



MASSACHUSETTS  
COLLEGE of PHARMACY  
and HEALTH SCIENCES

*School of Nursing*



# **Doctor of Nursing Practice Handbook**

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About this handbook: This handbook is designed to be a ready resource for Doctor of Nursing Practice students and is specific for the SON DNP Program. For general university-wide policies and information, please refer to the Massachusetts College of Pharmacy and Health Sciences Student Handbook which can be found on the university website, [mcphs.edu](http://mcphs.edu)

## **Welcome from the Dean of Nursing**

Dear Doctor of Nursing Practice (DNP) Student:

Welcome to the School of Nursing at Massachusetts College of Pharmacy and Health Sciences (MCPHS)! Founded in 1823 as the oldest University in Boston, MCPHS is a private co-educational institution with an unbroken record of academic excellence and distinguished tradition of innovation in teaching and learning. Our university is unique in the number of professional health care programs and the opportunity for interprofessional education across programs and campuses.

The Doctor of Nursing Practice (DNP) program is designed to build on graduate level studies of the APRN and prepare nurses with the highest level of practice expertise focused on systems leadership. Graduates of the DNP program will serve the needs of their community, be change-agents within their respective clinical settings, enhance quality of care delivered using scholarly evaluation and the integration of evidence based knowledge that support patient outcomes. Each DNP student will demonstrate competency in eight identified DNP domains through coursework, clinical immersion and scholarly integration.

Our vision of academic excellence is achieved through an intellectually energetic environment that challenges, yet supports students learning. On behalf of the entire School of Nursing Faculty and Staff, we wish you the best on your educational journey in the Doctor of Nursing Practice program.

*Tammy L. Gravel*

Tammy L. Gravel, EdD, MS, RN  
Dean and Chief Nurse Administrator  
Associate Professor

## **Faculty and Staff Directory**

### **DNP Leadership Team**

Tammy L. Gravel, EdD, MS, RN  
Dean and Chief Nurse Administrator, Associate Professor  
[tammy.gravel@mcphs.edu](mailto:tammy.gravel@mcphs.edu)

Barbara Frechette, DNP, PMHNP-BC  
Director, Online Graduate Program, Associate Professor  
[barbara.frechette@mcphs.edu](mailto:barbara.frechette@mcphs.edu)

Bonnie Laurent, DNP, APRN, CPNP-PC, PMHNP-BC  
DNP Interim Program Administrator, Associate Professor  
[bonnie.laurent@mcphs.edu](mailto:bonnie.laurent@mcphs.edu)

### **DNP Faculty**

Edith Claros, PhD, MSN, PMHNP-BC  
Psychiatric Mental Health Nurse Practitioner Track Coordinator  
[edith.claros@mcphs.edu](mailto:edith.claros@mcphs.edu)

Deirdre Donahue, DNP, ANP-BC, CPHQ  
Assistant Professor  
[deirdre.donahue@mcphs.edu](mailto:deirdre.donahue@mcphs.edu)

Barbara Frechette, DNP, PMHNP-BC  
Director, On-line Graduate Studies, Associate Professor  
[barbara.frechette@mcphs.edu](mailto:barbara.frechette@mcphs.edu)

Tammy L. Gravel, EdD, MS, RN  
Dean and Chief Nurse Administrator, Associate Professor  
[tammy.gravel@mcphs.edu](mailto:tammy.gravel@mcphs.edu)

Bonnie Laurent, DNP, APRN, CPNP-PC, PMHNP-BC  
DNP Interim Program Administrator, Associate Professor  
[bonnie.laurent@mcphs.edu](mailto:bonnie.laurent@mcphs.edu)

Fatma Zohra Mataoui, MD, PhD, RN  
Associate Professor  
[fatmazohra.mataoui@mcphs.edu](mailto:fatmazohra.mataoui@mcphs.edu)

Patricia Murray, DHS, MSN, FNP-BC  
Associate Dean, Accreditation & Assessment, FNP Track Coordinator, Associate Professor of Nursing  
[patricia.murray@mcphs.edu](mailto:patricia.murray@mcphs.edu)

Nancy Street, ScD, PPCNP-BC, FAAN  
Professor  
[nancy.street@mcphs.edu](mailto:nancy.street@mcphs.edu)

**DNP Program Staff**

Mary Ellen Rivet, BA  
DNP Administrative Assistant, Graduate Program  
[maryellen.rivet@mcphs.edu](mailto:maryellen.rivet@mcphs.edu)

**Clinical Operations Coordinator**

Doreen Luciani, BS  
Clinical Operations Coordinator, Graduate Program  
[doreen.luciani@mcphs.edu](mailto:doreen.luciani@mcphs.edu)

**MCPHS Online Liaison**

Kristen Watson, BA, MEd  
Online School of Nursing Student Services Specialist  
[kristen.watson@mcphs.edu](mailto:kristen.watson@mcphs.edu)

**Library and Learning Resources Liaison for Doctoral Nursing Students**

Karen Alcorn, MLS  
Reference and Instruction Librarian, Associate Professor  
[karen.alcorn@mcphs.edu](mailto:karen.alcorn@mcphs.edu)

## **1.0 MCPHS School of Nursing Accreditation**

The Bachelor of Science in Nursing degree program at Massachusetts College of Pharmacy and Health Sciences is accredited by the Commission on Collegiate Nursing Education <https://www.aacnnursing.org/ccne-accreditation>.

The Master of Science in Nursing degree program at Massachusetts College of Pharmacy and Health Sciences is accredited by the Commission on Collegiate Nursing Education <https://www.aacnnursing.org/ccne-accreditation>.

The Doctor of Nursing Practice degree at Massachusetts College of Pharmacy and Health Sciences is accredited by the Commission on Collegiate Nursing Education <https://www.aacnnursing.org/ccne-accreditation>.

The Bachelor of Science in Nursing (BSN) programs in Boston and Worcester have Approval with Warning from the Massachusetts Board of Registration in Nursing (MBORN). The Bachelor of Science in Nursing (BSN) program in Manchester, NH has received Full Approval (2021-2031) from the New Hampshire Board of Nursing.

Massachusetts College of Pharmacy and Health Sciences is accredited by the New England Commission of Higher Education (NECHE) through its Commission on Institutions of Higher Education. Accreditation of an institution of higher Education indicates that it meets or exceeds criteria for the assessment of institutional quality periodically applied through a peer review process. An accredited college or university is one that has available the necessary resources to achieve its stated purposes through appropriate educational programs, is substantially doing so, and gives reasonable evidence that it will continue to do so in the foreseeable future. Institutional integrity is also addressed through accreditation.

## **1.1 MCPHS School of Nursing Philosophy**

Congruent with the philosophy and core values of Massachusetts College of Pharmacy and Health Sciences (hereafter MCPHS or University), the School of Nursing philosophy reflects our beliefs in a set of core values that are fundamental to nursing education and shared and upheld by the nursing students, faculty, staff, and our clinical partners.

Education is a self-actualizing, creative, and lifetime endeavor involving systematic inquiry and progression from novice to expert. The educational process must be learner-centered to foster intellectual vitality, critical thinking, and responsibility of ongoing professional development. Nursing education must be academically rigorous and socially relevant, embracing multiple ways of knowing and integrating the liberal arts and sciences with professional nursing study. Organized around a clear appreciation of the domain of nursing, the curriculum's foundation embraces the nursing metaparadigm: person/people; health/illness; society/environment; and nursing. Weaving scholarly, professional, and practice-related activities throughout the education process creates a cohesive tapestry of caring and patient-centered care.

Nursing is deeply rooted in the science of caring and connection to others. Individuals have unique qualities and basic needs for respect and recognition of personal dignity. The universality of human rights and needs transcend the boundaries of age, gender, race, ethnicity, class, culture, language,

spirituality, and religion. Human diversity and psychosocial-cultural factors influence and are influenced by the experience of individuals, communities, and society. Incorporation of humanity and respect is vital to the process of healing and the quality of nursing care.

The primary goals of nursing are to promote, restore, and maintain health, prevent disease, and provide care and comfort throughout life, during illness, and at the end of life. The patient is the center of nursing care and may be an individual, family, group, or community in varying states of health. The patient is recognized as having distinct and unique needs that continuously change and are redefined as the patient interacts with the nurse, healthcare providers, and the environment. It is critical that a nurse anticipates and adapts to the changing needs of the patient. Identification of patient needs, provision of nursing care, the healthcare experience, and environment are fundamentally connected. The nurse helps create a healing environment for each patient by collaborating with the patient to establish mutual goals that enable the patient to attain optimal health.

The core competencies necessary to meet the primary goals of nursing are communication, assessment, critical thinking, and technical skill. The core competencies allow the nurse to assess, plan, design, provide, and manage culturally competent, cost-effective, high quality, and direct and indirect nursing care across the lifespan to diverse populations across an ever-changing healthcare delivery system. We strive to achieve competence in nursing practice through a thoughtful and intentional blending of theory, knowledge, and experience.

Our clinical affiliations allow for sharing of resources, knowledge, and experiences between nursing practice and academic nursing. Students, faculty and staff, along with our clinical affiliates form a dynamic triad whereby nursing practice informs nursing education and nursing education influences the practice of nursing and the delivery of healthcare. The goal of our clinical partnerships is to provide a solid, functional, and rigorous foundation for evidence-based nursing practice.

The future of nursing rests with those in the profession. Throughout the various levels of nursing education, faculty and students refine and enhance the beliefs and values that sustain nursing education. We are dedicated to the advancement of all engaged in this endeavor. We believe that the most effective, inspiring, and celebrated professionals are individuals who continue to make their personal development primary and see it as essential to professional excellence. Nurses must be willing to grow and explore outside their comfort zone both personally and professionally as it enhances their ability to innovate, increases their efficacy and enriches their lives.

## **1.2 MCPHS School of Nursing Mission**

The Mission of the School of Nursing (SON) is to provide students with a high quality and innovative education and to foster scientific inquiry and professional service. The SON is committed to using the following methods to achieve the mission:

- Developing innovative, dynamic, and socio-politically relevant model of nursing education based upon a theoretically-sound curriculum, evidence-based practice, clinical immersion, and scholarly inquiry.
- Developing a curricular foundation that promotes reflective, ethical, compassionate, innovative, and intellectually rigorous nursing practice;
- Establishing a community of learners inclusive of students, faculty, and clinical partners who embrace a spirit of inquiry and a commitment to continuous professional growth.



- Promoting resiliency and integrity in nursing graduates for practice in dynamic, diverse, and complex healthcare environments.
- Fostering a community of scholars that advances nursing through excellence in the discovery, application and integration, and dissemination of knowledge.
- Providing service to the School, the University, the profession, and the community.

### **1.3 MCPHS School of Nursing Vision**

Our vision is to create a center of excellence in nursing education where an environment of partnership is created and nursing practice, education, and scholarship connect for the advancement of healthcare and the profession of nursing.

### **1.4 MCPHS School of Nursing Core Values**

As members of the School of Nursing and a broader community, we are committed to the following core values:

#### **Respect**

- Value and appreciate self and others across the boundaries of age, race, culture, gender, language, ideology, religion, and class. Seek to know, understand, acknowledge, and appreciate the uniqueness and contribution of self and others;
- Treat self and others in a caring and considerate manner; and
- Recognize that the patient is the center of nursing care.

#### **Literacy**

- Examine and process information in a critical and reflective manner;
- Appreciate and judiciously use literature from nursing science, liberal arts, and other health sciences;
- Cultivate a sense of intellectual inquiry and engage in the process of lifelong learning and development; and
- Embrace continual knowledge development as central to professional excellence and the advancement of nursing practice.

#### **Practice**

- Develop competence and advance acquisition of nursing knowledge, skills, attributes, and abilities;
- Communicate and collaborate as an integral member of the health care team;
- Apply nursing knowledge and skill in diverse practice settings; and
- Provide care in accordance with professional standards, practice within the legal and ethical scope of nursing, and engage in continuous quality improvement of nursing care.

#### **Integration**

- Draw on existing knowledge and develop new knowledge in order to establish a nursing practice that is critically reflective and dynamic;
- Connect theory and multiple ways of knowing in the practice of nursing;
- Behave and present self in a manner that projects confidence and inspires trust; and
- Act with integrity, responsibility, and accountability in the practice of nursing.

### **1.5 MCPHS School of Nursing and SON DEI Committee Statement on Diversity, Equity and Inclusion**

**Mission:** *The goal of the SON Diversity Committee is to increase cultural competence, humility, and sensitivity and to raise awareness of social injustice, unconscious bias, and systemic discrimination, with the goal of developing a globally minded nursing workforce.*

**Vision:** The SON DEI Committees vision is to nurture a culture committed to advancing a diverse and inclusive nursing curriculum which fosters the advancement of diversity, equity, and inclusion in the future nursing workforce.

**Diversity:** We are committed to promoting diversity awareness, which is expressed in myriad forms, including yet not limited to race and ethnicity, gender and gender identity, sexual orientation, socioeconomic status, language, culture, national origin, religion, age, and (dis)ability status.

**Equity:** We are committed to working actively to challenge and respond to bias, harassment, and discrimination. We are committed to an environment of equal opportunity for all persons so that all members of the MCPHS community are treated justly.

**Inclusion:** We are committed to pursuing deliberate efforts to ensure that our campus is a place where differences are welcomed, different perspectives are respectfully heard, and every individual feels a sense of belonging, inclusion and is treated with dignity and respect.

## **2.0 Nursing Code of Ethics**

### **American Nurses Association (ANA) Code of Ethics for Nurses (2015)**

- **Provision 1:** The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
- **Provision 2:** The nurses' primary commitment is to the patient, whether as individual, family group, community, or population.
- **Provision 3:** The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
- **Provision 4:** The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
- **Provision 5:** The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integration, maintain competence, and to continue personal and professional growth.
- **Provision 6:** The nurse, through individual and collective efforts, establishes, maintains, and improves the ethical environment of work setting and conditions of employment that are conducive to safe, quality health care.
- **Provision 7:** The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
- **Provision 8:** The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
- **Provision 9:** The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

It is an expectation that all students read and refer to the American Nurses Association (ANA) Code of Ethics (2015) located on the ANA website: <http://www.nursingworld.org/codeofethics>. The Code of Ethics is one of several professional nursing standards that frame the curriculum of the undergraduate and graduate nursing programs. The Code provides a standard of practice to guide nursing professionals toward thoughtful, ethical, and high-quality nursing care. The Nursing Code of Ethics underscores all activities within the profession of nursing and adherence to the principles is a prerequisite to participation in the School of Nursing.

## 2.1 Professional Comportment

Professional comportment (*the manner in which one behaves or conducts oneself*) is expected of all nursing students in the School of Nursing. Professional comportment embodies the core values of MCPHS and is defined as behaving in a way that exemplifies respect for individuals including those in the academic setting, health care setting and community of practice. Communication is an important element of professional comportment and as such should be practiced throughout the nursing program. Policies set forth in this handbook provide a framework to socialize students to behave in an ethical, responsible, and professional manner.

Students are expected to display professional demeanor, interactions and boundaries with patients and their families, clinical staff, peers, faculty and the public at all times in consideration of their representation of the profession of nursing and the MCPHS (See the [ANA Code of Ethics for Nurses](#)). Essential expected behaviors include, but are not limited to:

- Consistent display of professional demeanor and appropriate interpersonal interactions and boundaries with patients, staff, and peers; including emails to faculty and staff. Specifically, the code provides the following guidance:
  - Respect for human dignity – A fundamental principle that underlies all nursing practice is respect for the inherent worth, dignity, and human rights of every individual. Nurses take into account the needs and values of all persons in all professional relationships.
  - Relationships with colleagues and others – The principle of respect for other persons extends to all individuals with whom the nurse interacts. The nurse maintains compassionate and caring relationships with colleagues and others with a commitment to the fair treatment of individuals, to integrity preserving compromise, and to resolving conflict. Nurses function in many roles including direct care provider, administrator, educator, researcher, and consultant. In each of these roles, the nurse treats colleagues, employees, assistants, and students with respect and compassion. This standard of conduct precludes any, and all, prejudicial actions, any forms of harassment or threatening behavior, or disregard for the effect on one's actions on others. The nurse values the distinctive contribution of individuals or groups and collaborates to meet the shared goal of providing quality health services.
- Adherence to the profession's Code of Ethics;
- Timeliness and adherence to preparation, attendance, policies, and deadlines;
- Prompt notification of absence or tardiness according to the established absence policies;
- Adherence to School of Nursing professional dress guidelines;
- Exhibiting professional and responsible behavior when representing MCPHS in any manner or venue while wearing the white coat, clinical uniform, lanyard, or any MCPHS logo; and

- Displaying professional conduct in cyberspace (examples include, but are not limited to Blackboard, Email, Twitter, Pinterest, Tumblr, Facebook, YouTube, etc.).

