**WESTERN KENTUCKY UNIVERSITY**

**School of Nursing**

**DNP STUDENT HANDBOOK**

**2014**

Revised 5/26/2014

**DNP Program Purpose**

The DNP faculty believes that the purpose of graduate education is to prepare the advanced practice nurse for specialization in nursing. The program further develops expertise in advanced nursing practice that demands increased accountability, proficiency, and leadership. The WKU DNP curriculum is designed to prepare nurses who can function in the advanced practice roles as nurse practitioners. Nurses entering the Post MSN DNP program will gain knowledge and skills to positively impact health care systems through evidenced-based practice, health policy, technological innovations, interprofessional collaboration, and leadership. BSN to DNP students will gain competencies to provide primary care in their new roles as family nurse practitioners integrated with evidence-based practice, health policy, technological innovations, interprofessional collaboration, and leadership.

The SON faculty believes that students are active, self-directed adult learners who are committed to

and are accountable for integrity of academic accomplishments, professional practice and self-assessment. The DNP program is built upon beliefs related to adult education theory. The faculty provides resources

and guidance to increase the student’s competencies and skills as a doctorally prepared nurse scholar and leader.

**Program Outcomes**

The expected outcomes of graduates of the DNP program are to:

 Critically appraise theoretical concepts and knowledge from nursing and other disciplines and integrate this evidence in developing, implementing, and evaluating best practices for improved health outcomes.

 Develop, integrate, and evaluate evidence-based health care innovations while considering cultural, economic, ethical, legal, political, and technological issues across diverse health systems and models.

 Use and evaluate information systems and technology to improve clinical decision making, and health outcomes.

 Demonstrate leadership in the critical analysis and application of economic, ethical, political, and social components of health care policy.

 Demonstrate interprofessional collaboration and leadership skills to improve patient and population health outcomes.

 Analyze and apply advanced nursing practice concepts of clinical prevention and health promotion to improve health outcomes in relevant populations.

 Apply the relevant advanced practice role to improve patient health outcomes and health care systems.

**Curriculum Progression**

The DNP program is built upon “The Essentials of Doctoral Education for Advanced Nursing Practice

(American Association of College of Nursing, 2006a), the American Association of Colleges of Nursing (AACN), Essentials of Masters Education for Advanced Practice in Nursing and the National Organization for Nurse Practitioner Faculty (NONPF) Core Competencies for Nurse Practitioners. The BSN to DNP Program includes one specialty track, the Family Nurse Practitioner. Degree requirements are based on the program entry point – Post-MSN or Post-BSN.

**Post-MSN option degree requirements are:**

• Minimum of 36 total credit hours of course work, including a minimum of 8 credit hours in laboratory, clinical or residency courses based on a 1:4 credit and clock hour ratio for a total of 480 clinical and

residency clock hours.

• 3.25 minimum cumulative grade point average on all course work, and a minimum 3.0 GPA on all nursing (NUR) course work.

• Clinical project that includes a minimum of 360 clock hours. Additional clinical hours may be required for individuals who enter the program with less than 520 hours of clinical, laboratory, or internship

experiences documented on the Clinical Hours form.

**Post-BSN option degree requirements are:**

• Minimum of 76 total credit hours to include a minimum of 18 credit hours in laboratory, clinical or residency courses based on a 1:4 credit and clinical clock hour ratio for a total of 600 clinical and 480

laboratory/residency clock hours.

• 3.25 minimum cumulative grade point average on all course work including all (NUR) coursework and

a minimum 3.0 GPA on all nursing (NUR) course work

• Clinical project that includes a minimum of 360 clock hours.

