



DEPAUL UNIVERSITY

COLLEGE OF SCIENCE AND HEALTH

School of Nursing

**DePaul University School of Nursing
Post Licensure Programs
Student Handbook**

The Director of the School of Nursing (SON) and Associate Directors for the DNP and RN to MS Program, and Post Master's Certificate Programs at DePaul University (DPU) SON reserve the right to change the information, regulation, requirements and procedures in this handbook at any time. It is the personal responsibility of each student enrolled in a post licensure nursing program in the SON to acquire knowledge of all pertinent regulations set forth in this Student Handbook. The SON reserves the right to require the withdrawal of any student, at any time, who fails to give satisfactory evidence of academic ability, earnestness of purpose, or active cooperation in all requirements. The only official interpretation or modifications of academic regulations are those made in writing by the Director of the SON.

03/26/2026



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

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

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



Student Handbook Agreement

I _____, a student in the
Print Name

_____ program at DePaul University (DPU) School of
Enter Name of Program

Nursing (SON), have thoroughly read and will comply with the policies included the SON Post Licensure Student Handbook. I understand that failure to comply with the policies included in the SON Post Licensure Student Handbook may result in dismissal from the program.

Student Signature

Date

Advisor Signature

Date

Please affix your signature on this agreement form and submit it to Castle Branch by the first academic quarter of your program.

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Mission of the DePaul University School of Nursing

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

Philosophy of the DePaul University School of Nursing

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

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

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

A professional level of nursing practice is best achieved through master's degree education in nursing and requires appropriate licensure through examination (NCLEX-RN). Advanced nursing practice education integrates specialization into the master's degree curriculum or at the post-masters level providing eligibility for professional certification as a Nurse Anesthetist; Clinical Nurse Specialist in community, acute or long-term care areas; Nurse Practitioner in primary care, Nurse Educator, and Nurse Administrator.

Accreditation

The Bachelor of Science degree in nursing at DePaul University is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.

The Master of Science degree in nursing at DePaul University is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.

The Post-graduate APRN certificate programs at DePaul University is Currently under review with accreditation by Commission on Collegiate Nursing Education 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.
Pending Final Review 2025-2026

The Doctor of Nursing Practice program at DePaul University is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791.

The Council on Accreditation on Nurse Anesthesia Education Programs (CoA-NAEP) currently accredits the Nurse Anesthesia Program offered by NorthShore University Health System (NSUHS) School of Nurse Anesthesia in affiliation with DPU SON that confers the DNP degree to all DPU-NSUHS Nurse Anesthesia DNP graduates.

Post Licensure Programs

RN to MS Program Summary and Learning Outcomes

Designed for registered nurses interested in completing a post-licensure bachelor and/or master's degree in nursing. This streamlined program is an innovative and interdisciplinary approach to nursing and clinical care. Due to the variety of options for nurses to enter into the profession, this program offers 3 admission options:

- a) Nurses who have a BSN are enrolled in the graduate program to earn their MS in nursing,
- b) Nurses who have associate degree with a non-nursing undergraduate degree are enrolled in the graduate program to earn their MS in nursing, and
- c) Nurses who have an associate degree in nursing are enrolled as an undergraduate to complete their BS in nursing and can seamlessly transition to the graduate program to earn their MS in nursing.

Both the Associate Degree/Diploma and Associate Degree nurse with a non-nursing baccalaureate degree will complete 80 hours of practice experiences integrated throughout the program.

Program Student Learning Outcomes

The RN to MS program is a multi-layered program encompassing two degrees (BS and MS). Within the MS degree, there are Five tracks; Nurse Educator, Nursing Leadership, Family Nurse Practitioner (FNP), Adult Gerontology Nurse Practitioner (AGNP) and Psychiatric Mental Health Nurse Practitioner (PMHNP) and dual Family Nurse Practitioner and Psychiatric Nurse Practitioner (FNP/PMHNP) pathway. Student learning outcomes are grouped accordingly as follows:

BS in Nursing (Post-licensure)

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

Post Graduate Certificate Program Summary:

Designed for the Master's Entry Registered Nurse graduate who wants to pursue Nurse Practitioner education and training for national certification. The Post Graduate Certificate Program tracks include AGNP, FNP, PMHNP, Dual FNP/PMHNP, Nursing Leadership and are designed to, (i) Advance professional practice and leadership roles in health promotion and illness care. (ii) Continuing academic and clinical education at the post-graduate level. (iii) Collaboration and scholarship to meet present and future health needs of modern society.

Student Learning Outcomes

1. Practice as an advanced practice clinician who demonstrates knowledge of population health issues, prevention strategies, and culturally relevant approaches to improve health.
2. Provide organizational leadership through systems of care that utilize interdisciplinary collaboration and consultation to deliver safe, effective, and efficient patient-centered care, which influences policy.
3. Design, implement, evaluate, and promote evidence-based care in complex situations through continuous quality improvement processes and clinical scholarship.

4. Develop, implement, and evaluate transformational patient care technologies and analytical methods focused on safety and quality standards.
5. Demonstrate awareness of global health disparities, and in the Vincentian mission of the university, advocate for social justice, equity, and ethical policies that impact the overall health of individuals, communities, and population.

Program Goals

The purposes of Post Graduate Certificate program tracks are to prepare graduate level Nurses in **acquiring the advanced practice competencies, coursework, and clinical hours** in the practice setting who are expected to:

1. Integrate nursing science with the knowledge of other disciplines and implement this knowledge in order to improve healthcare.
2. Evaluate and translate evidence-based practices to improve health and healthcare outcomes at the patient, family, population, clinical unit, system, and/or community level.
3. Demonstrate collaborative and leadership skills on intra-professional and inter-professional teams to foster effective communication, enhance patient outcomes, and create change in complex health care delivery systems.
4. Contribute to the specialty of advanced nursing practice through participation in research and scholarships.
5. Use information systems and technology to improve patient care outcomes in advanced nursing practice.
6. Incorporate a philosophy of social caring based upon respect for the whole person, embodied in professional practice and service activities within a multicultural society.
7. Assume a leadership role in influencing the direction of health care at the local, regional, and national levels.
8. Demonstrate competencies of advanced nursing practice within a defined specialty.
 - a. Integrate nursing theories and concepts with knowledge from biology, physics, pathophysiology, pharmacology, psychology, sociology and organizational sciences to deliver the highest level of advanced nursing practice in any practice setting and population focus.
 - b. Demonstrate safe, effective, and efficient professional practice, in a defined area of advanced nursing practice.
 - c. Develop the ability to work independently, accepting responsibility and accountability for one's own advanced practice as an Advanced Practice Nurse.
 - d. Demonstrate responsibility to society by establishing an Advanced Practice Nurse practice that is based upon professional standards as well as ethical and moral principles.
 - e. Develop organizational and systems leadership skills for quality improvement and systems thinking to improve health outcomes at the local and national level.
 - f. Evaluate and translate evidence-based practices to improve health and healthcare outcomes at the patient, family, population, clinical unit, system,

- and/or community level.
- g. Embody a commitment to self-directed life-long learning and continuing personal and professional development.
 - h. Use existing and new computerized databases, analyze data accurately, critically appraise the literature, and develop and implement best practices in healthcare based on highest level of evidence.
 - i. Use conceptual or theoretical framework to evaluate information systems and technology that can transform the future of healthcare.
 - j. Incorporate a philosophy of social caring based on respect for the whole person, embodied in professional practice and service activities within a multicultural society.
 - k. Analyze major factors and policy triggers that influence legislative health policy making in order to achieve fair and just health-related policies, educate others about health disparities, and improve access to quality care.
 - l. Design, influence and implement health care policies that address social justice, equity, patient-centered care, cultural sensitivity, access to affordable healthcare, and quality, safe and effective healthcare for all.
 - m. Reflect on educational experiences and life lessons to gain insight into the development of a personal philosophy of healthcare and align advanced nursing practice and personal decisions both legally and ethically.

Doctor of Nursing Practice Program (DNP Degree) Program Summary:

Designed for the Baccalaureate or Master's Entry Registered Nurse graduate who wants to pursue Nurse Practitioner or Nurse Anesthesia education and training for national certification and/or experienced Certified Nurse Practitioner, Clinical Nurse Specialist, Certified Registered Nurse Anesthetist or Certified Nurse Midwife seeking a clinical doctorate to gain knowledge on the delivery of advanced nursing practice to patient populations in healthcare systems where they work, acquire competencies on clinical scholarship with a focus on translation of new knowledge to practice and evaluation of health care delivery models, develop organizational and systems leadership skills, apply clinical prevention and population health services, engage in health care policy-making as a vehicle for advocating health for all and appraise information systems/technology and patient care technology that can lead to the transformation of tomorrow's health care. The DNP Program tracks include AGNP, FNP, PMHNP, Dual FNP/PMHNP, Leadership and DNP Completion. Our Certified Registered Nurse Anesthetist (CRNA) track is in partnership with Endeavor Health School of Nurse Anesthesia.