Individuals whose behavior, in the opinion of the preceptor, faculty member, or staff are disruptive to the learning environment may be given a corrective warning(s) and/or coaching for minor infractions. Repeated or egregious unprofessional behavior may lead to suspension, indefinite suspension or expulsion from the master's program at the sole discretion of the Dean of Nursing/Chief Nursing Officer or their designee. Students who have been suspended indefinitely must apply for readmission in writing to the Office of the Dean of Students. Such applications should include a detailed account of the corrective measures taken to ensure the required change(s) in behavior.

### **3.0 Doctor of Nursing Practice Overview**

The Doctor of Nursing Practice (DNP) program at MCPHS offers the opportunity for licensed/certified advanced practice nurses to gain the knowledge, skills, and aptitude to directly impact healthcare. The practice-focused DNP terminal degree in nursing builds on evidence-based knowledge obtained in previous nursing degrees and utilizes a focus on organization and systems leadership to prepare nurses to deliver innovative direct care, explore opportunities for quality improvement, improve diverse population patient outcomes, and advocate for policy change.

The Doctor of Nursing Practice (DNP) degree is designed for advanced practice registered nurses (APRN's) looking to reach the highest level of the nursing profession.

### **3.1 Admission Policies and Procedures**

#### **Admission Requirements**

- Earned master's in nursing in an advanced nursing practice specialty from a nationally accredited CCNE, ACEN, or NLNAC program
- Completed application
- Current National Certification as an advanced practice nurse (FNP, AGPCNP, AGACNP, ANP, PNP, GNP, ACNP, PMHNP, Nurse Midwife, Nurse Anesthetist, or CNS)
- Current unencumbered licensure as an advanced practice registered nurse (APRN) in the state in which practice will occur
- GPA 3.0 or above on a 4.0 scale
- Resume or CV
- Successful completion of Prerequisite Graduate research methods/statistics course minimum grade of 3.0
- Transcripts from all post-secondary institutions
- Two letters of reference: One pertaining to academic ability and professional competence and a second letter referring to leadership potential
- DNP Personal Statement Essay
- Zoom interview will be a part of the admission process
- Students are required to complete 1,000 clinical hours as part of DNP degree completion. A maximum of 500 hours of preceptor-supervised direct care clinical hours earned from previous Master's in Nursing (MSN) degree may be applied to this requirement with program administrator or dean approval.

#### **Geographic Eligibility**

Admission into the DNP Program is dependent on program availability in the state where the student is physically located at the time of matriculation. If a student moves to a different state after matriculation, continuation within the program will depend on the availability of the program within the new state where the student is physically present. It is the student's responsibility to notify the University of a change in physical presence. Program availability is subject to change.

MCPHS University accepts nursing students into its programs from the following states: *Colorado, Connecticut, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, South Dakota, Texas, Vermont, Virginia, Washington D.C., West Virginia*

### **3.2 Admission Procedures**

#### **Application of Accrued Clinical Hours**

Up to 500 direct care clinical hours accrued during the completion of the MSN degree or post-master's certificate program may be applied toward the 1000 hour required DNP clinical hours upon review, verification, and written approval by the DNP Program Administrator and/or School of Nursing Dean.

"Verification of hours can be completed in various ways, including forms sent to the student's master's degree program, transcript review, and documentation of national certification requiring academically supervised practicum hours." (AACN DNP Task Force, 2015, p. 9).

### **4.0 Doctor of Nursing Practice Program**

#### **4.1 DNP Expected Program Outcomes**

The MCPHS University Doctor of Nursing Practice (DNP) program prepares practice-scholars to demonstrate professional leadership integrating evidenced-based knowledge to improve health outcomes in a complex health care system.

At the conclusion of the program, the DNP graduate will be able to:

1. Employ effective communication and collaboration with interprofessional teams to create change in health care delivery systems for individuals and populations. (DNP Essential VI)
2. Assume a leadership role advocating for the nursing profession through the development and appraisal of health care policy at the institutional, local, federal and international levels. (DNP Essential V)
3. Critically appraise, translate and disseminate evidence-based research into practice to improve health care outcomes (DNP Essential III)
4. Use information systems/technology to support and improve patient care and health care systems. (DNP Essential IV)
5. Demonstrate advanced levels of clinical judgement, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care to improve patient outcomes. (DNP Essential VIII)
6. Evaluate organizational structure, functions, and resources to improve the quality and the delivery of care for individuals and populations (DNP Essential II)
7. Advocate for ethical policies and practice that prevent illness, promote health and social justice, and reduce disparities for patient populations in urban, rural, and global settings. (DNP Essential V, VII)

8. Analyze new practice approaches that integrate nursing science with knowledge from ethics, biophysical, psychosocial, analytical, and organizational sciences to improve health care practice and delivery systems. (DNP Essential I, V, VIII)

#### 4.2 DNP Program Goals

Program goals of the DNP Program align with the SON Mission and Vision and the AACN DNP Essentials (2006). The DNP graduate will:

1. Acquire the knowledge, skill, and aptitude in organizational/systems leadership
2. Function at the most advanced level of nursing practice as leaders in the dynamic healthcare arena serving diverse populations to improve healthcare quality and patient outcomes
3. Disseminate the outcomes of an evidence-based practice-focused DNP Final Project which translates a body of evidence to the practice setting for organizational/systems quality improvement and drives recommendations for further research
4. Serve as leaders in the healthcare arena to advocate for diversity, equity and inclusion in health policies and access to healthcare

#### 4.3 DNP Curriculum

The DNP program's innovative curriculum builds the foundation of graduate-level nursing knowledge, and expands the abilities and skills focused on in master's-level work.

| Semester   | Course   | Credits   |
|------------|--|-----------|
| Semester 1 | NUR 900: Clinical DNP Practice Foundations                             | 3         |
|            | NUR 910: Methods for Evidence-based Practice                           | 3         |
|            | <b>Total Credits/Semester</b>  | <b>6</b>  |
| Semester 2 | Elective 1   | 3         |
|            | NUR 915: Health Care Policy and Advocacy from Local to Global Issues   | 3         |
|            | NUR 920: Concepts in Population Health                                 | 3         |
|            | <b>Total Credits/Semester</b>  | <b>9</b>  |
| Semester 3 | Elective 2   | 3         |
|            | NUR 905: Organizational and Systems Leadership for Quality Improvement | 3         |
|            | HCM 820: Informatics and Data Analysis                                 | 3         |
|            | <b>Total Credits/Semester</b>  | <b>9</b>  |
| Semester 4 | Elective 3   | 3         |
|            | NUR 930: Research Translation I  | 3         |
|            | <b>Total Credits/Semester</b>  | <b>6</b>  |
| Semester 5 | NUR 931: Research Translation II                                       | 3         |
|            | <b>Total Credits/Semester</b>  | <b>3</b>  |
| Semester 6 | NUR 933: Research Translation III                                      | 3         |
|            | <b>Total Credits/Semester</b>  | <b>3</b>  |
|            | <b>Total Program Credits</b>   | <b>36</b> |

#### Reduced Course Load

Students may opt to reduce the course load to one course per semester. The DNP Program Administrator will meet with students with interest in the one course per semester option to develop an individualized curriculum sequence plan.

#### 4.4 DNP Interprofessional Elective Opportunities

DNP students at MCPHS have a unique opportunity to customize their degree by completing three elective courses in areas that will enhance their future role. Students choose from doctoral-level courses within the School of Nursing, or from a variety of doctoral degree programs within the MCPHS health sciences university, including pharmacy, healthcare business, public health, healthcare informatics, and acupuncture. Elective courses include regulatory affairs and health policy, global healthcare management, public health, and pain management. This flexibility to customize the degree empowers students to gain specialized knowledge in a variety of fields, enhancing and diversifying their degree, and ultimately preparing them to meet the challenges of today's integrated healthcare field. Electives are chosen with the assistance of the student's faculty advisor. These courses may be chosen from any graduate level offering in the University with the faculty advisor's approval.

#### 4.5 DNP Course Descriptions

| Course<br># Credits<br>Pre-requisites   | Course Description  | Course Objectives<br>(AACN DNP Essentials, 2006)  |
|---|---|---|
| NUR 900:<br>Clinical DNP Practice<br>Foundations<br>3 credits<br>No Prerequisites | The course is taken during the first semester of the DNP Program tenure. Students will explore DNP degree historical perspectives and current opportunities for application to nursing practice through application of a systems organizational lens. An analysis of DNP curricula and the DNP project will be conducted utilizing current NONPF Competencies and the AACN Essentials. Students will also explore the theoretical foundations of practice and conceptual models as frameworks to guide advanced practice and the DNP Project. | Upon completion of the course, the student will be able to: <ol style="list-style-type: none"> <li>1. Explore DNP degree historical perspectives and current opportunities for application to nursing practice through application of a systems organizational lens (2006 DNP Essentials I: 2021 AACN Essentials D-1: 1.1e; 1.1f; 1.1g; 1.2d; 1.2f; 1.2j; 1.3b; 1.3e; 1.3f; D-7.3a; 7.3c: D-9 9.5i;).</li> <li>2. Analyze and synthesize the DNP applicable NONPF Competencies and AACN Essentials as they relate to the DNP degree and DNP Project (2006 DNP Essentials I &amp; II: 2021 AACN Essentials D-1: 1.1e; 1.1f; 1.2f; 1.2g. D-4: 4.1j. D-9: 9.4h. D-10: 10.2i</li> <li>3. Analyze factors that influence the selection of theory to guide evidence-based practice (2006 DNP Essentials I&amp; II:</li> </ol> |

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|  |  | <p>2021 AACN Essentials D-1: 1.1e; 1.1f; 1.2f; 1.2j. D-4: D-4.1c; 4.1j; 4.2f).</p> <p>4. Evaluate and choose conceptual models and theoretical frameworks to guide the student DNP Project (2006 DNP Essentials I&amp;III: 2021 AACN Essentials D:1: 1.1a; 1.1e; 1.2f; 1.2j).</p> <p>5. Develop a theoretical statement for the DNP Project (2006 DNP Essentials I&amp;II: 2021 AACN Essentials 1.2f; 1.2j).</p>  |
| <p>NUR 905:<br/>Organizational and System Leadership for Quality Improvement<br/>3 credits<br/>Prerequisites:<br/>NUR 915, NUR 920</p> | <p>Students will explore the role of the DNP as organizational and system leader within complex health care systems.</p> <p>Students engage in inquiry into the state of health care delivery, patient-centered care, sustainable change, and ethical principles surrounding practice.</p> <p>Students consider the goal of managing quality outcomes through data analysis, knowledge and skills based on contemporary theory and research.</p> | <p>1. Develop and evaluate care delivery approaches that meet current and future needs of patient populations (DNP Essentials II).</p> <p>2. Ensure accountability for quality of health care and patient safety for populations (DNP Essentials II).</p> <p>3. Use advanced communication/processes to lead quality improvement and patient safety initiatives in the health care systems (DNP Essentials II).</p> <p>4. Analyzed cost-effectiveness of practice initiatives accounting for risk and improvement of health care outcomes (DNP Essentials II).</p> <p>5. Employ principles of business, finance, economics, and health policy to develop and implement effective plans for practice-level or system-wide practice initiatives that will improve the quality-of-care delivery (DNP Essentials II).</p> <p>6. Analyze effective strategies for managing ethical dilemmas inherent in-patient care, health care organizations and research</p> |



|   |  | (DNP Essentials II).  |
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| <p>NUR 910:<br/>Methods for Evidence-Based Practice<br/>3 credits<br/>Co-requisite:<br/>NUR 900</p> | <p>This course introduces students to research methodology for clinical scholarship and requires students to develop skills for analyzing studies that inform evidence-based practice. This course provides a practical overview of identifying the student's topic of interest, finding a gap in literature pertaining to each student's topic. This course guides students to generate a research question for both qualitative and quantitative study designs and helps students apply methods for both-qualitative and quantitative designs. The course will also require students to identify different ways of disseminating the findings.</p> | <ol style="list-style-type: none"> <li>1. Appraise evidence-based practice and differentiate it from tradition-based practice or clinical decision-making based on research-based rationales (2006 DNP Essentials I &amp; II: 2021 AACN Essentials D-1: 1.1e; 1.2b; 1.3b; D-4: 4.1a; 4.1b; 4.1d; 4.1f; 4.1i; 4.1j; 4.1k; 4.1g)</li> <li>2. Examine methods for reviewing the literature in order to identify the best current evidence (2006 DNP Essentials I &amp; II: 2021 AACN Essentials D-1: 1.1e; D-4: 4.2a; 4.2b; 4.2f; D-10: 10.2b).</li> <li>3. Select an appropriate design method (qualitative, quantitative or mixed methods) and discuss different methods for collecting data (2006 DNP Essentials I &amp; II: 2021 AACN Essential D-1: 1.1d; 1.2f; 1.2g. D-4: 4.2a; 4.2b; 4.1d; 4.2f; D-10: 10.2b).</li> <li>4. Apply knowledge of data analysis of both qualitative and quantitative study designs (2006 DNP Essentials I &amp; III: 2021 AACN Essentials D-1: 1.1e; 1.1f; 1.2f; 1.2g. D-4: 4.1d; 4.2a; 4.2b; 4.2f; D-10: 10.2b).</li> <li>5. Apply knowledge of statistical analysis to critique evidence from individual studies (2006 DNP Essentials I &amp; III: 2021 AACN Essentials D-1: 1.1e; D-4: 4.1d; 4.2a; 4.2b; 4.2f; D-10: 10.2b).</li> <li>6. Synthesize data from multiple studies to inform recommendations for clinical practice based on analysis of</li> </ol> |

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|   |  | the strength of supporting data (2006 DNP Essentials I & II: 2021 AACN Essentials D-1: 1.1e; 1.1f; 1.3b; 1.3c; 1.3d. D-4: 4.1d; 4.2a; 4.2b; 4.2f; D-10: 10.2b).   |
| <p>HCM 820: Informatics and Data Analysis (School of Healthcare Business)</p> <p>3 credits</p> <p>Prerequisites:<br/>NUR 900, NUR 910</p> | <p>Supervised study in health science involving a survey of existing knowledge, self-instructed or faculty assisted inquiry into previously published data or methodologies, or other faculty approved study of a non-research nature.</p> | <ol style="list-style-type: none"> <li>1. Discuss the issues related to the extraction and analysis of large archival data sets for patients (DNP Essential IV).</li> <li>2. Information systems/technology and patient care technology for improvement and transformation of health care (DNP Essential IV).</li> <li>3. Perform various statistical analyses on samples of archival data and write interpretative documents that describe the findings of the analysis (DNP Essential IV).</li> <li>4. Construct items, such as but not limited to, tables, graphs and charts, diagrams, reports, and dashboards using Microsoft Excel, SPSS, STATA, and Tableau (DNP Essential IV).</li> <li>5. Identify, assess, and select among statistical methods and models for solving real-world problems weighing their advantages and disadvantages, (DNP Essential IV).</li> <li>6. Transform large, complex informatics datasets into actionable knowledge through the use of data visualization techniques (DNP Essential IV).</li> </ol> |
| <p>NUR 915:<br/>Health Care Policy and Advocacy from Local to Global Issues</p> <p>3 credits</p> <p>Prerequisites:</p>                    | <p>The Doctoral Nurse Practice (DNP) student will critically analyze health policy proposals, policies, and related issues from the perspective of consumers, nursing, health professionals and other</p>                                  | <ol style="list-style-type: none"> <li>1. Evaluate the differences and similarities in health policy and initiatives in the US and globally</li> <li>2. Evaluate the relationship between healthcare policy and</li> </ol>  |

