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I. **Introduction**

This document is intended to serve as a guide for students and faculty of the Texas A&M University-Corpus Christi College of Nursing and Health Sciences DNP program. It is a dynamic document that will be updated as appropriate for the evolution of the program.

II. **College Vision, Mission, Philosophy, Goals and Conceptual Framework**

1. **Vision:**

   Envisioning the future. Transforming healthcare through education, research, innovation, and practice.

2. **Mission Statement:**

   The College of Nursing & Health Sciences positively impacts the health of the global population through the education of health care leaders and providers of tomorrow with innovative educational programs in the nursing and health professions. The College identifies, attracts, and graduates students of high potential, especially from groups who have been historically under-represented in the organization and provision of health care. This work is enhanced through faculty contributions to community service, leadership, practice and research. These activities are fostered in a collaborative inter-professional and multicultural learning environment promoting a sense of community and caring.

3. **Philosophy:**

   The faculty believes that learning is a life-long, interactive process in which both teachers and students are learners. The faculty endeavor to create a learning environment that is flexible and intellectually stimulating, encourages scholarship and promotes self-directed learning. Student learning is built upon an existing knowledge base and is directed toward socialization into the practice of professional nursing and the health sciences.

   Nursing and health science are professions as well as disciplines. Therefore, the faculty strive to maintain expertise in practice. Faculty influence student learning by being role models. (Practice is defined as clinical specialty expertise, research, leadership and other forms of scholarly endeavor.)

   Service is of great value to the nursing and health science faculty. As such, they interact and contribute to the internal and external communities that surround them. Through service, the faculty develop sensitivity to the context in which the nursing and health science programs exist and evolve. This active participation reflects a commitment to the community and serves as a professional standard for the student.
Research and scholarly activity are important parts of the faculty role and the curricula. Each member of the faculty is involved in research and/or scholarly activity. The research base for professional practice is an integral part of both undergraduate and graduate curricula. At both levels of education, students utilize the research process to identify and study nursing and issues related to health care. Critical thinking is developed through a variety of assignments aimed at promoting scholarship.

4. College of Nursing & Health Sciences Goals:
   a. To develop within the student, the knowledge and skills necessary for beginning professional and advanced health care practice, cultivating basic and specialized abilities needed to successfully pursue a career.
   b. To promote the concept of caring and facilitate attainment of a care delivery system sensitive to multicultural diverse communities and their health values.
   c. To offer individuals the opportunity to increase the breadth and depth of the theoretical base for health care practice, enhance and expand competence, prepare for role specialization and contribute to the discovery of new nursing knowledge.
   d. To provide an educational environment of respect within which students may evolve as broadly educated, responsible and accountable professionals dedicated to the principles of lifelong learning.
   e. To build a foundation for graduate education.
   f. To ethically serve diverse communities as health care experts, leaders and consultants and advocates of resources.

   a. Person. The faculty of the Texas A&M University-Corpus Christi College of Nursing and Health Sciences believe that each individual has value, dignity and worth, independent of special endowments or external circumstances and has the freedom to make choices. A person's development requires and is influenced by interaction with the environment. Certain life processes the person uses to interact with the environment characterize each individual. Each person is unique and influenced by, but not determined by, heredity, environment, culture and life experiences.
   b. Environment. The environment is viewed as physical, biological, psychological, cultural and social conditions that influence the individual. The relationship
between the individual and the environment is dynamic, continuous and reciprocal.

c. Health. Health is multidimensional and encompasses varying states of well-being. A health state is the result of an ability to adapt to change, to perceive in accordance with reality and to display a rational and integrated personality.

d. Nursing. Nursing is an applied science and an interpersonal process. Its essence is care. Texas A&M University-Corpus Christi faculty describe this essence in cognitive, affective and psychomotor terms. Caring implies an informed knowledge of the client's condition, behaviors and preferences. It implies emotional responses such as empathy, concern for comfort and respect for human dignity. Caring behaviors include the skillful use of the nursing process directed toward preservation of cultural differences, freedom of choice, promotion of human and environmental growth and development, and the adherence to ethical principles.

Nursing's ultimate goal is promoting optimal states of health in individuals, families and communities at all stages of development. Nurses assist clients to help themselves in maintaining and restoring health or in experiencing a peaceful death. These activities create relationships within which the nurse enacts complimentary roles categorized as professional, provider of care or coordinator of care.

Responsible and accountable nursing practice is characterized by the utilization and application of theory and research from nursing and a variety of other related disciplines to plan comprehensive care, implement care based on a high level of expertise and creativity, systematically plan evaluations, identify researchable nursing problems, and provide leadership to improve health care. Peer and interdisciplinary collaboration are sought to facilitate implementation of effective problem solving and decision-making.

III. Doctor of Nursing Practice Program Specifics

1. Program Overview:

The purpose of the Texas A&M University-Corpus Christi DNP program is to provide Nurse Practitioners with advanced preparation that will lead to their acquisition of knowledge and skills essential for reducing the incidence and impact of preventable disease and injury within their communities, improving administration of delivery systems, policymaking, and design or expansion of educational programs. The A&M University-Corpus Christi College of Nursing and Health Sciences’ (CONHS) extensive network of healthcare providers, agencies, and veterans services provides rich practice
experiences to enhance the DNP student’s knowledge and skills. These skills are essential in the development of experts responsible for translating evidence to practice.

The curriculum has been designed to meet the diverse needs of the nursing community in South Texas. Emphasis is placed on preparing experts to facilitate quality health care delivery within multicultural communities. The geographic region served by Texas A&M University-Corpus Christi provides numerous opportunities to examine the unique health needs of Hispanic and other cultures. Diverse needs of the community in South Texas will be met within the design of the DNP curriculum. The knowledge acquired through program courses and the implementation of the DNP project is transferable to a variety of settings and provides a foundation for nursing practice at the highest level.

2. DNP Student Learning Outcomes:

Course activities, practice experiences and student-directed learning are expected to support each student’s development of competencies required for practice as clinical and system leaders in diverse healthcare organizations. After completion of the program students are expected to demonstrate the following learning outcomes:

a. Integrate nursing science knowledge from the biophysical, psychosocial, analytical, and organizational sciences and ethics as the basis for practice.

b. Provide culturally relevant health promotion and disease prevention initiatives based on epidemiological, bio-statistical, environmental, and other scientific evidence for diverse populations

c. Demonstrate visionary organizational leadership by designing and implementing efficient, effective practice and policy models

d. Apply advanced levels of clinical scholarship, systems thinking and analytical methods in evidence-based management and practice.

e. Translate and disseminate knowledge to transform management and practice.

f. Leverage information systems and patient care technology for the improvement and transformation of health care.

g. Analyze, develop, and advocate for healthcare policies to improve healthcare systems across diverse constituencies.

h. Collaborate inter-professionally to improve patient and population outcomes through practice, education and leadership.
These outcomes are consistent with the American Association of Colleges of Nursing (AACN) *Essentials of Doctoral Education for Advanced Practice Nursing*.

3. **Academic Advising for DNP Students:**

Academic advisement for students enrolled in the nursing programs at Texas A&M University- Corpus Christi is provided by the Graduate Nursing Student Academic Advisor, DNP DNP Chair, DNP Program Coordinator, Graduate Nursing Department Chair, Associate Dean, and Dean.

Each student is responsible for awareness and successful completion of all degree requirements. The following individuals will facilitate student progress in accomplishing the DNP program outcomes:

a. **Graduate Nursing Academic Advisor** – this individual will assist students with class registration issues, course sequencing, graduation procedures, academic progression, navigating College of Graduate Studies’ procedures and utilizing existing university facilities, such as financial aid.

   - Each DNP student is responsible to meet or hold a phone conference with the Graduate Nursing Academic Advisor prior to or during each registration period. The purpose of this meeting is to inform the student of current offerings in the nursing program and review the student’s progress in the degree plan.
   - Students should consult the Graduate Nursing Academic Advisor when events affect their ability to complete courses, progress through the program or interfere with registration.
   - The Academic Advisor performs course inventories before graduation and students should be guided by this review of graduation requirements.

b. **DNP Chair** – The DNP Coordinator assigns each student a DNP Chair at the time of admission to the DNP program. The DNP Chair is a full time, TAMUCC tenure-track faculty member who is considered an expert in the student’s area of scholarly effort (or will support the student in finding such an expert) and will remain an advisor to the student through graduation unless a change is sought by the student or is necessary due to a change in faculty circumstances. The DNP Chair will be responsible for:
   i. Supporting students with Typhon
   ii. Assisting students to create Personal Practice Objectives (PPOs)
   iii. Evaluating students on their progress regarding PPOs Working with the student’s DNP Project Advisor to approve the focus of the DNP project
iv. Working with the DNP Team (Project Advisor and Content Expert) to evaluate the proposal and the finished project

v. Communicating with the student’s Preceptor or Facilitator to ensure student and project are progressing as expected and to troubleshoot problems

vi. Assisting students in planning their course of study, selecting courses congruent with their nursing degree plan and career goals and monitoring successful completion of the DNP Portfolio.

c. **DNP Project Advisor** – Each student will select their own DNP Project advisor with guidance from the DNP Chair. This is a full time, TAMUCC tenure-track faculty member who will provide expertise as the student identifies experiences relevant to the DNP project. The Project Advisor will serve as a guide to the student through the completion of the DNP Project and will work with the student’s Chair to approve the focus of the DNP project and assist in evaluation of the proposal and finished project report. The Project Advisor should be an expert in the DNP Project area of focus and should assist the student and Chair to determine the DNP Content Expert. Students must select their DNP Project Advisor in the first semester of their first program year (First Fall).

d. **DNP Content Expert** - Each student, with the guidance of the DNP Chair and Advisor, will select a content expert to support the completion of their DNP Project. This person is intended to provide specialized expertise to support students with content specific support, insights and/or networking opportunities. The Content Expert does not have to be a full time, TAMUCC tenure-track faculty member but must work within the guidelines of the TAMUCC CONHS DNP program. The Content Expert will participate in evaluation of the student’s final proposal and project report. This final member of the student’s DNP team must be selected by the end of the second semester of the first program year (First Spring).

e. **DNP Program Coordinator** - The DNP program coordinator is entrusted with the overall leadership of the DNP program. This individual is responsible for the design, implementation, and evaluation of the DNP program, including curriculum, clinical experience oversight, and compliance with national accreditation and certification standards. The DNP Program Coordinator is responsible for administering the policies related to the DNP program and supporting students as they progress through the program.

Students should seek assistance from course faculty as soon as they determine they are having difficulties in meeting course requirements, achieving learning outcomes, or meeting program goals.
Students are expected to contact course faculty, the Graduate Academic Advisor, the DNP Program Coordinator, Graduate Nursing Department Chair, or Associate Dean in the event academic difficulties occur that may impact program progression.

4. DNP Student Document Requirements:

Students are required upon admission to the program to submit documents confirming their licensure and compliance with Texas Administrative Code requirements for students enrolled in health profession programs.

a. **Nursing License.** Students must provide evidence they hold a current unencumbered license to practice nursing in the state of Texas throughout the program. The evidence shall be submitted to the CONHS through the student’s account in the data repository system maintained by the College. Students should upload a copy of the Texas Board of Nursing license verification document available through the Texas Board of Nursing. The period covered by the license must be included on the document provided to the College. Students should contact the CONHS Data Manager for additional information about these requirements.
   - Must provide current certification as an advanced practice nurse as part of their admission documents. One must hold national certification (ANCC or AANP) to practice as NP in the State of Texas.

b. **Immunization Requirements.** The Texas Department of State Health Services has specific immunization requirements for students enrolled in health profession programs. Some agencies where students may choose to complete practice experiences may have stricter requirements than the state minimum standards. Students will have to meet agency requirements to gain access to these agencies. Students are expected to provide evidence they have met the requirements for immunizations by uploading relevant documents to their account in the data repository maintained by the College. The data repository includes automated email messages to notify students when their immunizations have expired. Students must update immunizations while enrolled in the program as needed. Students should contact the CONHS Data Manager for additional information about these requirements.

   **Immunization requirements:** Texas Administrative Code, Title 25, Part 1, Chapter 97, Subchapter B, Rule 97.64 include the following:

   a. “Students may be provisionally enrolled for up to one semester to allow students to attend classes while obtaining the required vaccines and acceptable evidence of vaccination.”
b. “Students cannot be provisionally enrolled without at least one dose of measles, mumps, and rubella vaccine if direct patient contact will occur during the provisional enrollment period.”

c. “Polio vaccine is not required. Students enrolled in health-related courses are encouraged to ascertain that they are immune to poliomyelitis.”

d. “One dose of tetanus-diphtheria toxoid (Td) is required within the last ten years.”

e. “Students who were born on or after January 1, 1957, must show, prior to patient contact, acceptable evidence of vaccination of two doses of measles-containing vaccine administered since January 1, 1968.”

f. “Students must show, prior to patient contact, acceptable evidence of vaccination of one dose of rubella vaccine.”

g. “Students born on or after January 1, 1957, must show, prior to patient contact, acceptable evidence of vaccination of one dose of mumps vaccine.”

h. “Students shall receive a complete series of hepatitis B vaccine prior to the start of direct patient care or show serologic confirmation of immunity to hepatitis B virus.”

i. “Students shall receive two doses of varicella vaccine unless the first dose was received prior to thirteen years of age.”

- Complete a series of hepatitis. A vaccine or serologic confirmation of immunity to hepatitis A virus.
- Complete a series of hepatitis B vaccine or serologic confirmation of immunity to hepatitis B virus.
- Complete a tuberculosis screening annually.

The CONHS follows Rule 97.65 [Texas Education Code] in allowing for exceptions to the immunization requirements. These exceptions are:

a. “Serologic confirmations of immunity to measles, rubella, mumps, hepatitis A, hepatitis B, or varicella are acceptable. Evidence of measles, rubella, mumps, hepatitis A, hepatitis B, or varicella illness must consist of a laboratory report that indicates either confirmation of immunity or infection.”

b. “A parent or physician validated history of varicella disease (chickenpox) or varicella immunity is acceptable in lieu of vaccine. A written statement from a physician or the student’s parent or guardian, or school nurse, must support histories of varicella disease.”
c. **Hours Verification form.** This form is a formal record of the clinical hours obtained in the student’s master’s program. Up to 500 hours may be applied to the DNP Practice experience requirement of 1000 hours. This form accompanies the admission packet.

d. **CPR Certification.** Students must hold current American Heart Association CPR Type C certification. A copy of the student's current American Heart Association Health Care Providers card is required annually.

e. **Drug Screen Results.** Students must complete a 10 panel non-chain of custody urine drug screen upon admission to the DNP program. The results of the screen must be submitted to the CONHS through the data repository maintained by the CONHS. Some agencies may require additional drug screens.

f. **Student criminal background checks.** Students are required to complete a criminal background check after admission to the program. Generally, the background check is completed within the first semester of the program to meet the admission requirement. Occasionally an agency will require students complete another background check if the time between admission and a practice experience within the agency exceeds their time period for background checks. The additional background check will be a condition of the student’s access to the agency and cannot be waived by the College.

5. **Professional Liability Insurance:**

Students are required to purchase professional liability coverage through the University. Fees for this coverage are included in the fees paid at the time of registration at the beginning of each academic year.