Student Learning Outcomes

1. Practice as an advanced practice clinician who demonstrates knowledge of population health issues, prevention strategies, and culturally relevant approaches to improve health.
2. Provide organizational leadership through systems of care that utilize interdisciplinary collaboration and consultation to deliver safe, effective, and

- efficient patient-centered care, which influences policy.
3. Design, implement, evaluate, and promote evidence-based care in complex situations through continuous quality improvement processes and clinical scholarship.
 4. Develop, implement, and evaluate transformational patient care technologies and analytical methods focused on safety and quality standards.
 5. Demonstrate awareness of global health disparities, and in the Vincentian mission of the university, advocate for social justice, equity, and ethical policies that impact the overall health of individuals, communities, and population.

Program Goals

The purposes of the graduate tracks in the Doctor of Nursing Practice program are to prepare advanced practice nurses for leadership roles in the practice setting who are expected to:

1. Integrate nursing science with the knowledge of other disciplines and implement this knowledge in order to improve healthcare.
2. Evaluate and translate evidence-based practices to improve health and healthcare outcomes at the patient, family, population, clinical unit, system, and/or community level.
3. Demonstrate collaborative and leadership skills on intra-professional and inter-professional teams to foster effective communication, enhance patient outcomes, and create change in complex health care delivery systems.
4. Contribute to the specialty of advanced nursing practice through participation in research and scholarships.
5. Use information systems and technology to improve patient care outcomes in advanced nursing practice.
6. Incorporate a philosophy of social caring based upon respect for the whole person, embodied in professional practice and service activities within a multicultural society.
7. Assume a leadership role in influencing the direction of health care at the local, regional, and national levels.
8. Demonstrate competencies of advanced nursing practice within a defined specialty.
 - a. Integrate nursing theories and concepts with knowledge from biology, physics, pathophysiology, pharmacology, psychology, sociology and organizational sciences to deliver the highest level of advanced nursing practice in any practice setting and population focus.
 - b. Demonstrate safe, effective, and efficient professional practice, in a defined area of advanced nursing practice.
 - c. Develop the ability to work independently, accepting responsibility and accountability for one's own advanced practice as an Advanced Practice Nurse.
 - d. Demonstrate responsibility to society by establishing an Advanced Practice Nurse practice that is based upon professional standards as well as ethical and moral principles.
 - e. Demonstrate the ability to develop public speaking skills through the use of

- presentations and dissemination of DNP project findings.
- f. Demonstrate collaborative and leadership skills on intra-professional and inter-professional teams to foster effective communication, enhance patient outcomes, and create change in complex healthcare delivery systems.
 - g. Develop organizational and systems leadership skills for quality improvement and systems thinking to improve health outcomes at the local and national level.
 - h. Evaluate and translate evidence-based practices to improve health and healthcare outcomes at the patient, family, population, clinical unit, system, and/or community level.
 - i. Contribute to the specialty of advanced nursing practice through participation in or leading the conduct of systematic, practice-focused scientific inquiry and other scholarly endeavors.
 - j. Embody a commitment to self-directed life-long learning and continuing personal and professional development.
 - k. Use existing and new computerized databases, analyze data accurately, critically appraise the literature, and develop and implement best practices in healthcare based on highest level of evidence.
 - l. Use information systems and technology to improve patient care outcomes in advanced nursing practice.
 - m. Use conceptual or theoretical framework to evaluate information systems and technology that can transform the future of healthcare.
 - n. Incorporate a philosophy of social caring based on respect for the whole person, embodied in professional practice and service activities within a multicultural society.
 - o. Analyze major factors and policy triggers that influence legislative health policy-making in order to achieve fair and just health-related policies, educate others about health disparities, and improve access to quality care.
 - p. Design, influence and implement health care policies that address social justice, equity, patient-centered care, cultural sensitivity, access to affordable healthcare, and quality, safe and effective healthcare for all.
 - q. Reflect on educational experiences and life lessons to gain insight into the development of a personal philosophy of healthcare and align advanced nursing practice and personal decisions both legally and ethically.

Post-licensure Track Objectives

Nursing Leadership Track:

- 1. Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.
 - a. Competency: Integrate client-centered and culturally appropriate concepts and approaches in strategic planning to meet population needs for clinical

- prevention and appropriate care services for diverse populations.
2. Design, conduct, and evaluate scholarly inquiry in nursing science using nursing concepts and theories with a focus on translational science.
 - a. Competency: Apply scientific findings from nursing, physiological sciences, public health, quality improvement, and management science in an organization for the continual improvement of nursing care delivery.
 3. Evaluate health care systems in regard to the use of information systems technology, quality improvement, culturally relevant care models and tracking of performance outcomes.
 - a. Competency: Use current information systems technology, quality improvement concepts, and outcomes analysis to ensure effective health systems management.
 4. Examine professional nursing practice roles of autonomy, integrity, social justice, and ethics in light of Vincentian heritage and values and other influences and value systems.
 - a. Competency: Participate in health policy analysis and health policy formation relative to specific health care issues relevant to practice as an administrator.

Nurse Educator Track:

1. Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.
2. Design, conduct, and evaluate scholarly inquiry in nursing science using nursing concepts and theories with a focus on translational science.
 - a. Competency: Synthesize findings from health professions education research within the practice of nursing education to support competency development in learners.
3. Evaluate health care systems in regard to the use of information systems technology, quality improvement, culturally relevant care models and tracking of performance outcomes.
 - a. Competency: Use current technological tools to ensure the best quality interprofessional education foundation for nursing.
 - b. Competency: Analyze current nursing education issues including but not limited to use of technology in teaching/learning, contemporary pedagogies, and measuring educational outcomes.
4. Examine professional nursing practice roles of autonomy, integrity, social justice, and ethics in light of Vincentian heritage and values and other influences and value systems.

Nurse Practitioner Tracks:

1. Develop an advanced level of patient and family care management with emphasis on interdisciplinary population health focused on a culture of safety and quality that prevents harm.
 - a. Competency: Synthesize data from evidence and other disciplines to improve one's practice.
 - b. Competency: Utilize professional practice at the highest level of accountability to render care to patients while respecting patient wishes and maintaining culturally competency
2. Design, conduct, and evaluate scholarly inquiry in nursing science using nursing concepts and theories with a focus on translational science.
 - c. Competency: Advocate for high quality, cost-effective care by working with healthcare teams, patients and policy advocates to improve health care.
 - d. Competency: Promote approaches to clinical practice that observes not only the interdependence of clinical practice and policy but also considers the ethics at both the legal and social context.
3. Evaluate health care systems in regard to the use of information systems technology, quality improvement, culturally relevant care models and tracking of performance outcomes.
 - e. Competency: Utilize clinical information systems in a way that allows for clinical documentation and evaluation to enhance patient safety.
4. Examine professional nursing practice roles of autonomy, integrity, social justice, and ethics in light of Vincentian heritage and values and other influences and value systems.
 - f. Competency: Promote a culture of excellence by providing peer review and implementing improvement interventions proactively.
 - g. Competency: Translates new knowledge regarding clinical guidelines to improve patient outcomes both individually and in collaborative partnerships.

Nurse Anesthetist Track: (In Partnership with Endeavor Health School of Anesthesia)

The program is designed to cultivate clinical expertise, leadership and innovation in nurse anesthesia practice. Upon completion the DNP/DNAP graduate within this track shall be able to:

1. Demonstrate the advanced knowledge and skills that comprise a foundation for nurse anesthesia.
2. Analyze, synthesize, and evaluate knowledge and research from nursing and basic sciences that support the evidence-based practice of nurse anesthesia.
3. Utilize evidence-based practice outcomes to influence health services, health systems, and health policies for diverse patient populations.
4. Contribute to the specialty of nurse anesthesia through participation in systemic inquiry and other scholarly endeavors.
5. Promote a culture of safety in health systems through the utilization of information technologies that support evidence-based practice.

6. Demonstrate leadership skills that will influence the direction of health care at the local and national level.
7. Employ consultative and collaborative skills on intra-professional and inter-professional teams to foster effective communication, provide leadership, enhance patient care, and create changes in complex health care delivery systems.
8. Translate theoretical knowledge into evidence-based health care practices to improve prevention and treatment outcomes for diverse populations.
9. Demonstrate responsibility to society by establishing a nurse anesthesia practice that is based upon professional standards as well as ethical and moral principles.

Post Licensure Program Admission Requirements

Students must meet all admissions requirements of the University. The SON is committed to the principles of non-discrimination and equal opportunity for all persons. Students are evaluated and admitted to the program without regard to race, color, religion, gender, sexual orientation, age, or national origin. The SON is committed to providing equal access for all students with disabilities. Eligibility for services and accommodations is determined by the Office for Students with Disabilities and/or the Plus Office. Students with disabilities who wish to receive services and accommodations at DePaul University must have their disability on record with either one or both of the above offices.