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| <p>NUR 900, NUR 910</p>  | <p>stakeholders in policy and public forums.</p> <p>The course will assist the DNP to lead and advocate for social justice, equity, and ethical policies within all healthcare arenas</p>   | <p>health disparities in relation to the interdisciplinary connections inherent in the advanced practice role</p> <ol style="list-style-type: none"> <li>3. Analyze ethical concerns and other unintended consequences to disadvantaged and diverse populations related to policy development and enactment</li> <li>4. Analyze, formulate and advocate for policies that advance human rights and social, economic, and environmental justice in local and global context (DNP Essentials V (1, 2) VI (1) V (6) VII (1,2) II (2b, 2d, 2e)</li> <li>5. Evaluate the similarities and differences between ethical and legal dynamics in policy creation.</li> <li>6. Analyze the dimensions of the current US. healthcare policy and relevant concerns from the perceptions of patients and healthcare team members in the public forum</li> <li>7. Lead others to advocate ways to lobby for social justice in healthcare reform</li> </ol> |
| <p>NUR 920:<br/>Advanced Concepts in Population Health<br/>3 credits<br/>Prerequisites:<br/>NUR 900, NUR 910</p> | <p>This course introduces the student to comprehensive concepts in population health by examining health promotion and prevention strategies through the use of healthcare quality measures, diversity principles, and cultural, socioeconomic, ethical dimensions of care and population safety considerations.</p> <p>Concepts of epidemiology and biostatistics in public health as it relates to advanced nursing practice will be discussed.</p> | <ol style="list-style-type: none"> <li>1. Distinguish the roles and relationships between epidemiology and biostatistics in the prevention of disease and the improvement of health. (DNP Essentials VII and VIII) (Reflection Paper)</li> <li>2. Synthesize ethical and legal principles regarding the collection, maintenance, utilization, and dissemination of epidemiologic data. (DNP Essentials VII and VIII)</li> <li>3. Analyze the role of the nurse in advanced practice to overcome access barriers by</li> </ol>   |

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|   | Basic elements of grant writing will be introduced relative to population health.  | <p>providing culturally relevant and high-quality healthcare for vulnerable and high-risk populations. (DNP Essentials VII and VIII). (Reflection Paper)</p> <ol style="list-style-type: none"> <li>4. Differentiate bio-psycho-socio-political and economic and environmental conditions impacting epidemiologic perspectives that inform scientific, ethical, economic, and political discussion of public health issues. (DNP Essentials VII and VIII).</li> <li>5. Examine selected strategies for increasing intra-/inter-professional collaboration in interventional health education programs across healthcare systems. (DNP Essentials VIII).</li> <li>6. Integrate intra-/inter-professional collaboration in the design, implementation, and outcomes evaluation elements of a selected interventional public health program for improving health (DNP Essentials VI).</li> </ol> |
| <p>NUR 930:<br/>Research Translation I:<br/>Assessment and Design<br/>3 credits<br/>Prerequisites:<br/>NUR 905, HCM 820</p> | <p>The Doctoral Nurse Practice student will participate in clinical practice, collaborative teamwork, and practice-based evaluation in their advanced practice role.</p> <p>Doctoral Nurse Practice students will lead a scholarly project with emphasis on the evaluation of quality practice with a focus on vulnerable populations.</p> | <ol style="list-style-type: none"> <li>1. Critically analyze and synthesize the evidence in the literature to identify an evidenced based problem in your clinical practice and utilize clinical decision based on best clinical practice guidelines (DNP Essentials I, II, III &amp; IV).</li> <li>2. Examine, evaluate, and execute a problem statement to provide the basis for the proposed scholarly project purpose statement (DNP Essentials I&amp;III).</li> <li>3. Apply knowledge of statistical analysis to the evaluation of evidence from individual</li> </ol>  |

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|  |  | <p>studies, the process of data extraction, and pooled data from meta-analyses (DNP Essentials I&amp;III).</p> <ol style="list-style-type: none"> <li>4. Demonstrate expertise in utilizing clinical skills within practice-based settings (DNP Essentials III &amp; VIII).</li> <li>5. Identify a topic based on the problem statement that addresses outcomes of practice, patterns, and systems of care within practice settings, health-care organizations, and/or the community (DNP Essentials I, II, &amp; V).</li> <li>6. Work collaboratively on teams in conducting ethical practice-based evaluative studies (DNP Essentials II, III, &amp; VI).</li> <li>7. Implement strategies within the practice setting that enhance the application of each DNP essential to practice (DNP Essentials I-VIII).</li> </ol> |
| <p>NUR 931<br/>Research Translation II: Planning and Implementation<br/>Prerequisites: NUR 930</p> | <p>The Doctoral Nurse Practice student will participate in clinical practice, collaborative teamwork, and practice-based evaluation in their advanced practice role.</p> <p>The student will participate in a mentored practicum related to the chosen Scholarly Practice Project.</p> <p>Doctoral Nurse Practice students will lead the implementation of a scholarly project with emphasis on the evaluation of quality practice with a focus on vulnerable populations.</p> | <ol style="list-style-type: none"> <li>1. Apply the evidence-based knowledge to lead the implementation of an evidenced based scholarly project in clinical practice (DNP Essential I, II, III and IV)</li> <li>2. Utilize an evidence-based plan in accordance with the IRB to provide the basis for the implementation of the scholarly project (DNP Essential I, II and III)</li> <li>3. Apply knowledge of valid data collection and research methodology for clinical scholarly work (DNP Essential I and III)</li> <li>4. Operationalize data sources to address constructs outlined in problem statement (DNP Essentials I and II)</li> </ol>  |

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|   |  | <ol style="list-style-type: none"> <li>5. Work collaboratively on interprofessional teams in conducting ethical practice-based evaluative studies (DNP Essential I, VI and VIII)</li> <li>6. Explore the application of DNP Essentials towards achieving high quality patient care in the clinical setting (DNP Essentials I, II and VIII)</li> <li>7. Demonstrate nursing expertise in utilizing clinical skills within practice-based settings (DNP Essentials I, III, VII and VIII)</li> </ol>   |
| <p>NUR 933:<br/>Research Translation III:<br/>Evaluation and<br/>Dissemination<br/>3 credits<br/>Prerequisites: NUR 931</p> | <p>This course is the third in a three-course sequence designed to support the DNP student in completion of the Scholarly Practice Project (SPP). Students will analyze and evaluate data and disseminate findings of the evidence-based practice SPP which addresses the identified micro, meso, or macro systems organizational or practice problem previously identified through review of the literature. Dissemination will include a final defense of the SPP and communication of results to the healthcare community with the goal of improving healthcare outcomes. This course includes 185 clinical experiential hours.</p> | <ol style="list-style-type: none"> <li>1. Apply the evidence-based knowledge to lead the analysis and dissemination of an evidenced based scholarly project in clinical practice (DNP Essential I, II, III and IV)</li> <li>2. Utilize an evidence-based plan in accordance with the IRB to provide the basis for the data analysis and dissemination of the scholarly project (DNP Essential I, II and III)</li> <li>3. Apply knowledge of valid data analysis for clinical scholarly work (DNP Essential I and III)</li> <li>4. Analyze data in accordance with the analysis plan outlined in the SPP proposal and interpret findings (DNP Essentials I and II)</li> <li>5. Communicate findings and interpretation of analysis in context of nursing practice and health care in the final SPP paper (DNP Essentials I and III)</li> <li>6. Work collaboratively on interprofessional teams in conducting ethical practice-based evaluative studies (DNP Essential I, VI and VIII)</li> <li>7. Disseminate the SPP analysis and findings to the organization and healthcare stakeholders to</li> </ol> |

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|  |  | <p>close the research to practice gap, to inform quality healthcare and to improve client outcomes.</p> <p>8. Explore the application of the AACN DNP Essentials towards achieving high quality patient care in the clinical setting (DNP Essentials I, II and VIII).</p> <p>9. Demonstrate nursing expertise in utilizing clinical skills within practice-based settings (DNP Essentials I, III, VII and VIII)</p> |
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## 5.0 DNP Experiential Clinical Policies and Procedures

The DNP Project requires a minimum of 1000 post-baccalaureate clinical hours. The Experiential Clinical immersion is "...designed to help students achieve specific learning objectives related to the DNP Essentials and specialty competencies" (AACN DNP Essentials, 2006, p. 19). A maximum of 500 hours accrued during the completion of the student's MSN/APRN program may be applied toward the 1000 hour required accrual upon review and approval by the DNP Program Administrator and/or School of Nursing Dean.

A total of 500 Experiential Clinical hours will be completed during NUR 930: Research Translation I, NUR 931: Research Translation II, and NUR 933: Research Translation III under the supervision and mentorship of a DNP Project Site Mentor in the student's geographic area of residence and with oversight of MCPHS course faculty. DNP students identify their chosen practice site for completion of their DNP Project during NUR 930: Research Translation I. The chosen practice site will vary based on the focus of the DNP Project and may include community or public health organizations, clinical practice agencies, private practice settings, school systems, prison systems, or government healthcare related organizations in local, statewide, regional, or national levels. The DNP student must complete the DNP Project Site and Site Mentor Request (Appendix A-1) by week two of NUR 930 and submit the document to the NUR 930 course faculty for approval. The Experiential Clinical site and DNP Project Site Mentor must be approved by the NUR 930 course faculty and the DNP Program Administrator must be informed.

A DNP Project Site Mentor Agreement, Letter of Cooperation and an Affiliation agreement between MCPHS SON and the site administrator(s) and site mentor must be signed and fully executed prior to the student beginning any Experiential Clinical hours. The signed DNP Project Site Mentor agreement will be housed in the student's eValue software account and the full executed Affiliation Agreement and Letter of Cooperation Agreement will be filed with the Graduate Clinical Coordinator.

Experiential Clinical hours may include both direct hours (hours spent at the practice site with the project site mentor) and indirect hours (hours spent working on the DNP Project, but not necessarily in the practice site). The student must log completed DNP Essential Activities and Experiential Clinical hours in eValue within 72 hours of completion. Completed Experiential Clinical Hours must be documented in eValue under the appropriate AACN DNP Essential category and include a list of activities

completed. The required minimum of 500 hours must be spent among all eight AACN DNP Essentials (AACN, 2006). All Experiential Clinical hours must be approved electronically via eValue by course faculty.

Students may choose to complete their DNP Project at their place of employment. When Experiential Clinical hours are completed at a student's place of employment, the hours must be clearly delineated from time spent as an employee. All clinical experiential hours must relate to completion of the DNP project and must include activities that meet the AACN DNP Essentials (AACN, 2006).

"Practice experiences should have well defined learning objectives and provide experiences over and above the individual's job responsibilities or activities. Also, the DNP student must have the opportunity to gain knowledge and skills beyond employment expectations and incorporate these into their nursing practice." (AACN DNP Task Force, 2015, p. 9).

Clinical Experiential hours and the DNP Project cannot focus on nursing academia. "Practice as a nurse educator should not be included in the DNP practice hours. The focus of the DNP program, including practicum and the DNP project, should not be on the educational process, the academic curriculum or on educating nursing students." (AACN DNP Task Force, 2015, p.10)

Literature systematic or integrative reviews, portfolios and group projects are not acceptable for DNP Project consideration.

### **5.1 DNP Project Description and Overview**

As part of the DNP program, students engage in rigorous scholarly work to synthesize knowledge from the program's core and specialty courses, along with the immersion clinical experience, to create a meaningful project that is reviewed by an academic team. The DNP Project is based on an advanced nursing practice experiential clinical experience, which is designed to address a nursing or healthcare problem with the goal of improving practice or healthcare outcomes. The DNP project includes proposal, implementation, and evaluation of evidence-based practice on a variety of initiatives, including practice change, quality improvement, health promotion/disease prevention, community outreach, or policy analysis. The AACN Essentials of Doctoral Education for Advanced Nursing Practice (2006) and the AACN DNP Task Force, Doctor of Nursing Practice: Current Issues and Clarifying Recommendations (2015) provide the basis for the DNP Project requirements.

### **5.2 DNP Project Team**

The DNP Project Team will be assigned by week two of NUR 930, Research Translation I, Assessment and Design. The DNP Project Team Members include the DNP Project Team Chair, the DNP Project Team Member, the DNP Project Site Member and the DNP Student. The DNP Project Team works closely with the DNP Course Faculty. The course faculty are responsible for all grading of assignments and approval and sign-off of clinical evaluations, DNP Essential activities, and Experiential Clinical Hours.

The DNP Project Team Chair is assigned by the DNP Administrator. The DNP Project Team Member may be requested by the DNP student or assigned and must be approved by the DNP Administrator. The DNP Site Mentor is chosen by the DNP student and approved by both the course faculty and DNP Administrator.



The DNP Project Team Chair will be a doctoral prepared MCPHS SON faculty member. A second doctoral prepared MCPHS SON faculty member will serve as a DNP Project Team Member, and a content expert will serve as the DNP Project Site Mentor (Appendix A-3).

#### **5.2.1 MCPHS Research Translation Course Faculty (NUR 930, NUR 931, NUR 933) Responsibilities:**

- Evaluates clinical experiential sites and site mentors for appropriateness of learning experiences.
- Communicates with clinical site representatives and the Graduate Clinical Coordinator to ensure all required clinical documents are complete before the student participates in Experiential Clinical Hours.
- Reviews and approves all student documented Experiential Clinical Hours and AACN Essential activities during NUR 930: Research Translation I, NUR 931: Research Translation II, and NUR 933: Research Translation III.
- Oversees the DNP Project site experience. Collaborates, communicates, and supports the DNP Project Site Mentor. Provides Site Mentor orientation prior to the start of each Research Translation course to include AACN DNP Essentials (2006) Overview, DNP Program Outcomes, Course Description, Didactic Course Objectives, Experiential Clinical hour objectives and Site Mentor Role and Responsibilities and the expectations for students.
- Communicates with DNP Project Site Mentor during each Research Translation course a minimum of the first week of the course, mid-semester, and end of course via text, phone, email or Zoom and documents DNP Site Mentor feedback.
- Reviews all mid-term and final DNP Site Mentor Evaluation of Student Performance evaluations (Appendix A-3). Discusses evaluation with DNP Site Mentor, approves and signs all evaluations, delivers evaluations to the DNP student.
- Oversees IRB application process and application preparation
- Assesses student project readiness for project proposal presentation. Synthesizes proposal presentation feedback, supports student completion of needed project revisions
- Leads final oral project presentation proceedings and ensures that all written paper revisions are completed (Appendices A-4, A-5, & A-6); provides final sign off following completion of the DNP Project and verifies satisfactory completion of graduation requirements in collaboration with the DNP Program Administrator and SON Dean.

#### **5.3 DNP Project Chair**

DNP Students will be assigned a Project Team Chair by week two of NUR 930, Research Translation I, Assessment and Design. The DNP Project Team Chair might also be the course faculty or course coordinator for the three DNP Project courses: NUR 930: Research Translation I, NUR 931: Research Translation II, and NUR 933: Research Translation III. The chair will be assigned by the DNP Administrator when the student's proposed project topic and site has been approved by course faculty. The DNP Project Team Chair does not need to be an expert in the student's area of research interest.

#### **DNP Project Chair Responsibilities:**

- Serves as DNP Project advisor to support the student throughout the DNP Project process: project development, preparation of the DNP proposal, project implementation and evaluation, data analysis, development of final written DNP Project Paper and dissemination plans.
- Communicates with DNP Project Site Mentor and Course Faculty during each Research Translation course a minimum of the first week of the course, mid-semester, and end of course via text, phone, email or Zoom and documents DNP Site Mentor feedback.