6. **Curriculum Components:**

   a. The curriculum is designed for students who have earned their Master of Nursing Degree as a Nurse Practitioner. Students are assumed to have the knowledge and experience used in advanced nursing practice as the underlying foundation for further learning.

   b. Courses are delivered in a sequence that promotes the student’s development of skills in the design of health services not acquired through master-level nursing programs.

   c. Courses are arranged to support working registered nurses through a part-time program that can be completed in their home communities.
• Students will be required to travel to agencies they select for practice experiences.
• They may choose to meet faculty or other resources on the Texas A&M University-Corpus Christi campus to facilitate their learning.
• Students will be expected to attend periodic events on campus. Students will be notified of dates of events requiring on campus presence at least one semester in advance. Students are expected to discuss barriers to participation in any of these events with the DNP Program Coordinator.

d. All graduate students are required to have successfully completed a graduate level research course as well as a graduate-level inferential statistics course. The statistics course can be completed prior to admission OR before completing 12 semester hours of DNP course work. Students are responsible to document completion of these courses via a transcript that is submitted to the Graduate Nursing Academic Advisor. Credit earned for the research or inferential statistics courses does not count for credit in the DNP program.

e. The DNP curriculum is 40 semester credit hours. Course activities are both didactic and experiential. The didactic component of courses is delivered through the Blackboard Learn web-based, learning management system.

f. Graduation requirements include the satisfactory completion of:
   • All courses (with a final grade of B or better). Courses not passed with at least a B may result in an alternate degree plan and delay program completion.
   • The design, implementation and evaluation of a DNP project.
      o Students may need to retake either NURS 6310 or 6210 to complete project requirements.
   • The preparation of a professional portfolio documenting a total of 1000 hours in post-baccalaureate practice experiences (The practice experience hours may include up to 500 clinical hours completed in a student’s accredited MSN program).
      o Students may need to retake either NURS 6310 or 6210 to complete practice hour requirements.
   • If any of the above criteria are not met, students should meet with their DNP Chair to discuss options.

7. Course Sequence:

a. Students should consult the course faculty immediately when they encounter problems that may interfere with the successful completion of a course in any semester.

b. In order to progress, students must meet prerequisites for individual courses. Course prerequisites are based on sequencing of course content. Students who do
not meet these requirements risk not successfully completing a course or slowing the degree progression.

c. Courses will be taught once a calendar year so students should consult the DNP Program Coordinator if they are unable to follow the current degree plan. An alternate degree plan may be available.

**Texas A&M University-Corpus Christi DNP Degree Plan for Nurse Practitioners**

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8. **Course Activities:**

Each DNP course can be accessed in a unique Blackboard shell through the A&M University-Corpus Christi link. Course materials are organized within the shell using the College of Nursing and Health Sciences Blackboard template (syllabus, course schedule, course-specific lessons). Links to support services including the library, ODELT (Office of Distance & Educational Learning Technology) tutorials, and IT Help Desk are available in each shell. All course-related communication including documentation of grades, clarification of assignments, and discussions should occur in the course shell. Generally, face-to-face activities between faculty and classmates will not be required to complete course-specific assignment.

Course work consists of a combination of synchronous and asynchronous activities that support student learning. Faculty may use a variety of web-based technologies such as
YouTube videos or WebEx group conferencing as well as the learning tools embedded in the Blackboard Learn learning management system (chats, discussions, assignment management) to support student learning.

Students are expected to maintain access to the Internet so that they can regularly participate in class activities. The A&M University-Corpus Christi IT Help Desk maintains student support services seven days a week and can be reached by email or phone. Students should contact the ITHelp services when they cannot access the course shell. Additionally, students should contact the course faculty as soon as possible when they have long-term problems that will interfere with their access to course materials through Blackboard.

Each course should present a class schedule, which will delineate deadlines for assignments and provide a framework for establishing a work plan to complete course requirements. Most courses include lessons presented through a text format. These lessons generally include references to material on sites outside of the course made available through links. The lessons supplement the required readings. Self-assessments are often used as activities for students to evaluate their understanding of the information covered in lessons.

Most courses will include activities completed in practice settings through practice experiences. These activities provide appropriate opportunities for students to demonstrate their ability to implement the principles covered in a course and complete the practice hours required for the program. Students are expected to complete course assignments in a timely manner.

9. Written Assignment Requirements:

Because this is a doctoral program, student performance will be assessed primarily through application activities that include the design, implementation, and evaluation of interventions that support quality health care. All assignments submitted to faculty must be submitted in the current APA format unless specifically instructed for that assignment. Any deviation from this requirement will be explicitly stated in a course syllabus. Students are strongly advised to purchase a copy of the Publication Manual of the American Psychological Association and avoid relying only on electronic templates. Using only electronic aids for APA formatting may create problems because electronic templates do not always work correctly when documents are transmitted electronically. SQUIRE 2.0 (Standards for QUality Improvement Reporting Excellence) will be used to document the DNP Project. Students should become familiar with this framework as early in the program as possible: http://journals.lww.com/jncqjournal/Fulltext/2016/01000/SQUIRE_2_0_Standards_for_QUality_Improvement_1.aspx.

10. Proctored Test Procedure:
The A&M University-Corpus Christi College of Nursing and Health Sciences strives to create an environment that supports the University standards for academic integrity. The College administers tests in the DNP program at secure testing sites. Students can select a test site near their home from a list of approved sites: any testing fees will be paid by the student directly to the test site.

To facilitate the use of test sites, course faculty work together to establish a test schedule for the academic semester. Students are expected to adjust their work schedules so that they can take the test when it is scheduled. Each course syllabus will outline the testing procedure in detail and delineate the class policy for rescheduling tests. Each faculty member has discretion to establish the course policy for rescheduling test dates.

11. Practice Experiences:

Students enrolled in the DNP program are required to complete up to 1,000 hours of post-baccalaureate practice experiences (often classified as clinical practice) during the program (AACN DNP Essentials). A practice experience is an experiential learning activity completed under the guidance of content experts in a relevant setting through which the student acquires and applies knowledge, skills, and attitudes that expand a student’s professional framework.

Practice experiences should be completed under the guidance of the student’s DNP Chair and a preceptor OR facilitator. Preceptors are experienced professionals who, guide students in their work within the experience, and provide feedback regarding performance. Facilitators are professionals who provide access to sites and resources but do not provide supervision for student practice. Students should identify preceptors/facilitators in their community who will help them access resources, key stakeholders, and opportunities in which the student can complete the work relevant to their DNP project and program objectives

• Each semester, prior to initiating each practice experience, students are expected to review the learning outcomes they plan to achieve from the practice experience. The student should consult their DNP Chair when delineating these learning outcomes.
• The DNP Chair will consult with course-specific faculty when the experiences are directly related to a course.
• The DNP Chair (in consultation with the DNP Project Advisor) must approve all practice experiences.
• Practice experiences may be completed in the student’s practice site if the experience provides an opportunity to achieve learning objectives and avoids conflict of interest with employer. Students completing hours in their workplace should work closely with their DNP Chair and employer so work hours can be delineated from practice hours.

Practice experiences can be:
• Synthesis experiences completed within courses that contribute (a) to meeting the DNP Essentials and (b) to the design of the DNP project and contribute to a student’s further development as an expert.

• Immersion experiences in which students engage in activities specific to patient populations relevant to their project.
  - Direct care clinical experiences may be required for further refinement of the student’s skill and knowledge in clinical settings and completion of the DNP Project. For direct care experiences, preceptors must meet the qualifications for graduate nursing education preceptors as specified by the Texas Board of Nursing. These qualifications are outlined in the Preceptor Guide For MSN Clinical Courses which is located on the CONHS website under the Graduate Students link: (http://conhs.tamucc.edu/current-students/index.html)

Students entering the program with 500 practice hours from their MSN program should use the following benchmarks to evaluate their progress with practice experience hours. Hours are listed in a running total through progression of program.
Within the first 2 semesters, practice hours are not required but are encouraged at the discretion of the student’s course faculty & DNP Chair.

**First Fall**
- NURS 6300 Leadership in Health Policy
- NURS 6200 Informatics and Technology
- NURS 6221 Economics of Advanced Practice

**First Spring**
- NURS 6301 Epidemiology and Statistics for Evidence-Based Practice
- NURS 6302 Genomics in Health Care

Within the remaining 4 semesters, practice hours are required for successful course completion. Students MUST consult their DNP Chair for guidance on Personal Practice Objectives.

**First Summer**
Students should have logged the following in Typhon by the end of their first summer semester:
- 6303 - System Behavior and Impact on HealthCare Quality
  - A minimum of 20 Immersion hrs
- 6304 - Application of Evidence in Practice I
  - A minimum of 40 Synthesis hrs
- 6320 - Advanced Principles for Clinical Practice I
  - A minimum total of 120 Immersion hrs
- 6201 - Application of Evidence in Practice II
- 6211 – Introduction to Scholarly Project
- 6210 - Practicum

**Second Fall**
Students should have logged the following in Typhon by the end of the second Fall semester:
- 6321 - Advanced Principles for Clinical Practice II
- 6210 - Practicum
- 6310 – Practicum
- 6311 - DNP Project and Seminar

**Second Spring**
Students should have logged the following in Typhon by the end of the 2nd Spring semester:
- 6310 – Practicum
- 6311 - DNP Project and Seminar

**Final Summer**
Students should have logged the following in Typhon by the end of their final summer semester:
- 6310 – Practicum
- 6311 - DNP Project and Seminar

**Total DNP Program Hours:** 500

*Students who come to the program with less than 500 practice hours from their MSN should meet with their DNP Chair and the DNP program Coordinator to determine a plan for successfully completing the required 1,000 practice hours.*

**Practice experience Evaluation Tool.** (Appendix I) This evaluation tool is to be completed by the Preceptor at the end of each DNP practice experience to assess the extent to which a student met the identified learning objectives. Additional competency forms may be developed and used for specific activities such as clinical practice in order to measure the student’s level of competency achieved through that activity/experience.
12. Behavioral Expectations for Practice Experiences:

Students engaged in practice experiences are expected to:

a. Maintain necessary RN licensure, ACLS, BCLS or PALS certification for completion of clinical experiences.

b. Follow program requirements for establishing partnerships with preceptors and clinical agencies that support learning experiences.

c. Maintain a professional appearance when engaged in practice experiences. Professional appearance includes avoiding extremes in style of clothing and no exposed tattoos or body piercings. Wear a nametag that indicates student is acting in the role of a Texas A&M University-Corpus Christi Doctor of Nursing Practice student.

d. Nametags may be obtained at any local office supply store or online and should include the student’s name, credentials, and identify them as a TAMUCC CONHS DNP Student

e. Communicate regularly with individuals directly involved in practice experiences. These individuals include: course faculty, DNP Project Advisor, preceptor, DNP DNP Chair and any other relevant member of the team.

f. Record required information in the DNP practice experience log.

13. Practice experience Contracts:

TAMUCC requires a Preceptor Agreement to be completed for clinical experiences (Appendix H). TAMUCC does not require a “contract” with facilities or clinics. Should a hospital, clinic, long-term care, or other clinical site require a formal contract, then a Contract Initiation Worksheet (Appendix H) should be completed and forwarded to the Graduate Clinical Coordinator. TAMUCC has contracts with many healthcare systems throughout the state and the Contract Initiation Worksheet will be the first step in determining if a contract exists. If a new contract is needed, please allow two to three months to finalize.

14. DNP Portfolio:

The DNP Portfolio is a compilation of practice experience details, artifacts and other evidence demonstrating the student’s development of advanced competencies throughout the DNP program. No two portfolios will be identical because the documents representing each student’s experience will vary depending on specific learning activities completed during the program. The complete portfolio must be submitted with the DNP
Project as evidence of program completion. It will be reviewed by the student’s DNP Chair and the DNP Program Coordinator. The Project Advisor and Content Expert will review evidence related to the DNP Project.

15. DNP Project:

Students must complete a DNP Project to meet program requirements. The DNP Project is used to demonstrate the student’s ability to translate scientific evidence for clinical practice. Each student is expected to identify a potential change in practice that targets a practice or health problem not satisfactorily managed through current standards of care. The DNP Project requires the student design, implement, and evaluate the effect of the change in practice on patients, patient populations, or health systems. Project outcomes should include improvement in quality and cost-effectiveness of care. Please see the DNP Project Proposal Rubric to guide the development of their project proposal (Appendix J).

The DNP Project provides students opportunities to examine structures and processes encountered in clinical practice that interfere with the effectiveness of health services. Activities completed in courses should provide student insight into practice problems and stimulate the design of interventions that improve services through the application of research based evidence to practice settings. Examples of potential DNP Projects include but are not limited to:

- evidence-based intervention or change initiative,
- program evaluation,
- pilot study,
- evaluation of a practice model,
- consultation project,
- research utilization project,
- policy initiative

The student, with faculty support, is responsible for the selection of the DNP Project focus. Students are expected to focus their DNP Project on the health care issue or clinical problem identified in the application essay and admission interview. These two processes are utilized to match the student, projected DNP Project, and COHNS faculty for the DNP program and project. Students will maintain communication with the COHNS faculty, DNP Chair, DNP Project Advisor, and Content Expert. If required, the DNP Project Advisor and Chair will assist students in the rapid identification of an alternate topic. It is critical students establish the project focus early in the program as successful completion will likely require five of six program semesters. Throughout the DNP program, students will demonstrate expert nursing leadership behaviors and professional collaboration in completing the DNP Project. The culminating products include but are not limited to a DNP Project Report and an activity through which the student disseminates the results of the DNP Project. See the DNP Project Documents (Appendix J) for further direction.
Students, in consultation with their Chair, are responsible for writing the DNP Project Proposal, preparing and submitting IRB proposals as indicated, completing the DNP Project Report, and preparing a Project Executive Summary for the DNP Portfolio.

*SQUIRE 2.0 (Standards for QUality Improvement Reporting Excellence) will be used to document the DNP Project. Students should become familiar with this framework as early in the program as possible: [http://journals.lww.com/jncjjournal/Fulltext/2016/01000/SQUIRE_2_0_Standards_for_QUality_Improvement_L.aspx](http://journals.lww.com/jncjjournal/Fulltext/2016/01000/SQUIRE_2_0_Standards_for_QUality_Improvement_L.aspx).*

16. DNP Project Team:

The DNP Project is directed by a DNP Team who works with the student to create relevant protocols that enhance the delivery of quality health services and improve health outcomes for diverse patient populations. The team consists of a minimum of 3 faculty members, the DNP Chair, the DNP Project Advisor, and the Content Expert.

17. Manuscript Author Guidelines:

Students who choose to disseminate their work through manuscript publication submission or oral/poster presentation at a professional conference are encouraged to do so and must follow the International Committee of Medical Journal Editors authorship guidelines found at: [http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html](http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html).
18. TYPHON Information:

Students will record and describe all time spent in clinical practice experiences and document elements relevant to program completion in the Typhon Tracking System. Students will be responsible for a one-time fee to create a Typhon account that will be used throughout the DNP program. The information students enter into Typhon will be used to create their Student Portfolio. Students may also find the Typhon Preceptor Guide useful for identifying clinical sites and preceptors.

Students are responsible for documenting activities completed in every practice experience in TYPHON. These practice experiences can be direct or indirect patient care events, observational experiences, interviews, relevant community events, minutes/agendas from professional meetings, or any other activity that contributes to the students understanding of DNP practice. The record should contain the specific learning outcomes students delineated for the experience and explanations as to how they demonstrated their achievement of learning outcomes through experiential activities.

19. Institutional Review Board:

Students are expected to protect human participants and disseminate the results of their DNP Project through manuscript submission or professional presentations. Therefore, students, in consultation with their DNP Chair, should plan early submission of their project protocol to the CONHS Human Ethics Review Committee (HEOC). This committee is made up of a subset of DNP Faculty and a TAMUCC Institutional Review Board (IRB) member, who review all DNP project protocols to determine if the project meets the definition of human subjects research (HSR) pursuant to 45 CFR 46; and to ensure the project, if not deemed HSR, is conducted in an ethical manner consistent with privacy and confidentiality requirements regarding protected health information (PHI). The Human Ethics Oversight Review Form (provided to students in the NURS-6211 course) and the project protocol is then submitted to the A&M University-Corpus Christi Institutional Review Board (IRB). [http://research.tamucc.edu/compliance/index.html](http://research.tamucc.edu/compliance/index.html). The IRB proposal must be approved before a project involving human subjects can be implemented. The agency in which you are completing the project may also require that its IRB review the protocol prior to implementation.

20. Curricular Changes:

The DNP curriculum was designed to support student acquisition of principles essential to the professional practice at its highest level. The CONHS reserves the right to modify the curriculum when professional standards for doctoral education in nursing indicate a change is needed. The Associate Dean of Academic Programs, working with the DNP Program Coordinator, will notify students of impending changes as soon as possible.
IV. Policies and Regulations

1. University Catalog:

Students are responsible for the policies contained within the catalog. The Texas A&M University-Corpus Christi Catalog is available at:  http://catalog.tamucc.edu/.

