

**CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
DEPARTMENT OF NURSING**

**GRADUATE NURSING STUDENT
POLICY HANDBOOK**

2020-2022



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Section I. Overview of the Department and Program

A. Introduction

California State University Bakersfield (CSUB) opened in September 1970 as the 19th member of the 23-campus CSU system. CSUB is located at the southern end of the San Joaquin Valley approximately 110 miles north of Los Angeles. As the only four-year institution within a 100-mile radius, CSUB is located in the city of Bakersfield, a commercial, medical, and educational center for the area. The university serves a regional population of over 900,000 including the city and unincorporated areas. The campus, located on a 375-acre site that was donated from the private sector, sits on the growing western edge of metropolitan Bakersfield. Thirty buildings provide classroom, laboratory, administrative, and technical support facilities. Enrollment in the university for Fall 2020 included 9,788 undergraduate and 1,609 postgraduate students, served by over 1,200 faculty and staff members. CSUB has 45 bachelor's degree programs, 6 credential programs, 21 master's degree programs, and a doctoral program in education.

The university is fully accredited by the Western Association of Schools and Colleges, Senior College and University Commission (WSCUC, formerly known as WASC), with six programs also accredited by national organizations. Accreditation by WSCUC was reaffirmed in 2020 and the university's next comprehensive review will be held in 2027.

CSUB is a comprehensive regional University and is committed to excellence in its four schools: Arts and Humanities, Business and Public Administration, Natural Sciences, Mathematics and Engineering (NSME), and Social Sciences and Education. The Department of Nursing (DON) is one of eight departments in the School of NSME.

B. Overview of the Department of Nursing

Undergraduate Program: Over the past 50 years, more than 2,750 students have earned a BSN through CSUB's two undergraduate nursing programs. Non-licensed students can obtain a BSN and eligibility for permission to take the National Council Licensure Examination (NCLEX-RN) through the Traditional BSN Program, a rigorous 3-year experience. Registered nurses can earn a bachelor's degree through the RN-BSN Program, which features online didactic courses and a face-to-face clinical course in Community Health Nursing.

As of January 2021, there are 174 Traditional BSN students and 49 RN-BSN students enrolled at CSUB. As a result of heavy demand, the Traditional BSN Program and the RN-BSN Program have both been granted Impacted Status designation from the CSU Chancellor's Office (Exhibit A). In the CSU system, a program is granted Impacted Status when the number of applications received exceeds program capacity. At CSUB, admissions standards and ranking criteria for the Traditional BSN and RN-BSN Programs are established by the Undergraduate Program Committee (UPC), and cohorts are comprised of the top-ranking candidates. Graduates of the Traditional BSN and RN-BSN Programs have provided an excellent pool of candidates for admission to the Master of Science in Nursing (MSN) Program at CSUB.

Graduate Program: The DON opened the MSN Program in 1987 with a graduate degree in Nursing Administration and secured National League for Nursing (NLN) accreditation in 1991. After the implementation of the Family Nurse Practitioner (FNP) Track in 1996, the BSN and MSN programs transitioned successfully to accreditation by the Commission on Collegiate Nursing Education

(CCNE) in 1998. Additional MSN tracks were also introduced and discontinued over the years, based on student demand and available resources. Between 1990 and 2010, the MSN program graduated 114 FNPs and 87 Clinical Nurse Leaders, Clinical Nurse Specialists, Nurse Educators, and School Nurses. Most MSN graduates have remained in Kern County and are leaders within the local healthcare community.

During a period of economic recession and statewide budget cuts in higher education, the difficult decision was made to temporarily close the MSN Program in 2010. Between 2010 and 2014, leaders within the community and on campus monitored the trends within the healthcare system, the community's needs, and the professional goals of current and prospective students. A feasibility study was conducted, which indicated a tremendous need for more FNPs; a healthy MSN/FNP Program is a critical resource for the Central Valley of California. Through the dedication and expertise of the DON faculty, the MSN/FNP Program was reopened in Fall 2014.

Cohorts were accepted to the MSN Program on an every-other-year basis until Fall 2019, when annual admissions were initiated. As of January 2021, there are 19 first-year and 18 second-year students enrolled, for a total of 37 graduate students. The MSN/FNP Program requires five semesters of full-time coursework, including 585 hours of clinical practice. Since reopening in 2014, the program has graduated 50 well-prepared FNPs.

In accordance with the commitment by the National Organization of Nurse Practitioner Faculties (NONPF) to establish a doctorate as the entry-level degree for NP practice by 2025, the DON has initiated the process to develop a Doctor of Nursing Practice (DNP)/Nurse Practitioner (NP) degree at CSUB. The university Provost and President, as well as the Academic Senate, have approved placement of the DNP on the Academic Master Plan for CSUB, verifying that the necessary support for this critical transition has been secured.

Nursing Faculty

The Department's nursing faculty are highly qualified nurse scholars and educators prepared in research and practice of their respective nursing disciplines. Faculty members meet the California Board of Registered Nursing expectations for clinical competence, the University and the Commission on Collegiate Nursing Education's expectations for scholarship, teaching, practice and leadership.

Resources

The Department maintains three technical areas for nursing students in the Romberg Nursing Education Center (RNEC) on the CSUB campus: a nursing skills laboratory, a computer laboratory, and a simulation center with an attached smart classroom to support multiple forms of technology-assisted classroom instruction. The nursing arts laboratory has 13 patient care learning stations, and the computer lab contain videotapes, PCs and Macintosh computers, instructional software, and multimedia software.

Community Partners

Students practice their nursing skills at many locations in Bakersfield and in the surrounding Kern Country area. These facilities include hospitals, physicians' offices, health clinics, schools, public health agencies, homeless shelters, hospices, and specialty care centers.

CSUB Non-Discrimination and Non-harassment Policy

The Department of Nursing follows the CSUB policy on non-discrimination and non-harassment and does not discriminate on the basis of race, religion, sex, age, handicap, color, marital status, sexual or national origin. https://www.csub.edu/bas/hr/HR_Policies_Procedures/index.html

C. California State University, Bakersfield Mission Statement

CSU Bakersfield is a comprehensive public university offering excellent undergraduate and graduate programs that advance the intellectual and personal development of its students. We emphasize student learning through our commitment to scholarship, ethical behavior, diversity, service, global awareness and life-long learning. The University collaborates with partners in the community to increase the region's overall educational attainment, enhance its quality of life, and support its economic development.

D. Department of Nursing Mission, Vision, and Values

Mission

The Department of Nursing provides nursing education to undergraduate and graduate students seeking entry into professional nursing or advanced nursing education. The faculty provides a collaborative, inclusive, and interactive learning environment committed to excellence in teaching, scholarship, service, and practice. The Department of Nursing accomplishes the mission through collaboration with the communities of interest.

The Department of Nursing fosters an environment that encourages lifelong learning and advancement within the profession. Graduates will have the acquired knowledge, skills, attitudes, and values essential to the practice of advanced professional nursing. As professional nurses, our graduates will engage in evidence-based practice in an interprofessional healthcare environment. In recognition of the health needs of a multicultural society, advanced professional nurses who are graduates of CSUB will address healthcare issues and needs of their community.

Vision

The CSUB Department of Nursing pursues innovative ways to advance nursing practice and address the growing complexities associated with creating a healthier population in California's Central Valley.

Values

The Department's values align with those of the university, including academic excellence, freedom of inquiry and statement, global awareness and cultural sensitivity, diversity, honesty and fairness, democratic governance, community engagement, and personal responsibility. The DON embraces professionalism and a respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to the discipline of nursing.

Revised March 1, 2012; January 9, 2014; December 8, 2015; May 12, 2016, September 3, 2020

E. Goals of the Department of Nursing

The DON goals reflect professional nursing standards. These standards are provided in the following documents, which serve as a foundation for the curricula and policies of the DON:

1. *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs* (CCNE, 2018)
2. *The Essentials of Master's Education in Nursing* (AACN, 2011)
3. *National Task Force Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016)
4. *Nurse Practitioner Core Competencies* (NONPF, 2017)
5. *Population-Focused Nurse Practitioner Competencies* (NONPF, 2013)
6. *Essential Genetic and Genomic Competencies for Nurses with Graduate Degrees* (ANA, 2012)
7. *Quality and Safety Education for Nurses Graduate Competency KSAs* (QSEN, 2012)
8. *Quality and Safety Education for Nurses* (QSEN, 2013)
9. *American Nurses Association Code of Ethics for Nurses with Interpretive Statements* (ANA, 2015)
10. *Nursing's Social Policy Statement: The Essence of the Profession* (ANA, 2010)
11. *ANA Scope and Standards of Practice* (ANA, 2015)
12. *California Code of Regulations (CCR)* pertaining to nursing education (California BRN)

Based on the statements in the philosophy, the overall goal of the Department of Nursing is the continuing development and preparation for graduation of individuals who will provide professional nursing through clinical practice, leadership, research and education.

Strategic Goals and Objectives

The following major objectives and key strategies will be achieved by the Department of Nursing over the next 5 years:

1. Demonstrate student outcomes that reflect program excellence through ongoing and consistent Program Evaluation to determine efficiency and effectiveness.
 - a. Expand the capacity of the Traditional BSN Program.
 - i. Maintain NCLEX first attempt pass rates of >92%.
 - ii. Maintain academic attrition rates of <10%.
 - iii. Monitor student performance on ATI exams.
 - iv. Achieve employment rates of 70% within one year of graduation.
 - v. Maintain Impacted Status for the Traditional BSN Program.
 - vi. Increase enrollment to meet the needs of the community.
 - b. Increase RN-BSN Completion Program graduation rate to 75% within 2 years of entry.
 - i. Increase student advisor to full-time to facilitate advising prior to program entry.
 - ii. Establish each incoming cohort of students as a learning community to foster student success and satisfaction.
 - iii. Maintain Impacted Status for the RN-BSN Completion Program.
 - c. Sustain an FNP/Non-Clinical MSN program that meets CCNE and BRN approval criteria.
 - i. Maintain a graduation rate of >80%.
 - ii. Maintain national FNP certification first time exam pass rates of >80%.

- iii. Achieve employment rates of > 80% within one year of graduation.
 - iv. Explore a non-clinical MSN program option for CSUB approval.
 - v. Establish an MOU with another CSU for a DNP program based on the NONPF initiative: DNP to entry level practice by 2025.
2. Recruit and retain highly qualified faculty.
 - a. Increase proportion of doctorally-prepared faculty in full-time positions to 50%
 - b. Achieve salaries competitive with the profession.
 - c. Revise faculty web page to highlight faculty accomplishments and promote faculty recruitment.
 - d. Facilitate pursuit of doctoral degrees for current nursing faculty members through encouragement, information sharing, mentoring, and release time when possible.
 - e. Value diversity in the search and screening process.
 - f. Increase the ratio of tenure-track/tenured faculty to 50%.
 3. Deliver technology-mediated instruction in a manner that is effective and student-centered.
 - a. Maintain departmental standards for best practices in online education in accordance with the DON Philosophy for Online Education.
 - b. Develop faculty expertise and capacity to teach online.
 - c. Explore funding of an Information Technology staff person to maintain website and assist with technology needs.
 - d. Explore sources for annual faculty development on teaching innovation.
 4. Advance development of faculty in teaching, scholarship, service, practice, and leadership.
 - a. Advocate equitable workload for faculty by providing reassigned time for full-time lecturers to facilitate participation in curriculum development, program evaluation, and promotion of student success activities.
 - b. Pursue a full-time faculty position for the Simulation Center and Skills Laboratory Director.
 - c. Support faculty grant-writing including funding for attending workshops and pursuing grants.
 - d. Continue to refine the faculty leadership development plan for the DON.
 - e. Support and encourage faculty sabbaticals.
 5. Promote healthy behaviors and disease prevention within the community, while increasing the visibility of the CSUB DON.
 - a. Increase visibility of CSUB DON community-focused health promotion activities through a campaign that highlights community service activities through press releases and scholarly work.
 6. Collaborate with university departments interested in creating interprofessional learning courses.
 - a. Create online and hybrid courses with interprofessional appeal to university departments.
 - b. Co-teach and coordinate interdisciplinary projects with other departments on campus.

F. Strengths, Weaknesses, Opportunities, & Threats

A SWOT analysis conducted by the Department of Nursing identifies the following internal and external attributes which exert influence over the organization's ability to meet its objectives. Areas of improvement and threats include both actual and potential influences.

<p style="text-align: center;">Strengths</p> <ul style="list-style-type: none"> ▪ CCNE accredited/BRN approved BSN program and MSN/FNP program ▪ Experienced, high quality faculty and staff ▪ Academic preparedness of students; Impacted Status designation ▪ Rigorous MSN and BSN curricula ▪ Excellent student outcomes (high NCLEX and FNP certification pass rates, low attrition) ▪ Advanced technology-mediated instruction, including courses (hybrid and fully online) and Simulation Center ▪ Certified faculty to teach online courses ▪ High-quality student activities, including CPHC and CNSA ▪ Positive faculty-student relationships ▪ Strong leadership succession planning 	<p style="text-align: center;">Weaknesses</p> <ul style="list-style-type: none"> ▪ Limited resources for faculty development (travel, conferences, continuing education, simulation, & online instruction) ▪ Limited resources for faculty research & publication ▪ Insufficient technological support ▪ Need for more full-time doctorally-prepared faculty ▪ Limited funds to maintain and update Simulation Center equipment ▪ Low tenure/tenure-track density of faculty
<p style="text-align: center;">Opportunities</p> <ul style="list-style-type: none"> ▪ Improve health of community through CSUB Nursing initiatives ▪ Increase MSN and RN-BSN Program enrollment in response to community need and IOM recommendations ▪ Increase community support for CSUB Nursing ▪ Obtain external funding through grants/donations ▪ Strengthen alliance between members of the Nursing Advisory Committee ▪ Increase number of MSN and BSN students engaging in research and scholarly writing with faculty mentors ▪ Increase faculty and student diversity ▪ Increase tenure/tenure-track density 	<p style="text-align: center;">Threats</p> <ul style="list-style-type: none"> ▪ Insufficient funding to provide for competitive faculty salaries ▪ Insufficient financial support from the state ▪ Competition from other nursing programs ▪ National nursing faculty shortage ▪ Limitations in clinical site type and quantity

Approved by Faculty Organization 2/2006; Revised 5/2010; 4/2014; 11/2016; 9/2018; 3/2020

G. Philosophy of Nursing

The outstanding faculty of the CSUB Department of Nursing has designed the departmental philosophy and curriculum around the Nursing metaparadigm concepts of client, environment, health and the nurse.