- Collaborates with the DNP student and Course faculty to schedule ongoing DNP Project Team meetings to facilitate project development, project proposal presentation date, project completion, and final project presentation date.
- Communicates effectively with the Course Faculty, DNP Project Team members, the DNP Project Site Mentor and the DNP student.
- Provides ongoing feedback to the DNP student on written drafts of scholarly paper in a timely manner.
- Guides student with IRB application process and application preparation as needed
- Assesses student project readiness for project proposal presentation. Supports student completion of needed project revisions; participates in final project presentation proceedings and ensures that all revisions are completed; provides final sign off following completion of the DNP Project.
- Serves as a mentor to the DNP student in the DNP Project findings dissemination.

#### **5.4 DNP Project Team Member**

The DNP Project Team Member contributes to the development and refinement of the DNP Project and DNP Project written Paper. The DNP Project Team Member will be chosen and invited to serve in the role by the DNP student no later than the second week of the NUR 930: Research Translation Course. The DNP Project Team Member must be approved by the course faculty and DNP Project Chair and the DNP Administrator must be notified. The DNP Project Team Member should share experience in the student's area of research interest.

DNP Project Team Member Role and Responsibilities:

- Serves as DNP Project Team Member to support the student throughout the DNP Project process: project development, preparation of the DNP proposal, project implementation and evaluation, data analysis, development of final written DNP Project Paper and dissemination plans.
- Serves as a second reader of the DNP Project paper and provides feedback to the DNP student in a timely manner during NUR 930: Research Translation I, NUR 931: Research Translation II, and NUR 933: Research Translation III.
- Collaborates with the DNP student and DNP Chair to participate in ongoing DNP Project Team meetings to facilitate project development, project proposal and project completion.
- Communicates effectively with the DNP Project Team members.
- Assesses the DNP student's project readiness for the final project presentation, attends the DNP student's final presentation, provides timely written feedback of the presentation, and supports student completion of needed project revisions.
- Serves as a mentor to the DNP student in the DNP Project findings dissemination.

#### **5.5 DNP Project Site Mentor**

DNP Project Site mentors are advanced clinical practice or administration professionals who are experts in the student's research focus area. The DNP Project Site Mentor will be chosen and invited to serve in the role by the DNP student no later than the second week of the NUR 930: Research Translation Course. The DNP Project Site Mentor must be approved by the course faculty and the DNP Administrator. The DNP Project Site Mentor may be selected from among a variety of disciplines, thereby building upon the DNP program objective to enhance the student's interdisciplinary experience. The DNP Project Site Mentor must be academically and experientially qualified, having an earned master's degree and a minimum of five years in the area of expertise.

### DNP Project Site Mentor Role and Responsibilities

- Participates in the DNP Project Site Mentor orientation prior to the start of each Research Translation course to include AACN DNP Essentials (2006) Overview, DNP Program Outcomes Course Description, Didactic Course Objectives, Experiential Clinical Hour Objectives and Site Mentor Role and Responsibilities.
- Maintains an ongoing relationship with the DNP student throughout the completion of the DNP Project, contributing to the student's development of interdisciplinary collaborative practice and leadership skills in the student's area of evidence-based practice interest.
- Supports the DNP student to facilitate opportunities for the DNP student to meet the DNP Project objectives.
- Directly oversees the DNP Project site experience. Supports project development and implementation at practice site
- Works Collaboratively with the DNP Project Team Chair. Communicates with the DNP Project Team Chair on a minimum of the first week of the course, mid-semester, and end of course via text, phone, email or Zoom.
- Communicates any concerns regarding the student's performance to the student and DNP Project Chair within 48 hours; provides verbal and written documentation of concerns and works with the DNP student and DNP Project Chair to develop strategies for improvement.
- Completes DNP Site Mentor Evaluation of Student Performance evaluations and reviews them with the course faculty in a timely manner.
- Validates student Experiential Clinical Hours spent on site.
- Provides ongoing feedback to the DNP student on drafts of DNP Project written paper in a timely manner
- Participates in the DNP student final DNP Project presentation and provides timely written feedback of the presentation to the DNP course faculty.

### 5.6 DNP Student Role and Responsibilities as a Member of the DNP Project Committee

- Submits the DNP Project Site and Site Mentor Request form to course faculty by week two of NUR 930, Research Translation I.
- Responds to emails and requests for completion of clinical documents by the Clinical Operations Coordinator for the Graduate Program within 24 hours.
- Ensures all clinical documents are complete and faculty approval has been granted prior to participation in any Experiential Clinical Hours.
- Documents Experiential Clinical Hours and DNP Essential Activities in eValue within 72 hours of the completed hours and activities.
- Is receptive to course faculty and DNP Site Mentor feedback and uses recommendations as opportunities to strengthen any areas in need of improvement or for continued growth.
- Responds to DNP Project Team and Course Faculty emails within 24- hours. Uses MCPHS email for all email communications.
- Maintains an ongoing relationship with the DNP Project Team and Course Faculty throughout the completion of the DNP Project, contributing to development of interdisciplinary collaborative practice and leadership skills in area of evidence-based practice interest.
- Communicates any concerns regarding the ability to meet course objectives, DNP Project site or DNP Project Site Mentor within 48 hours.
- Exhibits professional behavior at all times.

## **5.7 DNP Scholarly Project Progress and Associated Academic Credit**

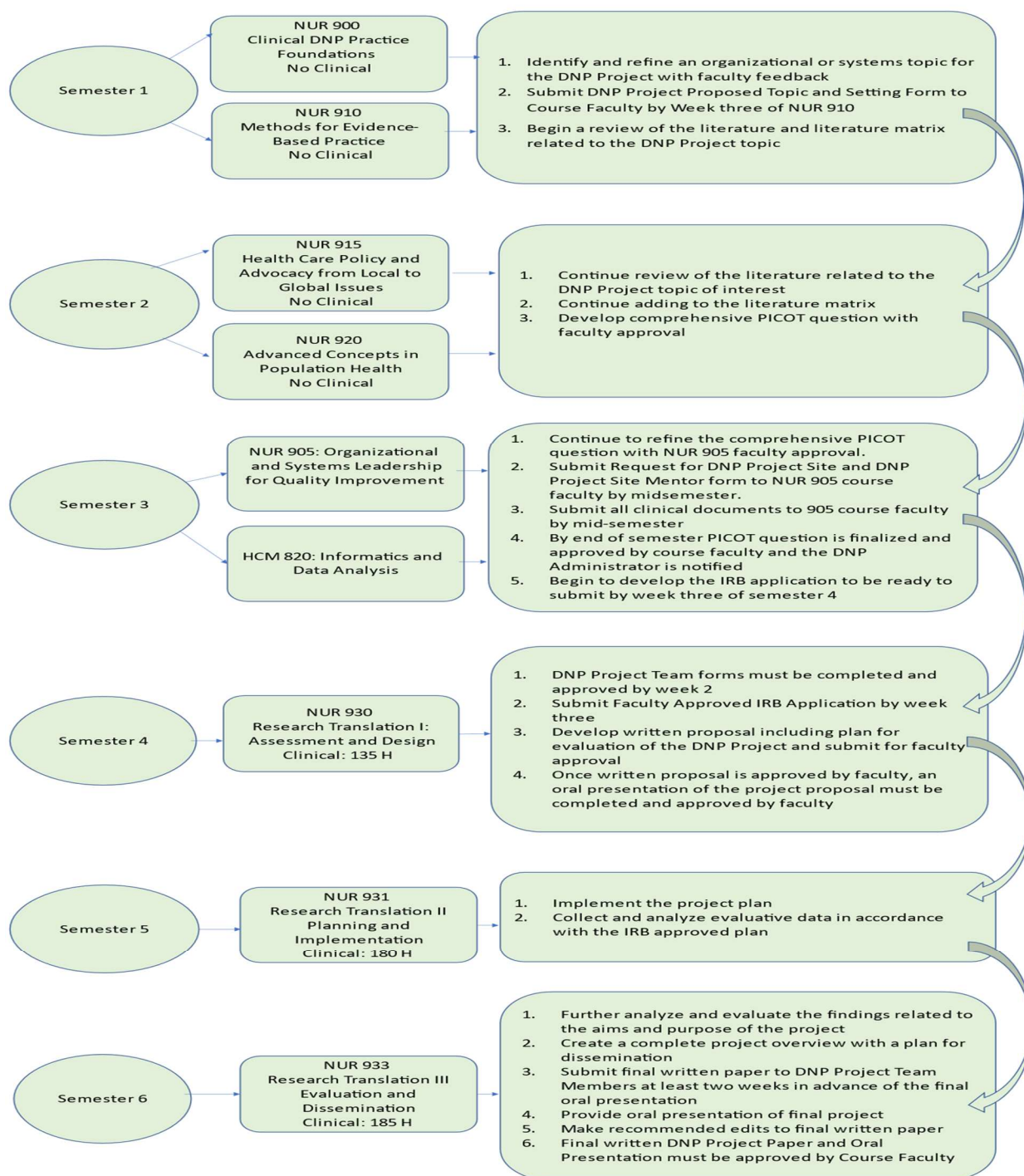
### **DNP Project credits**

A total of 9 academic credits and 500 experiential clinical hours are associated with the DNP Project completion. The nine academic credits are awarded through successful completion of the course and clinical objectives in three courses: NUR 930: Research Translation I, Assessment and Design, NUR 931: Research Translation II, Planning and Implementation, and NUR 933: Research Translation III, Evaluation and Dissemination. In rare circumstances the DNP student may need additional time beyond the end of the final semester to complete the DNP Project. In these circumstances, with the Project Chair and Program Administrator permission, the student will earn an Incomplete (I) for the final course grade and the student must register for the course (NUR 933) for the subsequent semester as a continuation. Students should refer to the MCPHS University Catalog for further information regarding academic progression guidelines.

### **5.8 DNP Project Overview of Deliverables**

The infographic on the next page provides a guide for students and faculty in the progression of steps toward completing the DNP Project. Further description is provided in course syllabi.

## DNP Project Milestones



## 6.0 Student Support and Resources

### 6.1 DNP Faculty Advisor

The DNP student will be assigned a faculty advisor upon admission to the program by the DNP Administrator or SON Dean. The University and SON embrace a faculty-student advisory model. The faculty advisor advises students on academic and professional matters to assist students who have academic difficulties and/or serious personal problems by referring them to appropriate University personnel.

### 6.2 Student Representation in the School of Nursing Governance

Matriculated DNP students are invited to serve on the DNP Committee as voting members. One DNP student representative will hold voting privileges.

#### DNP Committee

1. Purpose: To review all aspects of the DNP program
2. Membership of the DNP Committee.
  - a. MCPHS University DNP Administrator will chair the committee.
  - b. The committee shall include full-time faculty vetted to teach in the DNP Program. Faculty may teach at other levels in addition to the DNP courses (BSN, MSN).
  - c. Student representatives (voting) from the DNP program.
  - d. Adjunct/online faculty for DNP courses (non-voting) members
3. The role of the DNP Committee shall be to:
  - a. Review and recommend DNP student applicants for admission as needed
  - b. Review and recommend DNP program adjunct faculty, as needed
  - c. Formulate policies related to the DNP program and DNP students.
  - d. To review and analyze relevant data from a variety of sources (student and clinical partner evaluation, student formative and summative feedback, DNP Project Team members and/or community of interest feedback) to evaluate program effectiveness. All data is reported to the SON Graduate and Undergraduate Evaluation Committee.
  - e. Record and maintain meeting minutes.
  - f. Recommend actions based on evaluation data to the Dean and/or to other standing committees within the School of Nursing as indicated.
  - g. Develop and make revision recommendations of the SON *DNP Student Handbook* to the Dean and the Nursing Faculty Organization. The review will take place annually and as needed.
  - h. Advise the Dean of issues, concerns, and recommended changes related to student learning which may require the input and/or support of the larger MCPHS University community.
4. Meeting and reporting structure
  - a. Report to the Dean and the Graduate Committee and the Nursing Faculty Organization regarding all issues related to the DNP committee.
  - b. Meeting frequency: twice per semester or more as needed

Additional MCPHS School of Nursing shared governance opportunities are available for DNP students to include the Graduate Curriculum Committee, the Diversity, Equity and Inclusion Committee and the Scholarship Committee. Current information about each committee is available on the DNP Virtual Village.

### **6.3 Library and Learning Resources**

The MCPHS library system is available to all students and fosters research and learning. It provides access to electronic resources 24 hours a day. There are over 11,655 volumes of books, journals, and multi-media; 700 serial subscriptions; around 41,500 electronic books; and 145 databases. Nursing leadership and DNP project documents have been created for the DNP students to help them find resources available through the library resources on these integral topics. The School of Nursing program has a dedicated library liaison who is experienced in teaching evidence-based practice and searching appropriate nursing databases.

Online portal: <https://www.mcphs.edu/library>.

Online students are encouraged to utilize services through the Library and Learning Resources. Karen Alcorn is available for individual research consultations. Contact: Karen Alcorn, MLS, [karen.alcorn@mcphs.edu](mailto:karen.alcorn@mcphs.edu)

### **6.4 Center for Academic Success and Enrichment**

The Center for Academic Success and Enrichment (CASE) supports students through providing a number of academic support services introducing them to the strategies that will enhance performance in their academic programs and ultimately contribute to their professional lives.

#### **Academic Coaching/Counseling**

Academic Coaches/Counselors work collaboratively with students by program cohort assignment and can assist students with a variety of topics ranging from time management and prioritization, study skill development, connecting with campus resources and more. The CASE staff are available to meet with students on an appointment basis Monday – Friday 9:00am-4:00pm ET. To schedule an appointment with your assigned coach/counselor visit Student Success Hub.

Questions related to CASE services can be directed to the respective CASE department email based on program location: [case@mcphs.edu](mailto:case@mcphs.edu) (BOS) or [case.wm@mcphs.edu](mailto:case.wm@mcphs.edu) (WOR/MAN/ONL).

#### **University Learning Network (ULN)**

The ULN is intended to support students in meeting the challenges of our health- science based programs with our resources consisting of: Subject Tutoring (Peer/Professional), English Language Resource Center, Writing Center, and TutorMe.

Students can utilize the ULN's appointment-based services (Subject Tutoring, English Language Resource Center, & Writing Center) by visiting Student Success Hub. TutorMe can be accessed through the Tools section of the course's Blackboard page.

Questions related to University Learning Network services can be directed to [ULN@mcphs.edu](mailto:ULN@mcphs.edu).

#### **Accessing CASE Support**

*Student Success Hub:* To schedule an appointment with an Academic Coach/Counselor or an appointment-based ULN service, visit Student Success Hub at the following link and navigate to the "Offices & Services" section: <https://mcphs-university.force.com/StudentSuccessStudentPortal/s/>

### **6.5 Counseling Services for Online Students**

Counseling Services are available across all campuses with 24-hour coverage. The Division of Student Affairs also offers a variety of workshops and resources to support student well-being. Counseling services are available to all students regardless of program, campus or program modality. If an online nursing student needs or has inquiries about counseling services, MCPHS encourages the student to contact Counseling Services in Worcester at 508-373-5646. Due to limitations of services, MCPHS does not provide continuing counseling to online students but can consult with faculty and staff about mental health concerns for students, talk with the student briefly by phone to assist with finding appropriate referrals in their area or state, and work with faculty and staff to make sure the student need is addressed and supported.

### **6.6 Writing Center**

Students are welcome to participate in the following services offered through the University Learning Network (ULN). The Writing Center assists in giving feedback and advice about how writing can be improved. The Writing Center will coach you through the process of drafting and revising essays, reports, presentations, etc. To schedule an appointment please visit <https://mcphs.mywconline.com>

### **6.7 English Language Resource Center**

The English Language Resource Center (ELRC) serves English Language Learner (ELL) or multilingual (ESL) students who wish to strengthen their English skills to study more effectively at MCPHS. ESL faculty members are available on all three campuses to work with students one-on-one or in groups. Students can get help with their grammar, pronunciation, vocabulary, reading, writing, speaking, or any English skill necessary for their classes. For additional information and ELRC resources please visit the [ELRC page](#).