1. Admission criteria
 - a. Degrees
 - i. Associate degree or diploma in nursing from an ACEN or CNEA accredited nursing program. (RN to MS ONLY)
 - ii. Associate degree or diploma in nursing from an ACEN or CNEA accredited nursing program and a non nursing Bachelor degree from an accredited university. (RN to MS ONLY)
 - iii. BSN from a CCNE accredited nursing program (RN to MS OR DNP)
 - iv. MSN, from a CCNE accredited nursing program (DNP or POST GRADUATE CERTIFICATE ONLY)
 - v. Master's degree in nursing with certification as a Nurse Practitioner, Clinical Nurse Specialist, Nurse Anesthetist or Nurse Midwife (DNP Completion Program ONLY)
 - b. Hold a current unencumbered license as a Registered Nurse from a U.S. state with eligibility to practice in the state where clinical will take place.
 - c. An official transcript showing completion statistics with a grade of "C" or better* (RN to MS ONLY)
 - d. Cumulative GPA greater than or equal to 2.75. (RN to MS and Post Graduate Certificate ONLY)
 - e. All applicants must write a personal statement (2-3 pages).
 - f. Two letters of reference from former faculty or employer
 - g. Resume
 - i. Please include professional activities (i.e. organization memberships, committee memberships, officer positions, etc.), scholarly activities

and community service activities

2. Additional requirements for DNP Program All tracks
 - a. TOEFL score of 590 (PBT) or 96 (iBT) or above if the applicant's primary language is not English. In addition, the applicant will be required to demonstrate equivalent proficiency by an on-campus written essay, evaluated by the DNP Admission Committee
 - b. A Personal interview may be requested for admission along with a writing sample and will be scheduled in person or by a virtual platform with two faculty members after the application file is complete
3. Additional requirements for Nurse Anesthesia Track
 - a. Two years full time ICU experience prior to matriculation required
 - b. GRE within the last 5 years is required for BSN students in the nurse anesthesia track with a GPA < 3.5 on a 4.0 scale
 - c. Organic Chemistry completed within last five years
4. Additional requirement for DNP Completion Program
 - a. Students are required to submit an official letter from the NP Program Director stating the total precepted hours that they have completed at the college or university where they obtained their NP education and training. This certification letter for the 500 precepted hours or higher must be submitted prior to being admitted into the DNP Completion track.
5. Additional requirement for Dual Track Programs
 - a. Students applying for the Dual DNP/PMHNP Track should have a Cumulative GPA greater than or equal to 3.25 on a 4.0 scale.
 - b. A Personal interview may be requested for admission along with a writing sample and will be scheduled in person or by a virtual platform with two faculty members after the application file is complete.
6. Applicants may submit applications [online](#) with a \$40 application fee or through [Nursing CAS](#) with required DePaul \$40 application fee, an online centralizes application service for nursing programs nationwide.
7. The student is responsible for meeting all conditions of admission and for notifying the SON once all conditions have been fully met.

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

International students (those who were educated outside of the U.S. and/or require an F1 visa) must take additional steps to be considered for admission. Please visit [International Student Admission Process](#) for details.

Procedure for Program Admission

1. All post licensure nursing programs four times per year. Student applications will be reviewed when complete. Students may apply at any time; however, all applications MUST

be completed no later than 8 weeks before the start of the term the student seeks to start.

2. Application materials are available online at the University website. All forms, recommendations, test scores, transcripts, personal essays, and fees are required to complete the application process. Incomplete applications may result in delayed or denied admission for the current term. It is the student's responsibility to ensure that all parts of the applications are submitted in a timely fashion.

3. Graduate transfer credit of up to 12-quarter hours or the equivalent semester hours not used for another graduate degree may be approved as "Transfer Credit." The use of transfer credits requires completion of a formal transcript evaluation of all post-secondary schools attended, and inquiring students must supply official transcripts and original course syllabus with topic outline. Students who wish to transfer graduate nursing courses from another college or university, need to follow the [Transfer Credit Approval Process](#). If graduate course work was earned to complete a previous graduate degree, a "waiver credit" upon request and review of official college transcripts and course syllabus with topic outline documents.

Retention Policies

BS in Nursing Degree Seeking Students

1. An RN to MS student with undergraduate standing who fails to maintain a 2.00 cumulative grade point average (C average) is on academic probation. A student is removed from academic probation when the cumulative grade point average reaches the required minimum of 2.00. A student's academic status is reviewed after any Autumn, Winter, Spring and Summer quarters in which the student was enrolled in at least 1 credit hour. A probationary student may be limited to 12 credit hours per quarter until a cumulative GPA of 2.00 is reached. A student who remains on probation for three sequential quarters of enrollment may be dismissed.
2. A student dismissed for academic reasons is not eligible for readmission to DePaul University for a period of two quarters. The readmission decision is made by the Admission, Progression, and Retention (APR) Committee.
3. A dismissed student may be required to demonstrate acceptable academic achievement at another regionally accredited college or university before readmission is approved. Courses to be taken elsewhere must be approved by the Associate Director of the program and a grade of C or better must be earned in all such coursework to receive the transfer credit.
4. Credits and grades earned during previous enrollment at DePaul will remain a part of the student's records.
5. A student who completes the BS in nursing with a GPA < 2.75 will be prohibited from advancing to the MS portion of the RN to MS program. As long as all other undergraduate graduation requirements are met with a GPA ≥ 2.75 , the student will be permitted to matriculate to the MS degree in nursing. In order for courses to count toward a future MS degree, a minimum of a B- is required or else the courses must be retaken when

matriculated to the graduate program.

MS Degree, Post Graduate Certificate, and DNP Degree Seeking Students

1. To be retained in the nursing program, students must maintain a cumulative grade point average of 3.0 or greater in all academic work at the University.
2. To earn credit, students must earn a grade of B- or better in all courses. Graduate students who receive a grade of C+ to D- in any nursing course will have the opportunity to repeat the course a maximum of two times only. Student who receive a grade of F will be dismissed from the program
3. Students who drop below the required cumulative GPA of 3.0 will be placed on probationary status. Students who have less than the required GPA for two consecutive quarters will be dismissed from the program.
4. In accordance with the nursing licensing regulations, students found to be convicted of serious crimes (felonies, substance abuse) will be reviewed by the Admission, Progression and Retention Committee and may be suspended or dismissed from the program.
5. The SON expects a respectful environment conducive to teaching and learning from all students. Inappropriate conduct is defined as any action that interferes with the creation and maintenance of an effective learning environment. Students are expected to display civility in all aspects of their educational experience at DePaul University. Appropriate student conduct is outlined in detail in *the SON Professional Development Guidelines* (Appendix B). Appropriate student conduct includes, but is not limited to: being punctual for all classes; displaying courtesy; maintaining professional standards and safe practice in the clinical areas; maintaining academic integrity; avoiding leaving the classroom/clinical area other than during designated breaks and only with the permission of the responsible faculty member; fostering a positive learning environment by respecting the ideas and opinions of others; not talking during class or engaging in activities that distract the attention of others, including keeping cell phones and pagers set on silent mode; respecting others, including not making sarcastic or disrespectful remarks, using foul language or swearing; not threatening others; and remaining emotionally calm without inappropriate outbursts. Students are expected to follow the chain of command in resolving issues. Students displaying inappropriate conduct may be asked to leave the classroom, clinical area, or meeting. Inappropriate conduct will be documented with a written copy of the incident being placed in the student's file. Such incidents of inappropriate conduct will then be reported to the Director of the SON, with copies sent to the Associate Directors of the Program and the Admission, Progression, and Retention Committee. Additional sanctions for inappropriate conduct may be imposed, including dismissal from the nursing program. For additional information, please see both the University Student Handbook-available online, as well as the "Student Misconduct Process" outlined below.
6. Students are required to immediately notify the SON of any arrests or convictions during the program of study. The SON may elect to suspend the student until the criminal charge has been resolved. The SON may elect to dismiss the student for a criminal conviction.

Progression Policies

1. All students must attend an orientation session before beginning the nursing program of studies.
2. All students must meet with their assigned academic advisor before the first quarter of their program to review their official program of studies for the current academic year. The student is responsible to sign the coversheet of the Student Handbook and upload it to Castle Branch.
3. Students are responsible for scheduling a meeting with their assigned academic advisor or program director at the end of the first academic year and at least once during each subsequent academic year to review progress in the program and plan for the following year. Appointments should be made via Blue Star in Campus Connect. Advisors may not be available during the months of July and August. Please plan accordingly.
4. A student may not register for any course that has a prerequisite if that student has an incomplete in the prerequisite course.
5. Students may not attend classes in a course for which enrollment is blocked. No credit will be awarded for assignments completed when not officially enrolled in a course. This includes assignments previously completed and turned-in for courses taken in the past.
6. All required health records, evidence of CPR certification, criminal background checks, licensure, personal health insurance etc. must be kept on file in the SON. It is each individual student's responsibility to keep all of their records up-to-date. Drug screens are required for clinical placements. See [Student Health Requirements](#) for further information. Failure to have all records present and up-to-date before the start of each course will result in inability to attend the clinical component of the course.