2. University Student Handbook:

The Texas A & M University-Corpus Christi Student Handbook is available at:  http://studentaffairs.tamucc.edu/handbook.html

3. College of Graduate Studies Doctoral Student Handbook:

The Texas A & M University-Corpus Christi Doctoral Student Handbook is available from the College of Graduate Studies at: http://gradschool.tamucc.edu/current_students/assets/doctoral_handbook.pdf

Selected policies relevant to the DNP program can be found in Appendices.

4. Academic Honesty and Professional Integrity Policy:

Texas A&M University-Corpus Christi strives to protect its educational community and to maintain social discipline among its students and student organizations. The University endeavors to foster the development of students who are ethically sensitive and responsible community members. Since students serve as representatives of the A&M-Corpus Christi campus community, inappropriate behavior, whether occurring on or off campus, will be investigated and adjudicated in a manner pursuant with the institution’s educational and community development goals. Consistent with this purpose, reasonable efforts will be made to foster the personal and social development of those students who are found responsible for violations of University regulations and local, state, or federal law. The Texas A&M University-Corpus Christi. Student Code of Conduct is available on-line: http://judicialaffairs.tamucc.edu/studentcofc.html.

Honesty is defined as truthfulness and integrity. Academic dishonesty is broadly defined as an act that functions to give a student unfair scholastic advantage. More specifically academic dishonesty is presenting any one or all course assignments as the student’s original work when it/they are not; unless indicated by documented approval of the professor or pre-approved group work assignments. Course assignments include but are not limited to: examinations, written assignments, quizzes, research projects and oral presentations.

Article III of the Student Code of Conduct addresses academic honesty. Specific violations of the Student Code of Conduc include, but are not limited to:
5. **Academic Misconduct:**

Engaging in an act that violates the standards of the academic integrity policy as described in the *Student Code of Conduct* and *Procedure for Academic Misconduct Cases*. Any behavior specifically prohibited by a faculty member in the course syllabus or class discussion may be considered as academic misconduct.

Additionally, possessing, using, buying, stealing, transporting, selling or soliciting in whole or in part items including, but not limited to the contents of an un-administered test, test key, homework solutions or possession at any time of current or previous test materials without the instructor’s permission will be considered academic misconduct.

**Cheating:** intentionally using or attempting to use unauthorized materials, information, notes, study aids or other devices or materials in any academic exercise.

Examples:

- Copying from another student’s paper or receiving unauthorized assistance during a quiz, test or examination.
- Using books, notes or other devices (e.g. calculators, cell phones, or computers) when these are not authorized.
- The acquisition, without permission, of tests or other academic material belonging to a member of the University faculty or staff.
- Unauthorized collaboration on exams.
- Selling, giving or exchanging completed exams to a student who has not yet taken the test.

**Plagiarism:** intentionally and knowingly presenting the work of another as one’s own with the exception of information that is generally accepted as common knowledge.

Examples:

- Using another’s work from print, web or other sources without acknowledging the source.
- Quoting from a source without citation.
- Using facts, figures, graphs, charts or information without acknowledgement of the source.
- Using a past assignment, the student has completed as a portion of a new assignments, without providing citation. Please note that without instructor permission this is also considered a multiple submission violation.
Multiple Submissions: submission of substantial portions of the same work (including oral reports) for credit more than once without authorization from the instructors for which the student submits the work.

Examples:

- Submitting the same paper for credit in two courses without instructor permission.
- Making minor revisions in a credited paper or report (including oral presentations) and submitting it again as if it were new work.

Collusion: Intentionally or knowingly helping or attempting to help another to commit an act of academic dishonesty. This includes, but is not limited to, the unauthorized collaboration with another individual in progressing forward on academic assignments.

Examples:

- Knowingly allowing another to copy from one’s paper during an examination or test.
- Distributing test questions or substantive information about the material to be tested before a scheduled exercise.
- Deliberately furnishing false information in regards to an academic integrity investigation.
- Working with another student on a take home test or homework assignments without permission from the instructor.
- Discussing the contents of a completed exam or other assignments with a student who will take the exam or complete the assignment in the future.

Fabrication, Falsification, or Misrepresentation: intentional altering or investing of any information or citation that is used in assessing academic work.

Examples:

- Inventing, counterfeiting or omitting data and/or results such that the research is not accurately represented in the research record.
- Falsely citing the source of information.
- Altering the record of or reporting false information about the practice experiences.
- Altering grade reports or other academic records.

6. Professional Integrity:

Students enrolled in the College of Nursing at Texas A&M University-CC are expected to demonstrate professional integrity in academic and practice areas. Professional
conduct should be guided by the following: university, college of nursing, hospital, agency and community guidelines, rules, regulations and laws related to behavior as determined by these entities.

Conduct Guidelines. For specific University Code of Conduct, see http://judicialaffairs.tamucc.edu/studentcofc.html. For the Texas Board of Nursing student conduct guidelines, see the Nurse Practice Act available at: https://www.bon.texas.gov/ and the guidelines for Unprofessional Conduct at: http://www.bon.texas.gov/rr_current/217-12.asp

Violations of Professional Integrity: According to the College of Nursing, violations of professional integrity (unprofessional conduct) include those identified by the University Student Code of Conduct, College of Nursing and the assigned clinical area such as hospital, agency and community.

7. Student Records:

Student records are maintained by the Academic Advisor in the College. The Open Record Policy is followed and students can review their own records. Records must remain in the CONHS for the review. They cannot be taken outside the College.

All nursing students are responsible for updating official changes in names and contact information (mailing address, phone number, email address) in the appropriate student database. They are also responsible for notifying the Graduate Nursing Academic Advisor, College of Graduate Studies and Registrar's of these changes. Students may not receive important information that affects progression through the program or eligibility for graduation if contact information is not current.

8. Recency of Credit:

Credit that is more than seven years old will not be counted toward a degree. The seven-year period begins the first semester students are enrolled and is calculated from the date of degree conferral. Exceptions, provided the courses were completed at this university, will require strong justification in writing from the student requesting the exception. Also required will be a revalidation plan accompanied by a current degree plan.

9. Revalidation of Courses:

Courses listed on the plan of study completed more than seven years prior to graduation are considered dated. The faculty advisor or college graduate committee recommends a revalidation plan. Revalidation will verify that the student’s knowledge in a specific subject area is current. Written examinations normally are required.

Successfully revalidated courses may be included in the student’s plan of study. Failure to follow all designated requirements of the revalidation agreement may result in
dismissal from the program. Subsequent requests for revalidation may be considered, but will be denied absent a showing of extraordinary hardship. Graduate students will not be permitted to submit more than 12 semester hours of the program’s required courses for revalidation. Courses must have been completed at this university to be eligible for revalidation. All revalidation plans must be approved by the student’s advisor, the department chair, the College Dean, the Graduate Dean, and the Provost.

Use the Graduate Degree Plan Revalidation Request form to initiate the process. A current degree plan must be submitted along with the revalidation plan.

Options for course revalidation include written examinations, 3–5-page essay, a project, course retake, or other equally rigorous academic means appropriate to the discipline to determine the student learning outcomes have been met. Revalidation requests should be submitted on the Revalidation Request Form and accompanied by a written justification, updated degree plan, revalidation plan, and documentation used for revalidation.

All revalidation requests and plans must be approved by the student’s advisor, the department chair, the College Dean, the Graduate Dean, and the Provost. The student’s advisor, department chair, and College Dean are responsible for determining whether the student demonstrated sufficient course knowledge necessary for successful course revalidation. Successfully revalidated courses may be included in the student's plan of study. Failure to follow all designated requirements of the revalidation agreement may result in dismissal from the program. Subsequent requests for revalidation may be considered, but will be denied absent a showing of extraordinary hardship. Graduate students will not be permitted to submit more than 12 semester hours of their program’s courses for revalidation. Courses beyond the 12-semester hour limit will need to be retaken. Courses must have been completed at this University to be eligible for revalidation.

10. Grading Scale:

The CONHS letter grading scales for all programs consist of the following:

A - 90 to 100
B - 83 to 89
C - 75 to 82
D - 74 to 67
F - 66 and Below

11. College of Nursing and Health Sciences Student Grade Appeal Process:

The College of Nursing and Health Sciences (CONHS) adheres to the University’s Student Grade Appeal Procedure found in Procedure Section 13.02.99.C2.01 on the University website
12. Progression, Retention, and Dismissal
   a. Each semester, student progression is evaluated by the DNP Chair based on the program milestones. Holds may be placed by the DNP Coordinator to ensure compliance with program milestones.
   b. All students must meet the standards for minimal performance and progression established by Texas A&M University-Corpus Christi Office of Graduate Studies.
   c. If a student earns a grade of C, D, F, or W, the student:
      i. Must repeat a course in which a grade of C or lower or W (Withdrawal) was earned.
      ii. May be placed on scholastic probation if the GPA falls below 3.0 because of the C, D, F, or W.
      iii. Will be removed from scholastic probation in accordance with university policy. See Scholastic Probation and Enforced Withdrawal in the graduate catalog.
      iv. May not progress to courses for which that course is a prerequisite when a grade of C, D, F, W or I (Incomplete) was earned.
   d. If the student earns a second C or below in the program, the student cannot progress further and is required to withdraw from the program even when the GPA does not fall below 3.0.
   e. The student cannot progress to next course after withdrawing from two courses in the program unless approved by the APG Committee. A plan to complete the program must be submitted to the Committee before a progression decision can be made. Admission to courses that need to be completed will depend on space availability.
   f. The student may be dismissed from the program without previous warning for unsafe and/or unprofessional behavior identified by College administrators and faculty. The conduct of nursing students should meet ethical standards as defined by the American Nurses Association (ANA) in the Code of Ethics. Personal integrity is reflected in professional judgments. Consequently, the College reserves the right to dismiss students from the program for unprofessional or unsafe behavior. See College of Nursing and Health Sciences Student Handbook for examples.
General Assumptions

a. The CONHS faculty in the classroom environment and clinical area should encourage discussion, inquiry, and expression. Student performance, however, should be evaluated solely on an academic basis and the Standards of Care upheld in the rules and regulations of the Texas Board of Nursing.

b. Faculty are responsible for documenting objectives in the syllabus, setting standards for each course, and making clear the means of evaluation for purposes of grading students. Students are responsible for class attendance and/or online participation, for learning the content of any course of study and for maintaining standards of academic performance established for each course in which they are enrolled. Students who violate academic integrity and regulations (see current University Catalog and Student Handbook) or demonstrate disruptive behavior will be held accountable by faculty and may have their grades adjusted accordingly.

c. Student Grade Appeal Procedure does not apply to grades that may be affected by academic misconduct or dishonesty cases. Academic misconduct is defined in the University Student Handbook Article III, Section I, the procedure is outlined in University Procedure 13.02.99.C3.01

d. The University and the CONHS has the duty and corollary disciplinary power to maintain standards of scholarship and conduct for students who attend classes. Students shall have protection through orderly procedures against prejudices or capricious academic evaluation.

e. A student who believes that he or she has not been held to appropriate academic standards as outlined in the class syllabus—equitable evaluation procedures or appropriate grading—may appeal the final grade given in the course.

Grade Appeal Process: The student should note the following tenets when deciding whether or not to appeal a grade:

- The basis of the appeal request must focus on specific departures from guidelines and standards in the course syllabus. (TBON)
- The burden of proof shall rest with the student.
- The standard of proof shall be a preponderance of the evidence.

Most problems or complaints can be resolved through discussions between the student and the faculty. Therefore, the student is encouraged to first discuss the matter with the faculty. In those instances in which the problem cannot be resolved at this level, the student may initiate the appeal process. The student has the right to withdraw an appeal.
or grievance at any time during the process. If an appeal is not processed in a timely manner in accordance with the procedures, the student may proceed to the next level. If the student does not follow the timeline for the appeal, the grade appeal will be dismissed by the CONHS. This dismissal report will be documented in the student’s record and sent to the Provost of the University.

Grade Appeal Procedure and Timeline:

a. The student will present the matter of grievance, in writing, to the faculty through the appropriate Department Chair using the Student Report Form (Available in the TAMUCC CONHS Student Handbook: http://conhs.tamucc.edu/current-students/index.html). This must be done within fifteen business days after the beginning of the next semester (Spring, Summer or Fall).

b. Within 7 business days after receiving the written grievance, the faculty member will either sustain the original grade assigned or make a change. The faculty member will notify the student in writing or by email regarding this action. If the faculty does not act within this period, the student may appeal to the Department Chair.

c. If the faculty member is no longer employed at the University, the College Dean will determine the appropriate procedure for submission to the College.

d. If the student believes the matter is not satisfactorily resolved at the student-faculty level, the grievance may be submitted to the appropriate Department Chair. The student will present the appeal in writing within one week (five business days) after the faculty has acted, or, if there has been no action by the faculty, within two weeks (ten business days) after the time period for action has ended. If the student does not submit an appeal by these dates, the University is not required to process the grievance.

e. The Department Chair will review all facts and evidence in the grievance, consulting with the student and the faculty, and attempt a successful mediation within fifteen business days of receiving the grievance.

f. The Department Chair will issue to the student and faculty a written statement of findings, indicating that this stage of the appeal process is completed. If the grievance is not further appealed, (within five business days of the decision) it will be considered resolved.

Preliminary Review and Advising: If the student wishes to further appeal the decision of the Chair, the Chair will refer the student and faculty member to the Associate Dean of the college. The Associate Dean is not part of the College Grade Appeals Committee. Rather her/his role is to objectively analyze the case and advise the principals involved as
to possible ways to mediate the issue before going through a formal grade appeal. The student may withdraw the appeal at any time in the process.

Submission: Upon notification by the Associate Dean that a grade appeal has been received, the Department Chair will furnish the Associate Dean the student appeal file within seven business days. This file will include the written appeal, the course description and syllabus, course criteria for grading, student work submitted for evaluation, the grade distribution for the course, and the statement of findings. Any other available and appropriate correspondence and documentation pertaining to the appeal will also be furnished. Along with the written appeal, the student must deliver any graded course work that was returned to the student by the instructor or provide a copy of the work. The request must be submitted within fifteen business days following the issuance of the statement of findings in step 2.2.1. If the student does not submit a written appeal within fifteen business days, the University is not required to process the grievance.

The Associate Dean will notify the Chair of the College Grade Appeals Committee, the Department Chair, and the faculty member of record that a grade appeal has been received. The Chair of the Appeals Committee will convene the committee and the hearing within fifteen business days from the Associate Dean’s notification of the Appeal.

College Grade Appeal Committee: The College Grade Appeal Committee (CGAC) will be made up of three faculty members (one of whom will serve as Chair of the CGAC) and two students. A total of four members will constitute a quorum. The Committee member selection process includes:

a. The CONHS Dean will appoint three faculty members at the beginning of the Academic year (September – August) to serve on the CGAC. Three alternate faculties will also be appointed to fill any vacancies during the academic year. All fulltime, clinical, tenured and tenure track faculty are eligible for appointment to the CGAC. All appointees will serve one academic year. The Associate Dean will be excluded from the pool of applicants because of his/her role in the appeal process. If the Associate Dean is named in the appeal as a faculty participant, the Associate Dean for Graduate Studies will review the appeal and call for the convening of the CGAC.

b. Students participating on the CGAC will be selected from a pool of students from all departments (HS, Undergraduate and Graduate Nursing). All students except those in their respective first semester of study (in their major) who meet criteria are eligible for election into the pool. Each course (except first semester courses) will elect one student who meets the specific criteria to be entered into the pool of students for the GAC. The student who is bringing forth the grade appeal to the CGAC will have the opportunity to draw four names. The first two names will be
appointed to the CGAC. The second two names will be alternates. The drawing of the names will be done in the presence of the Associate Dean.

c. All faculty appointments and alternates are to make every effort to meet the requirements of service on the CGAC. If appointed faculty or alternate faculties are unable to serve on a scheduled CGAC grade appeal the Dean will appoint a replacement for the particular appeal.