For tutoring or support students can contact Sunnia Ko Davis at [sunniako.davis@mcphs.edu](mailto:sunniako.davis@mcphs.edu) with further questions.

## **7.0 General Policies**

### **7.1 Health Insurance Portability and Accountability Act of 1996 (HIPAA)**

In 1996, Congress passed federal regulations to provide portability of health insurance when an employee leaves a job as a way to be able to change insurance carriers without a break in coverage. The act contains other provisions that have a major impact on the practice of healthcare providers.

The Administrative Simplification Clause of HIPAA Title II addresses Electronic Transaction Standards, Unique Identifiers, Privacy Standards and Security Standards concerning all data pertaining to the care of each individual patient in any healthcare facility. The provisions under the privacy and security standards impose strict compliance with confidentiality on the part of all who have access to patient records. All healthcare providers are required to have documented training regarding these patient privacy regulations. All School of Nursing students are required to attend a formalized training session on HIPAA regulations provided by the University and/or by the clinical agency. Students are expected to adhere to all HIPAA provisions and standards related to patient privacy. Failure to do so may subject the student to disciplinary action under the MCPHS Student Code of Conduct.

To ensure the safety and security of the patient treatment environment and to ensure patient and employee privacy and confidentiality, in accordance with HIPAA, the use of personal cell phones/electronic communication devices by MCPHS nursing students during clinical hours is prohibited. Students may use cell phones/electronic communication devices only during lunch or break



periods in private spaces away from all patients, common patient care areas, and/or common clinical work areas. Personal cell phones/electronic communication devices are to be turned OFF and stored away and are NOT to be kept on the person.

## **7.2 Use of Social Media, Cellphones, and Tablets**

Cell phones and other social media are only to be used in the clinical setting to access resources needed to participate in patient care, and/or to log hours in the E-value system. No personal use of cell phones or other social media in the clinical setting is allowed.

MCPHS School of Nursing has adopted the National Council of State Boards of Nursing (NCSBN)'s policy for social media. It is the student's responsibility to review and comply with the content contained in the NCSBN White Paper on Social Media that can be found at: [https://www.ncsbn.org/public-files/NCSBN\\_SocialMedia.pdf](https://www.ncsbn.org/public-files/NCSBN_SocialMedia.pdf).

Students must also comply with the MCPHS Electronic Communications Policy, which is set forth in the MCPHS Student Handbook. If there is a conflict between the terms of the NCSBN White Paper on social media and the MCPHS Electronic Communications Policy, the terms of the MCPHS policy shall apply. Students are also encouraged to review The Core Rules of Netiquette, from the book *Netiquette* by Virginia Shea. <http://www.albion.com/netiquette/corerules.html>

## **7.3 Immunization Requirements**

Please refer to the section of the [MCPHS Course Catalog](#) titled "MCPHS University Immunization Requirements" Immunization information and clearances are provided through CastleBranch, the University's contracted vendor.

In accordance with state law, MCPHS policy, and clinical agency requirements, students must show proof of required immunizations, unless they qualify for one of the exemptions allowed by law. Noncompliance with MCPHS immunization requirements will result in administrative withdrawal from the MCPHS or might negatively impact progression in the academic program.

Some healthcare agencies and clinical education sites may have additional immunization requirements. In order to be eligible for clinical placements, students must meet ALL MCPHS immunization requirements and any additional requirements imposed by the clinical agency to which the student is assigned. In cases where the clinical site does not pay for the completion of any additional immunization requirements, the student is responsible for paying any associated fees. Without full clearance of immunization requirements, students will not be eligible to begin clinical learning experiences, and consequently, will be unable to meet program requirements. Immunization information and clearances are provided through the University's contracted vendor.

## **7.4 CPR Certification**

All students must show evidence of CPR training during the first semester in the graduate nursing programs. Students must be certified in Basic Life Support (BLS) Healthcare Provider by the American Heart Association (AHA).

Acceptable AHA courses include BLS (instructor lead) or Heart Code BLS (blended online/skill sign off). American Red Cross, First Aid, and online courses will not be accepted. Students must provide a copy of the card/e-card, indicating active certification (AHA requires recertification every two years),

to campus Clinical Placement Coordinator. We recommend that the student verify the course in advance to ensure that the course is appropriate.

**NOTE:** It is the responsibility of the student to submit evidence of all required annual updates of immunizations and certification renewals. Students will not be permitted to participate in clinical learning experiences until all information is received, and consequently, may be unable to meet program requirements or experience a delay in graduation.

### **7.5 Drug Testing**

Some healthcare agencies and clinical sites may have additional drug testing requirements. In order to be eligible for clinical placements, students must meet any additional requirements imposed by the clinical rotations site to which the student is assigned. The student is responsible for paying any associated fees. Clinical site drug testing policies can preclude the student from attending clinical, thus unable to satisfy course and program requirements. Please refer to the Drug Abuse Policy set forth in the MCPHS Student Handbook regarding marijuana use.

### **7.6 Criminal Offender Record Information (CORI), Level 1 Background Check**

Certain laws and accreditation standards require health care agencies to request Criminal Offender Record Information (CORI) about candidates for employment, volunteer, or training positions to determine if the candidate is eligible to be hired or on rotation in the agency. The majority of the clinical training sites at which the MCPHS places students for educational experiences must comply with these laws. In order to be eligible for clinical placements, students must be cleared through a CORI check. Additional CORIs may be required prior to returning from a Leave of Absence or Out of Sequence status. In addition, clinical sites may require their own CORI checks, and students may be asked to complete several release forms. In cases where the facility does not pay the charge for the CORI check, the student is responsible for paying the fee. If a site requires, but does not provide for obtaining CORI checks, the student can obtain them through the School of Nursing's Clinical Placement Coordinator and will be responsible for any associated fees. The CORI must be performed by the University's designated vendor due to clinical site/agency contractual requirements.

### **7.7 Physical, Technical, and Professional Standards**

All graduate students must have abilities and skills in the following four areas: *communication; observation; motor function and endurance; and behavioral*. Reasonable accommodations may be made for some disabilities. However, students must be able to perform in a reasonably independent manner, with or without accommodations.

Cognitive: Intellectual, Conceptual and Quantitative Abilities

- Follow policies and procedures of MCPHS and the cognitive requirements of the clinical sites hosting the faculty and students for learning.
- Comprehend and follow assignment directions, rubrics, and course syllabi developed by faculty
- Demonstrate ability to achieve course and program outcomes.
- Demonstrate ability to comprehend, integrate, and apply knowledge.
- Develop and refine problem-solving skills crucial to practice as a nurse.
- Access, analyze, and synthesize subjective and objective data to develop nursing diagnoses and comprehensive plans of care.

- Engage effective problem solving and accurately prioritize patient needs in a prompt and timely fashion.
- Utilize current evidence, clinical judgment, and patient preferences to systematically assess, analyze, implement, and evaluate healthcare interventions.
- Promote safe, culturally competent, quality care across the lifespan.

#### Communication

- Must be able to communicate effectively with patients, families, and members of the healthcare team through oral, written, and interpersonal means.
- Must be able to obtain information, describe patient situations, and perceive both oral and non-verbal communication (including ability to understand normal speech without seeing the speaker's face).
- Must be able to speak, comprehend, read, and write in English at a level that meets the need for accurate, clear, and effective communication. Examples include but are not limited to giving clear oral reports; reading watches or clocks with second hands; reading graphs; reading and understanding documents printed in English; writing legibly in English; discriminating subtle differences in medical terminology.

#### Observation

- Must be able to observe a patient accurately. Examples include but are not limited to listening to heart and breath sounds; visualizing the appearance of a surgical wound; detecting bleeding, unresponsiveness or other changes in patient status; detecting the presence of foul odor; and palpating an abdomen.
- Must be able to detect and respond to emergency situations, including audible alarms (e.g., monitors, call bells, fire alarms).

#### Motor Function and Endurance

- Must have sufficient strength and mobility to work effectively and safely with patients and carry out related nursing care.
- Must be able to complete assigned periods of clinical practice, including up to 12-hour shifts, including days, evenings, nights, and weekends.
- Must be able to respond at a speed sufficient to carry out patient assignments within the allotted time.

#### Behavioral

- Must possess mental and emotional health required for total utilization of intellectual abilities.
- Must be able to tolerate physically taxing workloads.
- Must be able to respond and function effectively during stressful situations.
- Must be capable of adapting to rapidly changing environments and respond with flexibility in uncertain situations.
- Must be able to interact appropriately with others (patients, families, members of healthcare team) in various healthcare contexts.

### **7.8 Physical Requirements in Clinical Setting**

Students must be able to meet all physical, technical and professional standards in order to attend classes/lab/clinical. Clinical agencies may have additional, or agency-specific technical standards, which take precedence over MCPHS standards. In such instances, the program will attempt to provide a

comparable alternative learning experience but if that is not possible, students may not be able to progress in the program, or complete program requirements.

## **7.9 Academic Honesty**

The following comes directly from the MCPHS Course Catalog and Student Handbook titled “Academic Honesty Policy”.

The University presumes that students will assume personal responsibility and maintain personal integrity in all aspects of their education. Responsibility for academic integrity is expected of all students whether in-person and/or through a virtual learning environment. Dishonest actions in the execution of an examination, report, academic assignment, and/or academic coursework requirement, including clinical rotations, constitute violations of the MCPHS Academic Honesty Policy. Such violations are subject to specific academic sanctions, as well as to disciplinary sanctions (i.e., disciplinary warning, probation, deferred suspension, suspension, and/or expulsion).

Academic Honesty and Student Discipline Procedures Academic violations or offenses include the following:

- 1.01 Receiving assistance, or attempting to receive assistance, not authorized by an instructor in the preparation of any assignment, laboratory exercise, report, or examination submitted as a requirement for an academic course or rotation.
- 1.02 Knowingly giving unauthorized assistance, or attempting to give unauthorized assistance, to another student in the preparation of any assignment, laboratory exercise, report, or examination submitted as a requirement for an academic course or rotation.
- 1.03 Plagiarism: Submitting another person’s work (including words, images, and ideas) as one’s own without the proper acknowledgment of source, or use of the words or ideas of another without crediting the source of those words or ideas. Also, submitting the same work for assignments in more than one class (copying from oneself) without permission from the instructor and/or appropriate citation, in the same semester or subsequent semesters.
- 1.04 Obtaining or attempting to engage another person (student or non-student) to take one’s own examination or offering to or taking another students’ exam.
- 1.05 Selling, giving, lending, or otherwise furnishing any material that can be shown to contain the questions or answers to any examination scheduled to be given at any subsequent date in any course of study offered by the University.
- 1.06 Taking, or attempting to take, steal, or otherwise procure in any unauthorized manner any material pertaining to the conduct of a class, including examinations.
- 1.07 Falsifying or presenting fictional patient information as real to fulfill requirements for work assigned by individual faculty members or clinical preceptors.
- 1.08 Signing in another student or requesting to be signed in by another student on a course attendance sheet; or falsely recording another student’s attendance (as with the use of “clicker”). Signing into an assessment for another student or providing your username and password to another individual is also prohibited.

1.09 Altering or attempting to alter grades or information on any assignment, laboratory exercise, report, exam, or previously completed examination as a requirement for an academic course or rotation. Implementation of the Academic Honesty Policy 1. The Dean of Students or designee will review the Academic Honesty Policy, issues of dishonesty, and consequences of violating the Academic Honesty Policy during new student orientation.

The Academic Honesty Policy will be provided by the Office of Student Affairs to all members of the MCPHS community online through the MCPHS student handbook. All students entering MCPHS are expected to acknowledge they have read the Academic Honesty Policy via an online process coordinated by the Office of Student Affairs. Refusal to do so may result in more severe sanctions should a student be found responsible for an academic honesty violation.

In specific testing and/or evaluation situations, students may be required to present their MCPHS ID cards to verify identity, including situations where remote proctoring tools are used during examinations. Each instructor is responsible for informing students of the standards of behavior expected of students in the classroom, laboratory, clinical site, and remotely, and for consistently enforcing such standards.

Faculty may require that students sign an academic honesty statement for exam and written graded assignments. This statement may be defined by each School or Program for specific requirements for in-person or remote assessment methods.

The statement will include:

Academic Honesty Statement I pledge that I have neither given nor received unauthorized aid and will not give or receive unauthorized aid on any examination, paper and/or assignment.

Student Name (printed) \_\_\_\_\_  
Student Signature: \_\_\_\_\_ ID Number: \_\_\_\_\_

### **Plagiarism Prevention Service**

Students are expected to abide by the University's Academic Honesty Policy as outlined. Plagiarism (see Offense 1.03 above) is considered a violation of this policy. In order to deter plagiarism and ensure appropriate use of resources in student research and learning, the University subscribes to a plagiarism prevention service. Faculty may require students to submit their written work electronically through this plagiarism prevention service in order to verify that when ideas of others are used, they are cited appropriately. The course syllabus identifies student work that must be submitted electronically for such review.

### **7.10 Chain of Command**

In the event a student in the School of Nursing needs to communicate a concern, need, or issue relating to courses/clinical expectations/experiences, the student needs to follow the designated chain of command as follows:

- **Step 1:** The student needs to discuss their concern/need/issue with the faculty member of the course/clinical that they are having an issue with.
- **Step 2:** If the concern/need/issue is not resolved, the student may bring the concern/need/issue to the DNP Program Administrator.
- **Step 4:** If the concern/need/issue still is not resolved, the student may bring the concern to the Director of the Online Graduate Nursing Programs.

- **Step 5:** If the concern/need/issue still is not resolved, the student may bring the concern to the Dean/Chief Nursing Officer. In order to meet all students' needs timely and appropriately, the student is asked to follow the appropriate chain of command as outlined. The decision of the Dean/Chief Nursing Officer is final.

### 7.11 Academic Progression Policy and Procedures and Grading Policy

#### Grading Policy

|          |            |                                      |
|----------|------------|--------------------------------------|
| A        | 4.0        | 100-94                               |
| A-       | 3.7        | 93-90                                |
| B+       | 3.3        | 89-87                                |
| <b>B</b> | <b>3.0</b> | <b>86-83 (minimum passing grade)</b> |
| B-       | 2.7        | 82-80                                |
| C        | 2.0        | 70-79                                |
| F        | 0          | <69                                  |

The overall professional GPA for the DNP program is 3.0. The School of Nursing grading practice is to eliminate decimal points and to assign whole numbers as to final course graded. The "rounding up" of a final grade is based on 0.50 or above; not 0.49, 0.48, etcetera. For example, if the student grade is 82.49 or less, the student's final grade of record is 82. Conversely, if the student grade is 82.50 or above, the student's grade of record is 83.

For the DNP program, the minimum passing grade in any course is 83, and the overall required professional GPA remains 3.0.

Students who wish to appeal a final grade must follow the University's grade appeal process as detailed in the MCPHS catalog.

### 7.12 Student Responsibility for Contents of Doctor of Nursing Practice Student Handbook

Upon admission to the DNP program, students are required to read the *MCPHS DNP Student Handbook*. Students are required to verify by signature that they have read and will abide by the policies, protocols, and guidelines described in this document.

At the beginning of each academic year and as needed, the *MCPHS DNP Student Handbook* is reviewed and revised as needed. The student body will be informed of any major revisions via email.

### 7.13 APA Writing Style

All formal papers must conform to guidelines of the *Publication Manual of the American Psychological Association*, 7<sup>th</sup> edition (2020). In addition to the *Manual*, students may find additional resources in the APA Style section of the [APA website](#)

### 7.14 Attendance Policy for Online Courses – General Statement

Communication from the student with faculty is essential and is expected. It is not acceptable for a student to "disappear" by lack of communication. Neither absence nor notification of absence relieves the student of their responsibilities to meet class/course objectives or check their MCPHS email on a regular basis. The School of Nursing Academic Standing Committee may consider this as grounds for an administrative withdrawal.