**Pathway from Entry to DNP**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Course Number and Title |  |  |  | Credit Hours | Clinical Hours | BSN to DNP | Post Masters DNP |
| **Graduate Statistics** |  |  |  | 3 |  | X |  |
| **NURS 500 Advanced Pathophysiology** |  |  |  | 4 |  | X |  |
| **NURS 503 Advanced Health Assessment** |  |  | 2 |  | X |  |
| **NURS 504 Advanced Nursing Theory** |  |  |  | 3 |  | X |  |
| **NURS 505 Advanced Health Assessment Clinical** | 1 | 60 | X |  |
| **NURS 510 Advanced Nursing Research** |  |  |  | 3 |  | X |  |
| **NURS 515 Advanced Pharmacology** |  |  |  | 4 |  | X |  |
| **NURS 520 Teaching in Schools of Nursing** |  |  | 3 |  | X |  |
| **NURS 546 Primary Care of the Infant, Child, and Adolescent****NURS 547 Primary Care of the Infant, Child, and Adolescent Clinical** | 32 | 120 | XX |  |
| **NURS 548 Primary Care of the Adult****NURS 549 Primary Care of the Adult Clinical** |  |  | 32 | 120 | XX |  |
| **NURS 554 Primary Care Practicum** |  |  |  | 5 | 300 | X |  |
| NURS 601 DNP Education, Roles, & Leadership |  |  | 2 |  | X | X |
| NURS 700 Leadership and Organizational Theory for the DNP | 3 |  | X | X |
| NURS 701 DNP Leadership in Health Policy |  |  | 3 |  | X | X |
| NURS 712 Evidence Based Practice |  |  |  | 3 |  | X | X |
| NURS 714 DNP Perspective on Economic and Finance | 3 |  | X | X |
| NURS 620 Advanced Biostatistics |  |  |  | 3 |  | X | X |
| NURS 630 Advanced Epidemiology |  |  |  | 3 |  | X | X |
| NURS 740 Technology in Health Care |  |  |  | 3 | 60 | X | X |
| NURS 750 Program Development and Evaluation | 3 | 60 | X | X |
| NURS 755 Quality Improvement in Health Care |  | 3 |  | X | X |
| NURS 765 Institutional Review Board Process |  |  | 1 |  | X | X |
| NURS 780 Clinical Residency |  |  |  | 6 | 360 | X | X |
|  |  | **Total BSN to DNP Clinical Hours** |  | 1080 |  |  |
|  |  |  | **Total BSN to DNP Credit Hours** |  | **76** |  |  |
|  | **Total Post-Master’s DNP Clinical Hours** |  | 480 |  |  |
|  | **Total Post-Master’s DNP Credit Hours** | **36** |  |  |  |

 Note: Courses in bold are the current WKU courses leading to the FNP degree. BSN to

DNP students will complete all of the courses listed.

**Policies**

General Policies related to admission, progression, and graduation can be found in the WKU Graduate Catalog ([www.wku.edu/graduat](http://www.wku.edu/graduate)e). Program specific policies follow. Program specific forms can be found on the DNP Program Blackboard site.

**Admission Criteria and Process**

Admission to Graduate Studies at WKU is a two-step process first requiring that the submit an application with fee and official copies of all higher education course work and degrees to the Office of Graduate Studies and Research. The application may be submitted online. Following receipt of these materials, the SON Graduate Program is notified of the student’s acceptance to WKU and a recommendation form requesting approval for official admission to the major is sent to the Graduate Coordinator. Additional requirements for admission to the DNP program include:

 Have an earned BSN or MSN from a CCNE or NLNAC accredited nursing program,

 GPA – 3.25 cumulative in BSN or MSN. Students with a GPA of less than this GPA may submit GRE scores and request admission. Students must score at or above the university

minimum posted on the Graduate Studies web site.

 Submit three professional references on form provided to applicant

 Provide a written goal statement of at least 500 words

 Submit a resume or CV highlighting past education, relevant clinical experience scholarly endeavors and professional service (BSN to DNP students must document one year of full time experience as a registered nurse)

 Professional license –

a. MSN –

i. NPs must have current and unencumbered RN and APRN licensure in the state of residence in which clinical experiences will be completed,

ii. Nurse Administrators must have a current and unencumbered RN license in

the state of residence where clinical experiences will be completed.

 iii. Completed verification of post-baccalaureate practice hours form.

 (Applicants who cannot demonstrate a minimum of 500 clinical

clock hours in graduate program will be expected to complete clinical course work beyond the proposed curriculum.

 iv. Completion of a graduate level statistics course within past 5 years.

b. BSN – current and unencumbered RN license in Kentucky or compact state

Following receipt of all admission requirements, the application is initially reviewed by the DNP program coordinator and presented to the SON Graduate Admissions Committee. Interviews will be scheduled for selected students. The interview will be conducted by faculty familiar with the interview format and questions developed by the SON Graduate Committee. The interview questions include a review of the student’s goals; validation of any questions identified following initial review of the applicants admission materials; a discussion of the students plan for success in the program; research interests and possible funding for the program. Additionally the student’s initial questions are answered related to the process and resources.