We assume nursing is a scientific discipline and as a discipline makes a distinctive contribution to the maintenance and promotion of health. This contribution is achieved through facilitating maximum functional health status by collaborating with individuals, families, groups and the community. Activities to accomplish nursing goals are viewed as congruent with society's expectations and needs.

Professional nursing draws upon the related disciplines of natural and social sciences, humanities and nursing science for its theory as a foundation for practice. In addition, nursing continues to develop and refine its knowledge base through scientific inquiry into its theory and practice. Critical thinking, progressive inquiry, and decision-making skills are emphasized through the use of the nursing process, which is directed toward achievement of maximum functional status for the client. The use of this process results in complex independent judgments based on accurate data and knowledge. We believe that the ability to engage in this process necessitates a baccalaureate level of nursing education. Such education is the essential preparation for beginning professional nursing practice.

Client

The client of nursing is the recipient of nursing care and may include the person across the lifespan, family, group or community. The faculty believes in the integrity, dignity, and worth of the person as an open, goal-directed, humanistic being. We assume each person as an open system includes distinct, but integrated physiological, psychological and socio-cultural systems. The person as an open system actively engages in interchange of energy with the environment and tends to achieve a balance among the various forces operating within and upon it. As an open system, the individual attempts to achieve balance with respect to these forces by utilizing, conserving, and replenishing energy in order to function effectively and efficiently. The motivating energy underlying this interchange with the environment is assumed to be present from conception through the lifespan.

Developing through the process of adaptation, each person is engaged in modification through interaction with the environment. Effective adaptation during development can be defined as momentary periods of balance and maximum functional status. Genetic factors, spiritual orientation, education, occupation, and cultural/ethnic group membership influence individualized development. Although individuals strive to achieve balance and maximum functional status, they also actively seek new experiences that may disturb their balance at least temporarily. These new experiences may require variable behavioral modifications to re-establish balance. Further, we believe that individuals are rational, ever-changing, and capable of making critical choices.

Within our philosophical framework, the person across the lifespan, as an open system, interacts with, is part of, and influences other systems. The family is a dynamic social system which responds to the needs and desires of its members and the community in which it is located. As the primary reference group for the individual, the family serves to protect, educate, and nurture. Individuals or sub-populations sharing a common purpose or problem are the group/aggregate clients of nursing. A community, also a client of nursing, interacts with individuals, groups and institutions for their mutual protection and common good. Because we believe in the value of relationships, linking people to each of the above social systems, we view the individual not in isolation, but as an integral part of the larger

whole. These relationships are significant because they influence the individual's development, systems stability, functional status and health.

Environment

The environment may be defined as a composite of all the conditions and elements that make up the internal and external surroundings and influence the development of individuals. Additionally, the environment may be conceptualized as human, social, political, economic, geographic and physical factors influencing each other. We view society as the network of dynamic relationships that links individuals to other systems such as family, other individuals, group/aggregates, community, nation and the universe. The individual and society are linked to and part of the environment. Further, individuals, society, and the environment mutually influence each other through exchange of energy. One aspect of the interaction of these multiple factors is their influence on health.

Health

Health can be defined as a state of maximum wellness/functional health status at a given point in time. The concept of maximum wellness has been classically defined as an "integrated method of functioning which is oriented toward maximizing the potential of which the individual is capable within the environment where he is functioning" (Dunn, 1959, p. 18). Hence our belief that health consists of the ability to function optimally within an ever-changing environment and that health influences one's growth and development. Health is composed of multiple factors, some of which include the presence or absence of a disease state and the ability to adapt to internal and external stressors. Personal responsibility for an individual's health is assumed by virtue of the individual's health promoting behaviors.

Nurse

We believe the professional nurse works autonomously and collaboratively with others to promote the health of individuals, families, and communities. Nurses are individually accountable to the public they serve. As a patient advocate and change-agent, the nurse works with others to facilitate growth and needed changes in the healthcare delivery system by evaluating and utilizing research findings. The professional nurse not only interacts with patients/clients during the provision of care but also supervises and coordinates the care given by others. Advanced communication, education, leadership, research and clinical skills are used to carry out these nursing functions.

Professional nurses provide nursing services to individuals of all ages and to families in a wide variety of healthcare settings where they function with various degrees of independence and complexity. Increasingly, evolving nursing roles in the healthcare delivery system will require even greater independent decision-making, accountability, and autonomy of practice. Scientific and technological advances necessitate commitment to life-long learning and may include higher education. While ensuring the welfare of the public, the nurse also has the added responsibility to enhance the welfare of the profession of nursing. This is accomplished by being actively involved with political and social forces impacting upon the profession.

Approved by Faculty Organization May 13, 2010; Reviewed 9/15, 9/20

H. Philosophy of the Master of Science Degree Program in Nursing

The faculty of the Department of Nursing is committed to the belief that higher education in nursing is built on the philosophy of nursing and Baccalaureate nursing education which emphasizes the person as a humanistic being actively interacting with the environment to maintain or regain a maximum state of wellness.

A Master of Science Program in Nursing is built on a body of knowledge which includes concepts, facts, principles, conceptual models and theories of nursing, health sciences, behavioral sciences, the humanities, and natural sciences. Students entering a Master's program should provide evidence of a basic knowledge of professional nursing and competent performance at the Baccalaureate level. Individualization and flexibility in the graduate program stem from this common base.

We believe that graduate education in nursing provides experiences which enable students to explore a variety of resources in depth. These experiences will facilitate analysis, synthesis, and application to practice the knowledge from various disciplines appropriate to nursing. Students constantly engage in scientific inquiry processes which emphasize independent thought and action leading to behavioral change. Through these specific processes, students acquire advanced knowledge in nursing, develop expertise in an area of advanced nursing, and develop skill in a functional role area as well as in research. Students in the Family Nurse Practitioner program are prepared to provide primary care. In addition, we believe that a reciprocal relation exists between the area of advanced clinical nursing and the roles of teaching, administration, clinical leader, and nurse practitioner.

This relation becomes apparent when students apply knowledge gained through advanced clinical nursing in their functional role performance. Further, graduate students prepared to demonstrate advanced nursing skills in functional roles and research, are able to function within the changing patterns of nursing care and healthcare systems. Therefore, this graduate program in nursing will reflect emerging patterns of healthcare at the local, state and national levels, and the nursing and health needs of society.

The faculty assume that the professional nurse approaches advanced clinical nursing with a generalist background in nursing (Baccalaureate level education). Upon completion of advanced clinical nursing education, the graduate will have recognized expertise as a family nurse practitioner, school nurse, or clinical nurse leader. The faculty views advanced clinical nursing as grounded in theory and research necessary to establish a basis for such practice. Nursing theory, practice, and research are interrelated. Advanced clinical skills develop as both practical and theoretical knowledge are applied, refined, and extended in practice situations (Benner, 1984; Benner, Tanner & Chesla, 1996).

I. Philosophy of the Teaching Learning Process and Professional Education

Learning is an active, experiential process that is lifelong, dynamic, continuous, and growth-producing. This faculty views teaching as a deliberate endeavor to guide a learning situation in order to bring about a desired learning outcome. We believe that our goal as professional nursing educators is to provide experiences for students to become mature, skilled, responsible practitioners of nursing who arrive at independent, complex judgments. These judgments are based on complete and accurate data coupled with theory and knowledge, not only from nursing, but also from the liberal arts and sciences. Because

of the complexity of the evolving body of knowledge we believe that professional nursing education is a life-long process.

Development of the student in the acquisition of nursing knowledge takes place through the student's interaction with the environment. The nature of the learning environment is therefore a significant factor in learning. The Department of Nursing structures the learning environment that proceeds from simple to complex experiences. Teaching/learning practice provides the student with opportunities to care for individuals, families and communities. The student comes to the learning situation with a specific cultural and ethnic background. Each student's learning style, strengths, and goals have evolved out of past interactions between innate characteristics and the environment. With the assistance of the faculty, it is the student's responsibility to identify personal strengths and weaknesses and to achieve self-understanding, which enhances personal and professional growth.

We view faculty members as educators and facilitators of learning with the goal of stimulating student interest and encouraging students to assume responsibility for their own learning. We recognize that the faculty member's expertise, perceptions, beliefs and expectations influence the learning process. The faculty member exposes students to attitudes, experiences, skills, and knowledge, encouraging students to discover meaningful relationships relevant to nursing practice. The faculty member serves as a role model to the student by demonstrating a variety of nursing skills, not the least of which is sensitivity in human relationships. The elements of openness, trust and caring in the student-faculty relationship are critical to the establishment of an environment conducive to learning.

Creativity and flexibility in teaching allow for responsiveness to changing environmental and societal needs. Thus, we recognize various instructional methods in promoting learning. Individual needs of the student, based on their cultural and ethnic backgrounds, available experiences, content to be learned, and environmental conditions all influence the Department of Nursing choice of instructional methodology. We believe that the most effective methods are those which actively involve the student with the material to be learned. In addition, the faculty utilizes academic and personal counseling as well as the campus educational support system which provides assessment and tutorial help.

A planned nursing curriculum, subject to ongoing evaluation by faculty, students, and the community of interest, is essential to guide students in becoming professional nurses. The curriculum is designed to foster behaviors consistent with professional standards and guidelines. The intent of the curriculum is to stimulate intellectual curiosity, analytical ability, critical thinking, ethical reasoning, and individual creativity in all settings. The effectiveness of the program is measured ultimately by the extent to which students: (1) demonstrates achievement of the program's terminal objectives; (2) are valued by patients/clients and employers; (3) derive satisfaction from their nursing activities; and (4) make significant contributions to the improvement of healthcare and the profession of nursing.

J. Graduate Program Description

The purpose of this master's program is to prepare nurses with advanced nursing theory and clinical experiences in the advanced practice nursing role of Family Nurse Practitioner (FNP). Students are prepared to assess the health needs and health risks of all family members, apply family theories, and analyze legal, ethical, economic, leadership, and professional issues pertinent to nurse practitioners. Graduates from this program will be qualified to practice in primary care practice settings within the changing patterns of health care; assume leadership roles in multidisciplinary health groups; and practice family nursing in primary and secondary health care settings. Graduates will be prepared to apply for doctoral programs in nursing.

The content of this program includes advanced health assessment, advanced pathophysiology, and advanced pharmacology; analysis, utilization, and evaluation of theories of nursing; research methodology; role development; care of vulnerable populations; health care policy and delivery systems; leadership; and application of advanced knowledge in providing nursing care for clients representing a variety of cultural and ethnic backgrounds in both urban and rural community settings. Students complete a culminating experience which demonstrates their competence in the conduct of scientific inquiry related to clinical problem solving. Students must complete the requirements for the Master's degree before they can pursue FNP certification from the CA BRN.

K. Master's Degree Program Objectives

The program objectives are to prepare students for graduation who can:

1. Expand knowledge and evaluate nursing theories and theories from related disciplines as a basis for advanced roles and nursing practice.
2. Utilize nursing concepts, theories, and knowledge to support advanced practice roles and evidence-based nursing practice.
3. Demonstrate expertise in advanced roles in nursing.
4. Apply evidence based research findings to advanced roles and nursing practice.
5. Utilize the steps of scientific inquiry to evaluate and integrate research, theory, and practice.
6. Advance practice through the development and implementation of strategies for improving nursing care and initiating changes in the health care system.
7. Actively engage in collaborative relationships with other members of the health care team to improve health care and influence health care policies.
8. Assume responsibility for contributing to the advancement of the nursing profession.
9. Utilize technology to enhance the effectiveness of managing client and clinical information.
10. Acquire a foundation for doctoral study in nursing.

L. Family Nurse Practitioner Program Overview

The Family Nurse Practitioner program at CSUB is a 2-year full-time program, which leads to a Master of Science degree in Nursing with a Family Nurse Practitioner (FNP) specialization.

There are four advanced practice registered nurse (APRN) roles: certified registered nurse anesthetist (CRNA), certified nurse midwife (CNM), clinical nurse specialist (CNS), and nurse practitioner (NP). The FNP Program at CSUB prepares APRNs in the role of nurse practitioners (NP). Family nurse practitioners provide care for individuals and families across the lifespan. The FNP role includes preventative healthcare as well as assessment, diagnosis and treatment of acute and chronic illness for individuals and families (NONPF, 2013). Emphasis is placed on health promotion, disease prevention, and management of common health conditions. Graduates are prepared to provide high-quality, evidence-based, and family centered care to infants, children and adults across the lifespan and from diverse backgrounds.