## **Class Attendance**

MCPHS supports a learner-centered environment and attendance at all classes, seminars, clinical experiences, simulations, and residencies directly correlates with successful course completion and represents a basic professional behavior. Students of the School of Nursing are responsible to engage in their own learning and professional comportment.

In the case of illness or prolonged absence, it is the student's responsibility to notify their course faculty within five (5) days from the first date of absence. With acceptable documentation from a student, Office of the Dean of Students may issue an official memorandum notifying faculty of an excused absence. In the case of an approved, excused absence, the course faculty will make reasonable attempts to assist the student to satisfy requirements of the course (e.g., make-up classes and exams). Students are expected to abide by instructions in each course syllabus regarding student responsibilities related to class absences. Students who fail to do so may be ineligible to receive an excused absence – regardless of the reason for the absence. With respect to completion of work missed, if an acceptable agreement between the student and professor(s) cannot be reached, the DNP Administrator/Dean of Nursing will serve as arbitrator.

Students are responsible for all class materials, content, and assignments. Students may only make up missed class assignments, quizzes, and exams if a valid excuse has been granted. Graded work that is missed due to an unexcused or unapproved absence will be assigned a grade of zero (0). All course work and exams must be completed before a student can sit for a final exam in a course.

Regular online class attendance is mandatory as evident by active participation in online discussion, meeting course requirements, and timely submission of online postings, responses, case studies, assignments, and tests. Logging into the Blackboard course site is essential to student learning and success in the course. As a general rule of thumb, students are expected to attend online as many hours as listed in the credit hours of the course. A minimum of 3 hours of preparation time per credit per week is recommended to assist in the student's success.

### **7.15 Punctuality**

Punctuality is expected of students for all classes, seminars, clinical experiences, simulations, and residencies. Neither tardiness nor leaving early will be tolerated, as it impacts adversely upon the student's learning experience and is disruptive to fellow students and faculty. Students will be held accountable for all missed material.

### **7.16 Email Policy**

All MCPHS students are required to open, utilize, and maintain (i.e., keep storage within the maximum set by the Department of Information Services) a MCPHS email account. Official University communications and notices are sent via MCPHS email accounts. All students are responsible for regularly checking their MCPHS email and for the information contained therein. Only MCPHS accounts will be used in all matters related to academics, student life, and University notifications. The University does not forward MCPHS email to personal email accounts. We encourage students to check their MCPHS email regularly and (minimum of 3 times per week).

When a student needs to contact the faculty by email, the faculty will respond to email messages in a timely manner, generally within 24 hours during the week and 48 hours on weekends. Note that weekends and other MCPHS holidays may impact the timing of email responses from faculty.

### **7.17 Course Work**

Assignments are due on the date specified. Work submitted after the due date will be considered late and will be graded accordingly. The maximum achievable grade will be based upon a loss of 5 points per day for each calendar day including holidays and weekends that an assignment is late. For example, an assignment that is 4 days late can receive a maximum achievable grade of 80%. The assignment is then graded, and points are subtracted from a total of 80, as opposed to 100%. Any issues/concerns regarding the completion and/or submission of an assignment need to be discussed with faculty before the date that the assignment is due. Grades will not be reconsidered after they are posted.

Faculty, at their discretion, may allow for an individual student to have a time extension as an approved late assignment, with a maximum extension of 1 to 7 days. Students must submit their request for assignment extensions prior to the due date of the assignment in order for the request to be considered. In the event an extension is granted, the student will not be penalized according to the “late assignment” policy above.

### **Plagiarism and “Turn-it-in”**

Students are expected to abide by the College’s Academic Honesty Policy as explained in the MCPHS Student Handbook. Plagiarism is considered a violation of this policy. Plagiarism is defined as submitting another person’s work as one’s own without proper acknowledgment or using the words or ideas of others without crediting the source of those words or ideas. In order to deter plagiarism and ensure appropriate use of resources in student research and learning, the College subscribes to plagiarism prevention services [www.turnitin.com](http://www.turnitin.com) and SafeAssign. Faculty may request students to submit their written work electronically to these plagiarism prevention services in order to verify that when ideas of others are used, they are cited appropriately. The course syllabus identifies student work that must be submitted electronically for such review and provides directions for doing so.

The graduate program at MCPHS has determined a maximum acceptable similarity index of 15% for all DNP assignments.

### **Original Work**

Student assignments must be original work produced during the semester calendar. Resubmitting work from prior semesters or from other classes is considered plagiarism and will receive a “0” grade for the assignment.

### **Remediation Opportunities**

On the occasion that a written assignment grade is significantly below the accepted 83 points, an opportunity to rewrite may be offered at the faculty’s discretion. This is not considered an extra credit assignment but an opportunity to address issues identified in the first submission. The maximum grade attainable in a rewrite would be 83.

Students are strongly encouraged to utilize the MCPHS Writing Center with all written assignments. The course coordinator/faculty member may require the student to collaborate with the MCPHS Writing Center, as appropriate, to best support the student in their graduate writing responsibilities.



### **7.18 Withdrawal & Re-entry**

A graduate student wishing to withdraw from the DNP program must:

- Contact the Online Graduate Student Services Specialist to initiate the withdrawal process.
- The Online Graduate Student Services Specialist will send the student the withdrawal form.
- The student will complete and return the form to the Online Graduate Student Services Specialist who will send the student the link to withdraw from the program.
- It is recommended that students discuss withdrawal from the program with the DNP Administrator.

See MCPHS handbook for policy on refunds or reach out to Student Financial Services with questions.

### **7.19 Progression**

Graduate students must achieve a final grade of B (GPA of 3.0) in each nursing course to progress. DNP courses are sequential and must be taken in order per the written curriculum. Each student must also achieve a grade point average of “B” or better in order to graduate.

Students must complete the requirements for the DNP degree within four (4) years of starting the program. If this time limit from the date of admission to completion has lapsed and the student has not completed all degree requirements, the student must request an extension in writing and meet with the DNP Administrator/Dean of Nursing, who may approve or deny the extension request. The Dean’s decision is final and not subject to further appeal.

### **Incomplete Grades**

According to the [MCPHS Catalog](#), courses with a grade of Incomplete must be completed within three weeks of the new semester following the academic term (including summer sessions) in which the Incomplete grade was assigned, or the grade automatically becomes an F.

No student may progress to courses for which the course with an Incomplete is a prerequisite until the work is completed and the I grade is changed. No student can graduate with an Incomplete grade in any course necessary for graduation.

### **7.20 Probation/Dismissal**

For successful completion of a doctoral level course, the student must achieve a minimum passing grade of “B” (GPA of 3.0).

1. Graduate students who receive a grade below a “B” (3.0) in any course will be placed on academic probation.
2. The student must repeat the course in which they received a grade below a “B” and receive a grade of “B” or higher.
3. Students will be recommended for dismissal from the graduate nursing program for:
  - a. Failure of the same course twice (with a grade below “B”)
  - b. Failure of a total of three courses throughout the student’s tenure (with a grade below “B”)
4. Clinical components of nursing courses are graded on a 5-point Likert Scale. A score of less than 3 in any area on the final end of semester clinical evaluation may result in course failure, regardless of didactic grade.

5. Failure, in the DNP Program, of the didactic portion of a nursing course will result in failure of the entire course regardless of the clinical evaluation scores. All elements of a course must be repeated when the course is repeated.

### **7.21 Leave of Absence**

MCPHS recognizes that there are situations when a student may require a leave of absence (LOA). Such leaves are granted for a maximum of one academic year with the exception of leaves granted for military service. The student must meet to consult with the DNP Administrator or the SON Dean or designee regarding the reason(s) for, requesting the LOA, and the ramifications of taking a leave of absence. Leave of absence approval or denial is determined by the DNP Administrator or the SON Dean. After the initial meeting the student must return the completed Leave of Absence form within 1 week (or 5 business days) with the required signatures: a) the student, b) Academic Dean or designee, c) Student Financial Services, and d) Immigration Services representative (for international students). The DNP Program Administrator or designee will notify the student within 1 week (or 5 business days) upon receipt of the completed form with the finalized LOA requirements via the student's MCPHS email account. **Students who take a leave after the designated add/drop period will receive course grade(s) of W.** *\*For information on a Health/Medical Leave of Absence, please see the Health/Medical Leave of Absence section in the MCPHS Catalog.*

Students considering taking a LOA must be aware that they are subject to any curricular changes that have occurred in their Graduate Program during the LOA. An updated Program Plan will be provided to the student upon return to the program.

### **Return from Leave of Absence**

Students returning from a leave of absence must confirm they are returning to MCPHS with the DNP Program Administrator and SON Dean or designee prior to the following dates:

- *March 1-for a summer or fall semester return*
- *October 1-for a spring semester return*
- *Online students-30 days prior to the beginning of the semester*

Students on a Leave of Absence are *not* eligible for MCPHS Services. Students who intend to return from a LOA must also review and adhere to applicable school/program specific policies in addition to the general policy outlined herein. Students who fail to return within the designated time must reapply for admission.

A student who fails to return during the granted Leave of Absence period will be administratively withdrawn from the program. The student is responsible for contacting the Graduate Program designee at least 30 days prior to the expected return. Approval of Leave of Absence is on a case-by-case basis. See the [MCPHS Catalog](#) for additional information.

Students who wish to return to the School of Nursing must complete the Intent to Return from Leave of Absence form and notify the DNP Administrator and SON Dean no later than thirty (30) days from the start of the desired semester return date. An Intent to Return Form will be sent to the student and must be completed and submitted to the graduate program designee. A review of the program of study will take place and will be updated if necessary.

## **7.22 Grade Appeals**

### **Academic Warning**

Students who are identified as failing to maintain a minimum mid-point grade of at least a 'B' will receive a mid-semester warning per MCPHS policy. Each student is encouraged to access and utilize available resources to support their success. Resources may include but are not limited to:

- The course faculty
- The DNP Project Team Chair,
- The Center for Academic Success and Enrichment (academic advising and services), or
- The Writing Center.

### **Clinical Warning**

When a concern about clinical competency or a breach of professional conduct arises, faculty may place a student on clinical warning status and initiate a clinical learning contract. Examples of incidents which may lead to a clinical warning and a clinical learning contract include, but are not limited to:

- Failure to demonstrate competence consistent with the objectives of the course;
- Behavior deemed by the faculty member to be unsafe (behavior that places the student, the patient, or another staff member at risk of injury, or causes the student, the patient, or another staff member to be harmed);
- Absence or tardiness that precludes an effective learning experience;
- The student does not seek appropriate consultation from the site mentor or other site healthcare provider;
- Does not provide for delivery of safe patient care;
- Does not abide by the ANA Scope and Standards of Advanced Practice Nursing in dealing with the patient and other health care providers;
- Fails to be current with or complete clinical hours or submission of clinical experience documentation. This documentation includes clinical logs in eValue within 48 hours of completion and end of semester clinical hour attestation form.
- Does not notify the site mentor, course faculty, and DNP Administrator of absence from a clinical site;
- Does not communicate or fails to facilitate communication between course faculty/DNP Project Team Chair and site mentor as necessary
- Other behavior which adversely affects patient care or does not demonstrate professionalism at all times.

### **Graduate Program Documentation of Clinical Warning/Remediation**

The clinical warning and/or clinical learning contract will be documented in the student's record. The information will indicate the date, time, place, and circumstances of the relevant incident(s). The information will be signed by the initiating course faculty/DNP Project Team Chair, site mentor, and the student, and forwarded to the DNP Program Administrator. A copy of the clinical warning/clinical contract will be given to the student. The clinical learning contract will clearly specify the objectives and means to achieve the objectives, evaluation criteria, and a timeframe by which the student must meet the objectives of the contract. The evaluating site mentor and course faculty/DNP Project Chair will provide progress reports to the student during the period of the contract. Outcomes of the clinical warning and/or contract can be successful or unsuccessful. Should the outcome be favorable for the student, documentation of the improvement will be placed in the student's record and the contract may be discontinued. If the warning represents a critical element such as, but not limited to attendance/tardiness, organizational skills, documentation, professionalism, etc., the student will

remain on warning status during subsequent courses and/or for the duration of their tenure in the nursing program. Patterns of inappropriate behavior and/or weak clinical performance may result in clinical failure. All information will be retained in the student's file for subsequent access by authorized faculty. Should the student fail to meet the prescribed objectives and timeframes noted in the clinical learning contract or if the identified behaviors persist, the result will be a clinical failure, and therefore, failure of the course and an inability to progress in the graduate program.

### **7.23 Financial Aid**

Students can arrange financial assistance through Student Financial Services at MCPHS at the following website: <https://www.mcphs.edu/admission-and-aid/financial-services>

### **7.24 Graduation**

MCPHS awards degrees in May, September, and December of each year. University-wide commencement ceremonies are held only in May and December. For more information, please visit the [MCPHS Catalog](#) for additional information and procedures.

### **7.25 Responsibility for Content of DNP Handbook Verification Form**

The MCPHS University DNP Student Handbook is a resource to assist you in becoming acquainted with the academic and clinical policies of the School of Nursing. It contains information that is important for your academic and clinical success and progression in the School of Nursing.

My signature below indicates that I have access to the MCPHS University DNP Student Handbook, either in hard copy or online, and that I acknowledge my responsibility for knowledge of the contents and adherence to the policies, protocols, and guidelines contained therein.

My signature below also indicates that I have accessed and read the NCSBN policy online on the use of social media within Nursing and Healthcare.

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

Printed name: \_\_\_\_\_

Date: \_\_\_\_\_

Please return a signed copy via Blackboard Assignment Drop Box.

## Appendix A1

### DNP Project Site and Site Mentor Request



MASSACHUSETTS COLLEGE of PHARMACY  
and HEALTH SCIENCES

**DNP Project Site and Site Mentor Approval Request**

DNP student must complete form by mid-term of semester 3 (course BEFORE starting clinical hours). Form must be submitted to course faculty. Course faculty will review and sign. The DNP Administrator will sign attesting to notification.

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

Date: \_\_\_\_\_

DNP Project Topic of Interest: \_\_\_\_\_

DNP Project Setting: \_\_\_\_\_

Requested site: \_\_\_\_\_

Requested DNP Site Mentor (must attach copy of current curriculum vitae):  
\_\_\_\_\_

Student's rationale for choosing DNP project site and DNP Project Site Mentor (why are they appropriate for DNP Project completion):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Course Faculty Response to Request**

|                                  | Approved<br>(Initials) | Denied<br>(Initials) | Comments |
|----------------------------------|------------------------|----------------------|----------|
| Proposed DNP Project Site        |                        |                      |          |
| Proposed DNP Project Site Mentor |                        |                      |          |

If the request for site, site mentor, or both are denied, faculty may grant up to a maximum of a two-week extension to submit a request for a different mentor or site. A second unapproved request for a DNP site or site mentor may result in a mid-semester academic warning and may delay progression.

**Signatures**

DNP Student: \_\_\_\_\_ Date: \_\_\_\_\_

MCPHS NUR 930 Course Faculty: \_\_\_\_\_ Date: \_\_\_\_\_

DNP Program Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

## Appendix A-2

### DNP Project Approved Team Members



MASSACHUSETTS COLLEGE of PHARMACY  
and HEALTH SCIENCES

**DNP Project Approved Team Members**

The DNP Project Team will be assigned by week two of NUR 930, Research Translation I, Assessment and Design. The DNP Project Team Members include the DNP Project Team Chair, the DNP Project Team Member, the DNP Project Site Member and the DNP Student. The DNP Project Team works closely with the DNP Course Faculty. The course faculty are responsible for all grading of assignments and approval and sign-off of clinical evaluations, DNP Essential activities, and Experiential Clinical Hours.