Grade Scale

Below is the grading scale for all post-licensure nursing programs:

Letter Grade	Score
A	93-100
A-	90-92
B+	87-89
B	83-86

B-	80-82
C+	77-79
C	73-76
C-	70-72
D+	67-69
D	63-66

Leave of Absence/Withdrawal:

A. Students who need to interrupt their studies for personal, health or other reasons may request a Leave of Absence. The on-line Leave of Absence Request form can be found on Campus Connect via Navigation: Student Homepage to Academic Records to Leave/Withdrawal Request. This form needs to be filled out and submitted. Detailed information can be found [here](#). The request to the faculty adviser, Associate Directors of the post-licensure Program and the Admission, Progression and Retention Committee all should be notified.

B. Students who wish to return to the program following a leave of absence will need to submit a written request for resuming coursework to the Admission, Progression and Retention Committee. It is the student's responsibility to send a copy of such request to the Director of the SON, the student's faculty adviser and the Associate Directors of the Program. This written request should demonstrate the resolution of the extenuating circumstances contributing to the original need to leave the DePaul Nursing Program. This request for reinstatement must be made no less than 6 weeks prior to resuming the nursing course sequence. Students will be notified in writing regarding the decision concerning their re-entry to the program. Individual assessment of current knowledge and clinical skills will be made prior to placement of the student back into the nursing program. Students who become "out of sequence students" due to dismissal, withdrawal, or military/medical/family leave of absence will resume course work based upon roster space availability in required courses offered at that time.

8. Students who have taken a leave of absence from the program for greater than 12 calendar months must re-apply to the university. Their re-application will then be considered with all other qualified applicants applying for admission.

9. A student who withdraws from any nursing course while in good standing cannot progress in the sequenced nursing curriculum until that course has been successfully completed. In courses that contain both a clinical practicum and a lecture component, both course segments must be completed simultaneously. Exceptions may be identified and defined by the Admission, Progression and Retention Committee (APR) in consultation with either the Director of the SON and Associate Director of the Program and the course faculty.

10. A student who withdraws from any nursing course who is 'not in good standing' (with a grade of "C+" or lower or on probation) at the time of withdrawal, will be referred to the APR Committee. The APR Committee will meet to review the student's past and current performance and to elicit recommendations from the course faculty. A representative of the APR Committee may then meet with the course faculty and the Associate Director of the Program and student to counsel the student and to establish a contract for academic

improvement. Such students may not progress in the sequenced nursing curriculum until the course has been retaken and successfully completed.

11. A student may withdraw from any nursing courses 'in good standing' (with a grade of "B-" or higher) only twice during their program of study. A third such withdrawal will result in dismissal from the program.

12. All out of sequence students will be placed in courses on a space/faculty available basis. Priority will be given to students who are out of sequence for military service, severe illness, or family leave rather than for failure or withdrawal 'not in good standing'.

13. A student who has a grade less than B- (80% or less) at mid-quarter will be notified by the instructor. The student must satisfactorily fulfill all course requirements by the end of the quarter in order to receive a course grade.

A student currently enrolled in a degree program in which revisions are approved while their studies are in progress may elect to formally adopt the revised requirements.

Admission, Progression and Retention (APR) Committee

Enforcement of Retention Policies

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

1. Instructors shall notify the APR Committee within one week of the end of the quarter of a student who will be receiving a final grade in a course that less than B-. The APR Committee will be responsible to initiate the academic action to be taken and to notify the student of this.

2. If the Retention Policies indicate that the academic action taken is: a) inability to receive credit for a course, b) probation, c) suspension from the Program, or d) dismissal from the Program, the APR Committee shall notify the student in writing of the academic action. If the trigger for the academic action is academic performance, the APR Committee will notify the student in writing no later than two weeks after the end of the quarter in which the student received a final grade in any course(s) that has resulted in the academic action. If the trigger for the academic action is the conviction of a felony or other serious crime, the APR Committee will notify the student within two weeks of receiving notice of the conviction. If the trigger for the academic action is a decision by the Director of the SON upholding claims that the student has exhibited unsafe behavior in the clinical setting or has acted in a manner deemed student misconduct (See policies for each in the Student Handbook), notification of the student by the APR Committee will occur no later than two weeks after the Director of SON has communicated the decision to the student.

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

Grievance Procedure

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

Student rights

Student responsibilities

Policies regarding grade challenges

Procedures for filing a grade challenge

Disciplinary procedures and other related matters covered in the handbook

The exception is that the SON requires filing of a grievance prior to the commencement of the next academic quarter.

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

Appeals related to Final Grade Challenge

1. The student must make an appointment to meet with the clinical instructor course coordinator if the course involved is a clinical course, or course director for other courses.
2. If not resolved, the student meets with the Associate Director of their Program.
3. If not resolved the student meets with the Director of the SON and must send all documentation regarding the challenge prior to the meeting.
4. If not resolved, the student may contact the Associate Dean for Graduate Studies in the College of Science and Health, Additional information about grade challenges can be found in the [DePaul Graduate Student Handbook](#).

Appeals Related to Academic Requirements

Any post-licensure student who wishes to make an appeal related to academic requirements must first consult the Admission, Progression and Retention Committee. If the issue is not resolved the candidate shall then discuss the matter with the Director of the SON.

Appeals Related to Academic Process

Any post-licensure student who wants to request an exception to academic processes should contact the Admission, Progression and Retention Committee. If the request is denied, the student shall then meet with the Director of the SON.

Academic Integrity Policy

Violations of academic integrity in any form are detrimental to the values of DePaul, to the students' own development as responsible members of society and to the pursuit of

knowledge and the transmission of ideas. Violations of academic integrity include but are not limited to: cheating, plagiarism, fabrications, falsification or sabotage of research data, falsification of clinical data, destruction or misuse of the university's academic resources, academic misconduct, and complicity. If an instructor finds that a student has violated the Academic Integrity Policy, the appropriate initial sanction is at the instructor's discretion. An instructor may choose to file an academic integrity violation with the university. Actions taken by the instructor do not preclude the college or the university from taking further action, including dismissal from the university. Conduct that is punishable under the [DePaul Academic Integrity Policy](#).

Academic Integrity Policy Extension for Clinical and Service Settings

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

Student Advising/Program of Study

1. A faculty advisor will be assigned to each student upon acceptance to the program. The advisor will assist in developing an appropriate program of studies according to the student's preferences, abilities, and anticipated course availability. Students are required to meet with their advisors during their first quarter in the program, at the end of the first academic year and once per academic year following.
2. Classes are scheduled so that a full-time student can complete the typical program of studies in the designated time frame. Part-time students or students taking courses out-of-sequence, may experience delay in obtaining necessary courses for timely progression in the program.
3. Students who need to change to their progression plan must follow the steps below. Students need to be aware that they may experience delay in obtaining necessary courses for timely progression in the program.
 - A. Meet with his/her academic advisor.
 - B. The academic advisor and student will develop an adjusted program of study that the student will follow.
4. The student is responsible for setting-up an appointment with the designated advisor to develop an individualized program of studies.
5. The student is responsible for obtaining a copy of the program of studies worked out during the faculty-student advising session.
6. The student is responsible for enrolling in classes in the sequence identified in the program of studies. Should circumstances interrupt or delay registering for the designated classes, students must notify the Associate Director of the Program and faculty advisor for modification of the planned program of studies.
7. The student is responsible for meeting all prerequisites to courses for which the student is registering.

8. The student is responsible for scheduling periodic student-advisor, and student-instructor conferences.
9. The student may not register for any courses until all conditions of admission are completed. Students who are not in compliance will be withdrawn from the course(s) for which they are currently registered. Students will be denied progression in the program up to and including being denied graduation until all requirements are met.

Clinical Guidelines

The student acknowledges that all DePaul University and SON academic and conduct policies remain in place during clinical experiences. The student also agrees to comply with all of the policies set forth by the clinical site. The student understands that failure to comply with university or SON policies or the policies of the clinical site may result in sanctions, including removal from the clinical site and/or the course. The student understands that it is his/her responsibility to immediately notify his/her clinical instructor in the event that the student encounters problems with his/her mentor, preceptor, or staff at the site or at the site generally. Post licensure students are expected to find clinical preceptors and/or mentors at clinical sites preferably in which DePaul University has an affiliation contract with. If none exists then a request for a clinical affiliation contract must be secured and signed by both institutions. Additionally, a request for a clinical preceptor agreement must be submitted using a Request for Letter of Agreement form along with the preceptor's CV or Preceptor Profile and copy of verification of licensure in the state.