**College Grade Appeals Committee Process:** The CGAC shall conduct its review according to the process established by the CONHS. *The decision of the CGAC is final and may not be appealed.* The process includes:

a. During the appeal process, the burden of proof rests with the student. The standard of proof shall be a preponderance of the evidence.

b. The proceedings, findings, and recommendations shall not be open to the general public or available to any individuals other than those involved with the case.

c. The Chair of the CGAC will preside at the hearing, maintain orderly proceedings and assure that all parties receive a fair hearing. The Chair will be a voting member of the CGAC. The Chair will keep appropriate records of meetings and actions of the CGAC and is responsible for all communications by the CGAC with other officials and parties to a hearing. The Chair will have the right to adjust procedures, given the circumstances at issue, to ensure fairness.

d. Evidence and Testimony: The Committee shall hear all parties to the case and review all evidence presented. Both the faculty member and student shall be present at the same time during the formal hearing. Students not residing at or near Texas A&M University-Corpus Christi may request to attend the hearing via video conference call, as appropriate.

e. Counsel: All parties to the hearing may be accompanied by another person in an advisory capacity only. Such person may not testify or ask questions.

f. Decision: The College Grade Appeal Committee will determine the facts of the case and attempt to affect a fair and appropriate resolution to the complaint. Depending on the circumstances of the case, the CGAC may recommend to the Associate Dean of the College that 1) the original grade of the instructor be upheld, or 2) that the grade in question be changed to a specific alternate grade. (In cases where the instructor is no longer affiliated with Texas A&M University-Corpus Christi, the Dean may initiate the change of grade, if so requested). The Committee decision cannot be appealed.
g. Notification of Findings: The Chair of the CGAC will present its findings and recommendations, in writing, to the Associate Dean (or Dean, if the Associate Dean is a party to the case) within five business days after completion of its hearings and deliberations. The notification should include a short summary of the facts of the case, the hearing, and the specific recommendations of the committee. The Associate Dean (or Dean) will send written notification of the decision to the student and the faculty member involved within five business days after receiving the CGAC’s findings and recommendations.

The College of Nursing and Health Sciences will maintain a log providing a record of all grade appeals. The CONHS will collect and maintain all files documenting the individual appeals. These records will be housed in the Dean’s suite and will be retained for a period of time consistent with the Texas A&M System Records Retention Policy. Logs and records will be available upon request to demonstrate compliance with Southern Association of Colleges and Schools accreditation standards.

12. Standards for Student Behavior:

The education of the students at Texas A&M University-Corpus Christi College of Nursing and Health Sciences is based on the concept that integrity, a sense of responsibility and self-discipline are inherent to the profession of nursing. The responsibility of the individual student to sustain high ethical standards is parallel to the concept that the professional nurse must be accountable for professional standards in the practice of nursing (published in the Texas Administrative Code, Texas Board of Nursing, Standards of Nursing Practice, and amended November 15, 2007). The continuation and enhancement of ethical standards within the academic community and nursing profession are the individual responsibility of each student and faculty member. Mutual respect and trustworthiness between the faculty and students promotes optimal learning.

13. Social Media:

Social media has become very popular in the public’s life as a way to communicate. The student is referred to the National Council of State Boards of Nursing (NCSBN) White Paper on Social Media 2011 for guidance in the use of social media in nursing. www.ncsbn.org/Social_Media.pdf The DNP student will be held accountable to professional standards related to confidentiality in all activities related to program requirements.
14. Unacceptable Behavior:

The following are considered unacceptable behaviors:

a. Falsification of Data - Dishonesty in reporting results, ranging from sheer fabrication of data, improper adjustment of results and gross negligence in collecting and analyzing data, to selective reporting or omission of conflicting data for deceptive purposes.

b. Aiding and Abetting Dishonesty - Providing material, information or assistance to another person with the knowledge or reasonable expectation that the material, information or assistance will be used to commit an act that would be prohibited by this Code or that is prohibited by law or another applicable code of conduct.

c. Unsafe Practice: Any action or inaction on the part of the student, which threatens the client's physical well-being or fails to protect self and others from harm.

d. Failure to Communicate: Any action or inaction on the part of the student in which communication patterns threaten the emotional well-being of the client. This area of concern includes but is not limited to the following omissions or commissions of behavior that result in failure to:

- Verify written procedure(s) to clients.
- Report changes in clients' conditions.
- Document findings.
- Use verbal and nonverbal communication that demonstrates respect, understanding, and caring.
- Avoid abusive, threatening, patronizing, or familiar communication patterns.
- Maintain client confidentiality.

15. Nurse-Patient Relationships:

The students at Texas A&M University-Corpus Christi are expected to exhibit behavior appropriate to the profession of nursing. Students must assume personal responsibility for being in physical and mental condition to give safe nursing care and for the knowledge and skills necessary to give this care. Unacceptable behavior includes, but is not limited to, the following:

- To provide nursing care in a predictably unsafe or harmful manner.
- To disrespect the privacy of a client.
- To falsify patient records or fabricate patient experiences.
- To fail to report omission of, or error in, treatments or medications.

16. Safety Precautions:
Fundamental Principles of Infection Prevention as outlined by the Centers for Disease Control (cdc.gov) should be used consistently for ALL patients by students and healthcare services personnel in various settings, including laboratory courses requiring exposure to blood using disposable equipment. Standard Precautions represent the minimum infection prevention measures that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where healthcare is delivered. These evidence-based practices are designed to both protect healthcare personnel and prevent the spread of infections among patients. Standard Precautions replaces earlier guidance relating to Universal Precautions and Body Substance Isolation.

Standard Precautions include:

a. Hand hygiene - Appropriate hand hygiene shall be performed before and after examining each patient. Hands and other skin surfaces shall be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands shall be washed after gloves are removed.

b. Use of personal protective equipment (e.g., gloves, gowns, facemasks), depending on the anticipated exposure - All health-care workers shall routinely use appropriate barrier precaution to prevent skin and mucous-membrane exposure when contact with blood or other body fluids or any person is anticipated. Gloves shall be worn for touching blood and bloody fluids, mucous membranes, or non-intact skin of all persons, handling items or surfaces soiled with blood or bloody fluids, and for performing venipuncture and other vascular access procedures. Gloves shall be changed after contact with each patient.

c. Masks and protective eyewear or face shields shall be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose, and eyes.

d. Gown or aprons shall be worn during procedures that are likely to generate splashes of blood or other body fluids.

e. Respiratory hygiene and cough etiquette - To prevent contact with mouth and oral secretions during patient resuscitation health care workers should use mouthpiece, resuscitation bag, and other ventilation devices to prevent contact with mouth and oral secretions.

All healthcare workers shall take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needle-stick injuries, used needles shall not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles,
scalpel blades, and other sharp items shall be placed in puncture-resistant containers for disposal; the puncture-resistant containers shall be located as close as practical to the use area.

Health-care workers who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment until the condition resolves. Students should discuss this situation with their preceptors and course faculty so arrangements can be made to make up time missed in the experience. Students must notify their preceptors when they are cannot meet scheduled appointments.

17. Practice experience Equipment:

DNP students in clinical experiences involving patient care are required to have the following basic equipment:

- quality stethoscope with bell and diaphragm (adult and pediatric)
- appropriate nametag

18. Progression:

Students are referred to the University Graduate Catalog and to course prerequisites in order to determine if they may progress in the degree, particularly after experiencing academic difficulty. Advice and counseling is discussed in Academic Advising section. Students who have failed or withdrawn from a course need to speak with the DNP Program Coordinator to determine their eligibility to progress further in the program.

19. Graduation:

A DNP student may receive a degree upon satisfying the requirements of the catalog under which the student enrolled in the program, provided the catalog is no more than seven years old when the degree is conferred and the University still offers programs and required curriculum described in that catalog. A student may petition to graduate under a subsequent catalog under which credit was earned because of a preference to meet newer degree requirements.

Students intending to have a degree conferred must notify their academic advisor. Students who plan to participate in a graduation exercise and/or receive a diploma must complete an application for graduation by the deadline indicated in the Academic Calendar. An application for graduation must be obtained and processed through the student's academic advisor. Students must also complete a Doctoral Student Checklist, completing all requirements by the provided deadline, specific to DNP students, prior to graduation. (The Doctoral Student Checklist for DNP Students can be found in the Appendices.) Students participating in the graduation exercise will also be required to obtain an appropriate cap and gown. The application for graduation is not transferable to
a subsequent semester. If a student does not graduate, the application will be canceled. A new application must be obtained and processed through the student’s academic advisor.
## V. Appendices

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Appendix A: Brief History of the College of Nursing & Health Sciences

In 1972, a delegation of community nursing leaders led by Elizabeth Willis, Chairperson of Registered Nurses Education at Del Mar College, met with the first Dean of the College of Science and Technology, Dr. Ralph Gilchrist, to study a number of successful upper-level nursing programs in the United States. Application for an Upper-Level Nursing Program at University of Corpus Christi (UCC) was made to the Texas Higher Education Coordinating and Texas College and University System. In July 1974, University of Corpus Christi (UCC) one of three universities in the state received approval to implement the multiple entry/exit model curriculum designed by the Study Committee on Nursing Education of the Coordinating Board.

In 1989, the Texas Legislature merged the University of Corpus Christi with The Texas A&M University System and approved returning the campus to four-year status. The BSN program was a designated a School of Nursing in the College of Science and Technology. In 1993, the University name was changed to Texas A&M University-Corpus Christi. The Texas A&M University System approved the creation of the College of Nursing and Health Sciences in December, 2003 and the Texas Higher Education Coordinating Board formalized its approval in February 2004. On September 1st, 2004, the CONHS officially joined the colleges of A&M University-Corpus Christi with Dr. Mary Jane Hamilton as founding dean.

The Undergraduate Nursing Program

The Baccalaureate (Bachelor of Science in Nursing) Nursing Program at Texas A&M University-Corpus Christi (TAMU-CC) then known as the University of Corpus Christi (UCC) was established in 1974. Research conducted by the Study Committee of Nursing Education of the Coordinating Board, Texas College and University System, had identified the need for increased numbers of nurses in Texas prepared to practice at all educational levels. The need was exceptionally strong for nurses prepared for teaching and leadership. The results also indicated the need for an upper-level nursing program in South Texas. Graduates of the five associate degree nursing programs in the region who wanted to further their education found that the nearest baccalaureate nursing programs were 160 to 220 miles away. The majority of those who moved away from the area to go to college never returned. This migration left an even greater deficit in the numbers of graduates available to work in South Texas. (Toward Quality Health Care: The Improvement of Nursing and Nursing Education in Texas, 1974.)

The Baccalaureate Program for Registered Nurses at the University of Corpus Christi (UCC) (TAMU-CC) began on a limited scale in the fall of 1974, becoming fully operational in the fall of 1975. Dr. Ruth M. Bakke was the first director of the Baccalaureate Nursing Program. Initial accreditation by the National League for Nursing (NLN) was attained December, 1979, retroactive for eight months. The UCC RN-BSN program was the first in Texas to be accredited by NLN. Continuing accreditation was
granted by the NLN Board of Review in March, 1985. In the fall semester of 1992 the
program was again reaccredited NLN for a 10 year period expiring in 2002. Program
administrators also sought accreditation from the Commission on Collegiate Nursing
Education (CCNE). Initial CCNE accreditation was granted in 1998 followed by
reaccreditation in 2005. The current TAMU-CC BSN program was reviewed by CCNE in
the fall 2015 semester and the review team report was favorable.

In 2001, the administrators in the A&M University-Corpus Christi School of Nursing
received funding from the Learning Anytime Anywhere Partnership (LAAP) and the
Fund for the Improvement of Postsecondary Education (FIPSE) to develop a web-
based online BSN track. Associate Degree in Nursing (ADN) and Bachelor of Science in
Nursing (BSN) programs formed an educational partnership to create an online program
that would facilitate a seamless transition for students who completed ADN programs
into the BSN program. Through this partnership, the eLine© track was established and
became operational in 2003. The online modular-based nursing education became first
online generic Bachelor of Science in Nursing in the nation.

In 2010 administrators in the CONHS received a grant from the Health Resources and
Services Administration (HRSA) to the transition of veterans to students and their
professional development as registered nurses. The White House and the Department of
Defense has repeatedly recognized the program for its unique mission to fill two critical
needs in our nation: a nursing shortage and civilian employment for military veterans.
The eLine© Military (ELM) track is a competency-based online program with face-to-
face clinical experience, which facilitates access to a full curriculum to obtain a BSN
degree and pathway to Registered Nurse (RN) licensure. The program developed an
individualized Prior Learning Assessment (PLA) process to award college credit for prior
learning from medical training and experience obtained while serving in the military. The
eLine© Military Nursing track was the recipient of the 2013 American Association of
Colleges of Nursing (AACN) Innovations in Professional Nursing Education Award.

The Graduate Nursing Program

The Graduate Nursing Program at the Texas A&M University-Corpus Christi was
established in 1984 as one of the Corpus Christi State University graduate programs. The
program offered registered nurses the opportunity to expand their scope of practice in one
of three specialty areas: advanced clinical practice, nursing administration, or nursing
education. Students earned their Master of Science in Nursing (MSN) upon completion of
core and specialty course work in tracks now known as Family Nurse Practitioner,
Leadership in Nursing Systems, and Nurse Educator areas of study. Starting in 1996,
nurses who had not earned the BSN degree were also admitted to the MSN program
through the RN-MSN entry option. The MSN program initially was accredited by the
National League for Nursing in the academic year 1988-1989. The Master of Science in
Nursing program has maintained accreditation since 1989 and is now currently accredited
by CCNE.
With the goal of meeting regional and state needs and as a component of the faculty’s commitment to educating the nursing and healthcare leaders for tomorrow, the graduate nursing program has been offered to students in distant sites. Outreach sites supported students living and working in the Rio Grande Valley, Laredo, Temple, Victoria and Weslaco, Texas. The faculty initially drove to these sites, moving shortly to incorporating audio-conferencing technology, then fixed-image transmission, progressing to slow scan video-conferencing as the method of course delivery. Faculty had access to the slow scan television after Corpus Christi State University joined the A&M University System in 1989.

Enrollment in A&M University-Corpus Christi MSN program grew with access to televised real-time classes. Faculty supplemented these televised class interactions through regular travel to the regional sites. By 2002 web-based computer delivery of classes was the norm. The interactive high-definition distance education technology available through the Internet provided access to graduate nursing education for working nurses living and working in rural areas. Neither students nor faculty had to travel to engage in learning activities. The MSN program now offers all of its tracks only through web-based course management systems.

The CONHS expanded its graduate programs to include a cooperative Doctor of Philosophy in Nursing Science program in 2012. This program is delivered as a partnership between the Denton campus of the Texas Woman’s University (TWU) and A&M University-Corpus Christi. Students enrolled in this program earn their degree from TWU. Members of the A&M University-Corpus Christi faculty provide student support through their roles on advisory and research committees. The first student graduated from this partnership in 2013.

The Doctor of Nursing Practice program is the newest CONHS graduate program. The planning period for the A&M University-Corpus Christi DNP program was extensive. Nurse Practitioner focus would support the preparation of registered nurses for advanced clinical roles in South Texas through a quality online, part-time doctoral education program. The online, part-time format would give Texas nurses an alternative to the full-time, face-to-face formats offered by other Texas universities.

The Texas Higher Education Coordinating Board approved the A&M University-Corpus Christi DNP program in April 2015. The approval stipulated the program should open in Fall 2016 for Nurse Practitioners only. Nurse practitioner students admitted to the DNP program in the Fall 2016 semester will be the first cohort for the A&M University-Corpus Christi DNP program.
Health Care Administration and Health Sciences

An interdisciplinary committee began the Health Care Administration (HCA) graduate certificate program minor in 1992. The minor is available to graduate students choosing health care as a focus for future administrative positions in support of the Master's in Public Administration or Business Administration programs. The first group of students to complete the certificate program graduated with their M.P.A. in May of 1995. Dr. Claudia Johnston served as the founding Program Coordinator.