Graduates of the FNP Program are:

- Qualified to be certified as NPs by the State of California
- Qualified to earn their furnishing number from the State of California
- Prepared to take national FNP certification exams
- Prepared to enter a doctoral program in nursing or related field

The FNP Program curriculum is a 2-year, full-time schedule of courses. Clinical hours are completed through preceptorships with local primary care providers in a variety of healthcare settings.

The first semester of the program includes Pharmacotherapeutics for Advanced Practice Nursing, Pathophysiology for advanced practice nurses, and an Advanced Health Assessment course, which prepares students to conduct comprehensive history and physical exams. The first of five clinical nurse practitioner courses begins in the second semester. Students continue to take didactic courses at CSUB during the time they are completing their clinical requirements. An outline of the required courses is included.

Clinical experience, defined as direct client care to individuals/families and/or communities, is a required component of the nurse practitioner curriculum. Clinical experience gives students the opportunity to apply theory in the clinical situation, develop an understanding of the nurse practitioner's role, function as a member of an interdisciplinary team, and demonstrate the ability to mobilize and coordinate available community resources in the management of client health and illness states. Students develop their clinical reasoning skills and test their philosophy of practice throughout clinical experience. This opportunity to apply in practice, the theory, research, and technical skills they are learning must be sufficient to enable the student to develop the competencies necessary for practice.

The FNP Faculty members are accountable for the final evaluation of students; however, preceptors are vital members of the teaching team and are clinically expert individuals with whom students have the opportunity to work. Faculty members, clinical preceptors, and students are continuously collaborating to enhance the clinical experience.

M. Family Nurse Practitioner Program Objectives

Upon graduation or entry to advanced practice, the Family Nurse Practitioner should demonstrate competence in the following:

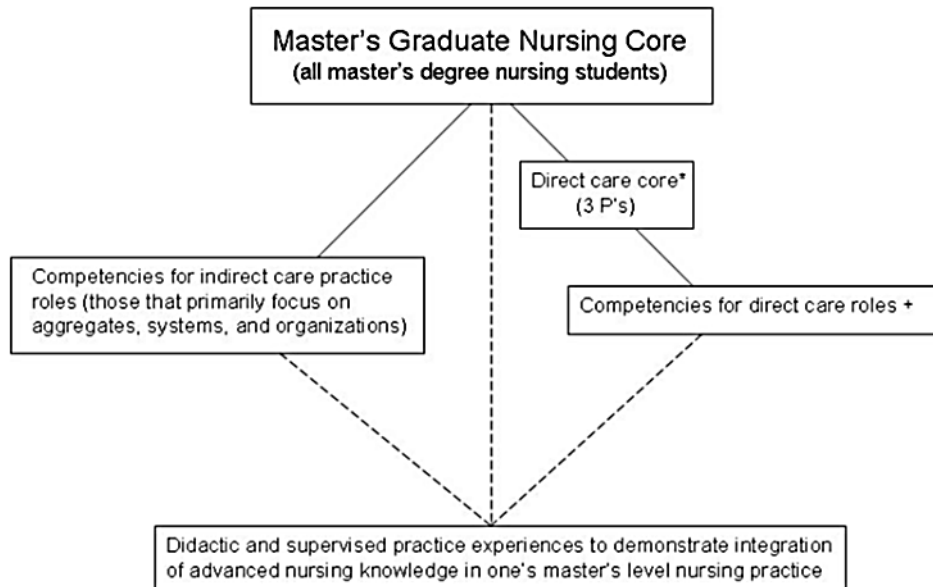
1. Synthesize theoretical, scientific, and contemporary clinical knowledge for the assessment and management of both health and illness states for the purposes of health promotion, health protection, disease prevention, and treatment of the individual, the family, aggregate groups, and the community.
2. Demonstrate a personal, collegial, and collaborative approach which enhances the Family Nurse Practitioner's effectiveness in patient care.
3. Function as a licensed independent practitioner by using best available evidence to continuously improve quality of clinical practice.
4. Demonstrate a commitment to the implementation, preservation, and evolution of the Family Nurse Practitioner role.
5. Implement clinical reasoning and build collaborative, interdisciplinary relationships to provide optimal health care to the patient.
6. Oversee and direct the delivery of clinical services within an integrated system of health care to achieve improved health outcomes for patients, communities, and systems.
7. Ensure quality of health care through consultation, collaboration, continuing education, certification, and evaluation (eligible for state and national certification upon completion of the program).
8. Provide culturally competent care, deliver patient care with respect to cultural and spiritual beliefs, and make health care resources available to patients from diverse cultures.

(Adapted from the *Nurse Practitioner Core Competencies*, NONPF 2017.)

N. The Department of Nursing Mission Congruence with the Master’s Program Objectives

DEPARTMENT MISSION EXCERPTS	MSN PROGRAM OBJECTIVES to prepare MSN graduates who can:
<ul style="list-style-type: none"> • “In recognition of health needs of a multicultural society, advanced professional nurses address healthcare issues and needs of their community.” 	<p>6. Advance practice through the development and implementation of strategies for improving nursing care and initiating changes in the health care system.</p> <p>8. Assume responsibility for contributing to the advancement of the nursing profession.</p>
<ul style="list-style-type: none"> • “The mission of the Department of Nursing is to provide a collaborative and interactive learning environment.” 	<p>7. Actively engage in collaborative relationships with other members of the health care team to improve health care and influence health care policies.</p>
<ul style="list-style-type: none"> • “The outstanding faculty provides nursing education to undergraduate and graduate students seeking entry into professional nursing or advanced education.” 	<p>1. Expand knowledge and evaluate nursing theories and theories from related disciplines as a basis for advanced roles and nursing practice.</p> <p>5. Utilize the steps of scientific inquiry to evaluate and integrate research, theory, and practice.</p> <p>10. Acquire a foundation for Doctoral study in nursing.</p>
<ul style="list-style-type: none"> • “Graduates will have acquired knowledge, skills, competencies, and values essential to the practice of professional nursing. Professional nurses make autonomous and collaborative judgments in a variety of healthcare situations and are accountable for their practice.” 	<p>2. Utilize nursing concepts, theories, and knowledge to support advanced practice roles and evidence-based nursing practice.</p> <p>3. Demonstrate expertise in advanced roles in nursing including the provision of primary healthcare across the lifespan.</p> <p>4. Apply evidence based research findings to advanced roles and nursing practice.</p> <p>9. Utilize technology to enhance the effectiveness of managing client and clinical information.</p>

O. Model for the Graduate Nursing Curriculum at CSUB



Based on the Model of Master's Nursing Curriculum (AACN, 2011)
<http://www.aacnnursing.org/Education-Resources/AACN-Essentials>

The model for the graduate nursing curriculum represents the student's progression from generalist to advanced practice nurse. The nurse generalist refers to the nurse who is prepared at the Baccalaureate level and has the basic nursing skills and theoretical knowledge required for beginning graduate education. Nurse generalist will either hold a Baccalaureate degree in nursing or a non-nursing Baccalaureate degree with additional Baccalaureate nursing course content. Graduate nursing education at CSUB Department of Nursing is guided by curriculum based in theory, research, and practice. Advanced practice relates to the development of clinical or role competencies of the nurse in advanced adult or family health nursing. Theory and research are incorporated into specialty practice course content. The graduate of the Master of Science degree has the competencies to practice advanced clinical nursing in family health.

Revised 5/2014, Reviewed 2020

P. Student Representation on Departmental Committees

A student representative is elected by each class in the Nursing Department to departmental committees such as Faculty Organization, Graduate Program Committee, Program Evaluation Committee, and various ad hoc committees. It is the responsibility of the student representative to attend or send an alternate, and to report back to the nursing students. It is also the responsibility of the students to provide the elected representatives with input so that they may adequately represent their colleagues. The voting privileges of student representatives on faculty committees are spelled out in the Faculty Bylaws.

Q. Student Opinionnaire on Courses and Instruction (SOCI)

Evaluation of specific nursing courses by students is done during each course in the nursing curriculum as part of the Program Evaluation Plan. In addition, evaluation of the course and faculty member's teaching is done in a formal manner through the SOCI (Student Opinionnaire on Courses and Instruction). Students in each regular class offered at the University are asked to fill in questionnaires which report their assessment of the course content and the instruction in that class. These SOCIs are used both by individual faculty members and the University administration in a continuing effort to insure that California State University, Bakersfield's instructional program is as effective as possible. The SOCI is administered during the last week of the semester prior to finals.

R. California State Board of Registered Nursing Policies

Policies of the California State Board of Registered Nursing can be found at www.rn.ca.gov. Included you will find information on impaired nursing students, guidelines for schools of professional nursing on ethical practices, transfer and challenge policies, and information on how to file a complaint with the Board of Registered Nursing.

Section II. Admission, Progression, and Graduation Policies

A. Admission Procedures for the Master of Science Degree Program

The Department of Nursing Graduate Program Committee (GPC) makes decisions about the admission of graduate students into the MSN program, and on classification status. The GPC makes decisions on exceptions for admission, progression, and graduation but must follow University requirements in these areas.

1. Interested students contact the Department of Nursing to meet with the Graduate Program Advisor. The Graduate Program Advisor will evaluate the student's educational background, discuss any possible prerequisite courses necessary for admission, and provide students with information about the Master of Science Degree Program in Nursing. Students will be referred to the Offices of Admission, Financial Aid, and Testing.
2. At the Admissions Office, the students will inquire about a California State University Graduate Application for Admission. Students select nursing as their major on this ~~form~~ application. Students must supply the Admissions Office with official transcripts of all undergraduate and graduate studies completed. The application is submitted through Cal State Apply and forwarded to the Department of Nursing once it has been evaluated by the admissions office. The student may apply online at <https://www2.calstate.edu/apply>
3. In addition, to qualify for admission into the Master of Science in Nursing program, students must have one copy of all official college transcripts, including all completed work to date, and a completed Application for Admission to the Master of Science Degree Program in Nursing. The student may apply to the program online at <https://nursingcas.org/>. On NursingCAS, search school as "California State University-Bakersfield" and select the program as "MSN-FNP".-The application instructions can be obtained on the Department of Nursing homepage at <http://www.csub.edu/nursing/programs/MSN>.
4. A student file containing all admission documents will be developed by the Graduate Advisor. It is the student's responsibility to make certain that his/her file is complete by the application deadline.
5. Student files will be forwarded to the Graduate Program Committee for consideration. Students will be notified of the Committee's decision regarding admission status.
6. Further information on admission can be found in the current California State University, Bakersfield catalog.

B. Family Nurse Practitioner Program Admission Requirements

1. Eligibility Requirements

- a. Applicants must meet the following minimum eligibility requirements to be considered for the MSN program:
 - i. Be a graduate of an accredited baccalaureate nursing program
 - ii. Be in good standing at the last college/university attended
 - iii. Have an overall baccalaureate GPA of at least 3.0
 - ~~iv.~~ Hold a current registered nurse license from the California Board of Registered Nursing (BRN) that is unmembered, unrestricted, with no disciplinary action pending or imposed.
 - v. Have a current American Heart Association BLS certification
 - ~~vi.~~ Employed full time as an RN for at least two years.
 - vii. Apply, and be eligible for, fall admission to CSU Bakersfield as a graduate student
 - viii. Submit a complete graduate nursing application during the application submission period.
- b. Preferred Qualifications
 - i. Have 3 years of full-time acute care nursing experience in the last 5 years
 - ii. Reside in the [CSUB Service Area](#)
 - iii. Have previous nursing experience serving underserved and/or rural populations

2. Admission Requirements

- a. Once accepted, students must complete the following requirements to be fully admitted and progress, in the MSN program:
 - i. Initial Requirements
 1. Submit a Program RSVP Form
 2. Complete a background check
 3. Complete a drug screen
 4. Complete all Annual Requirements
 5. Attend the Mandatory MSN-FNP Meet and Greet

3. Background Check

- a. All nursing students must complete a background check through CastleBranch. Students must use the independent company selected by the CSUB nursing department; background checks completed by another company WILL NOT BE ACCEPTED. Access to Background Check information is limited to the Nursing Department Chair, or an appointed designee. Background Check information remains confidential. If an area of concern is identified on the background check:
 - i. The chair will notify the individual nursing student.
 - ii. The nursing student may elect to have a second background check completed by a company approved by the Department of Nursing.
 - iii. The nursing student has the right to correct any misinformation from the background check with the company that completed it.
 - iv. Background check results may be released to: a) CSUB Human Resources, b) Clinical agency Human Resources, and/or the BRN.

CSUB nursing students are assigned to clinical agencies that have included students in the category of individuals that must complete background checks. As a result, the background check requirement for nursing students is a necessary component of Joint Commission accreditation for these clinical agencies (BRN, EDP-I-33, 2010).

When a nursing student's background check reveals a criminal offense, this information is shared in a confidential manner with the identified contact person for the clinical agency to which the student has been assigned. Based on the number, type, severity, and recency of offenses, the clinical agency may decline to accept the nursing student for clinical placement based on the agency's policy. The clinical agency's right to deny a nursing student's placement is recognized by the California Board of Registered Nursing (BRN, EDP-I-33, 2010).

In the event that a nursing student is denied clinical placement at a clinical agency, the Department of Nursing will attempt to place the student in another existing clinical group at a different location. If no clinical agency will accept a nursing student's placement, then the student would not be able to complete the required clinical course objectives and would be administratively dropped from the CSUB Nursing Program.