**DNP Program Progression**

Progression in the DNP Program requires the student to earn a minimum cumulative overall GPA of 3.0

in graduate nursing courses (courses with an NURS prefix) and a minimum overall GPA of 3.0 in the DNP degree courses. A grade of “B” or higher is required in all DNP and FNP specialty courses. Students may repeat one specialty course one time in the DNP course curriculum.

The DNP specialty courses include: NURS 601, 620, 630, 700, 701, 712, 714, 740, 750, 755, 765, 780. The FNP specialty courses are (BSN to DNP Program): NURS 500, 503, 505, 508, 509, 515, 546, 547,

548, 549, and 554. In specialty courses which have co-requisite didactic and clinical courses, a grade of

“B” or higher must be earned in the didactic course and a pass must be earned in the clinical course. If a

“B” and/or a pass (contingent on course type) is not earned both the didactic course and the clinical

course must be repeated.

DNP students may repeat up to nine (9) hours and may repeat each course only one time.

**Dismissal from the Program**

Students will be dismissed from the program due to the following circumstances:

1. A second occurrence of a failure to earn a B in a specialty course.

2. Failure to earn a “B” on a second attempt in NURS 510.

3. A second occurrence of academic probation.

4. Failure to remove a grade of incomplete according to the Graduate Catalog policy.

5. Failure to meet professional standards and SON policies as follows but not limited to:

 Academic dishonesty

 Incivility to patients, preceptors, staff, peers, or faculty.

 Violation of clinical policies

 Failure to follow HIPAA policies.

 Failure to follow professional Scope and Standards of Practice.

 Any violation of the social media policy (see SON Handbook).

 Failure to notify faculty of actual or potential situations that could result in actions on the

student’s RN license.

**FNP Certification: BSN to DNP Program**

Graduates of the BSN-DNP degree program who have completed all the requirements for the degree with

a concentration as a Family Nurse Practitioner are eligible to sit for certification examinations for the specialty. Information about nationally recognized certification exams and those for which individual

students are eligible can be found at the following Web sites:  *American Nurses Credentialing Center*, or

the, *American Academy of Nurse Practitioners*, and the  *National Certification* Corporation. When applying for the certification examination, students submit certification eligibility forms to the MSN and

DNP program director once required courses are completed.

**Preceptor Guidelines**

**Purpose:** The preceptorship is an organized and planned educational program in which preceptors facilitate the integration of nursing students into their role responsibilities in the work setting. The purpose for utilization of a preceptor is to guide and enhance the practice activities and learning experiences for students.

**Accountability and Responsibility:** Ultimate responsibility and accountability for Nursing education rest with Western Kentucky University’s School of Nursing and its faculty. Faculty is responsible for the application, integration, and enhancement of the theoretical constructs of each program’s curriculum as it relates to the student’s clinical experiences. Faculty is responsible and accountable for the control, direction, delegation, supervision, and evaluation of these experiences.

**Role expectations of faculty**

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| --- | --- |
| 1. | Communicate with the preceptor identified by the student at the beginning of the clinical experience and provide the preceptor with a course syllabus and requirements for documentation and student evaluation. |
| 2. | Be available to preceptors and students via telephone e-mail and/or paper. |
| 3. | Make on-site visits to coordinate, supervise, and evaluate student performance and learningexperiences. |
| 4. | Make on-site visits within 24-48 hours if warranted. |

**Role expectations of preceptors:**

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| --- | --- |
| 1. | Provide a copy of resume including documentation of current licensure/certification. |
| 2. | Be willing to serve as a preceptor, recognizing the time commitment required. |
| 3. | Receive orientation to the preceptor role. |
| 4. | Collaborate with Nursing faculty on student learning experiences. |
| 5. | Orient student to the clinical agency or institution and its policies and procedures. |
| 6. | Provide guidance for student achievement of learning objectives. |
| 7. | Supervise student performance as it relates to learning objectives. |
| 8. | Provide ongoing evaluation of student’s progress and performance. |
| 9. | Meet with faculty to provide feedback regarding student performance and progress. |
| 10. | Inform faculty of unacceptable or problematic student behavior in a timely manner after behavior. |
| 11. | Complete and discuss with the student an evaluation at the end of the rotation. |

**Role expectations of students**

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| --- | --- |
| 1. | Meet with preceptors to share expectations, learning needs, and plan dates and time for clinical experiences. |
| 2. | Be prepared/punctual for clinical and schedule make-up with preceptors. |
| 3. | Seek-feedback regarding clinical performance from preceptors and faculty. |
| 4. | Coordinate site visits with faculty and preceptors, including date and time. |
| 5. | Conduct themselves in a professional manner and dress appropriately (business professional attire unless otherwise directed). |
| 6. | Document achievement of clinical objectives by keeping a log or journal. |
| 7.8. | Evaluate effectiveness of preceptor at the end of the clinical experiences. Adhere to the policies of the WKU SON and the clinical agency. |

**Qualifications of Preceptors:**

Clinical preceptors for the BSN to DNP student may be nurse practitioners, physicians or other graduate

prepared faculty who meet the licensing and/ or certification requirement in the state in which they are practicing. The licensure must be active and unencumbered.