The Bachelor of Science in Health Sciences (HLSC) provides enrichment opportunities at the baccalaureate level for students with technical degrees in Allied Health. The program has been revised to accommodate freshmen seeking a variety of career opportunities in the health care field. The Health Science major supports student acquisition of the management skills necessary for success. This program was approved by the Texas Higher Education Coordinating Board and the in the 1994. The first graduates completed the program in December 1996. Dr. Whitney Bischoff served as the first program coordinator and Dr. William Koprowski joined the faculty in the fall of 1995 as the program coordinator. The current program coordinator, Dr. Sherdeana Owens, joined the faculty in 2010. The Health Sciences Student Association was established in the Fall, 2011 semester. This organization provides opportunities for leadership, networking, community service and socialization.

CONHS Administrative Structure

Currently (2017) the CONHS administrative structure consists of the Dean, Associate Dean, Associate Dean for Graduate Nursing Programs, Undergraduate Nursing Department Chair, and Graduate Chair Nursing Department Chairs. Program Coordinators support the Department Chairs to manage the delivery of high quality undergraduate and graduate professional programs.

Accreditation

The BSN, MSN, and post-graduate APRN certificate at Texas A&M-Corpus Christi are accredited by the Commission on Collegiate Nursing Education (CCNE) (http://www.aacn.nche.edu/ccne-accreditation).

The Commission on Collegiate Nursing Education
One Dupont Circle, NW, Suite 530
Washington, DC 20036-1120
Phone: (202) 887-6791
Fax: (202) 887-8476

Texas A&M University – Corpus Christi is accredited by Southern Association of Colleges and Schools (SACS) (http://www.sacs.org/)
The CONHS nursing programs are approved by the Texas Board of Nursing (https://www.bon.texas.gov/).

The Texas Board of Nursing (BON)
333 Guadalupe Street, Suite #3-460
Austin, TX 78701-3944
Phone: (512) 305-7400
Fax: (512) 305-7401
Appendix B: College Organization and Infrastructure

Texas A&M University - Corpus Christi is a four-year comprehensive university composed of six colleges (Science & Engineering, Education, Business, Nursing and Health Sciences, Liberal Arts, and College of Graduate Studies). There are more than 61 undergraduate and graduate degree programs among the colleges. The College of Nursing and Health Sciences graduate programs are also components of the College of Graduate Studies (COGS). Students are admitted to the Master of Science in Nursing and Doctor of Nursing Practice programs through the COGS. The COGS Dean must approve all transfer credit and modifications to the standard degree plan. The COGS Dean is also responsible for ensuring all students have completed program requirements and are eligible for graduation from A&M University-Corpus Christi.

The College of Nursing and Health Sciences is administered by a Dean who reports to the Provost and Vice-President for Academic Affairs. The Associate Deans are responsible for the planning, development, administration and management of all undergraduate and graduate nursing, health sciences and health care administration programs.

Organizational Structure of the College

See University website- College of Nursing and Health Sciences:

Students are encouraged to interface within the structure on several different planes:

1. Student input to curriculum and policy is facilitated by a student representative on the curriculum committees at both the undergraduate and the graduate levels.

2. Students who have a concern about an individual course first should seek clarification with the course instructor. If the concern persists, then the student should consult with the Course Manager, Coordinator if applicable, Department Chair, and the Associate Dean - in that order.

3. If the student has concerns about issues related to the outreach site, the Site Clinical Coordinator should be contacted about the issues, then the Graduate and Undergraduate Department Chairs, and the Associate Dean.

4. Secretaries are available to the students for tasks that are delineated by the faculty, such as collecting papers or documenting immunizations.

5. The College and Health Sciences advisors work with students by appointment on degree plans, admission and graduation requirements.
Undergraduate Department Committee

Membership. Members of the committee will be faculty with teaching 50% or greater responsibilities in the Undergraduate Program. Students, elected by the student body representing their program, will be non-voting participants on this committee. The chair of the Undergraduate Department will serve as Chair of the Undergraduate Department Committee. Two thirds eligible members shall constitute a quorum.

Meetings. Department meetings will be held monthly. Minutes of the meeting will be recorded and filed electronically to the designated repository.

Functions.

- Handles issues related to the pre-licensure and articulated baccalaureate nursing and health science programs.
- Review and evaluate the undergraduate curriculum.
- Recommend new courses and program offerings.
- Present proposed curriculum changes to the FOW.
- Provide a forum for the review of student input regarding curricular matters.
- Maintain SACS, BON, CCNE, and other specialty standards.
- Establish academic standards for the undergraduate program.
- Conduct a systematic evaluation of the undergraduate program.

Graduate Department Committee

Membership. Members of the faculty with 50% or greater teaching responsibilities in the graduate nursing programs. Graduate students, elected by the student body, will be non-voting participants on this committee. The chair of the Graduate Department will serve as Chair of the Graduate Department Committee. Two thirds eligible members shall constitute a quorum.

Meetings. Department meetings held monthly. Minutes of meeting will be recorded and filed electronically in designated repository.

Functions.

- Handles issues related to the graduate nursing programs
- Reviews and evaluates the graduate curriculum
- Recommends new course and program offerings to the FOW
- Presents proposed curriculum changes to the FOW
• Provide a forum for the review of student input regarding curricular matters
• Maintain SACS, BON, CCNE and other specialty accrediting standards.

Appendix C: Student Rights, Responsibilities & Obligations

Student Rights

1. Students should be encouraged to further develop the capacity for critical judgment and engage in a sustained and independent search for truth.

2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom: students should exercise their freedom in a responsible manner.

3. Each institution has a duty to develop policies and procedures which provide and safeguard the students’ freedom to learn.

4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, color, creed, national origin, ethnicity, age, gender, marital status, life style, disability, or economic status.

5. Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.

6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluation, but they are responsible for maintaining standards of academic performance established for each course in which they are enrolled.

7. Information about student views, beliefs, political ideation, or sexual orientation which instructors acquire in the course of their work or otherwise, should be considered confidential and not released without the knowledge or consent of the student, and should not be used as a basis of evaluation.

8. The student should have the right to have a responsible voice in the determination of his/her curriculum.
9. Institutions should have a carefully considered policy as to the information which
should be a part of a student's permanent educational record and as to the conditions of
this disclosure.

10. Students and student organizations should be free to examine and discuss all questions
of interest to them, and to express opinions publicly and privately.

11. Students should be allowed to invite and to hear any person of their own choosing
within the institution's acceptable realm, thereby taking the responsibility of furthering
their education.

12. The student body should have clearly defined means to participate in the formulation
and application of institutional policy affecting academic and student affairs, e.g.,
through a faculty-student council, student membership or representation on faculty
committees.

13. The institution has an obligation to clarify those standards of behavior which it
considers essential to its educational mission, its community life, or its objectives and
philosophy.

14. Disciplinary proceedings should be instituted only for violations of standards of conduct
formulated with significant student participation and published in advance through such
means as a student handbook or a generally available set of institutional regulations. It
is the responsibility of the student to know these regulations. Grievance procedures
should be available for every student.

15. As citizens and members of an academic community, students are subject to the
obligations which accrue to them by virtue of this membership and should enjoy the
same freedoms of citizenship.

16. Students have the right to belong or refuse to belong to any organization of their choice.

17. Students have the right to personal privacy in their living space to the extent that
the welfare and property of others are respected.

18. Adequate safety precautions should be provided by nursing programs, for
example, adequate street lighting, locks, and other safety measures deemed
necessary by the environment.
19. Dress code, if present in school, and/or if fulfilling academic requirements in professional settings, should be established with student input in conjunction with faculty, so the highest professional standards are maintained.

20. Grading systems should be carefully reviewed periodically with students and faculty for clarification and better student-faculty understanding.

21. Students should have a clear mechanism for input into the evaluation of nursing faculty.

The Texas A&M University-Corpus Christi CONHS adopted student rights from the NSNA Student Bill of Rights and Responsibilities. The Student Bill of Rights and Responsibilities was initially adopted in 1975. The document was updated by the NSNA House of Delegates in San Antonio, Texas (1991); and item #4 was revised by the NSNA House of Delegates in Baltimore, Maryland (2006).

Student Responsibilities

The CONHS student responsibilities are consistent with University Rule 13.02 Student Rights and Obligations. Students should assume responsibility for:

1. Representative participation in curriculum development by:

   - Attending all scheduled meetings
   - Preparing ideas, comments, reactions, and suggestions
   - Sharing ideas, comments, reactions and suggestions
   - Polling students for their views, comments, reactions and suggestions
   - Formulating mechanisms to increase input
   - Following through with assignments regarding curricula activities

2. Participation in curriculum implementation by:

   - Adherence with class participation as indicated in course syllabi
   - Following through with class and laboratory assignments
   - Preparing in advance for scheduled classes and laboratory sessions
   - Maximizing all learning opportunities
   - Resisting a focus limited to minimal achievement
   - Sharing learning experiences with peers
   - Striving constantly to broaden one’s education base
• Transferring previous learning
• Fostering and growing effective relationships with members of the interdisciplinary health team
• Abiding by established policies and procedures
• Assuming responsibility for one’s own learning experiences
• Seeking innovative learning experiences
• Finding opportunities for advanced decision making, independent judgment and self-direction
• Making fully operational philosophical and conceptual frameworks
• Contributing to research and conducting scholarly activities
• Preparing one's own projects, papers, and other assignments
• Maximizing learning through independent and collaborative study

3. Participation in the evaluation of the curriculum by:

• Appraising self in relation to stated course, level and end-of-program behavioral expectations
• Appraising faculty and course structure in relation to their facilitation of the meeting of stated course, level and program goals

4. Adhere to the following ethical principles:

a. Advocate for the rights of all clients
b. Maintain client confidentiality.
c. Take appropriate action to ensure the safety of clients, self, and others.
d. Ensure the provision of care for the client in a timely, compassionate and professional manner.
e. Communicate client care in a truthful, timely and accurate manner.
f. Actively promote the highest level of moral and ethical principles and accept responsibility for one’s own actions.
g. Promote excellence in nursing by encouraging lifelong learning and professional development.
h. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
i. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
j. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of DNP students.
k. Refrain from performing any technique or procedure for which the student has not been adequately prepared.
l. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
m. Assist the staff nurse or preceptor in ensuring that there is full disclosure and that proper authorizations are obtained from clients regarding any form of treatment or research.
n. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
o. Strive to achieve and maintain an optimal level of personal health.
p. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse and mental or physical health issues.
q. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.


"The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person." - from Nursing Code of Ethics, 2015

Student Rights and Obligations

University Rule 13.02
Approved February 27, 1995 (MO 44-95)
Revised September 26, 1997 (MO 181-97)
Revised September 26, 2008 (MO 328-2008)
Revised August 8, 2013 (MO 192-2013)
Next Scheduled Review: August 8, 2018

Policy Statement. This policy outlines the core rights of students at the universities (academic institutions) of The Texas A&M University System and the responsibilities with which they are associated.
**Reason for Policy.** This policy provides students, faculty, and staff with a clear message regarding the value of students as individuals and the contributions they can make when given the freedom to do so. It also recognizes that their opportunity for education is only limited by the respect which they give to fellow students, faculty, staff and others.

**Procedures and Responsibilities**

a. The rights of students are to be respected. These rights include respect for personal feelings, freedom from indignity of any type, freedom from control by any person except as may be in accord with published rules of the system academic institutions, and conditions allowing them to make the best use of their time and talents toward the objectives which brought them to the system academic institutions. No officer or student, regardless of position or rank, shall violate those rights; no custom, tradition or rule in conflict will be allowed to prevail.

b. Students are expected at all times to recognize constituted authority, to conform to the ordinary rules of good conduct, to be truthful, to respect the rights of others, to protect private and public property, and to make the best use of their time toward an education.
Appendix D: Resources

Student fees paid entitle you to a number of varied student resources. Below is contact information for resources available to you by category.

**Financial Assistance**
Graduate Scholarships and Assistantships
http://gradschool.tamucc.edu/funding
361-825-2177

Office of Student Financial Assistance
http://osfa.tamucc.edu
361-825-3338

**Student Services**
Admissions & Records
http://admissions.tamucc.edu
361-825-2624

Business Office
http://businessoffice.tamucc.edu
361-825-2600

Career Services
http://career-services.tamucc.edu
361-825-2628

IT Help Desk
http://it.tamucc.edu
361-825-2692

Disability Services
http://disabilityservices.tamucc.edu
361-825-5816

Office of International Education
http://oie.tamucc.edu
361-825-3922

University Center & Student Activities
http://ucsa.tamucc.edu
361-825-5200 or 361-825-2707

University Police Department
http://police.tamucc.edu
361-825-4444

University Services
http://universityservices.tamucc.edu
361-825-5710

Veterans Affairs Office
http://vets.tamucc.edu
361-825-2331

**Academic Resources**
Center for Academic Student Achievement (CASA) Writing Center
http://casa.tamucc.edu
361-825-5933

Mary and Jeff Bell Library
http://rattler.tamucc.edu
361-825-2643

Office of Academic Testing
http://testing.tamucc.edu
361-825-2334

SAIL
http://sail.tamucc.edu
361-825-2825

The Island Online (Blackboard)
https://iol.tamucc.edu
361-825-2825

**Health and Wellness**
Recreational Sports
http://recsports.tamucc.edu
361-825-2454

Student Health Plan
https://tamucc.myahpcare.com
800-452-5772
Additional Resources include:

1. Nursing Learning Resource Center:

The Nursing Learning Resource Center (NLRC) is composed of various rooms available to students. These are located on the second floor of Island Hall. The hours of availability are posted each semester. Staff available to assist you includes a Lab Manager/Coordinator and Research/Computer Graduate Students.

Students enrolled in the Doctor of Nursing Practice program may want to use the NLRC resources to implement their DNP project. The Project advisor will be able to assess the extent to which the Resource Center may fit the Project design and then guide the student in accessing the NLRC resources.

2. DynaMed Plus:

A clinical reference tool that clinicians go to for answers to clinical questions. Content is written by a world-class team of physicians and researchers who synthesize the evidence and provide objective analysis. DynaMed Plus topics are based on clinical evidence and the content is updated multiple times each day to ensure clinicians have the information they need to make decisions at the point of care. It includes robust features like overviews and recommendations, graphics and images, precise search results every time, expert reviewers, specialty content and mobile access.

3. Graduate Nursing Research Lab:

The CONHS created a Nursing Research Lab to support scholarship activities conducted by faculty and doctoral students. Students may have access to space when it is available.

4. The University has an array of resources to support doctoral students.

   a. The University Student Handbook can be downloaded from www.tamucc.edu/studentaffairs.tamucc.edu/handbook.html.

   b. The Texas A&M University-Corpus Christi Doctoral Student Handbook is available from the College of Graduate Studies from http://gradschool.tamucc.edu/current_students/doctoral_students.html.
Appendix E: Student and Professional Organizations

Student Organizations

Sigma Theta Tau International/Eta Omicron Chapter at TAMU-CC. The Sigma Theta Tau International Honor Society of Nursing is the only international honor society for nursing and is a member of the Association of College Honor Societies. The society recognizes achievement of superior quality, fosters high professional standards, encourages creative work and recognizes the development of leadership qualities. The organization strengthens the individual’s commitment to the ideals and purposes of professional nursing. Sigma Theta Tau is a scholarly professional nursing that promotes the best in nursing.

TAMUCC students who meet the eligibility criteria for membership as outlined in Sigma Theta Tau are eligible to join induction into Eta Omicron, TAMUCC’s founding chapter. Eligible students receive invitations to join the chapter in their final semester via their Islander email account. A formal induction ceremony is held each spring and fall. You can receive updates about TAMUCC’s Eta Omicron chapter from the chapter’s Facebook page which is updated often with upcoming events and pictures from ceremonies and contact information.

Phi Kappa Phi. The Honor Society of Phi Kappa Phi—the nation’s oldest all-discipline honor society — established its Texas A&M University–Corpus Christi chapter in 2014. The A&M University–Corpus Christi chapter is the 328th chapter of Phi Kappa Phi, which was founded in 1897 at the University of Maine. Graduate Students who meet the eligibility criteria will be invited by the chapter to join Phi Kappa Phi (no nomination letters needed). Graduate students must have completed 18 credit hours and rank in the top 10% of their class.