4. Drug Screen

- a. Initial Non-NIDA drug screening is required for all graduate students. This is completed one time for each new student entering the nursing program. Drug testing will be done at the student's expense through Castlebranch. Drug testing **MUST** be completed prior to the beginning of the semester in which the student is admitted. The Department of Nursing Chair, or an appointed designee, will be notified of the results. Results will not be noted on the health clearance form. Repeat drug testing may be required, if the student exhibits suspicious behavior in the clinical setting, at the discretion of the clinical instructor or the clinical agency. The repeat drug test will be at the student's expense.

5. Annual Requirements (Submit to Castlebranch each fall semester)

- a. Maintain the physical and mental qualifications necessary for clinical setting (Essential Functions form)
- b. Maintain a clear, active California RN license
- c. Maintain an American Heart Association BLS Certification
- d. Purchase CSU Bakersfield Student Professional Liability Insurance before the first day of each fall semester and maintain the insurance throughout the program.
- e. Submit evidence of a completed Respiratory Fit (Mask Fit) testing
- f. Submit a copy of personal health insurance
- g. Submit a copy of recent (within 2 months) Physical Examination Report before the first day of **each** fall semester.
- h. Submit an immunization record, including MMR, Varicella, Hep B, TB, and Tdap.
- i. Submit an updated Student Information Form
- j. Submit a copy of signed Honor Commitment form.
- k. Submit a copy of signed Confidentiality Statement

- l. Submit a copy of signed Photo Release
- m. Submit a copy of signed Memorandum of Understanding
- n. Submit copies of signed Child Abuse and Elder Abuse forms
- o. Submit a copy of signed Blood Borne Pathogens Form

C. Physical and Mental Qualifications

The Department of Nursing follows the CSUB nondiscrimination policy, and students requesting accommodations should contact the Disability Services office. A student with a disability must have the disability verified by the [Services for Students with Disabilities](#) office at CSUB. It is to the student's advantage to do this as soon as possible in the semester to ensure that approved accommodations can be granted in a timely manner. Students requesting accommodations must demonstrate their ability to meet the Essential Functions.

If, after admission to the nursing program, a student develops a physical or mental disability that limits his/her ability to meet the Essential Functions, it is the student's responsibility to bring this information to the attention of the clinical faculty before he or she begins the clinical course. If unable to meet the clinical course objectives, the student will not be allowed to participate in clinical activities. The student must provide documentation from his or her physician prior to returning to clinical which states that the student is able to meet the Essential Functions.

The Essential Functions form must be signed dated and submitted to the Department of Nursing prior to start of your classes. You will complete this form annually certifying that you are able to meet the essential functions required by the Department of Nursing.

D. Essential Functions for Graduate Nursing Students

There are essential functions or abilities necessary for admission and progression in the complex discipline of nursing at CSU Bakersfield. The candidate must be able to perform all of the essential functions each semester. The Department of Nursing follows the CSUB nondiscrimination policy, and students requesting accommodations should contact the Disability Services office. These essential functions include, but are not limited to, the following:

A. Critical Thinking:

A student must demonstrate critical thinking ability sufficient for clinical judgment.

1. Make effective clinical decisions.
2. Identify cause and effect relationships with clinical data.
3. Develop nursing care plans.
4. Perform math calculations requisite to safe dosage calculations and medication administration.
5. Read, synthesize, analyze, evaluate, and integrate material in the classroom and the clinical setting.

B. Professional-Ethical Conduct:

A Student must possess the ability to reason morally and practice nursing in a professional and ethical manner.

1. Demonstrate integrity, honesty, responsibility and tolerance.
2. Abide by professional standards of practice.
3. Deliver compassionate care to all patient populations.

C. Interpersonal Skills:

A student must demonstrate appropriate interpersonal abilities while interacting with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.

1. Communicate effectively and sensitively with other students, faculty, staff, patients, families, and other professionals.
2. Demonstrate willingness and ability to give and receive feedback.
3. Develop mature, sensitive and effective relationships with clients.
4. Establish trust and rapport with clients and colleagues.

D. Communications

A student must have the ability to clearly communicate in oral and written forms, and to effectively interpret communication with others.

1. Use appropriate grammar, vocabulary, and syntax.
2. Effectively communicate nursing actions.
3. Appropriately interpret client responses.
4. Initiate health teaching.
5. Demonstrate accurate nursing documentation.
6. Accurately report patient information to members of the health care team.

E. Mobility and Stamina:

A student must possess sufficient gross and fine motor skills and endurance to provide safe and effective nursing care in all health care settings.

1. Perform basic life support, including BLS.
2. Function in an emergency situation.
3. Safely assist a patient in moving (e.g., from wheelchair to commode, from chair to bed, lift and transfer from gurney to bed).
4. Calibrate and use equipment.
5. Perform treatments and procedures.
6. Apply pressure to stop bleeding.
7. Manipulate diagnostic instruments to adequately perform all aspects of a physical assessment.
8. Sit, stand, and move about in patient environments for 12 hour periods.

F. Tactile:

1. Perform palpation and other functions necessary for a physical exam.
2. Assess texture, shape, size and vibration.
3. Note temperature changes in skin and equipment.
4. Perform therapeutic functions (e.g., inserting a urinary catheter or IV, change dressings, give medications).

G. Auditory:

A student must have sufficient auditory ability to effectively monitor and assess health needs of patients.

1. Hear cries for help.
2. Hear alarms on equipment and overhead codes.

3. Hear auscultatory sounds using a stethoscope.
4. Hear and interpret verbal communication from patients.
5. Communicate over the telephone.

H. Visual:

A student must possess visual ability for observation and assessment necessary in nursing care.

1. Observe patient responses (e.g., changes in skin color, grimaces).
2. See drainage on dressings and note characteristics of body fluids.
3. Note fluid levels in collection devices, syringes and infusion devices.
4. Read gauges that monitor patient progress (e.g., sphygmomanometer).
5. Discriminate colors for diagnostic purposes.
6. Assess movements of patients.
7. Observe patient behavior (e.g., in rehab or psychiatric facilities).

I. Behavioral-Emotional Health:

A student must possess the emotional health required for full use of his or her intellectual abilities, the exercise of good judgment, and the prompt completion of all responsibilities attendant to the care of patients.

1. Maintain mature, sensitive, and effective relationships with patients, students, staff, faculty and other professionals under even highly stressful situations.
2. Experience empathy for the situations and circumstances of others and effectively communicate that empathy.
3. Be willing to examine and change his or her behavior when it interferes with productive individual or team relationships.
4. Prioritize competing demands.
5. Function in stressful circumstances.
6. Separate own needs and experiences in order to maintain objectivity and client-centered care.
7. Adjust to changing circumstances.
8. Plan effectively and complete all assigned duties carefully.

E. Graduate Student Classification Status

Classified Standing in the Master's Degree Program in Nursing

For classified status, the student must meet all the eligibility and admission requirements.

Conditionally Classified Graduate Standing

An applicant may be admitted as a Conditionally Classified Graduate Student if, in the judgment of the graduate admissions committee, the applicant has a potential for successful completion of all the "conditions" specified by the faculty for admission as a Classified Graduate Student and potential for successful completion of all the requirements for the graduate program. Upon satisfactory completion of all "conditions" specified by the faculty, the student's status will be administratively changed to Classified Graduate Student.

Advancement to Candidacy

The candidate must have all of the following:

1. Attained Classified status.
2. Completed 22 units of graduate courses in the Plan of Student and required elective courses with a GPA of 3.0 or better (on a scale of A=4.0)
3. Have successfully satisfied the GWAR by attaining a grade of "C-" or better in an approved upper-division writing course **or** achieved a score of 8 or higher in the exam
4. Filed a petition for Advancement to Candidacy with the Department of Nursing Graduate Program Director.

F. Grading Scale/Policies and Procedures

Graduate nursing students must have a GPA of 3.0 (on a scale of 4.0=A) to be admitted to Candidacy status.

Grading Scale: The grading scale for nursing courses is:

A = 93-100	B- = 80-82	D+ = 67-69
A- = 90-92	C+ = 77-79	D = 63-66
B+ = 87-89	C = 73-76	D- = 60-62
B = 83-86	C- = 70-72	F = 59 or below

Grading Policy

A minimum of grade of "B-" is required in every graduate course. Eighty percent (80%), which is a B- is the lowest passing score for each individual course. *A student with 79.9% will receive a C+. There will be no rounding up to 80% at the end of the semester.* A student may not advance to candidacy status or graduate without an overall GPA of 3.0 (on a scale of 4.0=A).

A student who failed to achieve a minimum grade of "B-" in a graduate course may request reentry into the program (based on seat availability and approved by the GPC) to repeat the course one time. A student who has previously had a grade of "B-" or less, will be ineligible to

remain in the program if the student had any subsequent course grade of “B-” or less.

N6290: Culminating Experience must be successfully completed with a grade of “credit.”

Procedures for Changing Grades

Once a final grade has been assigned, it can be changed only in the case of a declared clerical error or through the auspices of a student academic grievance procedure. The definition of a clerical error is an error made by the instructor in grade estimating or posting. No grade change may be made as a result of work completed or presented following the close of the grading period except for completion of work when an “I” or “SP” or “RP” was issued, or, in cases of emergency, as approved by the Dean.

Grade changes are made by completing the “change of grade” form. The “change of grade” form is a multi-copy form and after the grade changes have been made and properly recorded, a copy of the form is sent to each of the following: student, instructors, department of major (student’s advisory file), Admissions & Records.

Failure to Assign a Grade

If an instructor of record fails to assign a final grade, then the department in which the course was offered or in the case of interdisciplinary courses the department in which the instructor serves, should select, by majority vote, a qualified member of the faculty who will determine the appropriate grade and instruct the registrar to assign the grade thereby determined.

G. Program Standards and Progression

According to the policies of the CSUB Department of Nursing, students must meet the standards set by the program. Program standards are based on the policies of contracted clinical agencies, the California Board of Registered Nursing, the ANA Code of Ethics, state and federal laws, and the profession of Nursing. Students whose professional performance and behavior does not meet these standards may be dismissed from the CSUB nursing program regardless of their academic performance. This includes, *but is not limited to*:

- 1) Social Media policy violations
- 2) Breaches of patient confidentiality standards under HIPAA
- 3) Academic Integrity violations, including but not limited to cheating, unauthorized possession of an examination, or dishonesty in academic matters or patient care
- 4) Falsification of patient records or academic documents
- 5) Unauthorized access to clinical agency facilities, equipment, supplies, or medical records
- 6) Scope of practice violations, including performance of NP-level patient care activities outside of authorized clinical hours
- 7) Drug or alcohol related offenses
- 8) Theft
- 9) Other criminal activities substantially related to the qualifications, functions, and duties of a registered nurse
- 10) Inability to meet the Essential Physical and Mental Qualifications of the nursing program
- 11) Disruptive or violent behavior, under the CSUB Zero Tolerance policy
- 12) Severe maladaptation to the educational process as evidenced by a pattern of:
 - a. Inadequate classroom or clinical preparation
 - b. Late completion of assignments

- c. Poor communication and/or irresponsible behavior
- d. Absence from scheduled classroom or clinical hours
- e. Incivility during classroom or clinical hours that disrupts the teaching and learning environment

A student who is dismissed due to failure to meet CSUB nursing program standards will be notified by the Department Chair. The student may request to have this decision reviewed by the Graduate Program Committee.

H. Comprehensive Exam Grading Policy

To Receive a “Credit” in N6290: Culmination Experience: Comprehensive Examination

To receive a “Credit” in N6290, the student must complete and pass both portions (Part A and Part B) of the Comprehensive FNP Exam.

Part A:

Students must complete and pass the Graduate Nursing Comprehensive Examination for Advanced Practice Students in the FNP Program. To pass the Graduate Nursing Comprehensive Examination, the student must receive 80 points out of 100 points on the examination. The Student must submit an original paper that addresses a clinical question and incorporates the FNP role(s). The Graduate Nursing Comprehensive Examination paper will be submitted to a plagiarism detection software and blindly reviewed by two randomly assigned faculty members. In the event of a Pass and a Fail grade, a third faculty member will evaluate the exam to determine if the student has passed or failed the examination. If the Student paper receives a failing grade from two readers, the student will have to redo that part of the examination the student had problems with. One retake is allowed. If the student does not pass the Graduate Nursing Comprehensive Examination after the retake, the student will not receive credit for N6290.

Part B:

The Student must purchase, take, and pass the proctored Comprehensive FNP Exam with a 70% benchmark. Students will have the opportunity to repeat the Comprehensive FNP Exam one additional time (a total of 2 attempts). If the student does not pass the proctored Comprehensive FNP Exam on the second attempt, the student will not receive credit for N6290.

The course may be repeated once, upon approval from the Graduate Program Committee.

I. Assignment of a Grade of “Incomplete”

The grade of “Incomplete” can only be assigned according to all of the following criteria:

- at the discretion of the instructor, *and*
- when a majority of the course has been satisfactorily completed by the student with a "B-" or better, *and*
- when the student is unable to complete the coursework on time due to unforeseen and fully justified reasons, *and*
- when completion of the remaining coursework does not require unreasonable Department of Nursing resources.

A clinical grade of "I" cannot be assigned to make up clinical hours unless clinical supervision will be available under existing scheduled sections of the same course. A grade of "I" may prevent the student from continuing in nursing courses until the "I" is replaced with a passing grade through satisfactory completion of the remaining coursework according to the student/instructor contract. The "I" grade will automatically convert to an "F" if the student fails to complete the contract within one semester. A grade of "I" cannot be assigned as a way for a student who is failing a course to earn additional points through additional coursework.