Procedure for Initiating a Clinical Affiliation Agreement

1. Find a preceptor licensed in the state in which your clinical practicum will be completed.
 - a. All preceptors **MUST** have at least 2 years of work experience in the track specialty.
 - b. NP track students must have a licensed NP, MD, or PA. For more information please see below FNP and AGNP Clinical Guidelines.
 - c. Nursing administration track students must have a MSN or higher prepared nurse working in an administrative role.
 - d. Nursing education track students must have
 - i. A MSN or higher prepared nurse working in the student's specialty area of practice for the Role Transition course.
 - ii. A MSN or higher prepared nurse working in nursing education for the practicum course.
2. Please refer to this [page](#) for step-by-step process. Students are responsible to complete this process.

Nurse Practitioner Track Clinical Guidelines

Students must complete 500 clinical hours in each population specialty. These hours must mainly be in primary care/outpatient settings. 160/500 hours **MUST** be with a FNP/AGNP. The remaining hours may include PA, or MD preceptors.

- No acute care/hospitalist or specialty inpatient units (outside of 80 hrs Optional Specialty)
- Outpatient specialty practice clinical hours including telehealth are optional and can be no more than 80 clinical hours
- FNP ONLY: Women's Health and Pediatrics minimum 80 hours required for EACH specialty
 - May be taken in any of the practicum courses as long as their corresponding theory courses have either been completed OR are being taken concurrently with the practicum courses.
- AGNP ONLY: Must have at least 80 clinical hours in geriatric-focused clinical setting.
- PMHNP or FNP/PMHNP ONLY: Must have a minimum of 80 Clinical hours in pediatric focused clinical setting and 80 hours in geriatric- focused population.

NSG 483 and NSG 487 require a minimum of 160 clinical hours each (no more than 170 hours allowed)

NSG 490 requires 180 clinical hours (No more than 190 hours allowed)

NSG 683 requires 160 clinical hours (No more than 170 hrs)

NSG 687 requires 160 clinical hours (No more than 170 hrs)

NSG 690 requires 180 clinical hours (No more than 190 hours allowed)

(The PMHNP Clinical Focus will be distributed across the practicums and will include: Assessment and Diagnosis, Counseling, Psychoeducation, Psychotherapy (50hrs), Med Management, Substance Abuse and Addictive Disorders (50 hrs), Comprehensive Care, Crisis Intervention and Mental Health Community Service will be required (50 hrs).

Student Clinical Requirements

1. Students work with their preceptor for agreed upon schedule of activities. Students must attend ALL scheduled learning activities including orientation, lectures, exams, seminars, laboratories, simulation activities, observations, clinical practicums, evaluation conferences, and other comparable activities. If any scheduled learning activities are missed, the student will need to make-up these learning activities or withdraw from the course. Students are advised that opportunities for making up learning activities are subject to clinical faculty, site and laboratory availability.

Students are responsible for notifying the appropriate faculty member when an absence from a scheduled learning activity cannot be completed. Notification of faculty prior to an absence is expected, and when not possible, the student is responsible for notifying the faculty as soon as possible. An excused absence is defined as an absence for illness or other special circumstance, in which the faculty has been notified prior to the absence. Unexcused absence is defined as an absence for i.e., vacation, or other activities, which result in an absence, and have not been pre-approved by faculty. Students are responsible for resolving any conflicts that may arise. Failure to notify an instructor or preceptor of absence or tardiness is grounds for dismissal from the program.

The decision regarding the make-up of learning activities or consequent withdrawal from a course resides with the course director and/or clinical instructor as specified in the course

syllabus and as practical to the missed activity and class/clinical setting. Any absence may result in a lower grade.

2. Arrive on time, prepared for all scheduled learning activities. This includes but is not limited to appropriate dress, knowledge of medications, development of an appropriate plan of care, completion of all written and motor tests on skills that are necessary to a particular clinical rotation/setting. Refer to Dress Code Policy.

3. Students deemed unprepared or tardy may be asked to leave the clinical setting by the preceptor, receiving an “Unexcused” absence for the day. An “Unexcused” absence in clinical may result in failure of the course.

4. Required clinical equipment and dress a watch with a second hand or digital second reading capability, a stethoscope with both a diaphragm and bell (dual head), a penlight, and lab coat with DePaul Nursing patches, name pin/badge, black ball point ink pen.

5. Provide own transportation to clinical sites and pay for own parking as needed. Students are not allowed to transport clients or client families at any time.

6. Know and follow individual clinical agency policies and procedures. This information is available through each individual agency.

7. Use his/her legal signature in charting. The initials RN/ SNP/SRNA or NP/CRNA are to follow the legal signature.

8. Be knowledgeable about indications for, contraindications, warnings/precautions, interactions, adverse reactions and proper dosing when prescribing medications under the supervision of the clinical preceptor.

9. Comply with additional requirements of the clinical setting including but not limited to drug screening and dress code.

10. Bring reference books and materials to the clinical setting as needed to provide safe care.

11. Full-time students are expected to direct their major energy to their program of study. Thus the SON recommends that students limit their outside employment hours per week during periods when classes are in session. Previous experience demonstrates that students who work in excess endanger their scholastic standing and place themselves “at risk” for academic failure. Neither the university nor the SON has or assumes responsibilities for the nursing care of patients rendered by the student working as an RN since the student is employed by a nursing service and during such employment is not under the supervision of DePaul University.

12. Students can use the same clinics or work settings where they are concurrently employed only if working with a preceptor or mentor different than their current supervisor as a student in an unpaid NP student clinical role.

13. The students lab coat with DePaul Nursing patches, name pin/badge nor any part of it, is not to be worn in or around the student’s place of employment.

Student Dress Code

1. The student is to be well groomed at all times presenting a professional image. The rationale behind this and the following requirements comes from the belief that it is the client who is the focus of the nurse-client relationship.

2. Hair must be kept off the face and above the collar or pulled back and secured. Natural hair tones only. Sideburns, moustaches, and beards must be neatly trimmed. Make-up, if worn, must be minimal and conservative. Personal care products may only be lightly scented. Other fragrances are not to be worn.

3. Nails may not extend beyond the tip of the finger. NO artificial nails or nail polish is permissible.
4. The ONLY acceptable accessories are: One single or pair of stud earrings-one on each lobe; one plain ring/ring set on one finger; NO other body jewelry or accessories is acceptable. Note: in some clinical areas all jewelry must be removed.
5. When giving direct patient care, in the office or clinic setting, students must wear their white lab coat with DePaul SON patch, their SON student name pin, and professional dress consisting of a shirt, sweater, and/or blouse with pants or a skirt, closed toe shoes in good repair with a low heel and in neutral color, with neutral hosiery or socks. No high tops or bare foot sandals. Labcoats and Student ID badges can be obtained at the DePaul University book store.
6. Inappropriate clothing would include: sweatshirts; sweat pants; tight or sleeveless tops; shirts with lettering, pictures or hoods; stirrup pants; leggings; Capri pants; shorts; blue jeans; tight or revealing clothing; visibly worn, torn, or faded clothing; midriff tops; low necklines; open-backed clothing; cleavage or underwear showing; or flip-flops.
7. These guidelines are subject to modification by the clinical instructor, based on the instructor's judgment, individual student religious or cultural practices, the sensibilities of the population, and the dress code of the particular office or clinic setting or event where the student is in attendance or practicing.

Unsafe Clinical Performance

A student is responsible for implementation of safe patient care during the supervised clinical practicum. Unsafe behavior can result in suspension from the clinical site, student remediation, failure of the course, and/or dismissal from the program.

Unsafe practice is defined as behavior that has the potential to cause serious harm to a patient.