Nursing practitioners in the preceptor role must be either:

|  |  |
| --- | --- |
| 1. | MSN-prepared with a minimum of one year experience OR |
| 2. | In individual cases, exception may be made in consultation with the faculty. |

**Time Limit on Degree**

WKU Graduate Studies requires that a student enrolled in a doctoral program will have ten years to complete all requirements including the clinical project. This time begins with the first class required in the program of study. Requests for extensions must be approved by the Graduate Committee, the WKU SON Director and the Dean or his/her designee.

**Doctor of Nursing Practice Program - Leave of Absence Policy**

Students considering a leave of absence must discuss their plans with their academic advisor, prior to making a formal request. Students are also strongly encouraged to discuss this with the student loan or financial aid office as it may affect loan deferment. In addition to avoiding the need to reapply, leave of absence allows for priority registration. Students may request a leave of absence from the Doctor of Nursing Practice program in certain circumstances, for example the birth of a child, illness of a family member, etc. Students must (1) submit the request for leave in writing, (2) have it approved by their faculty academic advisor and then (3) by the program coordinator for the DNP program.

Request for leave must be made prior to the beginning of the semester leave is requested. No more than two consecutive and four total semesters in leave of absence status may be requested. Students who do not enroll in courses for more than one semester must complete submit a new application and fee to Graduate Studies and be readmitted to the program by the DNP coordinator. The student may be required to submit an updated Program Plan if curriculum changes occur resulting in the omission of courses from the WKU Graduate Catalog.

**Participation in College Hooding Ceremony**

In order to participate in the College’s hooding/graduation ceremony held in May, DNP students must complete all of the following items no later than the dates posted on the Registrar’s website. Earlier submission is strongly recommended. The SON may also have published deadlines for submission of the final paper and oral defense of the project.

**DNP Faculty Advisors**

Faculty advisors are assigned to DNP students upon admission to the program. They provide academic guidance and mentoring for their DNP advisees. The advisor meets regularly with their advisees to assist students with clinical, scholarly and professional development as related to the DNP program. Faculty advisors do not need to be experts in the student’s area of interest. Rather, they serve as facilitators and they guide the student’s progress in the program. The advisor is responsible for assisting advisees when identifying an appropriate clinical mentor and an additional College faculty member for the student’s committee. The committee member and clinical mentor are selected early in the program of study. Faculty advisors are expected to develop the advisee’s program of study plan during

the first semester of the program. A copy of the plan of study and any subsequent revised plans are kept on file in the student’s SON record and in Graduate Studies. Students are advised to keep copies of all forms submitted and approved. Student advisees are expected to work with their faculty advisor and the program director when developing the advisee’s plan of study for the program and selecting their committee member and clinical mentor.

**Project Chair and Committee**

 **Advisor.** The student if responsible for meeting with the assigned advisor each semester during the DNP program. The DNP Project Proposal Request Form is completed by the end of NURS 712 and sent to the advisor. This is after a systematic review of the proposed project is completed and reviewed by the advisor.

 **Clinical Project Committee**. The clinical project committee is made up of the student, the WKU faculty advisor who serves as the student advisee’s committee chair, a clinical mentor and a WKU faculty member approved as a doctoral committee member. The committee members work together closely throughout the student's program of study.

 **Faculty project committee chair.** The faculty committee member is an appointed member of

the College who has practice, content or methodology expertise in the advisees’ area of interest and in particular in the student’s capstone project focus. The faculty member assists the advisor and advisees on matters related to the students capstone project. Within the structure of the Committee, the faculty member also provides insight on matters that pertain to the project during course work. For example, the faculty member provides input on the chapters developed as part of the project .