J. Withdrawal from the Graduate Nursing Program or University

Withdrawal from the graduate nursing program will be considered if the student was passing all nursing courses at the time of the withdrawal. It is considered as a nursing course failure if the student was not passing the graduate core course with a "B-" or better. Although the University transcript may reflect a "W," the course will be viewed as a nursing course failure by the Department of Nursing.

K. Re-entry Request

Students who wish to re-enter the graduate nursing program must make a formal request in writing. Letters are addressed to the Graduate Program Committee (GPC). Requests are granted based on academic history, professional performance, and seat availability. Students who are dismissed due to non-adherence to program standards will also be evaluated based on the seriousness of the violation(s).

L. Policy Statement for Clinical Refresher

After being granted permission to re-enter the graduate nursing program by the GPC, the student will be required to enroll in a clinical refresher course. The clinical refresher course is an independent study course designed to update the individual student's clinical skills. The student is strongly encouraged to audit and attend the course bonding theory. The student will contract with a specified clinical faculty regarding the requirements of the course and the activities that the student will be responsible for completing. The student will be responsible for completion of the agreed upon contract within a predetermined time frame to receive credit. The faculty will provide guidance and coordination for selected activities outlined in the refresher course syllabus.

Failure to complete required course activities, excessive or unexcused absences, or patient safety concerns will result in a clinical warning and may lead to a no credit grade for the course. Failure of the student to demonstrate skills consistent with the specific nursing course tool will result in no credit for the course and the student may not progress in the nursing program. A No Credit grade in a clinical refresher course will be counted as a nursing failure.

M. Student Complaint and Grievance Procedures

The formal Student Complaint and Grievance Procedure requires that students first attempt to address their concern through informal meetings within the appropriate lines of authority. Faculty,

including those in leadership positions within the DON, are introduced to incoming students at the New Graduate Student Orientation and can be contacted as needed for additional concerns and information. Students can arrange for specific appointments or utilize faculty designated office hours to express their views or complaints. If students are unable to resolve their complaints with a course instructor, they are encouraged to meet with the team leader of the course. If there is no resolution at this level, the student and instructor are encouraged to meet with the FNP Program Director, Graduate Program Director, or Chair of the DON. Students who remain unsatisfied can meet with the Dean of the School and the Vice-President for Student Affairs. An on-campus Ombudsperson is available to students and serves as an objective mediator who helps resolve conflicts which arise from disagreements. The current CSUB Ombudsperson is recognized as an excellent resource for CSUB students and the DON.

Students are encouraged to utilize the informal procedures, including meeting with the Ombudsperson. If no resolution can be achieved through these discussions, a student may elect to file a formal grievance through the University procedures as outlined on the Academic Programs website.

Information on student complaint and grievance procedures and forms can be found on the web via the University's Grievance and Complaint page at <http://www.csub.edu/academic/Programs/Complaints%20and%20Grievances/>.

N. University Policies Related to Progression in the Nursing Master's Program and Graduation

1. Scholastic Expectations

A candidate for a Master's degree must earn at least a 3.0 GPA average in all graduate work in graduate standing and in the degree program.

Students performing below the minimum standard will be placed on academic probation. Students who fail to correct deficiencies within a reasonable time period will be suspended. Unclassified post-Baccalaureate students must maintain a 2.5 cumulative GPA. No course with a grade lower than "C" may apply toward the fulfillment of degree requirements.

2. Leave of Absence

Planned Educational Leave for Graduate Students: Graduate students who have been formally admitted to a Master's degree program and who are making satisfactory progress in the completion of their plan of study may qualify for a planned educational leave of absence for periods of up to two years and still maintain continuing student status. For further information, contact the graduate program coordinator.

3. Non-active Standing

A student who has been absent from the program more than two consecutive semesters without an approved Leave of Absence or without Continuous Registration will be reclassified as non-active. The student must file a new application for admission and pay appropriate fees to continue graduate studies.

4. Re-enrollment of Continuing Graduate Students

A former student returning to the university after an absence of more than two consecutive semesters must file a new application for admission and pay the application fee. This application will not receive any special consideration in the admission process.

5. Graduate Writing Competency Requirement (GWAR)

All graduate nursing students must demonstrate upper division writing competencies within the first year of beginning classes. If the student has completed the requirement during the Baccalaureate program with a score/grade that meets the minimal requirements specified by the graduate program, the verification of the upper-division writing competency will be accepted. Students who have not yet completed this requirement may register for and pass the [Graduation Writing Assessment Requirement \(GWAR\)](#) exam which is offered at CSUB once a semester. Otherwise, students may enroll in and satisfactorily complete one of the courses recognized by the University (refer to current course schedule or General Catalog).

*Please note that if a student was a post-baccalaureate student and completed their BSN at CSUB, they will need to complete the GWAR requirement if their first baccalaureate degree was not from a UC or a CSU.

6. Completion of the Comprehensive Examination.

You must have been advanced to candidacy (see Classification Status: Advancement to Candidacy) to register for Comprehensive Examination course.

7. Application for Graduation

All graduate students are encouraged to file an application for graduation at least one year before they plan to graduate. Please note that a response to the application from the Evaluations Office may take six to eight weeks. If the Evaluations Office notifies the student of any deficiencies in graduation requirements for the Master's degree program, the student must make up the deficiencies and reapply for graduation.

8. Time Limit to Complete Requirements for Graduate Degrees

The California Administrative Code, Title 5, Education, specifies that all the requirements for a Master's degree be completed within a seven-year (7) period.

This time limit requirement means that no more than seven years may elapse between the start of the term of the earliest dated course approved for the Plan of Study and the date the application for graduation is formally approved. The student may formally petition the graduate coordinator for an extension of the time limit or for the appropriate substitution of other appropriate course work.

9. Change of Address or Name

All graduate and post-Baccalaureate students who have a change in address or name must report the change to the Office of the Registrar by submitting the appropriate form with

the new name or address and the Nursing Department office. Such changes also should be reported to the Graduate Program Director.

10. Readmission to Nursing Program

Students need to reapply to the University and to the Department of Nursing through the Graduate Program Committee (GPC).

Students who wish to re-enter the nursing program must make a formal request in writing. Letters are addressed to the Graduate Program Committee (GPC). Requests are granted based on seat availability. Letters to the GPC should include a) the course that was failed, b) circumstances surrounding that failure, and c) the student's proposed actions to correct those circumstances.

11. Health Requirements

Health Clearance requirements must be completed and reported to CastleBranch prior to beginning nursing courses each year.

O. Graduation Requirements for the Master of Science Degree in Nursing

The Master of Science degree in Nursing requires completion of the specified number of core and option specific semester units of required courses with a grade point average of at least 3.0 (B).

Students must meet the upper division writing requirement of the University for advancement to candidacy. The student should complete this requirement during the first year of graduate course work. At least one semester before the student plans to graduate, the student should apply for graduation at the University evaluations office and complete the concentration outline with the advisor.

P. Support Services and Resources

Several support services and resources are available to all students at CSUB. [The Walter Stiern Library](#) provides regular orientation tours to acquaint students with the library services. Students can obtain textbooks and supplies from the [CSUB Runner bookstore](#). The [CSU, Bakersfield Dining Services](#) is available for meals and refreshments. The [Children's Center](#) provides daycare for children 6 months to 5 years of age.

[Counseling](#) services are available to students. In addition, [testing](#) services are available for national admissions tests, career, aptitude and personality tests, and the [Graduate Writing Assessment exam](#). Services are available for [students with disabilities](#). The [Student Health Center](#) provides on-campus healthcare. A centralized placement service is maintained through the [Community Engagement and Career Education](#) Center. Students needing tutorial assistance can contact the [Writing Resource Center](#). Additional resources are available to graduate students through the [Graduate Student Center](#).

Student Financial Services are available to assist students with financial account and tuition fee services. Tuition, student forms, and frequently asked questions may be found on their website at: <https://www.csub.edu/bas/fiscal/studaccount/>

The University Academic Calendar is regularly maintained and may be found at: http://www.csub.edu/facultyaffairs/Academic_Calendars/index.html.

Q. Financial Aid and Scholarships

Nursing Student Loans

Nursing student loans are available for students in the graduate program. In addition, there is a Nursing Student Emergency Loan Fund (the Sue Fujiki Fund) described further on in this document.

Scholarships

Various organizations make money available to nursing students, including graduate students based on certain eligibility criteria.

Grants

Grants for nursing research are also available from various funding agencies. For more information on such grants, contact the reference librarian or the graduate program coordinator.

Sigma Theta Tau, International, Xi Epsilon Chapter at CSUB provides grants for graduate project endeavors. See the Xi Epsilon Research and Awards Committee Chair.

For additional information contact the Office of Financial Aid and Scholarships of the Graduate Program Coordinator (or access the information on the web at www.csub.edu/finaid). Applications for financial aid and scholarships are to be submitted directly to the Financial Aid Office. Additional applications may be required for specific scholarships on special forms.

Sue Fujiki Nursing Student Emergency Loan Fund

The application form can be found in the “Forms” section of this handbook.

Criteria for use of the loan fund by nursing students:

A. Eligibility

- a. Students must be enrolled in a program in the Department of Nursing.
- b. To demonstrate eligibility, students must obtain a referral form, with signature, from a member of the Department of Nursing, Recruitment, Outreach, Scholarship and Awards (ROSA) Committee.

B. Specifications of the Loan

- a. The usual limit of the loan will be \$200.00. A student may borrow up to \$500.00 with permission of the ROSA Committee, if sufficient funds are available.
- b. No interest will be charged, but there will be a processing fee from the CSUB Foundation Office.
- c. The loan must be repaid in two months, with possible extension up to four months with the permission of the ROSA Committee.
- d. Late payment — If repayment is late, student will not be eligible for another loan until 30 days after repayment.
- e. Unpaid loans — Students who are more than 30 days overdue in repaying the loan will be contacted by the Foundation Office. If there is no response, or no

arrangement for repayment, the Department of Nursing ROSA Committee will be notified for a decision on further action.

Section III. General Policies

A. Health Requirements: Graduate Students

All health requirements must be completed and submitted to CastleBranch. The list of health requirements can be found in the student's CastleBranch account.

B. Student Individual Health Insurance

It is recommended that each student be responsible for obtaining individual health insurance. Neither the University nor clinical agencies can be held responsible for the student's health benefits.

C. Injury Policy (CSUB)

The single most important response action in the case of student, visitor or employee injury is to contact University Police to ensure that emergency medical services are made available to the injured person(s) as quickly as possible.

Students, visitors, and others should report incidents and/or accidents by contacting University Police or Risk Management in non-Emergency situations. Students should report to the Faculty supervising during the time of the incident if the incident occurs during class or laboratory session. Risk Management will follow up with the responsible University staff regarding the reported Accident/Incident.

Serious Incidents / Incidents Must Be Reported to University Police Department as soon as possible and will be assigned a UPD case number.

- Faculty and Staff should complete the California State STD 268 within 48 hours of the accident.
- Student and visitors should file a campus Incident Report.

Based upon the nature of the incident/accident, Risk Management will investigate and may provide recommendations or request repairs, notify insurers, and ensure full documentation of the incident for purposes of prevention of future injuries and for managing any claims that may result.

If injured on the job, employees are to report (where, when, and how the accident happened) and get immediate treatment. Employees will contact their supervisor and the Human Resources Department to get authorized medical treatment. Employees will be required to fill out all necessary paperwork for work related injuries. If there is an immediate emergency, employees are to get the best treatment available and then report the injury to the appropriate supervisor and the Human Resources Department as quickly as possible.

California State University, Bakersfield Safety and Risk Management website <http://www.csub.edu/BAS/srm/>
(2018)

The following forms can be found at <http://www.csub.edu/bas/srm/> under “Employee and Supervisors Injury and Illness Reporting”:

- Student and Visitor Injury or Accident Report (student)
- Incident and Accident Reporting Form (employee)
- Supervisors Report of Injury Form (employee supervisor)

In the event of blood-borne pathogen exposure, complete the BBP Post-Exposure Report Form available at <http://www.csub.edu/BAS/srm/files/BBP%20Exposure%20Report.pdf> and Fax the form to (661) 654-2299.

- 1) Faculty member will provide the DWC 1 Form, available at http://www.csub.edu/foundation/files/HR_Files/Workers_Comp/DWCForm1.pdf to the student to complete lines 1-8 within 24 hours of the injury.
- 2) Faculty will submit the original Supervisor Report of Injury Form and the DWC 1 Form to Tim Ridley, Director, Safety and Risk Management within 3 days.
- 3) Faculty member will counsel student as appropriate to determine how injury could have been prevented and to recommend counseling services as appropriate.

Additional Notes:

Employee Health Nurse at clinical site may be in contact with the student/faculty.

Details on the Injury and Illness Prevention Programs can be found at the following website:

<http://www.csub.edu/bas/srm/Injury%20and%20Illness%20Prevention%20Programs/index.html>

Revised and approved by UPC 1/2012, updated 9/2015 JHP; updated LL 12/2015; GPC 11/2016

D. Annual Health and Safety Requirements

All students will receive a letter from the Department over the summer with information on the requirements which must be met by the first day of the class of the fall semester.

NP students will be required to submit required documents including copies of current BLS card, health clearance (including TB test), and malpractice insurance to CastleBranch by the first day of the class of the fall semester. Students who have not met the requirements will not be allowed in the clinical setting. The maintenance of these records is the responsibility of the student.