Professional Organizations

Texas Nurses Association (TNA). TNA along with the ANA empowers nurses to advance the profession. TNA speaks out on crucial nursing issues such as workplace advocacy. Membership in TNA and ANA enables you to become a full participant in defining your profession now and into the future. Many of TNA's activities occur at the local — or district — level.

American Nurses Association (ANA). The American Nurses Association (ANA) is the premier organization representing the interests of the nation’s 3.4 million registered nurses. ANA advances the nursing profession by fostering high standards of nursing practice, promoting a safe and ethical work environment, bolstering the health and wellness of nurses and advocating on health care issues that affect nurses and the public. ANA is at the forefront of improving the quality of health care for all. (retrieved from http://www.nursingworld.org/FunctionalMenuCategories/AboutANA May 3, 2016).

Texas Nurse Practitioners (TNP). The primary mission of TNP is to serve as a voice of Texas Nurse Practitioners dedicated to improving patient access to quality health care. A registered
nurse currently enrolled in the first year of a NP program is eligible for free membership. Free Student Members may have a voice in discussions, and may serve as non-elected committee chairs or members but may not vote or serve as officers. Free Membership is for one year and can be renewed at the Student membership rate after the first year. Students are encouraged to investigate and/or join other affiliates within their local communities. Please refer to the listing of affiliates in your area of the state.

**The American Association of Nurse Practitioners (AANP).** The AANP is the national organization for nurse practitioners. Specific information for post-master’s student membership is also available and may be of particular interest to you if you are an NP in TAMUCC’s DNP program.

**American Organizations of Nurse Executives (AONE).** The American Organization of Nurse Executives provides leadership, professional development, advocacy and research to advance nursing practice and patient care, promote nursing leadership excellence and shape public policy for health care nationwide. AONE is a subsidiary of the [American Hospital Association](http://www.aone.org/about/overview.shtml) (retrieved from http://www.aone.org/about/overview.shtml)

**National League for Nursing (NLN).** For more than 100 years the NLN has been the premier organization for nurse faculty, schools of nursing, and leaders in nursing education. Currently the NLN is comprised of 40,000 individual and 1,200 institutional members representing all types of nursing programs from LPN/LVN through doctorate education. (retrieved from [http://www.nln.org/membership/overview May 3, 2016](http://www.nln.org/membership/overview May 3, 2016)).

**American Association of Colleges of Nursing (AACN).** AACN is the national voice for baccalaureate and graduate nursing education. AACN works to establish quality standards for nursing education; assists schools in implementing those standards; influences the nursing profession to improve health care; and promotes public support for professional nursing education, research, and practice. (retrieved from [http://www.aacn.nche.edu/about-aacn May 3, 2016](http://www.aacn.nche.edu/about-aacn May 3, 2016)).

**American Colleges of Healthcare Executives.** The American College of Healthcare Executives (ACHE) is an international association of healthcare executives often including high-level hospital administrators, CEOs, nursing executives, etc. Multiple local chapters exist throughout Texas. Please see www.ache.org.
Appendix F: Selected Policies from the College of Graduate Studies

Registration

The Office of the Registrar coordinates the course registration process for all current and incoming students. [http://registrar.tamucc.edu/registration/](http://registrar.tamucc.edu/registration/)

Current and incoming students are able to register online through their S.A.I.L. account or at the Office of the Registrar.

b. Office of the Registrar: Located in the Student Service Center
   - Phone: 361-825-2624
   - Website: [http://registrar.tamucc.edu/](http://registrar.tamucc.edu/)

Enrollment Status

Enrollment status for graduate students is defined below.

<table>
<thead>
<tr>
<th>Status</th>
<th>Fall or spring terms</th>
<th>Combined summer terms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>9 hours</td>
<td>6 hours</td>
</tr>
<tr>
<td>Three-quarter-time</td>
<td>7 hours</td>
<td>5 hours</td>
</tr>
<tr>
<td>Half-time</td>
<td>5 hours</td>
<td>3 hours</td>
</tr>
</tbody>
</table>

Total Hours

Normally a doctoral degree will consist of a minimum of 90 hours beyond the bachelor’s degree for students admitted to a doctoral program directly after completion of the undergraduate degree. For students who have completed a master’s degree, a minimum of 60 hours is normally required for the doctoral degree. The majority of the doctoral degree plan course work must be doctoral-level courses.

Continuous Doctoral Enrollment and Residency

Unless on an approved leave of absence, students in terminal degree programs **must be registered continuously for a minimum of 3 semester credit hours per long semester** (fall and spring semesters) during the academic year and pay the designated tuition and fees. Individual programs may have additional credit hour requirements. Students working on research/scholarly activity toward their dissertation should enroll in the number of credit hours that reflects the extent of a student's study or research activity. International students may have additional registration requirements depending on their visa status and should consult with the
Office of International Education to obtain current information. Unapproved Leaves of Absence may result in the student being required to reapply to his/her program.

In addition, some terminal degree programs require students to continuously register in courses for a minimum of two consecutive terms, which may include summer. The purpose of the residency is to permit professional interaction with program faculty and students. The residency provides an opportunity for sustained intellectual effort/creative output by enhancing exposure to new concepts in the discipline, to research methodologies and to development of research competency with the outcome resulting in a dissertation containing original research or a solo MFA final thesis and exhibition. For specific residency requirements, consult the degree requirements sections of the individual terminal degree programs.

Students must be enrolled the semester in which the dissertation defense/final examination occurs and in the semester in which they graduate.

**Graduate Courses**

Graduate courses are numbered 5000 or higher. Courses at the 5000 level are open only to students with graduate standing and senior undergraduate students who meet specific criteria. Courses at the 6000 level and higher are limited to students admitted to a doctoral program, or graduate students who meet specific criteria. Please consult the individual graduate program for additional details or requirements.

**Maximum Course Load**

As a graduate student, you may not register for more than 12 hours in a regular semester without the approval of your College Dean. You may not register for more than 6 hours of course work in a single session of summer school without the approval of your College Dean.

**Repetition of a Course**

Repetition of a Course to Raise a Grade: A course in which the final grade is C or lower may be repeated. A course in which the final grade is a B may be repeated only with the permission of the Graduate Dean. A maximum of two courses may be retaken during graduate study at the University. Each course may be repeated only one time. All grades received for the course will be computed in the grade point average.

Repetition of a Course for Multiple Credit: A course may be repeated for multiple credit towards graduation only when so designated in the course description and approved by the faculty advisor.

**Request for Leave**
Students experiencing **life-changing or catastrophic events** (e.g., serious illness of a student or immediate family member, death of an immediate family member, divorce, etc.) are encouraged to consult with their department chair and request a leave of absence in writing from the College of Graduate Studies using **Form K: Request for a Leave of Absence**, especially if the Recency of Credit Rule will be impacted. Consideration for requests submitted after the degree time limit has expired will be impacted by evidence of successful continuous progress towards the degree, programmatic changes, and faculty availability.

**Requests for a leave of absence must be approved by the faculty advisor, the Program Coordinator, the College Dean, and the Graduate Dean.** If the Graduate Dean approves the petition, the registration requirement will be set aside during the period of leave. Leaves will be granted only under conditions that require the suspension of all activities associated with pursuing the degree including use of University facilities and faculty mentoring/advice. Counting of the time to the completion of the degree pauses when a leave of absence is granted and resumes when the student re-enrolls to continue the program. Unapproved leaves of absence may result in the student being required to re-apply to his/her program.

A student who is in good standing may petition for a leave of absence of no more than one academic year (consecutive semesters) and the maximum number of leave of absence requests is two. In case of extenuating circumstances, a one-semester leave of absence can be extended to a maximum of two consecutive full semesters by the student’s Faculty Advisor and or Program Coordinator and the Graduate Dean. A student who returns to the University after an approved leave of absence will not be required to submit an application for readmission to the College of Graduate Studies. International students should visit with an advisor in the Office of International Education to find out how a Leave of Absence may impact their stay or re-entry into the U.S.

Title IX regulations also require the University to treat pregnancy, childbirth, false pregnancy, termination of pregnancy, and recovery therefrom as a justification for a leave of absence for so long a period of time as is deemed medically necessary by the student’s physician. At the conclusion of the leave of absence the student will be reinstated to the status that she held when the leave began. Students requesting leave of absence under this provision must submit their request to the **Title IX Coordinator or Deputy Title IX Coordinator (825-2765)**, who will initiate the process. The Associate Provost and Vice President for Academic Affairs will notify the instructors and coordinate the student’s reinstatement as appropriate.

**Transfer of Credit**

In addition to the general Transfer of Credit Policy in the Graduate Catalog, specific requirements must be met for courses that may transfer for terminal degree credit. The following rules apply to these courses, with the exception of degrees offered jointly.
a. Credit used for a degree at another institution cannot be applied to a graduate degree at A&M-Corpus Christi.

b. Transferred graduate credit must have been earned at a regionally accredited institution.

c. The student must have earned a grade of B or better in the transfer course work. Courses lacking letter grades (e.g., courses graded pass/no pass, credit/no credit, or satisfactory/unsatisfactory) will not be accepted as transfer credit.

d. The coursework must be less than 10 years old at the time the A&M-Corpus Christi degree is awarded.

e. The student must have been enrolled as a terminal degree student when the coursework was completed.

f. The maximum amount of transfer credit from another doctoral degree program accepted toward the A&M-Corpus Christi degree is one-fourth of the credit hours required for the A&M-Corpus Christi degree.

Please see individual programs for specific requirements related to Transfer Credits.

**Grade Point Average**

In order to remain in good standing, as well as maintain eligibility for University funding such as scholarships and assistantships, the University requires students to maintain a minimum grade point average of 3.0 (“B”) for all graduate work undertaken. Texas A&M-Corpus Christi uses a 4.0 scale for calculation of Grade Point Average (GPA).

Only grades earned at this University will be used to calculate the A&M-Corpus Christi grade point average as used in determination of eligibility for graduation.

Grades are made available to students at the end of each grading period at [http://sail.tamucc.edu](http://sail.tamucc.edu)

**Scholastic Probation**

The University places a student on probation if their cumulative graduate grade-point average falls **below 3.0** at the end of a semester.

*Placement on Scholastic Probation*: A graduate student will be placed on scholastic probation if, at the end of any semester or term, the student’s cumulative graduate grade point average falls below 3.0 (or higher GPA set by the program). A graduate student receiving a grade of U or NC in research will also be placed on scholastic probation.
A student can be on scholastic probation only once (see section on Enforced Withdrawal below).

Removal from Scholastic Probation: A student must achieve a cumulative 3.0 GPA (or higher GPA if required by the program) within completion of the next nine (9) semester credit hours to be removed from scholastic probation if scholastic probation was due to an unsatisfactory GPA. The courses included in the nine (9) semester hours must be approved by the program faculty for degree-seeking students.

a. A student who receives a grade of U or NC in research may be removed from scholastic probation after one year if the student achieves a cumulative 3.0 GPA (or higher GPA if required by the program) and subsequently receives grades of S or CR in research.

b. A student will not be placed on scholastic probation in a graduating semester if the cumulative GPA is 3.00 or higher and there are no more than two C’s for courses on the degree plan.

c. A student who is removed from scholastic probation is not eligible for placement on scholastic probation a second time.

Enforced Withdrawal

Enforced withdrawal is reflected on the student’s academic record. A student who is or has been on scholastic probation will be placed on enforced withdrawal if,

a. the student’s grade point average for any subsequent term or semester falls below 3.0, or

b. the student receives a second grade of U or NC in research, or

c. other scholastic requirements are not met, or

d. the student does not achieve the required cumulative GPA (3.0 or higher if required by the program) within completion of nine (9) semester hours.

Reinstatement

A student on enforced withdrawal may not enroll in any graduate program for a minimum of 12 consecutive months. A student must reapply, meet current requirements for degree-seeking students, and be accepted by the University and the program to enroll for graduate studies following the period of enforced withdrawal. The application may be submitted prior to the requested enrollment date. After reinstatement, students will normally be allowed to continue in the program from the point of progression they had reached before enforced withdrawal.
Colleges or programs may have additional procedures or requirements related to re-enrollment following enforced withdrawal or unapproved absences. Some colleges or programs may not permit reinstatement from enforced withdrawal. Please see the appropriate college or program section of the catalog for specific requirements.

**Texas 99-Hour Rule**

The Texas State Legislature has enacted a rule that provides that students at all state universities with over 99 doctoral hours may be subject to the payment of nonresident tuition. A student will generally be able to study at A&M-Corpus Christi full-time for five complete academic years, including summers, before being affected by the 99-hour rule. For students staying beyond five years, in a number of cases there is still the possibility of a programmatic or individual exemption from the rule. For more information, contact the coordinator of your graduate program.
Appendix G: Preceptor/Facilitator Agreement (for clinical based practice experiences)

Explanation of Preceptor/Facilitator Agreement Packet Elements

1. **Checklist:**

   The checklist must be included as the first page of the agreement and is a listing of the required documents that must be submitted all at one time.

2. **Preceptor Agreement:**

   (3 page form)
   - A separate agreement (and packet) must be completed for every preceptor/facilitator.
   - The dates of the agreement period start at the beginning of the semester and end when the semester ends. If for some reason a student is scheduled for clinical dates beyond the end of the semester, the agreement must be modified.
   - The preceptor/facilitator agreement must be signed by the clinical faculty, student, and preceptor.
   - If the preceptor/facilitator practices at more than one location and the student will be traveling to multiple clinics with the preceptor/facilitator, each site should be listed individually on the third page of the agreement.
   - The majority of agencies (clinics) rely on the preceptor/facilitator agreement documentation to establish a relationship and do not require a formal contract with the University. Keep in mind that some agencies require "contracts" or affiliation agreements between the agency and TAMUCC CONHS before students are allowed into their facilities. Should an agency require an affiliation agreement, students should contact their clinical instructors or the program coordinator immediately when they are informed this agreement is required. Students will not be allowed to start clinical until the agreement is signed.

3. **Confirmation of Student-Preceptor- preceptor/facilitator:** Agreement

4. **Preceptor/Facilitator Contact Information:**

   Have the preceptor/facilitator fill in completely.
5. **Curriculum Vitae (CV):**

   a. A CV form has been provided. Preceptors/facilitators are not required to complete the form if they have a prepared CV. In this case, include the CV form writing "see attached" at the top and then attach the preceptor's CV behind the form.

   b. If a preceptor/facilitator has submitted a CV within the past year and it is on file with College of Nursing and Health Sciences, then the preceptor/facilitator need not submit a duplicate. In this case, students should include the CV form in the packet writing "on file" on the form.

   c. It is the student’s responsibility to verify the CV on file accurately represents the preceptor's work experience and education. If it is not accurate, the student should assist the preceptor/facilitator to complete a new curriculum vita by providing the preceptor with the CV form. **The preceptor's CV must be the same CV stored in their TYPHON account.**

6. **Preceptor/Facilitator License Verification:**

When professional licensure is required for preceptors, the preceptor must meet established criteria in accordance with the position description included in this Preceptor Guide. A preceptor must hold professional licensure for supervising student involved in direct clinical practice including teaching. Once an individual has agreed to precept the student, the student should verify that the individual’s credentials are current and valid.

Students will only submit verification of licensure when the preceptor/facilitator practices in a profession that requires licensure (physician, registered nurse, medical social worker). Students should consult the course coordinator or the program coordinator when they have questions about their preceptor/facilitator’s credentials.

7. **Student Clinical Information:**

   (**NP TRACK ONLY**)  

Complete the form with each clinical date listed individually on the form. Students should include their mobile number on the form.
Preceptor/Facilitator Packet Checklist/Coversheet

The following documents must be submitted to your DNP Chair for approval PRIOR to the beginning of clinical hours. Please refer to the following and make sure that all documents are submitted to your DNP Chair as a packet.

Please make sure that all documents are legible, complete, and have the correct dates. Your DNP Chair will NOT approve any incomplete or illegible paperwork. Please be very deliberate and careful in completing and submitting this paperwork. Your clinical experience will be delayed if you do not follow these directions. Include this check sheet initialed when you send your packet to your clinical faculty.