 **Clinical mentor.** Clinical mentors are experts in the students focus area, willing to assist in clinical coaching and agree to collaborate on the advisory committee. Clinical mentors serve in the role of consultant. They have an ongoing relationship with students throughout the program, contributing especially to the student's development as a leader in the student’s area of practice or executive management. Clinical mentors may be selected from among a variety of disciplines, thereby building upon the DNP program objective to enhance the student's interdisciplinary experience. It is preferable for the clinical mentor to be doctorally prepared in their discipline. The clinical mentor form should be completed by the student and forwarded to their advisor for approval.

**Technical Report**

The first draft of technical report due to advisor no later than February 1 for May graduation.

**Technical Report Outline**

**Project Abstract (maximum 500 words)**

**Section 1: Background and Significance**

 Statement of the problem

 Significance of project for nursing and health care

 Theoretical foundation

 Clinical question

**Section 2: Critical Review of Pertinent Literature**

 Include theoretical, methodological, empirical research as applicable

 Include rating of level and strength of any empirical evidence using an established evidence-based rating system (as appropriate)

 Synthesize empirical support for proposed project

**Section 3: Methods**

 Description of population

 Outcomes (description of measures and, if appropriate, their reliability and validity or sensitivity/specificity profile)

 Procedures for implementation

 Plans for data analysis or evaluation

 Protection of human subjects



**Section 4: Results**

 Specific results

 Validity of results

**Section 5: Discussion and Conclusions**

 Summary of results

 Clinical implications of results/impact on practice

 Limitations and suggestions for improvement

 Suggestions for future clinical projects or research

 References

**Section 6: Appendices (Optional)**

 Summary matrix review of individual research tables

 Theoretical models (schematics)

 Methods models (schematics)

 Other as applicable

The technical report is completed in NURS 780, Clinical Practicum. Completion of this evidenced based project represents an opportunity for the student to investigate a health care issue in a clinical or systems situation. The focus is broad and includes not only direct care issues but interventions and programs that indirectly influence clinical outcomes for a defined population. Direct clinical care, interventions designed to improve clinical outcomes for an aggregate or population, administrative interventions to improve clinical outcomes, and policy interventions to improve health conditions and outcomes for populations are included in this definition. The project focus is on the scholarship of practice, with an emphasis on internal validity rather than external generalizability.

**Financial Support for Research**

Limited University financial support is available from Graduate Studies and Research. Information on applying for this support is available in the Current Student link at the Graduate Studies website. Funding may be received for the following.

 [Graduate Student Research Grants](http://www.wku.edu/graduate/index.php?page=graduate-student-research): Funding up to $750 is available for students conducting research.

 [Research Grant Calendar](http://www.wku.edu/graduate/index.php?page=research-grant-calendar): Submission dates for research grant proposals and interview dates for selected applicant.

 [Travel Award: Conferences and Research](http://www.wku.edu/graduate/index.php?page=graduate-student-conference-research-travel): Funding is available for graduate students to attend professional meetings and conferences and to support research project travel.

 Other external organizations

 Members of Kappa Theta Chapter of Sigma Theta Tau may be eligible to apply for small research grants of $250. Additional information may be obtained from the Kappa Theta President.

Contact information can be obtained at the School of Nursing website in the Kappa Theta Link.

 Faculty advisors are also a resource related to locating grant opportunities.

**Clinical Practicum Requirements**

All DNP students are responsible for compliance with the School of Nursing general policies. Clinical Hours: In order to achieve the DNP competencies, the American Association of Colleges of

Nursing (AACN) states that DNP programs should provide a minimum of 1,000 hours of supervised

clinical practice post-baccalaureate. Practice experiences should be designed to help students achieve specific learning objectives related to the DNP Essentials and specialty competencies. These experiences

should be designed to provide systematic opportunities for feedback and reflection. Experiences include in-depth work with experts from nursing as well as other disciplines and provide opportunities for

meaningful student engagement within practice environments.

BSN to DNP students should be aware that the FNP concentration requires 600 supervised clinical hours within their post-baccalaureate education to qualify for certification testing. Students are responsible for discussing certification requirements with their initial DNP Academic Advisor or their DNP Capstone Project Chair.

**Final DNP Defense**

1. Following approval from the DNP committee, the student will notify their advisor to schedule the DNP final defense. The student will coordinate his/her availability and the availability of the clinical mentor.

2. The clinical mentor may choose to present or participate by conference call.

3. The room will be reserved for a 2-hour block of time and should have computer, proxima, and conference call capabilities.

4. Announcements of the defense including the student’s name, date, and location will be

generated through the DNP Blackboard site and SON list serv.