Faculty will be responsible to verify that students in their assigned clinical sections have met the requirements prior to allowing the student enter into the clinical area.

E. Mask Fit Testing

Rationale: CSUB students learn the skills required for nursing in many clinical sites in Kern County and surrounding areas. These clinical sites protect their health workers against exposure to various organisms, including the tubercle bacillus, the organism that causes Tuberculosis (TB).

Policy: OSHA's policy is that all health care organizations verify that each worker is protected through an annual mask fit test. The health care institutions have, in turn, indicated that all faculty and nursing students will be mask-fit tested annually. As a part of clinical agreements between CSUB and clinical partners, all students must have mask fit clearance prior to entering into clinical practice.

F. Malpractice Insurance

Student Professional Liability Insurance, providing protection up to \$2,000,000 liability for each incident and \$4,000,000 aggregate for all covered parties, and not per student must be in force before the student begins course work in the nursing program. This insurance covers the student during clinical laboratory portions of the program. The Family Nurse Practitioner students must purchase the policy specific to the FNP option.

The University makes available blanket coverage at a nominal cost to the individual student. This insurance may be purchased for \$20 through the Cashier's Office through the California State University, Bakersfield, 9001 Stockdale Highway, Bakersfield, California 93311-1022.

Coverage obtained through other sources must provide an amount of coverage at \$2,000,000/incident and \$4,000,000 aggregate. Family Nurse Practitioner students must obtain insurance specific to the FNP role which may have a higher premium. If purchased privately, a copy of the face sheet of the policy detailing coverage amount and dates of coverage must be in the student's file. The private malpractice face sheet or CSUB receipt for malpractice must be obtained annually and presented to the Graduate Coordinator during the first week of Fall Semester prior to beginning graduate nursing courses. A copy of the blanket policy is available for perusal in the Nursing Department office. A copy of the policy is on reserve in the library under the Nursing Department section.

G. RN License

Students must have an unencumbered, unrestricted, with no disciplinary action pending or imposed as a registered nurse in California on admission and the license must remain current, clear, and active during enrollment in the nursing graduate program. Verification of the RN license will be obtained by the Graduate Nursing Program Director.

H. BLS Healthcare Provider Card

Students must maintain a current BLS Healthcare Provider card. This must include infant, child, 1-person, 2-person, adult. Students must submit-a copy of the current card to CastleBranch.

I. Uniforms

CSUB Department of Nursing Program photo identification/name tags **MUST** be worn while in all clinical areas including clinical rotations on campus. All students must be clearly and continuously identified as students during clinical experiences. Students are expected to dress in accordance with clinical policy with their identification tag exposed. Pressed white laboratory coats must be worn in all clinical agency or healthcare settings including clinical rotations on

campus. Additionally, every FNP student must properly display the CSUB Department of Nursing Patch on the left side of their white coat.

Business casual attire as a minimum standard is expected where contact with other professionals is possible. Examples of these activities include but are not limited to:

- Classes held on and off campus
- Non-classroom professional or academic activities held on campus
- Conferences, affiliate luncheons, etc.
- Professional related meetings
- Visits to clinical agencies, including patient visits, etc.

J. Required Identification

During the first month of class, students will obtain a photo identification badge from the Department of Nursing for \$10. The Department of Nursing will provide instructions to all graduate nursing students on how to obtain their identification badge. The badge will include:

First line: **First Name, Last Initial**
Second line: CSU Bakersfield
Third line: MSN-FNP
Fourth line: Student

K. Occupational Safety and Health Requirements

The federal OSHA requirements must be met annually by all personnel providing direct patient care in healthcare agencies. The California State University, Bakersfield academic year and the variety of clinical agencies used by the Department of Nursing could result in agencies having overlapped/duplicate requirements for students and faculty. Therefore, the CSUB nursing faculty will assume responsibility for providing the annual OSHA information to students and faculty.

For continuing nursing students, the OSHA requirements will be provided early in the fall semester. For new RN students, graduate students, and transfer or returning nursing students, the OSHA requirements will be provided in the first clinical course taken during the academic year.

Each student will complete the OSHA requirements as indicated on the Annual Health and Safety Requirement form. The form can be found in CastleBranch.

L. The CSUB Nursing Student Honor Commitment

The Honor Commitment is a personal commitment to honor and integrity which is self-imposed and not enforced by an outside authority. All students in the Department of Nursing pledge to follow the Honor Commitment. The Honor Commitment form can be found in the “Forms” section of this handbook.

M. Ethical Standards

A hallmark of professional practice is a Professional Code of Ethics. Ethical codes for professional nursing practice have been developed and revised by the American Nurses Association (ANA):

Code of Ethics for Nurses by the American Nurses Association (Revised 2015)			
Definition		Interpretive Statements	Examples
Provision 1	1.1 Respect for Human Dignity	The nurse practices with compassion and respect for every person.	Establishing relationships of trust with patients and colleagues; supporting the patient's right to make decisions about their healthcare, following Advance Directives.
	1.2 Relationships with Patients		
	1.3 The Nature of Health		
	1.4 The Right to Self-Determination		
	1.5 Relationships with Colleagues and Others		
Provision 2	2.1 Primacy of the Patient's Interests	The nurse's primary commitment is to the patient; family, group, community, or population.	Collaborate to provide high-quality patient-centered health care, avoid intimate relationships with patients.
	2.2 Conflict of Interest for Nurses		
	2.3 Collaboration		
	2.4 Professional Boundaries		
Provision 3	3.1 Protection of the Rights of Privacy and Confidentiality	The nurse promotes, advocates for, and protects the rights, health and safety of the patient.	<p>Not talking about patients in the elevator, cafeteria, or at home.</p> <p>No talking about patients or their situation on any social media site.</p> <p>No patient identifiers on care plan or any other documents.</p> <p>Report errors. Notify if another student has made an error. (Condoning errors through silence is unacceptable.)</p>
	3.2 Protection of Human Participants in Research		
	3.3 Performance Standards and Review Mechanism		
	3.4 Professional Responsibility in Promoting a Culture of Safety		
	3.5 Protection of Patient Health and Safety by Acting on Questionable Practice		
	3.6 Patient Protection and Impaired Practice		

Provision 4	4.1 Authority, Accountability, and Responsibility	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.	Maintaining sterile technique when performing procedures. Not performing procedures for which you have not been trained. Notifying the Professor and Preceptor if you need further supervision.
	4.2 Accountability for Nursing Judgments, Decisions, and Actions		
	4.3 Responsibility for Nursing Judgments, Decisions, and Actions		
	4.4 Assignment and Delegation of Nursing Activities or Tasks		
Provision 5	5.1 Duties to Self and Others	The nurse owes the same duties to self as to others.	Leading a healthy lifestyle. Never abandon a patient. Commitment to lifelong learning and education in the nursing profession.
	5.2 Promotion of Personal Health, Safety, and Well-Being		
	5.3 Preservation of Wholeness of Character		
	5.4 Preservation of Integrity		
	5.5 Maintenance of Competence and Continuation of Professional Growth		
	5.6 Continuation of Personal Growth		
Provision 6	6.1 The Environment and Moral Virtue	The nurse establishes, maintains, and improves the ethical environment of the work setting that are conducive to safe, quality health care.	Giving pain meds on time. Giving reassurance to patients and their families.
	6.2 The Environment and Ethical Obligation		
	6.3 Responsibility for the Healthcare Environment		
Provision 7	7.1 Contributions through Research and Scholarly Inquiry	The nurse, in all roles, advances the profession through research and scholarly inquiry, professional standards.	Nursing research must conform to ethical standards.
	7.2 Contributions through Developing, Maintaining, and Implementing Professional Practice Standards		
	7.3 Contributions through Nursing and Health Policy Development		

Provision 8	8.1 Health is a Universal Right	The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.	If child abuse is suspected, mandatory reporters of abuse. Offer immunizations.
	8.2 Collaboration for Health, Human Rights, and Health Diplomacy		
	8.3 Obligation to Advance Health and Human Rights and Reduce Disparities		
	8.4 Collaboration for Human Rights in Complex, Extreme, or Extraordinary Practice Settings		
Provision 9	9.1 Articulation and Assertion of Values	The profession of nursing, through its professional organizations, must articulate nursing values, maintain integrity and integrate social justice into nursing.	Apply hospital rules fairly for all patients/families. Treat other healthcare professionals respectfully.

N. Code of Academic Conduct

All members of the academic community are responsible for the academic integrity of the CSUB campus. Existing policies forbid cheating on examinations, plagiarism, and other forms of academic dishonesty. (1) Academic dishonesty is contrary to the purposes of the University and is not to be tolerated. High standards of behavior must be in place to support the community.

Examples of academic misconduct include, but not limited to:

- Receiving or providing unauthorized assistance on examinations
- Using unauthorized materials during an examination
- Plagiarism – using materials from sources without citations
- Altering an exam and submitting it for re-grading
- Fabricating data or reference
- Using false excuses to obtain extensions of time

The ultimate success of a code of academic conduct depends largely on the degree to which it is willingly supported by students themselves.

O. Attendance Policy

Lecture Attendance

1. Class attendance is expected of all students enrolled at the University. The instructor in each course sets the standard expected in this regard. When students are absent from classes, it is their responsibility to inform instructors of the reason for the absence and to arrange to make up missed classwork and assignments. Absence of more than 15% of the class attendance will result in a course failure, unless due to a serious and compelling reason has been approved by the faculty.
2. Students' guests are allowed in lectures only with special permission from the instructor.
3. Students must obtain permission prior to recording in the classroom.
4. Children are not permitted in the classroom.
5. A computer is required for the program.

P. Performance (Theory and Clinical) Warning Policy

In the event, that a student is not performing at the expected standards, as outlined in the course objectives for the FNP Program, a performance warning will be given.

A performance warning can be given in the event of, but not all inclusive of:

1. Unprofessional conduct in the clinical practice setting.
2. Failure to meet the objectives of the course during the semester.
3. Failure to submit a schedule of clinical hours and dates to Typhon at the start of the semester; and/or update the schedule as changes and new dates are scheduled.
4. Failure to complete clinical hours in a timely manner.
5. Failure to communicate in an appropriate time frame to your instructor for schedule changes, missing assignments, etc.
6. A repetitive pattern of late assignments submissions.
7. Performance warnings may result in a course failure.

Each warning will result in a 3% grade reduction from final course grade. Performance-warnings will result in grade reduction and /or a course failure.

Q. Late Assignment Policy

Points will be deducted for all late assignments submitted after the due date and time. Twenty-five percent (25%) of the grade will be deducted for each day late including weekends and holidays.

R. Professionalism Policy

It is expected that the graduate student will conduct themselves in a professional and responsible manner both in class and in their clinical setting.

Professional Conduct in the Advanced Practice Nursing Role:

- Respect for Persons: Compassion, Respect, dignity; Responsibility & Accountability for health promotion and optimal care of patients and themselves. Collaborates with the

health care team to protect human rights and promote health. Behaves in a non-offensive and non-discriminatory manner in all settings.

- Respect for Confidentiality: Keep all clinical/patient data confidential. Clinical/patient data used in in all school work, papers, presentations, research findings and in the clinical setting must be used in a manner that is accurate, truthful, and confidential. Patient data must have a justifiable reason for its presence. Acknowledge real data gaps that may exist in written work.
- Honesty: Be truthful in verbal and in written communications; do not cheat, plagiarize, or otherwise act dishonestly. Maintain accurate, honest records of patient care.
- Integrity: adherence to a code of conduct and professionalism and the American Nurse's Association's Code of Ethics for Nurses; Acknowledge your errors of omission and commission to patients, peers, Faculty, Preceptors, and staff.
- Decision Making: Make patient care decisions based on patients' needs and desires as well as evidenced based practice.
- Professionalism: Appearance, dress, professional behavior follow generally accepted professional norms; Establishes, maintains, and improves the ethical environment of the work setting demonstrated through their professional behavior.
- Responding to supervision: Accepts and incorporates feedback in a non-resistant and non-defensive manner; Accepts responsibility for failure or errors.
- Demonstrating dependability and appropriate initiative: Completes tasks in a timely fashion (papers, reports, examinations, appointments, patient documentation).
- Recognizing limits & when to seek help: Appears aware of own inadequacies; correctly estimates own abilities or knowledge with supervision; Recognizes own limits, and when to seek help.

S. Social Media Policy

All cell phones and social media devices should be turned off during class and clinical time. This includes no text messaging or postings on Facebook, Twitter, or any other social media sites during class or clinical time. Cell phones may only be used during breaks and meal time (if meal time is not utilized as part of clinical time for conference).

There is no such thing as a “private” social media site. Search engines can locate items many years after the publication of the original post. Comments can be forwarded or copied. It is often wise to delay posting until you are clear headed, even if you feel angry or passionate about a particular subject. If you are unsure about posting something, ask your faculty.

No inappropriate content should be text messaged, or posted on Facebook, Twitter or on any other social media networks; this includes responding to another student’s post. If you wouldn’t say it in an elevator, you shouldn’t put it online. Inappropriate content includes but is not limited to: patient information, stories or pictures related to patients or families cared for during clinical, and information related to health care agencies, co-workers, faculty and/or managers. Information should not be shared with family members, friends, or posted on social media even if names or other identifying information are not used. Absolutely no pictures should be taken, saved,

forwarded or posted of patients or family members, even if you have their permission. Patient confidentiality must be upheld at all times.

Future employers hold you to the highest standards of behavior. Ensure that your online image is the same as your in-person image. Employers are conducting Web searches on potential job candidates long before they extend job offers.

