened.
- Students should put forth good faith efforts into their learning and scholarship.
- Students have a responsibility to comply with the Code of Student Conduct and all university and College if Nursing policies.

SECTION 2

Academic Degree and Progression

Rights:

- Students have a right to clear descriptions of programs of study, degree requirements, and typical program progression, including courses and timeline.
- If there are changes to the curriculum, students should be notified in a timely manner with a clear description of the curriculum change and the reason for the change.
- Students also have a right to clear communication about what is expected of them in their respective programs and when important deliverables are due (e.g., vaccination records, BLS certification, PPD/QuantiFERON Gold results, etc.)
- Students have a right to information about financial aid and who to contact to inquire about obtaining financial aid.
- Students have a right to privacy of their education records pursuant to the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g; 34 CFR Part 99.

Responsibilities:

- Students have a responsibility to review the curriculum and information specific to their program and be aware of expectations of the degree.
- Students have a responsibility to complete federal and institutional financial aid requirements in a timely manner if they are seeking financial aid.
- Students have a responsibility to provide feedback to faculty, staff, College of Nursing administration, and DNP project mentors in an appropriate and timely manner.
- Students have a responsibility to maintain compliance status for the various requirements, such as vaccines, licensure status, etc.

SECTION 3

Communication

Rights:

- Students have a right to truthful, timely, and accurate communication from peers, faculty, clinical preceptors, staff, and College of Nursing administration. Communication should be respectful and constructive.
- Students have a right to know what the preferred communication modality is of individual faculty and staff.

Responsibilities:

- Students have a responsibility to reciprocate the above rights with communications among peers, clinical staff, preceptors, faculty, and staff.
- Students have a responsibility to respond to faculty communication in a timely manner, and in the preferred method identified by faculty or staff.
- Students have a responsibility to respect the communication among peers, clinical staff, preceptors, faculty, and staff. Communications should not be shared on social media unless consent is obtained first (see CON social media policy).
- Students have a responsibility to assume best intentions first and to seek clarification prior to coming to a conclusion.

SECTION 4

Clinical Experiences

Rights:

- Students have a right to clinical experiences that are safe, supportive, and enhance their learning and professional growth.
- Students have a right to clinical experiences that are appropriate for the specific program in which a student is enrolled.
- Students have a right to clear communication about the duration of the clinical experience length, onboarding procedures, location, expected start and stop times, and who the point of contact is at the College of Nursing and at the clinical site, as appropriate.
- Students have a right to have clear explanations of what to expect at the clinical site, as well as expected student outcomes related to the clinical experience.
- Students have a right to be informed of the policy and procedure for reporting safety concerns, challenges in the clinical setting, and conflicts or difficulties with preceptors (See incident reporting procedure on CoN canvas information page).

Responsibilities:

- Students have the responsibility to be active participants in the clinical experience process.
- Students have a responsibility to reply to all requests from College of Nursing faculty and staff in a timely manner and meet all deadlines for submission of required documents.

- Students have a responsibility to complete onboarding requirements for clinical sites (e.g., paperwork, certifications, online/in-person training, etc.) and working with the College of Nursing faculty and staff to ensure all requirements are met by set deadlines for a smooth start to the clinical experience.
- Students have a responsibility to report concerns and issues to the appropriate faculty as soon as the issue or concern arises in the clinical setting.

SECTION 5

Environment & Infrastructure

Rights:

- Students have a right to a safe, supporting, respectful, and professional leaning environment. This includes the SU campus and affiliate clinical sites.
- Students have a right to a learning environment that is non-discriminatory as outlined in the SU Non-Discrimination Policy.
- Students have a right to space within the SU campus and the College to engage in scholarly activities and meet with peers, colleagues, and faculty.

Responsibilities:

- Students have a responsibility for supporting a respectful and professional leaning environment.
- Students have a responsibility to conduct themselves consistent with the above mentioned rights and to work with colleagues, peers, faculty, and staff when the above mentioned rights are not adhered to.

SECTION 6

Scholarly Work, DNP Projects and Authorship

Rights:

- Students have a right to access information on faculty expertise to make an informed decision regarding a faculty mentor.
- Students enrolled in the DNP program have the right to a collaborative and engaged process to select a DNP project mentor.
- Students are allowed, following established policy and procedures, to change their DNP mentor for any reason; however, changes to DNP mentor may result in delays in progression.
- Students have a right to clear explanations of what constitutes a DNP project, key DNP project deadlines, and expectations of the DNP project (e.g., submission of IRB application, submission of DNP project for approval of Associate Dean Graduate Programs)

- Students have a right to authorship and dissemination of scholarly products if they are part of the team on faculty led scholarly projects. (Authorship should adhere to standards work established by peer-reviewed journals, e.g. each author makes a meaningful contribution to the project and manuscript).

- Students have a right to discuss roles and authorship upon joining a research/project team

Responsibilities:

- Students have the responsibility to participate in the selection of their DNP project faculty mentor and to inform their current mentor if they wish to change faculty mentors.

- Students have a responsibility to be actively engaged in their DNP project process and move the project toward completion.

- Students have the responsibility to manage their own DNP project deadlines and deliverables, including consulting with faculty and site mentors when needed.

- Students are responsible to be fully engaged and make a meaningful contribution when working in a student team or as a team member on a faculty research project.

- Students have the responsibility to complete the work assigned to them to the best of their ability and by the agreed upon deadlines.

- Students have a responsibility to obtain and maintain CITI certification and adhere to all requirements for keeping data private and secure.