- Examples of unsafe clinical behavior in clinical practice include, but are not limited to:
 - Violating HIPAA requirements
 - Violating OSHA requirements
 - Performing a procedure outside the domain of nursing
 - Performing a procedure in which he/she has not been prepared
 - Failing to use universal precautions
- Administering treatments/medications in any form via any route without consent and/or supervision from the clinical preceptor
- Advising patients about diagnosis or prognosis or referring patients to treatments, agencies, medications, without first discussing such with the clinical preceptor
- Performing any procedure without previous knowledge or training on a patient without preceptor guidance and supervision
- Inability to correctly calculate math/medication problems
- Knowingly exposing patients, colleagues and others to actual or potential life-threatening communicable diseases
- Stealing drugs, supplies, or belongings from an agency or patient
- Removing copies of patient care documents from healthcare agencies
- Removing patient identification
- Failing to adhere to DePaul SON and/or clinical agency policies
- Falsifying patient records or fabricating patient experiences

- Neglecting to give appropriate care
- Providing patient care in a harmful manner or exhibiting careless or negligent behavior in the process of providing care to a patient
- Refusing to assume the assigned care of a patient, or failing to inform the instructor of an inability to care for a patient
- Willfully or intentionally causing physical or emotional harm to a patient
- Failing to report an error in assessment, treatment, or medication or failure to report an unusual occurrence or an adverse reaction
- Failing to comply with DePaul's Drug Free Campus policy
- Performance not in compliance with stated student expectations as outlined in lecture or course syllabi

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

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

1. Dismiss the student for the remainder of the clinical day. The preceptor will follow institutional guidelines as appropriate.
2. Contact the course instructor and the Associate Director of the Program.
3. Submit a written report of the incident to the clinical instructor and Associate Director's office within one working day. The clinical instructor will schedule a meeting with the student within 24 hours of the incident or as soon as is practical and prepare a written report that describes the incident that resulted in the student's dismissal from clinical. The student will be given a copy of the report at this time.
4. The clinical instructor will advise the student that he or she will not be able to return to clinical until the meeting with the Associate Director takes place. The Director of the SON may also be involved in the meeting.
5. Within 3 working days, or as soon as is practical, a meeting will be held. In attendance at the meeting will be the clinical instructor, the student, the course coordinator and the Associate Director of the Program and Director of SON. The student may have his or her advisor present at the meeting. A decision regarding the student's continuation in the program will be made. This meeting will determine whether the student will be administratively withdrawn with a grade of F or is allowed to return to complete the clinical. The clinical instructor initiating the meeting is not involved in the decision regarding the student's progression in the program. A decision is made at the meeting and communicated to the student.
6. The documentation related to unsafe clinical practice will be kept in a secured file within the SON office.
7. The Admission, Progression and Retention Committee (APR) reviews any administrative course withdrawal resulting in an F. The APR will determine if the student is dismissed from the program or may return in an appropriate quarter per the procedures of the

APR Committee. The student may elect to appeal this decision per procedures in the student handbook.

Clinical Performance Limitation Related to Temporary Disability

A student who incurs an injury or has any other physical limitation of a temporary nature must notify the clinical instructor and course coordinator and provide documentation from his/her health care provider that he/she is able to safely carry out the duties of a student in the clinical setting. This must occur as soon as possible and prior to attendance at clinical. The final decision as to whether the student is allowed in the clinical setting rests with the clinical agency.

Clinical Probation/Remediation

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

The clinical contract is documented on the Student Faculty Contract form (Appendix A) and is completed by the course coordinator and clinical instructor. The course coordinator and clinical instructor will document, in writing, on the contract form, the areas of deficient student performance and identify behaviors the student will need to demonstrate in order to receive a passing grade. The student will receive a copy of this contract. The student's academic advisor will be notified as will the Associate Director of the Program. The academic advisor will follow-up with the course coordinator regarding the student's remediation progress. By the end of the quarter (or completion of the course in the event of a withdrawal), the student must demonstrate satisfactory remediation of all areas of concern noted in the contract without further additional deficits or risk failing the course.

Clinical Failure

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

Confidentiality

Patient/Client Privacy

1. The student is expected to adhere to the American Nurses Association Code for Nurses and act in accordance with the Patient's Bill of Rights.
2. Confidentiality is the protection of a client's privacy through careful use of oral and written communications. The client's right to privacy is safeguarded by judicious protection of confidential information. The student should adhere to the University Social Media Guidelines. Social Media Policy ([Appendix C](#)) regarding maintenance and confidentiality

and protection of privacy as it relates to communication via social media.

3. A client's chart is a legal document. Information from the client and chart is confidential and can't be disclosed to those who are not caring for the client. All entries must be accurate and legible. No part of the client's medical record can leave the office or clinic setting.

4. Information communicated by clients to students may not be repeated to anyone outside of the direct care team. Care should be taken when in the corridors, lounge, classroom, dining rooms, or other public areas, so that conversations are not overheard.

5. An individual can withhold any information about himself/herself that he/she desires. Nursing students must be especially careful regarding the invasion of the client's privacy.

6. Students should use only the initials of the client when filling out history and physical exam forms, SOAP notes, and any other documents which are a part of their educational experience.

In the event of any unprotected exposure to blood or body fluids, the student is to follow the procedures of the DePaul University [Bloodborne Pathogen Exposure Plan](#).

Exposure at DePaul University

Any student who incurs an exposure incident at DPU should obtain confidential post-exposure evaluation and follow-up.

Students who would like to obtain this confidential post-exposure evaluation and follow-up from Advocate Illinois Masonic Medical Center may contact DePaul Public Safety, who will facilitate transportation to Advocate Illinois Masonic Medical Center.

The post exposure evaluations and follow-up should include at least, the following elements:

Documentation of the route(s) and circumstances of the exposure.

The results of the source individual's blood testing, if available; and

All medical records relevant to the appropriate treatment of the student, including vaccination status, the Safety Officer or his/her designee will maintain these records.

Collection and testing of blood for HBV and HIV serological status will comply with the following:

The exposed student's blood shall be collected as soon as feasible and tested after consent is obtained. The student may have his/her blood collected for testing of the student's HIV/HBV serological status. The blood sample will be preserved for up to 90 days to provide time for the student to decide if the blood should be tested for HIV serological status.

The student is responsible for costs associated with the medical evaluation.

Exposure at an Outside Facility while Performing Duties within Student Role

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

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

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

Student Clinical Requirements

It is mandatory for students to complete and upload all clinical requirements to their immunization tracker via Exxat Approve. All clinical requirements must be submitted and approved prior to the first day of the quarter of clinical attendance. Updates and renewals (e.g., updated lab results, renewed coverage, yearly immunizations) must be submitted PRIOR to the expiration date. It is the responsibility of the student to ensure that all clinical requirements are kept current.

While non-compliant, a student is not permitted to attend ANY clinical activity, including orientation. Inability to attend a clinical activity due to non-compliance will result in an unexcused absence from clinical that may not be made up. Missing a required activity that cannot be made up or accumulating more than one unexcused absence puts the student at risk of failing the course. Should a student remain non-compliant for more than 5 business days from the start of the quarter OR miss a mandatory clinical activity such as orientation due to non-compliance, he or she may be administratively withdrawn from the course.

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

1. Tuberculosis (TB) Screening:

All students that will provide patient care in the clinical setting are required to submit proof of a negative screening for tuberculosis prior to the first day of the clinical rotation. Documentation must be uploaded into and approved to fulfill this requirement. This can be done by completing one of the following:

a. Two-step Tuberculin Skin Test

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

b. QuantiFERON Gold Test

- i. The student will be required to have this blood test drawn and upload the results. **Please note:** *some clinical sites will only accept this as proof of a negative screening.*

Students with Positive TB Results

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

- i. Submit certification from a healthcare provider that the student is currently

free of the signs and symptoms of active tuberculosis. This certification must be renewed every 6 months.

AND

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

OR

- iii. Complete a QuantiFERON Gold test.

AND

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

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

- i. Obtain a chest x-ray and submit the results.
- ii. Submit certification from a healthcare provider that the student is currently free of the signs and symptoms of active tuberculosis. This certification must be renewed every 6 months. If the student shows signs and symptoms of active tuberculosis during the provider evaluation, the student may not begin the clinical rotation until documentation of a completed course of prophylactic therapy and certification of currently being free of the signs and symptoms of active tuberculosis has been completed.

2. Rubeola, Mumps, Rubella (MMR): A vaccination series OR titers are necessary to document immunity. If uploading a titer, ensure the document contains the titer value as well as the reference norm. The required titers are as follows:

- a. Rubeola IgG
- b. Mumps IgG
- c. Rubella IgG

If titers indicate no immunity for Rubeola, Mumps, Rubella, and Varicella, immunization is required. For Measles, Mumps and Rubella, the following rules apply: If you were born in 1957 or later and have not had the MMR vaccine, or if you don't have a blood test that shows you are immune to measles or mumps (i.e., no serologic evidence of immunity or prior vaccination), get 2 doses of MMR (1 dose now and the 2nd dose at least 28 days later).

If you were born in 1957 or later and have not had the MMR vaccine, or if you don't have a blood test that shows you are immune to rubella, only 1 dose of MMR is recommended. However, you may end up receiving 2 doses, because the rubella component is in the combination vaccine with measles and mumps. For HCWs born before 1957, see the MMR ACIP vaccine [recommendations](#).

3. Varicella: A Varicella IgG titer OR documented receipt of two vaccinations is required. If the initial titer is negative, provide documentation of two vaccinations

after the negative titer. A repeat titer is NOT required.

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

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

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

If bloodwork following completion of the series of three vaccines does not show immunity, further vaccination is necessary. If, after completion of a second series, no immunity is detected, the student must sign a waiver.

The waiver states that you understand the risk associated with continuing in the nursing program, specifically that if you contract the disease to which you are not immune, the school is not liable and that you want to continue in your studies, knowing the risk. Once you have documented your immunity or signed a waiver, you will not need to furnish any further documentation.