You can be fined for a HIPAA violation, and/or sued independently for breaching of confidentiality or for ruining the reputation of patients, family members, faculty, or co-workers. You are legally liable for what you post. Please see the Undergraduate Nursing Student Policy Handbook for further information regarding patient's rights to privacy and confidentiality. Please note, this includes emails, over unsecured networks, containing patient information to peers, staff, and/or faculty.

Failure to follow these guidelines related to use of social media may result in grade reduction, course failure, and/or dismissal from the nursing program.

Approved by Undergraduate Program Committee 9/2010, Faculty Organization 10/2010, Updated 9/2015

T. Policy for Students Practicing Procedures on Each Other

In the course of the nursing program, when learning new skills, it is often useful for students to take the role of the patient. This enhances the learning experience in several ways:

1. For practicing, students may act as live "patients" to give them a more realistic patient experience.
2. For the student that acts as a "patient", it gives her/him an idea of what the procedure is like from the patient's perspective and should help her/him to be a more sensitive care giver.

In asking the individual student to take on the patient role, the student's right to privacy and right to refuse a given procedure will be protected. Faculty will make every effort to protect students' privacy by making sure students follow the same guidelines they would use in the hospital to avoid exposure to the patient. In the case of some procedures, such as baths, students will be given the opportunity to bring bathing suits or other appropriate clothing.

If a student chooses not to be a "patient" for a particular skill, such as an injection or bath, the instructor will arrange a simulated experience for that student's practice, unless another student is willing to take his/her turn as patient. Students will demonstrate IV insertion in the skills lab. Faculty must be notified of special requests a minimum of four (4) days prior to the assigned exercise.

Certain procedures may be deemed by the faculty to be unsuitable or potentially dangerous for students to practice on each other. Each faculty team and/or the Faculty Organization will make this decision when the occasion arises.

Students may not practice any invasive procedure on another student unless there is faculty supervision and it is in the skills laboratory setting. At no time is an invasive procedure to be performed on any person or client outside of the nursing classes or clinical area unless supervised by a faculty member.

Please sign and return one copy to your clinical faculty.

My signature indicates that I have read and understand the above policy and that I will not hold CSUB or any faculty member liable.

Print Name: _____

Signature: _____

Date: _____

Approved by Faculty Organization Committee 06/2002, Revised 8/2020

U. Simulation Center & Skills Laboratory Rules

These rules are designed to promote safe and efficient use of the Simulation Center and Skills laboratory. The Simulation Center and Skills laboratory setting is intended to simulate the agency environment. The equipment in the Simulation Center is quite expensive and must be treated with respect. It is expected that behavior in the Simulation Center and Skills laboratory will reflect an understanding of proper behavior in the clinical setting. The following rules apply to individuals or groups using the Simulation Center and Skills laboratory:

1. Food and drink are NOT allowed in the Simulation Center and Skills Laboratory.
2. Students must wear their CSUB identification badge and adhere to CSUB Dress Code when in the skills lab. White laboratory coats are to be worn during assigned clinical simulation time.
3. Students are not allowed in the Simulation Center and Skills Laboratory without faculty supervision, unless given express consent by the Skills Lab Coordinator.
4. Replace chairs, bedside tables, mannequins, and beds and privacy curtains to their proper location. Students and faculty are to follow the cleaning policy set forth by the university.
5. Faculty must supervise the use of equipment in the locked cabinets. Students may use their own laboratory equipment on scheduled lab day and by pre-arrangement with faculty. All equipment must be returned to the area designated by the Skills Laboratory Coordinator at the end of each laboratory session. Faculty will supervise the return of equipment and ensure the laboratory is locked after use.
6. The simulation equipment (mannequins, models) requires gentle handling and students must be supervised by a faculty member. The Computerized Patient Simulators are to be handled by trained faculty ONLY.

7. Sitting or lying on the beds is prohibited, except for specified simulation laboratory experiences. Never wear shoes while in or on the beds. The beds are not intended for naps. If you are ill, go to the Student Health Center.
8. Report any safety or equipment problems to the faculty, Skills Lab Coordinator or the nursing office.
9. Simulation exercises demand the same privacy as would be accorded a patient in the Agency.
10. Trash and used disposable equipment should be placed in the proper containers before you leave. Contaminated equipment should be disposed or cleaned according to policies or manufacturers' guidelines.
11. Simulation Center and Skills Laboratory equipment and supplies are for use only for clinical lab course work only.
12. Syringes and needles can only be used in the skills laboratory or lecture room when faculty is available to supervise. Syringes and needles cannot be signed out or taken out of the nursing building by students. The supervising faculty is responsible for the correct disposal of used syringes and needles.
13. Faculty and students must adhere to any other policies related to Simulation set forth by the Department of Nursing and CSUB.

Revised 01/2010, Revised GPC 11/2016,
09/2018, 9/2020

V. Nursing Computer Lab Guidelines

1. The Nursing Computer lab is reserved for students currently enrolled in the nursing program.
2. Students must wear their current CSUB ID badge while using the computers.
3. No programs are to be downloaded or installed. The computer background screen, screen saver, desktop icons, links, etc. should not be altered or deleted.
4. Students must provide their own paper to use the printer.
5. Students must be working on nursing related work to use the computers; no Facebook, instant messaging, blogging, twittering, etc.
6. No food or drink is permitted near the computers. The tables in the middle of the room have been designated for that purpose.
7. Do not try and fix the printer if there is a problem. Report all problems to one of the department administrative staff.
8. Viewing pornography or any other inappropriate images or text will not be tolerated and you will be asked to leave. Downloading illegal material is a violation of University policies and will result in student discipline.
9. A stapler, three-hole punch, and a pencil sharpener have been placed in the lab for your convenience. Please treat these items with respect, as the Nursing Department budget does not allow for replacement of these items. Please do not ask to use the department equipment. DO report to one of the administrative staff if the stapler is out of staples.
10. Children are not allowed in the computer lab.

Students must demonstrate professional behavior and respect for the study environment. Students who are socializing or disrupting the environment will be asked to leave.

11/1996

W. Student Representation on Departmental Committees

Each nursing class will identify a representative to attend the Nursing Department Committee meetings, including Faculty Organization, Graduate Program Committee, Program Evaluation Committee, and Recruitment, Outreach, Scholarships, and Awards Committee. It is the responsibility of the student representative to attend or send an alternate, and to report back to the nursing students. It is also the responsibility of the students to provide the elected representatives with input so that they may adequately represent their colleagues at the meetings. Topics to be discussed at meetings must be addressed with the Departmental Committee Chair prior to the meeting for the item to be placed on the agenda.

X. Student Feedback

Student evaluation of specific courses, faculty, and level objectives is sought at many points during the nursing program as part of the Program Evaluation Plan. Course, Level and Program evaluations are submitted using surveys through Qualtrics. In addition, evaluation of the faculty member's teaching is done in a formal manner through the SOCI (Student Opinionnaire on Courses and Instruction). Students in each regular class offered at the University are asked to fill in questionnaires which report their assessment of the course content and the instruction in that class. These SOCIs are used both by individual faculty members and the University administration in a continuing effort to ensure that California State University, Bakersfield's instructional program is as effective as possible. The SOCI is administered during the last week of the semester prior to finals.

Y. Lines of Communication

If students are having academic difficulty or other problems in any course, they should first ask their instructor for help to resolve the problem. If this does not result in resolution of the problem, the student needs to seek the assistance of the Team Leader for the course. If the difficulty and/or problems still persist, the student may then seek the assistance of the Graduate Program Director for problem resolution. If there is still a problem, the student should then seek the help of the Department of Nursing Chair.

Any unresolved issues can be referred to the CSUB ombudsman:

<http://www.csub.edu/counselingcenter/ombudsman/index.html>

Section IV. Written Work Policies & Culminating Activity

I. Nursing Department Policy for Written Assignments

- A. All formal papers must be typed.
- B. Students should demonstrate mastery of professional writing by using correct punctuation, spelling, and grammar.
- C. The Department of Nursing has adopted the *Publication Manual of the American Psychological Association (APA)* (7th ed.) as the standard for all written work. The *APA Manual* is available for purchase from the university bookstore or online, and is a required textbook for all courses.
- D. Students are to use the *APA Manual* guidelines for grammar, format, style, citations, and references.
- E. Students are expected to turn in original work. Papers may be required to be submitted using plagiarism detection software. If inadequate referencing is identified, it may be considered plagiarism. A plagiarism or a course warning will be issued. A copy will be placed in the student's file.
 - 1. Penalties can range from point deductions on the assignment to course failure depending on the severity of the violation.
 - 2. Plagiarism is a violation of the [CSUB Academic Integrity Policy](#) and may also be reported to the [Office of Student Rights and Responsibilities](#) for further action.

II. Nursing Department Policy on APA *Publication Manual*

- A. The CSUB Department of Nursing requires that student papers, thesis, and reports with citations be prepared according to the American Psychological Association *Publication Manual*. Students are required to use the latest version of the manual. The Department of Nursing and individual faculty members will advise students of any accepted variations from the manual.
- B. Reference:
American Psychological Association (APA). (2020). *Publication manual of the American Psychological Association* (7th ed.). Washington, DC: Author.
- C. Sample Papers
 - 1. **Student Paper**
 - a. Located on page 61 in the 7th edition of the *APA Manual*
 - b. Required elements
 - i. A title page (Section 2.3-6)
 - ii. Page numbers (Section 2.18)
 - iii. Text (Section 2.11)
 - iv. A reference list (Section 2.12)
 - v. If tables or figures are used, see Chapter 7

2. **Professional Paper** (thesis, manuscript)
 - a. Located on page 50 in the 7th edition of the *APA Manual*
 - b. Required elements
 - i. A title page (Section 2.3-4)
 - ii. Author names and affiliations (Section 2.5-6)
 - iii. Author notes (Section 2.7) and keywords (Section 2.10)
 - iv. Page headers with a running head and page numbers (section 2.8 and 2.18)
 - v. An abstract (Section 2.9)
 - vi. Text (Section 2.11)
 - vii. A reference list (Section 2.12)
 - viii. If tables or figures are used, see Chapter 7

D. Technical and Writing Errors

1. Carefully proofread for correct use of:
 - a. it's and its
 - b. there, their, and they're
 - c. numbering, underlining, and lines in tables and figures
 - d. "%" symbol or word "percent"
 - e. same verb tense within a sentence and whenever possible within a paragraph
 - f. past tense for results based on completed studies
2. Avoid:
 - a. single sentence paragraphs or very long paragraphs
 - b. overuse of the same word in a sentence or throughout a paragraph
 - c. use of first person unless it is necessary and permitted by instructor
 - d. use of a numerical figure when a number starts a sentence
 - e. use of a citation in the paper that is not listed on the reference list
 - f. inclusion of an entry on the reference list that is not cited in the paper

Additional Help

On campus resources:

Students needing tutorial assistance can contact the Academic Advancement Center or Writing Resource Center at <https://www.csub.edu/wrc/> or (661) 654-6411.

Internet resources:

https://apastyle.apa.org/?_ga=2.97885911.971142196.1595703965-98881196.1592880328
<https://apastyle.apa.org/style-grammar-guidelines/paper-format/sample-papers>
<https://apastyle.apa.org/instructional-aids/reference-guide.pdf>
https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_formatting_and_style_guide/general_format.html
<https://academicguides.waldenu.edu/writingcenter/apa>
<https://library.frontier.edu/infoguides/apa>
<https://nu.libguides.com/citations/APA>

Revised 8/2020

Academic Violation Process

The principles of truth and integrity are recognized as fundamental to a community of teachers and scholars. Students are expected to do all work assigned to them without unauthorized assistance and without giving unauthorized assistance. Students must adhere to the University's Academic Integrity Policy found in the current online CSUB Catalog and at the [Office of Student Rights and Responsibilities](#) (OSRR) website. Academic dishonesty is a broad category of actions that involve fraud and deception to improve a grade or obtain course credit. There are certain forms of conduct that violate the University's policy of academic integrity. These forms include but are not limited to:

Cheating: a broad category of actions that involve fraud and deception to improve a grade or obtain course credit e.g. submission of the same paper, or essentially the same paper for credit in a different course or intentionally utilizing someone else's work.

Plagiarism: consists of the misuse of publications or unpublished works of another by claiming them as one's own. Plagiarism may consist of handing in someone else's work as one's own, copying or purchasing a pre-written composition and claiming it as one's own, using paragraphs, sentences, phrases, words or ideas written by another without giving appropriate citation, or using data and/or statistics compiled by another without giving appropriate citation. Reuse of student's own work is also considered plagiarism.

Fabrication: intentional falsification of information on class assignments or presentations.

Unauthorized Collaboration: means working with others without the specific permission of the instructor on assignments that will be submitted for a grade. This rule applies to in-class or take-home tests, papers, labs, or homework assignments. Student may not collaborate without faculty authorization.

Failure to Collaborate: Not contributing to a group assignment/project.

In the Department of Nursing, Academic Integrity Violations will be handled in the following ways:

1. **Minor violations** will be documented using the "Notification of Violation of Academic Policies" form. A student who violates the academic integrity policy can receive a deduction in points or an assignment grade of zero. A copy of the notification will be placed in the student file along with a copy of the paper and/or assignment. The second minor violation in subsequent assignments and/or courses will be treated as a major violation and referred to the OSRR.
2. **Major violations** will be documented using the "Notification of Violation of Academic Policies" and "Academic Integrity Violation Reporting" forms. A copy of the notification will be placed in the student file along with a copy of the paper and/or assignment. These

violations will be reported to the OSRR for adjudication to determine additional disciplinary sanctions.