The DNP Project Team Chair is assigned by the DNP Administrator. The DNP Project Team Member may be requested by the DNP student or assigned and must be approved by the DNP Administrator. The DNP Site Mentor is chosen by the DNP student and approved by both the course faculty and DNP Administrator. The DNP Student and DNP Project Team Members should refer to the current DNP Student Handbook for Roles and Responsibilities.

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_  
NUR 930 Course Faculty: \_\_\_\_\_ Semester: \_\_\_\_\_  
Title of DNP Project: \_\_\_\_\_  
DNP Project Site: \_\_\_\_\_

DNP Project Team Chair Name: \_\_\_\_\_  
Chair Email: \_\_\_\_\_  
Chair Phone Number: \_\_\_\_\_  
Chair Highest Academic Degree: \_\_\_\_\_ Certifications: \_\_\_\_\_  
Chair Practice Specialty: \_\_\_\_\_

DNP Project Team Member Name: \_\_\_\_\_  
Team Member Email: \_\_\_\_\_  
Team Member Phone Number \_\_\_\_\_  
Team Member Highest Academic Degree: \_\_\_\_\_ Certifications: \_\_\_\_\_  
Team Member Practice Specialty: \_\_\_\_\_





MASSACHUSETTS COLLEGE of PHARMACY  
and HEALTH SCIENCES

**DNP Project Approved Team Members**

DNP Project Site Mentor Name: \_\_\_\_\_

Site Mentor Email: \_\_\_\_\_

Site Mentor Phone Number: \_\_\_\_\_

Site Member Highest Academic Degree: \_\_\_\_\_ Certifications: \_\_\_\_\_

Site Member Practice Specialty: \_\_\_\_\_

**Signatures:**

DNP Student: \_\_\_\_\_ Date: \_\_\_\_\_

NUR 930 Course Faculty: \_\_\_\_\_ Date: \_\_\_\_\_

DNP Project Team Chair: \_\_\_\_\_ Date: \_\_\_\_\_

DNP Project Team Member: \_\_\_\_\_ Date: \_\_\_\_\_

DNP Project Site Mentor: \_\_\_\_\_ Date: \_\_\_\_\_

DNP Administrator Signature of Approval: \_\_\_\_\_ Date: \_\_\_\_\_

SON Nursing Dean Signature of Approval: \_\_\_\_\_ Date: \_\_\_\_\_

## Appendix A-3

### DNP Site Mentor Evaluation of Student Performance



**DNP Site Mentor Evaluation of Student Performance Procedures:**

- The DNP Site Mentor Evaluation of Student Performance form will be completed by the DNP Site Mentor at mid-semester and during the last week of the semester in NUR 930, Research Translation I: Assessment and Design, NUR 931, Research Translation II: Planning and Implementation, and NUR 933, Research Translation III: Evaluation and Dissemination.
- The DNP Site Mentor will evaluate the DNP student's progress toward meeting the DNP Essentials (AACN, 2006) listed in the form at mid-point and end of the semester.
- The DNP Site Mentor will review the evaluation with the DNP course faculty. The DNP course faculty will review the evaluation for final approval and will discuss the evaluation with the DNP student.
- The DNP Site Mentor will email the completed evaluation including signature to the DNP course faculty within 72 hours of completion at mid-term and the final evaluation during the final week of classes.
- The DNP student will upload the completed evaluation including signatures of course faculty, site mentor and student, to the designated dropbox in the course Blackboard as part of their mid-semester and end of semester clinical documentation.
- If the student receives a score of less than 3 in any evaluated area at mid-point clinical evaluation, the course faculty will develop a plan for success with the DNP student and DNP Site Mentor to include specific objectives and timeline (see p. 9).
- A final clinical evaluation with a score of less than 3 in any evaluated area will result in course failure.

**Scoring Guidelines:** The scoring rubric is provided below. If the student receives a score of less than 3 in any evaluated area at mid-point clinical evaluation, the course faculty will develop a plan for success with the DNP student and DNP Site Mentor to include specific objectives and timeline (see p. 9). A final clinical evaluation with a score of less than 3 in any evaluated area will result in course failure.

**Scoring Rubric**

Level 1=Not observed

Level 2=Needs constant guidance

Level 3=Needs frequent guidance

Level 4=Needs occasional guidance

Level 5=Functions independently and seeks guidance when appropriate



## DNP Project Site Mentor Evaluation of Student Performance

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

Course Number: \_\_\_\_\_

DNP Project Site Mentor: \_\_\_\_\_

Experiential Clinical Site: \_\_\_\_\_

Grading Rubric:

Level 1=Not observed

Level 2=Needs constant guidance

Level 3=Needs frequent guidance

Level 4=Needs occasional guidance

Level 5=Functions independently and seeks guidance when appropriate

| DNP Essentials  | Midterm |   |   |   |   | Final |   |   |   |   | Additional Comments |
|---|---------|---|---|---|---|-------|---|---|---|---|---------------------|
| Essential I: Scientific Underpinnings for Practice  | 1       | 2 | 3 | 4 | 5 | 1     | 2 | 3 | 4 | 5 |                     |
| 1. Integrate nursing science with knowledge from ethics, the biophysical, psychosocial, analytical, and organizational sciences as the basis for the highest level of nursing practice. |         |   |   |   |   |       |   |   |   |   |                     |
| 2. Use science-based theories and concepts to:  |         |   |   |   |   |       |   |   |   |   |                     |
| • determine the nature and significance of health and health care delivery phenomena  |         |   |   |   |   |       |   |   |   |   |                     |
| • describe the actions and advanced strategies to enhance, alleviate, and ameliorate health and health care delivery phenomena as appropriate;  |         |   |   |   |   |       |   |   |   |   |                     |
| • evaluate outcomes.  |         |   |   |   |   |       |   |   |   |   |                     |
| 3. Develop and evaluate new practice approaches based on nursing theories and theories from other disciplines.  |         |   |   |   |   |       |   |   |   |   |                     |
| Essential II: Organizational and Systems Leadership for Quality Improvement and Systems Thinking  |         |   |   |   |   |       |   |   |   |   |                     |
| 1. Develop and evaluate care delivery approaches that meet current and future needs of patient populations based on   |         |   |   |   |   |       |   |   |   |   |                     |

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|---|--|--|--|--|--|--|--|--|--|--|--|--|
| scientific findings in nursing and other clinical sciences, as well as organizational, political, and economic sciences.  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2. Ensure accountability for quality of health care and patient safety for populations with whom they work.<br><ul style="list-style-type: none"><li>• Use advanced communication skills/processes to lead quality improvement and patient safety initiatives in health care systems.</li></ul> |  |  |  |  |  |  |  |  |  |  |  |  |
| <ul style="list-style-type: none"><li>• Employ principles of business, finance, economics, and health policy to develop and implement effective plans for practice-level and/or system-wide practice initiatives that will improve the quality of care delivery.</li></ul>                      |  |  |  |  |  |  |  |  |  |  |  |  |
| <ul style="list-style-type: none"><li>• Develop and/or monitor budgets for practice initiatives.</li></ul>  |  |  |  |  |  |  |  |  |  |  |  |  |
| <ul style="list-style-type: none"><li>• Analyze the cost-effectiveness of practice initiatives accounting for risk and improvement of health care outcomes.</li></ul>   |  |  |  |  |  |  |  |  |  |  |  |  |
| <ul style="list-style-type: none"><li>• Demonstrate sensitivity to diverse organizational cultures and populations, including patients and providers.</li></ul>   |  |  |  |  |  |  |  |  |  |  |  |  |
| 3. Develop and/or evaluate effective strategies for managing the ethical dilemmas inherent in patient care, the health care organization, and research.   |  |  |  |  |  |  |  |  |  |  |  |  |
| Essential III: Clinical Scholarship and Analytical Methods for Evidence-Based Practice  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1. Use analytic methods to critically appraise existing literature and other evidence to determine and implement the best evidence for practice.  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2. Design and implement processes to evaluate outcomes of practice, practice patterns, and systems of care within a practice setting, health care organization, or community against national benchmarks to determine variances in practice outcomes and population trends.                     |  |  |  |  |  |  |  |  |  |  |  |  |





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| policy, standards of care, and/or other scholarly products.   |  |  |  |  |  |  |  |  |  |  |  |  |
| 2. Lead interprofessional teams in the analysis of complex practice and organizational issues.  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3. Employ consultative and leadership skills with intraprofessional and interprofessional teams to create change in health care and complex healthcare delivery systems.  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Essential VII: Clinical Prevention and Population Health for Improving the Nation's Health</b>   |  |  |  |  |  |  |  |  |  |  |  |  |
| 1. Analyze epidemiological, biostatistical, environmental, and other appropriate scientific data related to individual, aggregate, and population health.   |  |  |  |  |  |  |  |  |  |  |  |  |
| 2. Synthesize concepts, including psychosocial dimensions and cultural diversity, related to clinical prevention and population health in developing, implementing, and evaluating interventions to address health promotion/disease prevention efforts, improve health status/access patterns, and/or address gaps in care of individuals, aggregates, or populations. |  |  |  |  |  |  |  |  |  |  |  |  |
| 3. Evaluate care delivery models and/or strategies using concepts related to community, environmental and occupational health, and cultural and socioeconomic dimensions of health.   |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Essential VIII: Advanced Nursing Practice</b>  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1. Conduct a comprehensive and systematic assessment of health and illness parameters in complex situations, incorporating diverse and culturally sensitive approaches.   |  |  |  |  |  |  |  |  |  |  |  |  |
| 2. Design, implement, and evaluate therapeutic interventions based on nursing science and other sciences.   |  |  |  |  |  |  |  |  |  |  |  |  |





Student: \_\_\_\_\_

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Course Faculty: \_\_\_\_\_

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**Mid-Term Signatures:**

|                          |       |      |       |
|--------------------------|-------|------|-------|
| Student Signature        | _____ | Date | _____ |
| Site Mentor Signature    | _____ | Date | _____ |
| Course Faculty Signature | _____ | Date | _____ |

**Final/end semester Comments.** *DNP Site Mentor and DNP Student should comment on strengths and opportunities*

Site Mentor: \_\_\_\_\_

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Student: \_\_\_\_\_

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Course Faculty: \_\_\_\_\_

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**Final/end semester Signatures:**

|                          |       |      |       |
|--------------------------|-------|------|-------|
| Student Signature        | _____ | Date | _____ |
| Site Mentor Signature    | _____ | Date | _____ |
| Course Faculty Signature | _____ | Date | _____ |

**Remediation Plan for Score of Less Than 3 in Any Evaluated Area**

| Area with a score of less than 3 | Remediation Strategy | Due Date | Date Evaluated | Progress |
|----------------------------------|----------------------|----------|----------------|----------|
|                                  |                      |          |                |          |
|                                  |                      |          |                |          |

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**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Site Mentor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Course Faculty Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Remediation Completed/Objectives Met Date** \_\_\_\_\_  
**DNP Project Site Mentor MID-TERM Affirmation of Clinical Hours:**

**I AFFIRM THAT THE STUDENT HAS SPENT \_\_\_\_\_ HOURS UNDER MY DIRECTION.**

**DNP SITE MENTOR SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_/\_\_\_\_/\_\_\_\_

(Required hours: NUR: 930 = 135 hours, NUR 931 = 180 hours, NUR 933 = 185 hours)

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Site Mentor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**DNP Course Faculty Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**DNP Project Site Mentor FINAL Affirmation of Clinical Hours:**

**I AFFIRM THAT THE STUDENT HAS SPENT \_\_\_\_\_ HOURS UNDER MY DIRECTION.**

**DNP SITE MENTOR SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_/\_\_\_\_/\_\_\_\_

(Required hours: NUR: 930 = 135 hours, NUR 931 = 180 hours, NUR 933 = 185 hours)

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Site Mentor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**DNP Course Faculty Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

#### **Verification of Clinical Hours and Essential Activities**

#### **Sample Verification of Clinical Hours Log (to be completed via the clinical documentation eValue software)**

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

Course and Required Clinical Hours: \_\_\_\_\_

DNP Site Mentor Name and Title: \_\_\_\_\_

Site Name and Address: \_\_\_\_\_

*Directions: Evaluation of clinical hours to be completed via the clinical documentation software. The DNP student will complete. The student and faculty of record are to review and sign the evaluation.*

***\*\*Please see the example below of how to document your clinical hours and activity\*\****

| DATE              | HOURS<br>COMPLETED | BRIEF DESCRIPTION   | RELATED COMPETENCIES |
|-------------------|--------------------|---|----------------------|
| <b>**11/16/17</b> | <b>1.5</b>         | Attended the strategic<br>planning meeting with<br>nursing leadership | Essential V**        |
|                   |                    |   |                      |
|                   |                    |   |                      |
|                   |                    |   |                      |

## Appendix A-4

### DNP Project Final Written Paper Instructions and Formatting Guide



MASSACHUSETTS COLLEGE of PHARMACY  
and HEALTH SCIENCES

**NUR 933, Research Translation III, Evaluation and Dissemination  
DNP Final Written Paper Instructions and Guide**

Note: Paper must adhere to APA 7<sup>th</sup> edition format including page numbers, headers, and sub headers, use New Times Roman 12 font throughout your paper. All papers need to be saved as: LastName.FirstName.Course#

Student should also refer to the DNP Project Final Written Paper rubric.

The methodology section should be written in the past tense.

**Paper Template**

**Title Page:** Title should be succinct and provide an overview of the project enabling the reader to understand the overall purpose of the proposal. The Title Page: Must adhere to APA 7<sup>th</sup> edition format. Title should describe the population, project, and setting.

**Abstract:** Less than 400 words. Should include topic, purpose, objectives, methods, sample, findings, implications

**Acknowledgements:** optional

**Dedication:** optional

**Table of Contents:** APA 7<sup>th</sup> ed. Format

**Chapter I: Introduction**

**Introduction:** Clearly states importance of the project topic with information leading to the development of the project, why it's relevant and the scope of the potential problem and why you selected the chosen area of interest for the DNP project.

**Background and Significance:** Thoroughly answers why the project is important and the implications of the identified problem(s). Provides a descriptive picture of the local problem with information about the organization where the problem is occurring.

**Problem Statement:** Concisely and clearly articulates the breadth and depth of the problem, why it is a concern and why it should be evaluated. Includes factual information and why the problem is significant for society, patients, the delivery and outcomes of care, nursing and healthcare systems.

**Clinical Question:** Using PICOTS format, precisely state the primary and secondary question(s) that the project will seek to answer. Thoroughly describes the phenomenon of interest, identifies the issue(s), clarifies previous research, and/or adds to the body of knowledge that is currently available.

**Feasibility/SWOT analysis:** Describe results SWOT Analysis including both internal and external factors.

## **Chapter II: Review of the Literature**

**Literature Review (past tense):** Thorough synthesis of a representative sample of available literature and how it applies to the phenomenon of interest and project. Literature comes from peer-reviewed journals or academic sources; clearly identifies the level of evidence. Includes all perspectives found in the literature. Include the methods used for the literature review, appraisal of the evidence and discussion of strengths, weaknesses and limitations and opportunities. Use the findings to support the DNP Project.

**Organizational Assessment (if local problem):** Comprehensively identifies the culture, physical, and sociocultural makeup of the organization. Identifies potential barriers and facilitators in the organization and organizational factors that were used to determine project feasibility.

**Purpose:** Provides 1-2 clearly articulated key areas. Thoroughly explains what the project will involve and what it will accomplish.

**Conceptual and Theoretical Framework:** Comprehensive and thorough explanation for selection of a conceptual and theoretical framework. Provides history and origin information of the frameworks and how they apply to the project.

## **Chapter III: Methodology**

### **Methodology:**

- Comprehensive and thorough explanation of the project design
- Setting: organization/agency description, congruence of agency's mission/goals/strategic plan with project
- Stakeholders: description of who the stakeholders are
- Sample: target population, sample, participants, inclusion/exclusion criteria, recruitment

**Ethical Consideration:** IRB approval(s)

**Intervention:** Description of evidence-based intervention

**Measures/Tools/Instruments:** Describe tool/instruments used for data collection, include reliability and validity

## **Chapter IV: Results**

**Analysis:** Description of data analysis and results

**Results:** Demographics and findings

## **Chapter V: Conclusion and Discussion**

**Discussion:** Describe how the project findings relate to existing literature. How did the project impact the site/organization?