All page numbers below refer to the Preceptor Guide for MSN Clinical Courses.

- Preceptor/facilitator agreement ______ student initials______ faculty initials
- Confirmation of Agreement __student initials_faculty initials
- Preceptor/facilitator Contact Information __student initials______ faculty initials
- Preceptor/facilitator CV form or complete CV _____student initials______ faculty initials
- Preceptor/facilitator license verification _____________student initials_faculty initials
  Complete if required. (See explanation on Page 19)

  a. If your preceptor is an advanced practice nurse go to:
     https://www.bon.texas.gov/forms/apninq.asp Follow the directions. Retrieve and print the license verification.

  b. If your preceptor is a MD, DO, or PA go to:
     https://public.tmb.state.tx.us/HCP_Search/SearchInput.aspx Follow the directions. Click on your preceptor’s name to retrieve and print the appropriate information.

  c. If you are using a facilitator who is not supervising your practice please provide a justification for selecting this facilitator: ____________________________

- Student clinical information (NP TRACK ONLY) _____student initials_____ faculty initials

Date packet submitted to DNP Chair ____________________________

Faculty Only: Date packet submitted to Data Base Coordinator ____________________________

_____ scan/email   _____ fax   _____ in person

Rev. 08/23/2018
DNP Preceptor/Facilitator Agreement

Course # __________________________

The preceptor agreement permits nursing students of the College of Nursing, Texas A&M University- Corpus Christi (TAMUCC) to participate in a student preceptorship in your facility, ________________________________. Conditions of this program are as follows:

(Site Name)
The Affiliation period will be_________________________ to_________________________.

Student Name: ________________________________________________

Preceptor/Facilitator (Circle one) Name: ________________________________________

The CONHS DNP Chair ________________________________, serves as the liaison with your facility for the above student.

<table>
<thead>
<tr>
<th>Preceptor Responsibilities</th>
<th>Facilitator Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Participate in a preceptor orientation (The orientation will</td>
<td>Orient the student(s) to the clinical agency.</td>
</tr>
<tr>
<td>be sent to you on CD).</td>
<td></td>
</tr>
<tr>
<td>2. Function as a role model in the clinical setting.</td>
<td>Facilitate learning activities for no more than two</td>
</tr>
<tr>
<td></td>
<td>students per day.</td>
</tr>
<tr>
<td>3. Facilitate learning activities for no more than two students</td>
<td>Contact the faculty if assistance is needed or if any</td>
</tr>
<tr>
<td>per day.</td>
<td>problem with student performance occurs.</td>
</tr>
<tr>
<td>4. Orient the student(s) to the clinical agency.</td>
<td></td>
</tr>
<tr>
<td>5. Collaborate with student to review the progress of the student</td>
<td></td>
</tr>
<tr>
<td>toward meeting clinical learning objectives.</td>
<td></td>
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<tr>
<td>6. Provide feedback to the student regarding clinical performance.</td>
<td></td>
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<tr>
<td>7. Contact the faculty if assistance is needed or if any problem</td>
<td></td>
</tr>
<tr>
<td>with student performance occurs.</td>
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<tr>
<td>8. Discuss with faculty/student arrangements for appropriate</td>
<td></td>
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<tr>
<td>coverage for supervision of the student should the preceptor be</td>
<td></td>
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<tr>
<td>absent.</td>
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<tr>
<td>9. Give feedback to the nursing program regarding clinical</td>
<td></td>
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<tr>
<td>experience for student and</td>
<td></td>
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</tbody>
</table>

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Nursing Program/Faculty Responsibilities:

1. Ensure that preceptors meet qualifications in Rule 215.10(f)(5).
2. Ensure that there are written agreements which delineate the functions and responsibilities of the clinical preceptor and associated agency and nursing program.
3. Ensure that clinical experiences using preceptors occur only after the student has received basic theory and clinical experiences necessary to safely provide care to clients (within course or curriculum) appropriate to the student’s progress in the program.
4. Orient both the student and the preceptor to the clinical experience.
5. Provide the preceptor an orientation to the philosophy, curriculum, course, and clinical objectives of the program and specific courses.
6. Discuss student expectations, skills’ performance, student guidelines for performance of procedures, and methods of evaluation.
7. Assume overall responsibility for teaching and evaluation of the student.
8. Assure student compliance with standards on immunization, screening, OSHA standards when appropriate, CPR, criminal background check as needed and current liability insurance coverage.
9. Work cooperatively with the preceptor and the agency to determine student learning needs and appropriate assignments.
10. Make appropriate student assignments with the preceptor.
11. Communicate assignments and other essential information to the preceptors.
12. Meet regularly with the clinical preceptor and the student in order to monitor and evaluate the learning experience.
13. Monitor student’s progress through clinical site visits, student clinical seminars, student-faculty-preceptor conferences and review of student clinical assignments.
14. Be readily available, e.g., telephone, pager or e-mail for consultation when students are in the clinical area.
15. Receive feedback from the preceptor regarding student performance.
16. Provide recognition to the preceptor for participation as a preceptor.

Agency/Preceptor Responsibilities:

1. Retain ultimate responsibility for the care of clients.
2. Retain responsibility for preceptor’s salary, benefits, and liability.
3. If preceptor is a nurse practitioner or physician assistant, notifies collaborating physician of preceptor/student arrangement.

Student Responsibilities:

1. Verify Preceptor/Facilitator eligibility.
2. Clearly delineate the learning outcomes they hope to achieve from the practice experience and...
get approval from DNP Chair or DNP Project advisor PRIOR to initiating the clinical practice experience.

3. Maintain open communications with the Preceptor/Facilitator and faculty.
4. Maintain accountability for own learning activities.
5. Prepare for each clinical experience as needed.
6. Be accountable for own nursing actions while in the clinical setting.
7. Arrange for preceptor’s supervision when performing unfamiliar procedures.
8. Contact faculty by telephone, pager or e-mail if faculty assistance is necessary.
9. Respect the confidential nature of all information obtained during clinical experience.
10. Wear appropriate professional attire and university name tags and behave in a professional manner when in the clinical site.

Signatures on this page confirm that the above conditions reflect correctly your understanding of / and agreement with this affiliation.

Confirmation of Student-Preceptor-Faculty Agreement to Clinical Preceptorship

Student /Texas A&M University-Corpus Christi
(Print) (Sign) (Date)

Preceptor / Clinical Agency
(Print) (Sign) (Date)

DNP Chair / Texas A&M University-Corpus Christi, College of Nursing & Health Sciences
(Print) (Sign) (Date)

Site Name: 

Site Address: 

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Attach listing of approved clinical objectives here.
TEXAS A&M UNIVERSITY CORPUS CHRISTI
COLLEGE OF NURSING & HEALTH SCIENCES
FOR ALL DNP TRACKS

Preceptor/Facilitator Contact Information

PLEASE PRINT CLEARLY

Preceptor/Facilitator Name: ____________________________________________

Preceptor/Facilitator E-mail: ____________________________________________

Preceptor/Facilitator Mailing Address: ____________________________________

City/St ___________________________________ Zip __________________________

Telephone Numbers: _____________________________________________

Office ___________________________________ fax _________________________

Social Security Number: (opt) _________________________ License #__________

(If applicable)
# Brief Preceptor Curriculum Vita

**PLEASE PRINT CLEARLY:**

## Professional Education (post-secondary schools attended)

<table>
<thead>
<tr>
<th>Institution</th>
<th>Degree Earned</th>
<th>Date</th>
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<tbody>
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</table>

## Certifications:

- 

## Academic and Professional Honors

- 

## Professional Experience:

<table>
<thead>
<tr>
<th>Position</th>
<th>Dates in Position</th>
<th>Institution</th>
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<tbody>
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</table>

## Preceptor Experience: (specify educational program for preceptored student)

<table>
<thead>
<tr>
<th>Type of Student Preceptored</th>
<th>Role of Student in Preceptor Relationship</th>
<th>Date of Experience</th>
</tr>
</thead>
<tbody>
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** A current CV may be submitted in lieu of this form.

Preceptor’s Name ___________________________ Date ___________________________

Student’s Name ____________________________

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# Student Clinical Information Form NP STUDENTS ONLY

<table>
<thead>
<tr>
<th>Student Name:</th>
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Cell (# can be contacted at during clinical hours):

<table>
<thead>
<tr>
<th>Preceptor’s Name:</th>
<th></th>
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Medical Practice Name:
Address:
Phone:

<table>
<thead>
<tr>
<th>Clinical Faculty Name:</th>
<th></th>
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</table>

Phone:

## Total Semester Schedule

<table>
<thead>
<tr>
<th>Day of the Week</th>
<th>Month/Day</th>
<th>Practice Hours (e.g. 8-12, 1-5, lunch 12-1)</th>
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Clinical Activity Documentation

Students are required to document their clinical activities using the Typhon Student Tracking software for every Practice experience.

End of Course Clinical Evaluations and Documentation

Students are responsible for ensuring all end of course evaluations and documentation are completed. Evaluations should be completed and returned to the student's assigned clinical faculty upon completion of each clinical experience.
Appendix H: Contract Initiation Request

**GRADUATE PROGRAM**

In the event that a clinical site informs the student that a “Contract” or “Affiliation Agreement” is needed, students may begin the contract initiation process by submitting the required information listed below. Either the student or the clinical site may complete the form.

All of the required information must be completed before submission. This form should be forwarded to cristiday@tamucc.edu. Once the information is received, the legal department will search the legal name and in the event that there is a current contract in place, the student will be notified. Please allow 2-3 months for new contract completion. Student inquiries about contract progress should be made to Dr. Day.

NOTE: TAMUCC does not require a Contract with clinical sites. TAMUCC requires a Preceptor Agreement for each Preceptor. The clinical site is the best resource for students to know if there is already a contract in place.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME OF AGENCY</th>
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<tbody>
<tr>
<td>CORPORATION MAILING ADDRESS</td>
<td></td>
</tr>
<tr>
<td>AGENCY CONTACT</td>
<td>Name</td>
</tr>
<tr>
<td></td>
<td>Telephone: Email:</td>
</tr>
<tr>
<td>CONTRACT SIGNATOR NAME/TITLE</td>
<td>Name</td>
</tr>
<tr>
<td></td>
<td>Telephone: Email:</td>
</tr>
</tbody>
</table>

Student___________________ Initiated___________________
Preceptor__________________ Submitted _________________

Rev. 08/23/2018
Appendix I: DNP Evaluation tools
## Student Evaluation of Practice experience Site

<table>
<thead>
<tr>
<th>Date:</th>
<th>Student Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Faculty:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Site:</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Course Name and Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### Instructions:
1. Please mark an X in the most appropriate space after each statement below to provide summative feedback to the preceptor named above for the clinical site.
2. Scale: 4 = Frequently 3 = Sometimes 2 = Seldom 1 = Not Applicable
3. Place written comments in the comment box below.

### Quality

<table>
<thead>
<tr>
<th></th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Was adequate time given to discuss objectives?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Were there sufficient learning opportunities?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>3.</td>
<td>Were the types of learning experiences varied and relevant?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Were there learning experiences available to meet the practice experience objectives?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Were there opportunities to explore areas of interest?</td>
<td></td>
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</tr>
<tr>
<td>6.</td>
<td>Were there opportunities to select areas of interest to students?</td>
<td></td>
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</tr>
<tr>
<td>7.</td>
<td>Was support staff appropriately helpful?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>8.</td>
<td>Was support staff accepting of the student's role as a DNP?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Was the philosophy of the agency to promote/provide collaborative, high quality care?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Were learning materials available?</td>
<td></td>
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</tr>
</tbody>
</table>

List ways this agency provides good clinical experience for students:

List areas in which this agency needs improvement in order to provide optimal learning:

Do you recommend this agency for other students? Why or why not?
Student Evaluation of Practice experience Preceptor/Facilitator

<table>
<thead>
<tr>
<th>Date:</th>
<th>Student Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Preceptor/Mentor:</th>
<th>Faculty:</th>
</tr>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Site:</th>
</tr>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Course Name and Number:</th>
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<tbody>
<tr>
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</tbody>
</table>

Instructions:
1. Please mark an X in the most appropriate space after each statement below to provide summative feedback to the preceptor named above for the clinical site.
2. Scale:  4 = Frequently 3 = Sometimes  2 = Seldom  1 = Not Applicable
3. Place written comments in the comment box below.

<table>
<thead>
<tr>
<th>Quality</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1 NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is available to student</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Utilizes student’s strengths and knowledge</td>
<td></td>
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</tr>
<tr>
<td>3. Serves as good role model for the advanced nursing profession</td>
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<tr>
<td>4. Demonstrates effective rapport when collaborating with the healthcare team</td>
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<tr>
<td>5. Encourages student to assume increasing responsibility during the Practice experience</td>
<td></td>
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<tr>
<td>6. Assists student in identifying goals and needs for experience</td>
<td></td>
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<tr>
<td>7. Considers student’s limits according to level of knowledge and skill</td>
<td></td>
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<tr>
<td>8. Provides appropriate and adequate feedback</td>
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<tr>
<td>9. Offers guidance to students through collaborative decision making</td>
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<tr>
<td>10. Offers constructive comments, encourages open dialogue</td>
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<tr>
<td>12. Discusses alternative solutions to address challenges and barriers</td>
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<tr>
<td>13. Suggests and provides additional and/or alternative learning experiences</td>
<td></td>
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</tr>
<tr>
<td>14. Preceptor's level of experience/expertise was appropriate for the Practice experience</td>
<td></td>
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</tr>
<tr>
<td>15. Demonstrates adequate understanding of the DNP role</td>
<td></td>
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</tr>
</tbody>
</table>

Comments:
TEXAS A&M UNIVERSITY-CORPUS CHRISTI  
College of Nursing and Health Sciences  
Doctor of Nursing Practice Program  

Preceptor Evaluation of Student – PRECEPTORS ONLY

<table>
<thead>
<tr>
<th>Date:</th>
<th>Name of Preceptor:</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Student Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>DNP Chair:</th>
</tr>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Site:</th>
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</table>

<table>
<thead>
<tr>
<th>Course Name and Number:</th>
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</tbody>
</table>

**Instructions:**
1. Please mark an X in the most appropriate space after each statement below to provide summative feedback to the preceptor named above for the clinical site.
2. Scale:
   - 4 = Frequently
   - 2 = Seldom
   - 3 = Sometimes
   - 1 = Never
   - N/O = Not Observed
3. Place written comments in the comment box.