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

CDC Categories of Persons at Increased Risk for Hepatitis B Infection

- i. Persons born to mothers in or from countries in which Hepatitis B is endemic.
 - ii. Sexually active men who have sex with men.
5. Tetanus-Diphtheria-Pertussis Booster: Must be within the last 10 years. Documentation can be in the form of a signed immunization card or statement from your healthcare provider or health department that documents the date the tetanus booster or Tdap were administered. Please note that a tetanus booster alone is not adequate, and you must demonstrate immunization for diphtheria and pertussis within past 10 years.
 6. Yearly influenza vaccine is required by October 15. Incoming MENP students will receive Standard Precautions/Universal Precautions Training as part of their initial

coursework.

7. **Current CPR Certification:** Current American Heart Association (AHA) certification in Basic Life Support (BLS) for Healthcare Provider is required for all entering and current students. A list of approved courses can be found [here](#).

Content covered in AHA BLS class:

- Critical concepts of high-quality CPR
 - The American Heart Association Chain of Survival
 - 1-Rescuer CPR and AED for adult, child and infant
 - 2-Rescuer CPR and AED for adult, child and infant
 - Differences between adult, child and infant rescue techniques
 - Bag-mask techniques for adult, child and infant
 - Rescue breathing for adult, child and infant
 - Relief of choking for adult, child and infant
 - CPR with an advanced airway
8. Evidence of Current Health Insurance: All nursing students must submit proof of continuous comprehensive health insurance on a yearly basis. Please note that the name on the health insurance must match the student's name.
 9. A signed HIPAA-FERPA [authorization](#) must be uploaded by the start of the first quarter. This form must be signed for the School of Nursing to release any student health information related to clinical requirements to clinical sites.
 10. Bloodborne Pathogens Exposure [training](#) must be completed on matriculation of the program and is renewed on October 31 of each year.
 11. COVID-19 vaccination is not mandatory for participation in the program, but is strongly recommended for all students. However, students placed in clinical rotations where vaccination is a requirement will need to comply with those specific mandates. Failure to obtain the required vaccination for such rotations will result in an interruption to the student's progress within the program.
 12. A signed Acknowledgement of Mandated Report Status [form](#) must be submitted, indicating that the student understands that while in the clinical setting, the student becomes a mandated reporter under the Abused and Neglected Child Reporting Act.
 13. A signed student clinical [acknowledgement](#) must be uploaded by the start of the first quarter.
 14. A signed student handbook [agreement](#) must be uploaded by the start of the first quarter.
 15. Criminal Background Check: Nursing students must submit to a criminal background check prior to their initial clinical experience. Criminal background checks must be completed by August 1st for Fall Quarter or December 1st for Winter Quarter and will remain in effect unless: a.) a clinical agency determines it necessary to require more frequent or more detailed background checks, b) OR a nursing

student interrupts his/her program of study for one quarter or longer. In the above cases, it is mandatory for the student to have another criminal background check performed.

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

16. **Drug Use and Screening:** Although Illinois state law permits the limited possession and use of cannabis, using or possessing cannabis remains a crime under federal law. In addition, other federal laws, such as the Safe and Drug Free Schools and Communities Act and the Drug-Free Workplace Act, prohibit cannabis in the workplace and on campus. Therefore, in accordance with federal law, DePaul University prohibits the use and possession of cannabis on any premises owned or controlled by DePaul University.

Similarly, the School of Nursing program is affiliated with clinical sites that also receive federal funding. Clinical sites typically expect and impose drug screening requirements and similarly prohibit the use of marijuana/cannabis regardless of whether for medical use. Drug screening is also consistent with the recommendations of the American Nurses Association Code of Ethics including protecting the health and safety of patients.

As such, School of Nursing students are required to complete a ten-panel urine drug screen (including amphetamines, barbiturates, benzodiazepines, cocaine metabolites, marijuana metabolite quant., marijuana metabolites, methadone, methaqualone, opiates, phencyclidine, and propoxyphene). Please note that this may include various forms of marijuana, cannabinoids, THC, and similar substances that are prohibited under federal law (even where such substances may be permitted under state law for recreational or medical purposes). Please be advised that students may be required to complete an annual drug screen. Students may complete drug screening through approved health care providers. The drug screen MUST follow a “chain-of-custody” procedure.

The School of Nursing will be unable to place students in a clinical setting if there are positive findings on the drug screen. A student who is unable to complete the clinical portion of the curriculum will be unable to complete the degree requirements.

When a prospective or current School of Nursing student has tested positive for one or more substances as part of the required drug screen, the student may submit a second, confirmatory ten-panel urine drug screen by an approved provider within 7 days. A prospective or current student who has tested positive on an initial drug screen, by applying for admission to the School of Nursing and seeking enrollment, agrees to cooperate with the School of Nursing in connection with any follow-up meetings, interviews, or tests requested by the School of Nursing.

Where the student admits to use of a controlled substance identified on a positive drug screen (or a second drug screen confirms the use of controlled substances), and where there is no sufficiently credible explanation for the positive drug screen (i.e., the accidental ingestion of a controlled substance through consuming substances not

prohibited by federal, state, and local law), the student will be unable to enroll and/or will be dismissed from the program (in accordance with local, state, and federal law).

Drug Use and Testing

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

Release forms must be signed to have the results sent to the Compliance Officer.

DNP Residency Training

The DNP Residency Training is a key component of the DNP program. The essential components of residency are scholarly activities that support the implementation and completion of a DNP Project. These may include time spent with a preceptor/mentor in a professional institution, clinic or community-based organization which provide care to an underserved/disadvantaged patient population due to lack of access or socioeconomic reasons. Continuing education conferences and workshops that expand /support the DNP Project may also be used. A minimum of 400 hours is required for the DNP NP Track Residency Training; the student is required to maintain a record log of the scholarly activities that includes a reflection analysis of each experience. The reflection journal will be incorporated into Typhon. The academic advisor/course director is responsible for supervision of the DNP Residency Training.

Baccalaureate & Post-Master's entry Registered Nurse DNP NP Track student - the DNP Residency Training occurs after 500 hours of advanced practice core preceptor clinicals in each of the designated Nurse Practitioner tracks. This includes: NSG 483, NSG 487, NSG 490, NSG 683, NSG 687 and NSG 690. In addition, students who wish to enroll in NSG 700 and NSG 701 must have completed NRSNG 601 with a successful IRB proposal and be concurrently enrolled in NSG 602 at time of course entry.

In NSG 602, students will earn 100 hours for their DNP project towards the 1,000 DNP degree hours.

A minimum of 400 DNP Residency Training clinical hours are required during NSG 700 Advanced Practicum I (DNP Residency Training starts) and NSG 701 Advanced Practicum II (DNP Residency Training ends).

Postgraduate Certificate Nurse Practitioner, Clinical Nurse Specialist and Nurse Midwife on DNP Completion Program: DNP Residency Training requires 400 clinical hours. 500 hours of direct patient care can be credited from previous academic advanced practice precepted hours. The credit will be based upon the number of documented NP preceptor clinical hours verifiable through the official transcript of records for the NP, CNS, or NM program of study or an official letter (must be written on a school's letterhead) from the Director of the NP/CNS/NM Program stating the

total preceptor clinical hours.

Postgraduate DNP Completion Program Hours:

- Previous Academic Advanced Practice Precepted Hours (500)
- NSG 602 DNP Project Hours (100)
- DNP Residency Training
 - NSG 700 Advanced Practicum I (200)
 - NSG 701 Advanced Practicum II (200)

Professional Portfolio

The SON does not endorse the use of any social media outlet such as LinkedIn or Facebook for building a professional portfolio. However, if a DNP student would like to build an online professional portfolio and online social network before or during job hunting, strictly follow the strategies for maximizing social media benefits on this website link:

<https://www.aarp.org/work/job-hunting/info-2017/10-ways-to-use-linkedin-job-search.html>.

Students may use a faculty guided Typhon Framework to house their professional curated organization of educational documents, skills, competencies and achievements for future use.

DNP Project

DNP students are required to complete a practice-focused inquiry as a DNP Project related to advanced nursing practice, which is broadly defined by AACN (2004) as: *any form of nursing intervention that influences health care outcomes for individuals or populations, including the direct care of individual patients, management of care for individuals and populations, administration of nursing and health care organizations, and the development and implementation of health policy.* (p. 2)

The DNP Project is a culmination of the knowledge gained in the DNP program courses and provides an opportunity to demonstrate an analytical approach to programmatic, administrative, policy or practice issues in a format that supports the synthesis, transfer and utilization of knowledge. The intent is to demonstrate identification and resolution of a practice problem through the scholarship of application/integration. The project is expected to contribute to a patient care, practice, leadership, administration or policy areas of advanced nursing practice; examples include: an evaluation of a program or intervention, an analysis of a health care policy, developing a practice training program, quality improvement or safety program, a comprehensive systematic review for determination of best practice an implementation and evaluation of best practices for managing patient care issues or disease- or treatment-related symptoms, or a strategic plan for the delivery of healthcare.