**Implication:** For practice, education, policy, and research

**Sustainability:** Plans for sustainability/next steps

**Limitations:** speak to any limitations; sample size, design, data collection

**Conclusion/Recommendations:** Summarize project and discuss value and recommendations

**References:** APA 7<sup>th</sup> edition format

**Appendices:** Tables, figures, site agreement, permissions, review of literature matrix, SWOT analysis completed template, IRB approval letter, demographic questionnaire, recruitment letter and consent form if appropriate to project, surveys/tools



## Appendix A-5

### DNP Project Final Written Paper Rubric



MASSACHUSETTS COLLEGE of PHARMACY  
and HEALTH SCIENCES

**NUR 933, Research Translation III, Evaluation and Dissemination**  
**Final DNP Project Written Paper**

**DNP Project Final Written Paper Rubric:** The DNP student should refer to the DNP Final Written Paper Instructions and Formatting Guide when writing the final paper. The final written paper should be submitted to the NUR 933 course faculty, the DNP Team Chair, DNP Team Member and DNP Site Mentor by the due date listed in the course syllabus.

| <b>Grading Criteria<br/>Total 100 points</b>        | <b>Score/Comments</b> | <b>Above<br/>Expectations<br/>9-10 points</b>   | <b>Meets<br/>Expectations<br/>7-8 points</b>   | <b>Below<br/>Expectations<br/>0-6 points</b>  | <b>Score and<br/>Faculty<br/>Comments</b> |
|---|-----------------------|---|--|---|---|
| <b>Title<br/>10 Points</b>                          |                       | A succinct title that provides an overview of the project so that the reader understands the overall project.   | A succinct title that provides some overview of the project, overall purpose is somewhat clear.  | Title is lengthy, does not provide overview of the project; overall purpose of the project is not clear.  |   |
| <b>Abstract/Executive<br/>Summary<br/>10 Points</b> |                       | Succinct summary of the project includes the statement of the problem, description of the purpose of the project, approach or methods used, data analytical procedures used, and the implications for practice. | Includes summary of the project, includes the statement of the problem, description of the purpose of the project, approach or methods used, data analytical procedures used, and the implications for practice. May be missing 1-2 components | Summary of the project is missing more than 3 components: statement of the problem, description of the purpose of the project, approach or methods used, data analytical procedures used, or the implications for practice. |   |

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|  |  |  | or may not be succinct.   |  |  |
| <b>Introduction<br/>10 Points</b>                |  | Clearly states importance of the project topic with information leading to the development of the project, why it's relevant and the scope of the potential problem.   | Somewhat explains importance of the project topic with information leading to the development of the project. Provides some explanation to why the project is relevant and the scope of the potential problem.                        | Does not clearly state importance of the project topic and/or lacks information leading to the development of the project. Does not clearly explain why the problem is relevant or the scope of the potential problem. |  |
| <b>Background and Significance<br/>10 Points</b> |  | Thoroughly answers why the project is important and the implications of the identified problem(s). Provides a descriptive picture of the problem with information about the organization where the problem is occurring. | Somewhat answers why the project is important and the implications of the identified problem(s). Provides a somewhat descriptive picture of the local problem with information about the organization where the problem is occurring. | Is not clear why project is important and/or the implications of the identified problem(s). Lacks a descriptive picture of the local problem and/or details about the organization where the problem is occurring.     |  |
| <b>Problem Statement<br/>10 Points</b>           |  | Concisely and clearly articulates the  | Somewhat articulates the breadth and  | Does not clearly articulate the  |  |

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|   |  | breadth and depth of the problem, why it is a concern and why it was evaluated. Includes factual information and why it is a problem for society, patients, the delivery and outcomes of care, nursing and healthcare systems. | depth of the problem, why it is a concern and why it was evaluated. Some factual information is included and why it is a problem for society, patients, the delivery and outcomes of care, nursing and healthcare systems. | breadth and depth of the problem, why it is a concern or why it was evaluated. Lacks factual information and does not explain why it is a problem for society, patients, the delivery and outcomes of care, nursing and healthcare systems. |  |
| <b>Clinical Question<br/>10 Points</b>                    |  | Thoroughly describes the phenomenon of interest, identifies the issue(s), clarifies previous research, and/or adds to the body of knowledge that is currently available.   | Partially describes the phenomenon of interest, identifies the issue(s), outlines previous research, and/or adds to the body of knowledge that is currently available.   | Limited description of the phenomenon of interest; does not identify the issue(s). Does not clarify previous research, or add to the body of knowledge that is currently available.   |  |
| <b>Conceptual and Theoretical Framework<br/>10 Points</b> |  | Comprehensive and thorough explanation for selection of a conceptual and theoretical framework. Provides history   | Somewhat thorough explanation for selection of a conceptual and theoretical  | Lacks a thorough explanation for selection of a conceptual and theoretical  |  |

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|  |  | and origin information of the frameworks and how they applied to the project.  | framework. Provides history and origin information of the frameworks and how they applied to the project.  | framework. Lacks history and origin information of the frameworks and how they applied to the project.   |  |
| <b>Literature review<br/>10 Points</b>         |  | Thorough synthesis of a representative sample of available literature and how it applies to the phenomenon of interest and project. Literature comes from peer-reviewed journals or academic sources; clearly identifies the level of evidence. Identifies gaps in the current literature. Includes all perspectives found in the literature. Written in past tense. | Partial synthesis of a representative sample of available literature and how it applies to the phenomenon of interest and project. Literature is mostly from peer-reviewed journals or academic sources; clearly identifies the level of evidence for most articles. Notes gaps in evidence. Includes all perspectives found in the literature. Written in past tense. | Incomplete synthesis or sample is not representative of available literature and how it applies to the phenomenon of interest and project. Literature does not come from peer-reviewed journals or academic sources; lacks clear identification of the level of evidence. Does not include all perspectives found in the literature. |  |
| <b>Organizational assessment<br/>10 Points</b> |  | Comprehensively identifies the culture, physical, and sociocultural  | Identifies the culture, physical, and sociocultural  | Incomplete description of the culture, physical, and   |  |

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|   |  | makeup of the organization. Identifies the barriers and facilitators in the organization and organizational factors that impacted project feasibility.            | makeup of the organization. Somewhat identifies barriers and facilitators in the organization and organizational factors that impacted project feasibility. | sociocultural makeup of the organization. Lacks identification of barriers and facilitators in the organization and organizational factors that impacted project feasibility. |  |
| <b>Purpose of project<br/>10 Points</b>           |  | Provides 1-2 clearly articulated key areas. Thoroughly explains what the project involved, including the methods, findings and implications for nursing practice. | Provides 1-2 clearly articulated key areas. Somewhat explains what the project involved and what it will accomplish.  | Missing the key areas of the project and does not explain what the project involved or accomplished.  |  |
| <b>Total Grade*</b>                               |  |   |   |   |  |
| <b>Course Faculty<br/>Additional<br/>Comments</b> |  |   |   |   |  |

*\*The course faculty is responsible for grading the presentation*

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| <b>DNP Project Chair<br/>Comments</b>           |  |
| <b>DNP Project Team<br/>Member<br/>Comments</b> |  |
| <b>DNP Project Site<br/>Mentor Comments</b>     |  |

**Signatures:**

Student \_\_\_\_\_ Date \_\_\_\_\_

DNP Course Faculty \_\_\_\_\_ Date \_\_\_\_\_

DNP Project Team Chair \_\_\_\_\_ Date \_\_\_\_\_

DNP Project Team Member \_\_\_\_\_ Date \_\_\_\_\_

DNP Project Site Mentor \_\_\_\_\_ Date \_\_\_\_\_

## Appendix A-6

### DNP Project Final Oral Presentation Rubric





MASSACHUSETTS COLLEGE of PHARMACY  
and HEALTH SCIENCES

NUR 933, Research Translation III, Evaluation and Dissemination  
Final DNP Project Oral Presentation Rubric

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

DNP Project Title: \_\_\_\_\_

The student will prepare and present a 30-minute presentation summarizing the DNP project. Additional time is allowed for questions from the DNP Project Team.

| Grading Criteria<br>Total 100 points     | Above Average<br>6-8 points  | Meets Expectations<br>3-5 points   | Below Expectations<br>0-2 points  | Points<br>Earned<br>and<br>Course<br>Faculty<br>Comments |
|--|--|--|---|--|
| Title<br>(8 points)                      | A succinct title that provides an overview of the project so that the reader understands the overall purpose of the proposal.  | A succinct title that provides some overview of the project, overall project purpose is somewhat clear.  | Title is lengthy, does not provide overview of the project; overall purpose of the project is not clear.  |  |
| Abstract/Executive Summary<br>(8 points) | Succinct summary of the project; includes the statement of the problem, description of the purpose of the project, approach or methods used, data analytical procedures used, and the implications for practice. | Presents summary of the project, includes the statement of the problem, description of the purpose of the project, approach or methods used, data analytical procedures used, and the implications for practice. May be missing 1-2 components or may not be succinct. | Summary of the project is missing more than 3 components: statement of the problem, description of the purpose of the project, approach or methods used, data analytical procedures used, or the implications for practice. |  |
| Introduction<br>(8 points)               | Clearly states importance of the project topic with information leading  | Somewhat explains importance of the project topic with information leading   | Does not clearly state importance of the project topic and/or lacks   |  |

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|   | <i>to the development of the project, why it's relevant and the scope of the problem.</i>   | <i>to the development of the project. Provides some explanation to why the project is relevant and the scope of the problem.</i>   | <i>information leading to the development of the project. Does not clearly explain why the problem is relevant or the scope of the problem.</i>  |  |
| <i>Background and Significance (8 points)</i> | <i>Thoroughly answers why the project is important and the implications of the identified problem(s). Provides a descriptive picture of the problem with information about the organization where the problem is occurring.</i>   | <i>Somewhat answers why the project is important and the implications of the identified problem(s). Provides a somewhat descriptive picture of the local problem with information about the organization where the problem is occurring.</i>                                 | <i>Does not clearly present why the project is important and/or the implications of the identified problem(s). Lacks a descriptive picture of the local problem and/or details about the organization where the problem is occurring.</i>  |  |
| <i>Problem Statement (8 points)</i>           | <i>Concisely and clearly articulates the breadth and depth of the problem, why it is a concern and why it was evaluated. Includes factual information, why it is a problem for society, patients, the delivery and outcomes of care, nursing, and healthcare systems.</i> | <i>Somewhat articulates the breadth and depth of the problem, why it is a concern and why it should be evaluated. Some factual information is included and why it is a problem for society, patients, the delivery and outcomes of care, nursing and healthcare systems.</i> | <i>Does not clearly articulate the breadth and depth of the problem, why it is a concern or why it should be evaluated. Lacks factual information and does not explain why it is a problem for society, patients, the delivery and outcomes of care, nursing and healthcare systems.</i> |  |
| <i>Clinical Question (8 points)</i>           | <i>Thoroughly describes the phenomenon of interest, identifies the issue(s), clarifies previous research, and/or adds to the body of knowledge</i>  | <i>Partially describes the phenomenon of interest, identifies the issue(s), clarifies previous research, and/or adds to the body of knowledge</i>  | <i>Limited description of the phenomenon of interest; does not identify the issue(s). Does not clarify previous research, or add to the body</i>   |  |

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|  | <i>that is currently available.</i>  | <i>that is currently available.</i>  | <i>of knowledge that is currently available.</i>   |  |
| <i>Conceptual and Theoretical Framework (8 points)</i> | <i>Comprehensive and thorough explanation for selection of a conceptual and theoretical framework. Provides history and origin information of the frameworks and how they applied to the project.</i>  | <i>Somewhat thorough explanation for selection of a conceptual and theoretical framework. Provides history and origin information of the frameworks and how they applied to the project.</i>   | <i>Lacks a thorough explanation for selection of a conceptual and theoretical framework. Lacks history and origin information of the frameworks and how they applied to the project.</i>   |  |
| <i>Literature review (8 points)</i>                    | <i>Presents a thorough synthesis of a representative sample of available literature and how it applies to the phenomenon of interest and project. Literature comes from peer-reviewed journals or academic sources; clearly identifies the level of evidence. Identifies gaps in the current literature. Includes all perspectives found in the literature. Written in past tense.</i> | <i>Somewhat thorough synthesis of a representative sample of available literature and how it applies to the phenomenon of interest and project is presented. Literature is mostly from peer-reviewed journals or academic sources; clearly identifies the level of evidence for most articles. Notes gaps in evidence. Includes all perspectives found in the literature. Written in past tense.</i> | <i>Incomplete synthesis or sample is not representative of available literature is presented. No discussion of how the evidence applies to the phenomenon of interest and project. Literature does not come from peer-reviewed journals or academic sources; lacks clear identification of the level of evidence. Does not include all perspectives found in the literature.</i> |  |
| <i>Organizational assessment (8 points)</i>            | <i>Comprehensively identifies the culture, physical, and sociocultural makeup of the organization. Identifies potential barriers and facilitators in the organization and organizational factors</i>   | <i>Identifies the culture, physical, and sociocultural makeup of the organization. Somewhat identifies potential barriers and facilitators in the organization and organizational factors that</i>   | <i>Incomplete description of the culture, physical, and sociocultural makeup of the organization. Lacks identification of potential barriers and facilitators in the organization and organizational</i>   |  |

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|   | <i>that impacted project feasibility.</i>  | <i>impacted project feasibility.</i>   | <i>factors that impacted project feasibility.</i>   |  |
| <i>Purpose of project (8 points)</i>                | <i>Provides 1-2 clearly articulated key areas. Thoroughly explains what the project involved and what it accomplished.</i>   | <i>Provides 1-2 clearly articulated key areas. Somewhat explains what the project involved and what it accomplished.</i>   | <i>Missing the key areas of the project and does not explain what the project involved or accomplished.</i>   |  |
| <b>Grading Criteria</b>                             | <b>Above Average<br/>16-20 points</b>  | <b>Meets Expectations<br/>10-15 points</b>   | <b>Below Expectations<br/>0-10 points</b>   |  |
| <i>Presentation style and mechanics (20 points)</i> | <p><i>PowerPoint slides are clear and highlight on key focus areas; Presentation flows well with recognizable themes, readable text and points are well understood Free of error in spelling, grammar and APA formatting;</i></p> <p><i>Questions are answered in a professional manner and reflect a strong command of the content.</i></p> | <p><i>Good readable text; mostly free of errors in spelling, grammar and APA formatting</i></p> <p><i>Some areas could be improved</i></p> <p><i>Clarity present but occasional confusion with presentation</i></p> <p><i>Questions are answered in a professional manner; answers reflect a good understanding of the content</i></p> | <p><i>Presentation is not organized and does not flow; slides are not clear and content is not interpreted correctly</i></p> <p><i>Substantial errors in spelling, grammar and formatting in the slide presentation</i></p> <p><i>Questions are addressed by student yet lack specificity required; answers do not reflect a command of the content</i></p> |  |
| <b>Grade*</b>                                       |  |  |   |  |
| <b>Summary of Course Faculty Comments</b>           |  |  |   |  |

*\*Course faculty is responsible for grading the presentation*

**DNP Project Team Feedback and Signatures:**

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| <b>DNP Project Chair<br/>Comments</b>           |  |
| <b>DNP Project Team<br/>Member<br/>Comments</b> |  |
| <b>DNP Project Site<br/>Mentor Comments</b>     |  |

**Signatures:**

|                               |            |
|-------------------------------|------------|
| Student _____                 | Date _____ |
| DNP Course Faculty _____      | Date _____ |
| DNP Project Team Chair _____  | Date _____ |
| DNP Project Team Member _____ | Date _____ |
| DNP Project Site Mentor _____ | Date _____ |