<table>
<thead>
<tr>
<th>I. SCIENTIFIC UNDERPINNINGS FOR PRACTICE</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
<th>N/O</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integrates nursing science with knowledge from collaborative sciences (ethical, biophysical, analytical, and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td><strong>psychosocial) to achieve the highest level of nursing practice.</strong></td>
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</tr>
<tr>
<td>I</td>
<td><strong>Uses science-based theories to describe actions and advance strategies to enhance delivery of health care to appropriate patient population.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td><strong>Develops and evaluates new practice approaches based on nursing theories as well as interdisciplinary theories.</strong></td>
<td></td>
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</tr>
<tr>
<td>II</td>
<td><strong>ORGANIZATIONAL AND SYSTEMS LEADERSHIP</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td><strong>Uses advanced communications skills/processes when discussing quality improvement and patient safety in the clinical arena.</strong></td>
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<tr>
<td></td>
<td><strong>Demonstrates sensitivity to diverse organizational cultures and populations, including patients and providers.</strong></td>
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<tr>
<td></td>
<td><strong>Demonstrates effective strategies for managing ethical dilemmas in patient care and the health care organization.</strong></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>III</td>
<td><strong>CLINICAL SCHOLARSHIP AND ANALYTICAL METHODS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Applies relevant findings to improve the practice environment.</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td><strong>Uses analytic methods to critically appraise existing literature and other</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IV. INFORMATION SYSTEMS/TECHNOLOGY</td>
<td></td>
<td></td>
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<tr>
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<tr>
<td>Demonstrates the conceptual and technical ability to extract relevant data from practice information systems and databases.</td>
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<tr>
<td>Demonstrates leadership in the evaluation and resolution of ethical and legal issues relating to the use of information, information technology, communication networks and patient care technology.</td>
<td></td>
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<tr>
<td>Evaluates consumer health information sources for accuracy, timeliness, and appropriateness.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>V. HEALTH CARE POLICY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to articulate and educate others regarding nursing, health policy, and patient care outcomes.</td>
</tr>
<tr>
<td>Advocates for social justice, equity, and ethical policies within the healthcare arena.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>VI INTERPROFESSIONAL COLLABORATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>evidence to determine and implement the best evidence for practice.</td>
</tr>
<tr>
<td>Uses information technology appropriately to analyze data from practice.</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>VII</th>
<th>CLINICAL PREVENTION AND POPULATION HEALTH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Employs effective communication and collaborative skills in the development and implementation of practice models, peer review, practice guidelines, and health policy.</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Employs consultative and leadership skills with interprofessional and interprofessional teams.</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Analyzes epidemiological, biostatistical, environmental, and other appropriate scientific data related to individual, aggregate and population health.</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Synthesizes concepts of psychosocial dimensions and cultural diversity related to clinical prevention and population health to improve health outcomes.</strong></td>
</tr>
<tr>
<td>VIII</td>
<td>ADVANCED NURSING PRACTICE</td>
</tr>
<tr>
<td>------</td>
<td>----------------------------</td>
</tr>
<tr>
<td></td>
<td>Conducts a comprehensive and systematic assessment of health and illness parameters in complex situations, incorporating diverse and culturally sensitive approaches.</td>
</tr>
<tr>
<td></td>
<td>Designs, implements, and evaluates therapeutic interventions based on nursing science and other sciences.</td>
</tr>
<tr>
<td></td>
<td>Develops and sustains therapeutic relationships and partnerships with patients (individual, family or group) and other professionals to facilitate optimal care and patient outcomes.</td>
</tr>
<tr>
<td></td>
<td>Demonstrates advanced levels of clinical judgment, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care to improve patient outcomes.</td>
</tr>
<tr>
<td></td>
<td>Guides, mentors, and supports other nurses to achieve excellence in nursing practice.</td>
</tr>
<tr>
<td></td>
<td>Educates and guides individuals and groups through complex health and situational transitions.</td>
</tr>
<tr>
<td></td>
<td>Uses conceptual and analytical skills in evaluating the links among practice, organizational, population, fiscal and policy issues.</td>
</tr>
</tbody>
</table>

General Comments and Overall Impression of Student (Strengths and Weaknesses)

Evaluator ____________________________________________ Date ________________

Signature

Student ______________________________________________Date _________________

Reviewed by Clinical Faculty ___________________________Date __________
Appendix J: DNP Project Documents
### DNP Project Requirements, Essentials and Guide to SQUIRE 2.0 Suggestions.

<table>
<thead>
<tr>
<th><strong>DNP PROJECT REQUIREMENT</strong></th>
<th><strong>DNP ESSENTIAL</strong></th>
<th><strong>Document in SQUIRE 2.0 Section:</strong></th>
<th><strong>DNP Course providing support</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Critique current system and identify potential areas for improvement</td>
<td>1. Scientific underpinnings for practice.</td>
<td>3, 4</td>
<td>NURS 6304 Application of Evidence in Practice</td>
</tr>
<tr>
<td>2. Evaluate the current organizational system, with the interprofessional team.</td>
<td>6. Interprofessional collaboration for improving patient and population health outcomes.</td>
<td>3, 4, 6</td>
<td>NURS 6303 System Behavior and Impact on Health Care</td>
</tr>
<tr>
<td>3. As part of the background for the project, analyze the health needs of the selected population using epidemiologic or biostatistical health data.</td>
<td>7. Clinical prevention and population health.</td>
<td>3, 4, 6</td>
<td>NURS 6304 Application of Evidence in Practice</td>
</tr>
<tr>
<td>4. Work with system’s leaders to identify the organizational mission and annual goals and ensure that the project aim is consistent with these organizational priorities.</td>
<td>2. Organizational and system leadership for QI and system thinking</td>
<td>6</td>
<td>NURS 6303 System Behavior and Impact on Health Care</td>
</tr>
<tr>
<td>5. Perform a literature search related to your DNP project and determine the level of evidence of support for your planned interventions</td>
<td>3. Clinical scholarship and analytical methods for evidence-based practice</td>
<td>4</td>
<td>NURS 6304 Application of Evidence in Practice</td>
</tr>
<tr>
<td>6. Prepare a budget for and analyze the cost-effectiveness of the proposed interventions.</td>
<td>2. Organizational and system leadership for QI and system thinking</td>
<td>7</td>
<td>NURS 6221 Economics of Advanced Practice</td>
</tr>
<tr>
<td>7. Use historic and national benchmarks to set project goals and measure progress.</td>
<td>3. Clinical scholarship and analytical methods for evidence-based practice.</td>
<td>10</td>
<td>NURS 6300 NP Leadership in Health Policy</td>
</tr>
<tr>
<td>Demonstrate how the project is guided by a relevant theoretical framework.</td>
<td>1. Scientific underpinnings for practice.</td>
<td>7,9</td>
<td>NURS 6304 Application of Evidence in Practice NURS 6201 Application of Evidence in Practice 2</td>
</tr>
<tr>
<td>Identify and outline a healthcare policy that is important to your project.</td>
<td>5. Healthcare policy for advocacy in health care.</td>
<td>7</td>
<td>NURS 6300 NP Leadership in Health Policy</td>
</tr>
<tr>
<td>8. Prepare proposal and submit to IRB or Doctoral Board for approval (as appropriate for your project).</td>
<td>3. Clinical scholarship and analytical methods for evidence-based practice.</td>
<td>12</td>
<td>NURS 6201 Application of Evidence in Practice 2</td>
</tr>
<tr>
<td></td>
<td>Activity Description</td>
<td>Related Goals</td>
<td>Methodology</td>
</tr>
<tr>
<td>---</td>
<td>--------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>9</td>
<td>Use information technology and data mining techniques for obtaining benchmarking data, preparing dashboards and report cards, creating documentation tools, data collection forms, and evaluating outcomes and process measures.</td>
<td>3. Clinical scholarship and analytical methods for evidence-based practice. 4. Information systems technology and patient care technology for the improvement and transformation of health care.</td>
<td>9, 10</td>
</tr>
<tr>
<td>12</td>
<td>Adapt guidelines and develop standards for the organization as part of the project.</td>
<td>6. Interprofessional collaboration for improving patient and population health outcomes.</td>
<td>8, 9, 10</td>
</tr>
<tr>
<td>13</td>
<td>Work to communicate and facilitate integration of these standards into daily practice within the organization. Evaluate (See #9)</td>
<td>6. Interprofessional collaboration for improving patient and population health outcomes. 8. Advanced nursing practice.</td>
<td>8, 13</td>
</tr>
<tr>
<td></td>
<td>Prepare a publishable manuscript describing the project and findings. Plans for dissemination of project.</td>
<td>3. Clinical scholarship and analytical methods for evidence-based practice.</td>
<td>14-17</td>
</tr>
</tbody>
</table>
TAMUC CONHS Doctor of Nursing Practice
Proposal Evaluation Rubric

Student’s Name: 

Title of DNP Project: 

<table>
<thead>
<tr>
<th>Problem</th>
<th>Satisfactory as Presented</th>
<th>Satisfactory with the following recommendations</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Background information/literature supports problem</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Problem/change clearly identified</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Scope of project realistic and appropriate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Analysis/Framework</th>
<th>Satisfactory as Presented</th>
<th>Satisfactory with the following recommendations</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Need, feasibility and significance are clearly presented</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Literature, benchmarks and supporting data provided and appropriate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Framework (theoretical/conceptual/practice) is evident and appropriate</td>
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<td></td>
<td></td>
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<tr>
<td>Other:</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Goals</th>
<th>Satisfactory as Presented</th>
<th>Satisfactory with the following recommendations</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goals stated in feasible and measurable terms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evaluation measures linked to goals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action Plan/Method</th>
<th>Satisfactory as Presented</th>
<th>Satisfactory with the following recommendations</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appropriate for goals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clear rationale for actions/method</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Setting and group clearly described</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tools/measures described</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resources/supports and risks/threats and benefits noted</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
a. **Accept the proposal.**
The DNP DNP Chair will file approval of the DNP Project Proposal on behalf of the DNP Liaison and DNP Project Advisor (and Content Expert if used) to the DNP Coordinator.

b. **Conditionally accept with minor revisions and no re-review.**
The student will file a final/revised Project Proposal to the DNP DNP Chair within one month of the proposal defense meeting. If revisions are approved, the DNP DNP Chair will file approval of the DNP Project Proposal on behalf of the DNP Liaison and DNP Project Advisor (and Content Expert if used) to the DNP Coordinator.

c. **Require minor or major revisions and re-review.**
The student must develop a significantly revised or new proposal. The DNP Project Advisor will work with the student on the revision. The DNP Liaison and DNP Project Advisor will review the new proposal and all prior steps will be repeated.

d. **Reject the proposal.**
The student must develop a significantly revised or new proposal. The DNP Project Advisor will work with the student on the revision. The DNP Liaison and DNP Project Advisor (and Content Expert if used) will review the new proposal and all prior steps will be repeated.

DNP Liaison Signature: _____________________________________________

DNP Project Advisor Signature: _______________________________________

DNP Content Expert: ________________________________________________

Doctoral Student’s Signature: _______________________________________

Date: ______________________________________________________________________
TAMUC CONHS Doctor of Nursing Practice
Project Evaluation Rubric

Student’s Name: 

Title of DNP Project: 

<table>
<thead>
<tr>
<th>1 = Very poorly</th>
<th>2 = Poorly</th>
<th>3 = Good</th>
<th>4 = Very Good</th>
<th>5 = Excellent</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Fail)</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

I. DNP Project Requirement
The candidate addresses each DNP Project Requirement

Background and Significance
Background information/literature demonstrates the focused need or problem.
Literature review supports significance/relevance of problem/proposed project/intervention.
Need, feasibility and significance are clearly presented.

Problem Statement or Purpose
Problem/purpose clearly described.
Scope of project realistic and appropriate.

Theoretical Framework
Framework (theoretical/conceptual/practice) is described/evident and applicable.

Project Description
Literature, benchmarks and supporting data provided and organized into integrated synthesized summary
Goals stated in feasible and measurable terms.
Congruence of organizations’ strategic plan to project is described.
### Project Design

- Appropriate for goals.
- Clear rationale for actions/method.
- Setting and group clearly described.
- Implementation methods/tools/measures clearly described.
- Resources/supports and risks/threats and benefits noted.
- Time frame outlined.

### Evaluation Plan

- Analysis/Evaluation plan coherent / consistent with project plan.
- Evaluation measures linked to goals.
- Outcomes/evidence-based measures appropriate for goals.
- Tools/instruments described and linked to measures and goals.
- Method of analysis clearly described for each measurement.

### Findings

- Findings organized in appropriate format.
- Findings linked to problem statement, goals and evaluation plan.
- Described the extent to which the goals were achieved.
- Addressed key facilitators and barriers that impacted the project’s goals.
- Described unintended consequences (both positive and negative).

### Recommendations/Implications

- Recommendations/Implications addressed for problem statement, supporting organization, key stakeholders, other settings, and student.
- Included recommendations related to identified facilitators / barriers and unintended consequences.
- Addressed any ongoing activities or evaluations outside the scope of the DNP Project.
a. **Approve the DNP Project**
   Once the DNP Project is approved, the student becomes eligible for graduation at which time the DNP candidate will be granted the degree along with the rights and privileges awarded by the degree. The DNP DNP Chair will file approval of the DNP Project on behalf of the DNP Liaison and DNP Project Advisor (and Content Expert if used) to the DNP Coordinator.

b. **Conditionally approve the DNP Project with minor revisions**
   The student will file a final/revised Project Proposal to Doctoral Committee Chair within two weeks of the proposal defense meeting. If revisions are approved, the DNP DNP Chair will file approval of the DNP Project on behalf of the DNP Liaison and DNP Project Advisor (and Content Expert if used) to the DNP Coordinator.

c. **Reject the DNP Project**
   The student must develop a significantly revised or new project. The DNP Project Advisor will work with the student on the revision. If a new project is selected, a new Proposal form will need to be submitted to the DNP Coordinator. The DNP Liaison and DNP Project Advisor (and Content Expert if used) will review the new project and all prior steps will be repeated.
Student’s Name: ____________________________________________

Title of DNP Project: ____________________________________________

DNP Liaison Signature: __________________________________________

DNP Project Advisor Signature: ________________________________

DNP Content Expert: __________________________________________

Doctoral Student’s Signature: ________________________________

Date: ________________________________________________________
Appendix K – Human Ethics Oversight Form

Texas A&M University-Corpus Christi, College of Nursing and Health Sciences
Doctor of Nursing Practice - Human Ethics Oversight Review Form

Purpose: To systematically determine if this proposed DNP project meets the definition of human subjects research (HSR) pursuant to 45 CFR 46; and to ensure this project, if not deemed HSR, is conducted in an ethical manner consistent with privacy and confidentiality requirements regarding protected health information (PHI).

STUDENT SECTION

DNP Project Director (PD): _____________________________
Title of DNP Project: _____________________________

Clinical Site of Project: _____________________________
PD’s Relationship with Clinical Site: _____________________________
Brief Description of Project Goals/Purpose (include intent to use existing knowledge to implement change in practice and major measurable outcome(s)): _____________________________

Evidence-based Literature Review (provide citations and brief descriptions of major studies supporting the implementation of the intervention in this project): _____________________________

Brief Description of Methods (include setting, sample. recruitment, data collection, data management methods, permission to collect PHI (if applicable), and letter of support from institution administrator): _____________________________

Student portion of this review should be 3 pages or less (not including permission or support letters).

Project Director Signature: _____________________________ Date: ________________

Faculty Liaison Signature: _____________________________ Date: ________________
HUMAN ETHICS OVERSIGHT COMMITTEE (HEOC) SECTION

Quality improvement (QI) projects typically do not require IRB review and approval because they are not research that is subject to federal human subjects protection regulations. The following questions may help in determining whether a proposed activity is a QI project and not human subjects research. If all questions below can be answered as Yes, IRB review is not required. If the answer to any of the questions is No, IRB review may be required.

Quality Improvement OR Research Checklist*

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>PURPOSE: Does the project solely aim to improve the quality/process/delivery of care or health-related practices within a specific health care setting or health-promoting institution?</td>
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<tr>
<td>SCOPE: Does the project solely aim to evaluate current practice and/or attempt to improve it based on existing evidence/knowledge?</td>
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<tr>
<td>EVIDENCE: Is there sufficient existing evidence to support implementing this project to create practice change?</td>
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<tr>
<td>CLINICIAN: Is the project conducted by a clinician who has ongoing commitment to the institution where the project is taking place, to improve care/health-related practice?</td>
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<tr>
<td>CONSENT: Will the planned intervention only require consent that is already obtained in clinical/usual practice and could the intervention be considered a part of usual care/practice?</td>
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</tr>
<tr>
<td>BENEFITS: Will future patients/participants at the institution where the project takes place, potentially benefit from the project?</td>
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<tr>
<td>RISK: Is the risk to patients/participants no greater than what is involved in the care/practice they are already receiving OR can participating in the project be considered acceptable or ordinarily expected when practice changes are implemented within a health care/health-promoting institution?</td>
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</tr>
<tr>
<td>CONFIDENTIALITY: If protected health information (PHI) is collected in an identifiable manner, where collected data can be linked to an individual, has the project director obtained written approval from an institution administrator or privacy officer to access such information?</td>
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</tr>
<tr>
<td>SUPPORT: Has the project director obtained a signed letter of support for the goals and methods of this project from the institution where this project will take place?</td>
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</tr>
</tbody>
</table>

*Adapted with permission from the Yale University IRB and Duke University Health System IRB, November 2017.

If ALL the above questions can be answered as “YES,” the HEOC has determined this project not to be Human Subjects Research and agreed it meets privacy and confidentiality regulations under HIPAA.

HEOC Chair Signature: _______________________________ Date: _______________
References


Appendix L – Doctoral Checklist for DNP Students

Final version is pending.