The DNP Project proposal will be developed in NSG 600: Evidence-Based Practice Research I. The student will identify a DNP Project Team with two members minimum: one being a DePaul or North Shore faculty member as the Team Lead & a second team member (content expert/mentor) with a master's or higher degree (from the SON/North Shore School of Nurse Anesthesia faculty and/or from an outside institution). In NSG 601: Evidence Based Practice Research II, the students will obtain approval from the DePaul University IRB and prepare to implement their projects. Continuation of the project will occur in NSG 602 in which 100 DNP Project hours are required of all DNP students. A formal oral presentation and a

publishable manuscript will be presented to the student's DNP Project Team for approval at the end of the program.

Group Projects: Student wishing to do a DNP project as a group of two must show evidence and a rubric of division of labor that there is enough content and work for both students and adhere to the parallel project guidelines within the course. The work distribution must be equitable (see guidelines below from the AACN White paper published on August 2015).

Group/Team Projects can be a valuable experience, helping to prepare graduates to function in interprofessional teams in the future, but often present challenges, particularly for student evaluation and grading. Group projects are acceptable when appropriate to the students' area of practice and goals, and the project aims are consistent with the focus of the program.

Guidelines for the entire project as well as for individual contributions to the project and a rubric used for each individual's evaluation should be developed and shared with students prior to the initiation of the project. Each member of the group must meet all expectations of planning, implementation and evaluation of the project, and be evaluated accordingly. Each student must have a leadership role in at least one component of the project and be held accountable for a deliverable. The following serve as illustrative examples:

The student serves as a vital member of an interprofessional team, implementing and evaluating a component of a larger project.

Students work on the same project, for example improving hand washing, across multiple units within the same organization or across multiple organizations.

Students focus on different aspects of improving diabetic outcomes of care by meeting criteria for guidelines for diabetes care such as eye exams, time frames for Hg A1-c screening and foot care.

Students analyze and implement changes in state immunization policies to improve access to immunizations and increase immunization rates.

Systematic Reviews: In light of the Commission on Accreditation's 2020 White Paper on DNP Projects, a systematic review using the [PRISMA](#) or [JBI](#) guidelines for systematic reviews and meta-analysis is now considered as an acceptable DNP project. All systematic review DNP projects must be formally registered with PROSPERO as appropriate. An implementation and dissemination plan for the findings of the systematic review must accompany this type of DNP Project submission.

It's important to note that integrative and systematic reviews alone do not constitute a DNP project. Integrative and systematic reviews form the basis to evaluate the literature, identify gaps and the evidence to guide any proposed [practice change](#).

Access to Student Records

1. A student may have access to his/her personal student record upon request. Confidentiality is maintained with all student files. Release of information is granted upon written request by the student.
2. No specific or detailed information concerning specific medical diagnoses will be

provided to faculty outside the department, administrators, or even parents, without the expressed written permission of the individual in each case. This position with respect to health records is supported by amendment to the Family Education Rights and Privacy Act (FERPA) of 1974. Health officials and other institutional officers must remember that all confidential medical/health care information is protected by statutes and that any unauthorized disclosure may create legal liability.

Graduation

DePaul University awards degrees to students who successfully completed their program. All requirements of the University, College, and SON must be met as outlined in the current Bulletin.

The student must [Apply to Graduate](#) for degree conferral and commencement by the deadline posted in the academic calendar.

Graduation Forms (DNP Students)

All graduating DNP students must email their graduation forms to their program director no later than the last day of the quarter of their degree conferral. Send all below documents to your program director:

1. Final version of submission ready journal manuscript as a PDF
2. Abstract and Keyword form
3. Author Submission form
4. Approval of Proposal for Final Project form
5. Final Requirements Report form from program director

Legal Limitations for FNP/AGNP/PMHNP Licensure

Requirements for certification licensure may vary from state to state. Those students wishing to take their certification exam outside of Illinois are advised to check with that state's licensure requirements early in the academic program. All DNP students will be eligible to take their national certification exam upon completion of all NP track courses. However, the certificate will not be released until your degree has been conferred

Program Time Limitation Requirements

RN to MS Program

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

□ $7 \text{ quarters} \times 2.5 = 17.5/4 \text{ quarters} = 4.3$ rounding up to 5 years to complete the BS degree

MS degree completion defined as 2.5 times the amount of time from the date of the first day of the term for the students' first term of enrollment in the program OR the first day of the term the student has matriculated as a MS student from the BS component. It is a total of 9

quarters to complete the MS taking 2 courses/quarter for the ADN with a previous bachelor degree

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

An extension request beyond the limitation must be supported by extenuating circumstances. The SON's APR Committee reserves the right to make the final decision in consultation with the SON Director/Chief Nursing Officer and the CSH Dean on any appeal for extension of the Postgraduate Certificate Program completion.

Postgraduate Certificate Program

Defined as 5 years from the first quarter of matriculation into the Postgraduate Certificate Program. An extension request beyond the limitation must be supported by extenuating circumstances. The SON's APR Committee reserves the right to make the final decision in consultation with the SON Director/Chief Nursing Officer and the CSH Dean on any appeal for extension of the Postgraduate Certificate Program completion.

DNP Program

Defined as...All students in the DNP program from various tracks (BSN, MS, RN to MS-prepared NP, NA, and completion tracks) must complete their program of study on or before 7 years from the first quarter of matriculation into the DNP program (i.e., first course enrollment in one of the degree requirement or doctoral core courses). An extension request beyond the limitation must be supported by extenuating circumstances. The SON's APR Committee reserves the right to make the final decision in consultation with the SON Director/Chief Nursing Officer and the CSH Dean on any appeal for extension of the DNP Program completion.



Appendix A: Student Faculty Contract

Name:

Date:

I have been placed on a warning contract for the following reason(s):

The following decisions have been made and have been discussed with me:

Failure to meet the above will result in the following action:

Progress Summary:

Faculty Signature

Date

Student Signature

Date

Faculty Signature

Date

Student Signature

Date

CC: Student, Faculty, Student File, APR Committee Chair, Associate Director of Program,
Director of School of Nursing

Appendix B: Professional Development Guidelines

Professional Development Guidelines

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

Appropriate and respectful interpersonal relations and communication with clients, peers, faculty and other health care personnel.

Responsible fulfillment of class and practicum obligations, including timely, safe provision of nursing care in the practicum setting based on sufficient knowledge; and

Honesty and integrity in all academic and professional matters.

These expectations are minimally essential to professional nursing practice and should be met in both classroom and clinical settings however individual instructors may stipulate other rules for professional behavior as appropriate to the course and as outlined in the syllabus.

The following are examples of behavior that may hinder maximum professional growth and competence as a professional nurse and are specifically discouraged:

Tardiness is defined as arriving 5 minutes after clinical or lab has been started by the instructor. Tardiness in the clinical setting can place a client or peer in an unsafe situation. You must speak in person (face to face, phone) to your clinical instructor if you are going to be tardy or absent in either lab or clinical. Calling the school or facility, leaving a message, or sending e-mail is not acceptable. Two tardies may result in course failure.

Absences are also very serious and difficult to make up. Because of this, one clinical/lab absence will result in a student faculty contract. Clinical instructors will work with the team leader to determine the method of making up missed clinical experiences. Additional absences from clinical may result in failure to meet clinical outcomes and a failing grade. Make-up for clinical or lab sessions must be approved by the lead teacher or designee.

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

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

Dishonesty as a violation of professional ethics and standards is defined as the intentional falsification or omission of information that has the potential to mislead, harm, or take unfair advantage. Dishonesty may take many forms including plagiarism, documentation of inaccurate or unverified patient data, and failure to report unethical or unsafe professional practice. Dishonesty is most serious and can result in failure, suspension, or dismissal.

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



Appendix C: School of Nursing Use of Social Media Policy

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

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

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

Appendix D: Document Conversion Instructions for Qualtrics Surveys

This appendix includes instructions for how to convert .pdf files into .docx format for use in submitting resumes via Qualtrics preceptor/mentor surveys.

PDF to .docx Using Microsoft Word

Right click on the .pdf and select “open with,” choose another app, and select Word. The file will automatically convert into .docx format. If there are compatibility issues due to formatting, try another method below.

Using Google Drive (recommended)

Sign into your drive.google.com account. Click on “new” in the top left corner, navigate to file upload, and select the .pdf. Once the upload is complete, click on the three dots to the right of the file name in the browser. Select “open with” and choose Google Docs. Once the document loads, go to File, select download, and choose the “Microsoft Word (.docx)” format.

Using Adobe Acrobat (paid)

DePaul students are eligible to download the Adobe Creative Cloud suite at a discount through the [Kivuto Web Store](#). Once downloaded and installed, open the .pdf in Acrobat Pro. Go to menu, select “export a pdf,” choose Microsoft Word, and click on “Word Document.”