12/2010 DW/MK; 09/2011, Revised 9/2020

Section V. FNP Program Policies & Information

A. Course Requirements for the Master of Science in Nursing (MSN) Degree Program

Core Courses

N5200 Advanced Health Assessment (Theory)
N5201 Advanced Health Assessment (Clinical)
N5220 Theoretical Foundations of Nursing
N5240 Human Diversity & Health Care Policy
N5250 Transformational Leadership and APRN Role Development
N6260 Advanced Nursing Research
N6290 Culminating Experience: Comprehensive Examination
N6300 Pathophysiology for Advanced Practice Nurses
N6310 Pharmacotherapeutics for Advanced Practice Nurses

Specialty Courses

Family Nurse Practitioner Track

N6320 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Theory)
N6321 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Clinical)
N6330 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Theory)
N6331 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Clinical)
N6340 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Theory)
N6341 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Clinical)
N6351 Advanced Practice Practicum (Clinical)

Elective Course

N5230 Educational Principles and Methodology Applied to Nursing (Elective)

B. Course Descriptions

NURS 5200 Advanced Health Assessment (Theory) (2) Advanced knowledge and skills needed for performing comprehensive health assessments will be explored. Emphasis on analysis and synthesis of all relevant physiological, pathophysiological, psychopathological as well as physical and psychosocial data. Individualized, comprehensive, and holistic protocols for client care management based on best available evidence will be developed. Focus on the identification of health risk factors, health promotion, and disease prevention. Prerequisite: Senior standing in BSN program or Post-Baccalaureate status with permission of instructor, or Admission to the MSN Program. Corequisite: NURS 5201.

NURS 5201 Advanced Health Assessment (Clinical) (1) Comprehensive health histories for individuals of all ages will be conducted using advanced knowledge and skills learned in the theory class. Data acquired through interviewing, physical assessment, and clinical laboratory tests will be used to assess the health status of the individual, identify client problems, formulate, implement, and evaluate individualized nursing care plans at an advanced level of nursing practice. Following a comprehensive health appraisal, students will plan for individualized client care management including health counseling, health education, and referral. Prerequisite: Senior standing in BSN program or Post-Baccalaureate status with permission of instructor, or Admission to the MSN Program. Corequisite: NURS 5200.

NURS 5220 Theoretical Foundations of Nursing (2) A seminar dealing with the relationships between philosophy, theory, research, and practice in nursing. An historical analysis of nursing's professional progress to its present theoretical state provides the background for analysis, discussion, and evaluation of different nursing theories. Included will be analysis of relevant mid-range theories from a wide range of disciplines. Prerequisite: Senior standing in BSN program or Post-Baccalaureate status with permission of instructor, or Admission to the MSN Program.

NURS 5230 Educational Principles and Methodology Applied to Nursing (2) The focus of the course is on the use of a variety of teaching skills and strategies to help nursing staff, students, and other health care workers establish policies and standards. These skills enable the advanced practice nurse to influence attitudes and understanding about nursing health care. Students in this course develop and present programs or classes for nursing staff development, education of nursing students, or programs of health education for consumers and other health care providers. Prerequisite: Senior standing in BSN program or Post-Baccalaureate status with permission of instructor, or Admission to the MSN Program.

NURS 5240 Human Diversity and Health Care Policy (3) Exploration of health care policy, organization and financing of health care systems in order to provide the basis for leadership in the planning of provision of quality cost-effective care. Includes as an essential foundation for the delivery of health care services: examination of legislation, regulation, distributive justice and the social determinants of health that cause (or contribute to) health disparities in vulnerable populations; comparison of various care delivery systems; exploration of various modes of health care financing; consideration of culture, ecology, and epidemiology. Prerequisite: Senior standing in BSN program or Post Baccalaureate status with permission of instructor, or Admission to the MSN Program.

NURS 5250 Transformational Leadership and APRN Role Development (3) Role development in advanced practice nursing from historical, economic, political, legal, and ethical perspectives. Discussion of role definition, transition, ambiguity and development. Concepts of collegial practice, inter-professional and intra-professional relationships, legal issues, healthcare policy, organizations, and financing will be emphasized. Prerequisite: Senior standing in BSN program or Post Baccalaureate status with permission of instructor, or Admission to the MSN Program.

NURS 6260 Advanced Nursing Research (2) In-depth study of selected research strategies commonly used in nursing such as clinical case study, experimental, quasi-experimental, historical, ethnographic, ex-post-facto, and survey methods. Identification and clarification of nursing problem statements and related hypotheses. Admission to the MSN Program and successful completion of the Graduate Writing Assessment Requirement (GWAR) of the university.

NURS 6290 Culminating Experience: Comprehensive Examination (3) The comprehensive examination will allow the student to demonstrate mastery of the subject matter including: client assessment, diagnostic reasoning, and clinical reasoning in developing a treatment and management plan. The comprehensive examination will include a multiple-choice examination

preparing the student for the national certification examination for the Family Nurse Practitioner. The comprehensive examination will include a written component that will incorporate nursing theory, nursing leadership, nursing research, educational principles, and patient care management. Prerequisites: Candidacy status in the MSN program. Completion of all MSN/FNP courses except NURS 6351.

NURS 6300 Pathophysiology for Advanced Practice Nurses (3) Physiology based course focusing on the pathogenesis of human disease as a consequence of abnormalities and alterations of normal physiologic function based on a cellular and systems-oriented framework. Regulatory and compensatory mechanisms that aim at maintaining and restoring homeostasis in response to changes in the internal and external environment are explored. Synthesis of current research regarding pathophysiological patterns and its application to primary care are emphasized. Prerequisite: Admission to the MSN Program.

NURS 6310 Pharmacotherapeutics for Advanced Practice Nurses (3) Designed to meet the California Board of Registered Nursing requirement for nurse practitioners to furnish medications and/or devices commonly used in the diagnosis, prevention, and treatment of health care conditions affecting patients across the life span, pursuant to the Business and Professions Code including utilizing standardized procedures, including controlled substances (Schedule II-V) and risk of addiction associated with their use. Content of focused discussion and testing will include, but not limited to: pharmacokinetics, pharmacodynamics, pharmacotherapeutic management; recognizing and managing side effects; interactions with medications, foods, and dietary supplements; ethical and legal issues related to the furnishing process, including furnishing controlled substance. Emphasis is on achieving optimal drug therapy outcomes as well as preparation for application for a furnishing license.

NURS 6320 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Theory) (3) The roles of the Advanced Practice Nurse in the primary health care management of individuals and families across the lifespan are introduced. Disease prevention, and health and wellness care in rural, urban, and multi-ethnic and culturally diverse populations across the lifespan are emphasized. Theoretical models of family, aggregate, and community systems as they relate to health promotion, risk reduction, and health restoration are explored. Prerequisites: NURS 5200, 5201, 6300, 6310. Classified status in the MSN Program and the FNP option. Corequisite: NURS 6321.

NURS 6321 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Clinical) (3) Development and utilization of disease protocols for intervention and management are emphasized. Emphasis is placed on data gathering, conducting routine health histories, physical examinations, and health promotion/risk reduction activities in rural, urban, and multi-ethnic and culturally diverse populations across life span. Prerequisites: NURS 5200, 5201, 6300, 6310. Classified status in the MSN Program and the FNP option. Corequisite: NURS 6320.

NURS 6330 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Theory) (3) Family Nurse Practitioner concepts in family assessment, diagnosis, and management in primary care and community based settings are explored. The diagnosis, management, and evaluation of treatment outcomes of common health problems to families and

individuals across lifespan are examined. Care of individuals and families across the lifespan with acute self-limiting illness and chronic illness are emphasized. Prerequisites: NURS 6320, 6321. Classified status in the MSN Program and the FNP option. Corequisite: NURS 6331.

NURS 6331 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Clinical) (2) Application of Family Nurse Practitioner concepts and skills in assessment, diagnosis, and management in primary care and community based settings. Pathophysiological and pharmacological concepts are applied in clinical decision making process. Supervised clinical practice emphasizes on using best evidence to formulate diagnosis and management plan for the common acute self-limiting illness and chronic illness in individuals and families across lifespan with the guidance of preceptors. Prerequisites: NURS 6320, 6321. Classified status in the MSN Program and the FNP option. Corequisite: NURS 6330.

NURS 6340 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Theory) (3) Family Nurse Practitioner concepts in family assessment, diagnosis, and management in primary care and community based settings are explored. The diagnosis, management, and evaluation of treatment outcomes of common health care problems to families and individuals across lifespan are examined. Care of individuals and families across the lifespan with complex acute illness, chronic multi-system illness, and psychological/behavioral problems are discussed. The theoretical base for provision of care to older adults is emphasized. Prerequisites: NURS 6330, 6331. Candidacy status in the MSN Program and the FNP option. Corequisite: NURS 6341.

NURS 6341 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Clinical) (4) Application of Family Nurse Practitioner concepts and skills in assessment, diagnosis, and management in primary care and community based settings. Pathophysiological, pharmacological, psychosocial concepts are applied in clinical decision making process. Supervised clinical practice emphasizes on using best evidence to formulate diagnosis and management plan for complex acute illness and chronic multisystem illness in individuals and families across lifespan with the guidance of preceptors. Prerequisites: NURS 6330, 6331. Candidacy status in the MSN Program and the FNP option. Corequisite: NURS 6340.

NURS 6351 Advanced Practice Practicum (4) Supervised nurse practitioner role development practice with a preceptor and faculty guidance in a primary care and community-based setting. Problem solving strategies as they apply to multiethnic clients and culturally diverse client/systems are implemented through the utilization of theoretical models and research across practice settings. Emphasis is placed on advanced competency in the formation and evaluation of comprehensive evidence based plans of care for complex and multisystem disorders. Extensive clinical experiences prepare the student to assume the role and professional responsibilities of the entry level FNP. Prerequisites: NURS 6341. Candidacy status in the MSN Program and the FNP option.

C. Standards Used in Developing the Family Nurse Practitioner Course Content:

1. *California Code of Regulations, Title 16, Section 1484: Nurse Practitioner Programs* (Board of Registered Nursing [BRN], updated 2019). BRN approval is required in order for the FNP program to operate in the State of California.
2. *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs* (Commission on Collegiate Nursing Education [CCNE],-2018). CCNE accreditation is required in order for FNP graduates to become licensed, certified, and eligible for reimbursement.
3. *Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force [NTF] on Quality Nurse Practitioner Education, 2016). CCNE accreditation requires demonstration that the *NTF Criteria* have been met.
4. *The Essentials of Master's Education in Nursing* (American Association of Colleges of Nursing [AACN], 2011). CCNE accreditation requires demonstration that the *Essentials* have been met.
5. *Population-Focused Nurse Practitioner Competencies: Family/Across the Lifespan* (National Organization of Nurse Practitioner Faculties (NONPF, 2013).
6. *Nurse Practitioner Core Competencies Content* (National Organization of Nurse Practitioner Faculties (NONPF, 2017).

The NONPF (2013 & 2017) guidelines address the nine domains of curricular content:

1. Scientific Foundation Competencies
2. Leadership Competencies
3. Quality Competencies
4. Practice Inquiry Competencies
5. Technology and Information Literacy Competencies
6. Policy Competencies
7. Health Delivery System Competencies
8. Ethics Competencies
9. Independent Practice Competencies

Available at:

<https://www.nonpf.org/page/14>

Revised Graduate Program Committee 2018, 2020

D. List of Courses and Units for FNP Option

Semester	Course	Units
Fall		
N5200	Advanced Health Assessment (Theory) *	2
N5201	Advanced Health Assessment (Clinical) *	1
N6300	Pathophysiology for Advanced Practice Nurses *	3
N6310	Pharmacotherapeutics for Advanced Practice Nurses *	3
		9
Spring		
N5220	Theoretical Foundations of Nursing *	2
N6260	Advanced Nursing Research *	2
N6320	Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Theory)	3
N6321	Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Clinical)	3
		10
Summer		
N5240	Human Diversity & Health Care Policy *	3
N6330	Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Theory)	3
N6331	Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Clinical)	2
		8
Fall		
N5250	Transformational Leadership and APRN Role Development *	3
N6340	Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Theory)	3
N6341	Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Clinical)	4
		10
Spring		
N5230	Educational Principles and Methodology Applied to Nursing * (elective)	2
N6290	Culminating Experience: Comprehensive Examination	3
N6351	Advanced Practice Practicum (Clinical)	4
		7 (9)
	Total Units	44 (46 w/N5230)
	Clinical Experience (Direct Patient Care) Minimum Requirements: BRN 12 units CCNE 500 hours	13 units (585 hours)
	*MSN Core Courses	

E. Clinical Course Timetable

Semester 1	Semester 2	Semester 3
Fall First Year Students attend classes at CSUB, including 3 hours per week of clinical laboratory time.	Spring First Year Students attend classes at CSUB and spend approximately 135 hours with preceptor.	Summer Session Students attend classes at CSUB and spend approximately 90 hours with preceptor.
Semester 4	Semester 5	
Fall Second Year Students attend classes at CSUB and spend approximately 180 hours with preceptor.	Spring Second Year Students attend classes at CSUB and spend approximately 180 hours per week with preceptor.	

F. Guidelines for Student Progress

End of First Semester (N5201)

In addition to the successful completion of theory requirements, the student will:

1. Complete an adequate screening physical exam.
2. Use their instruments properly.
3. Demonstrate necessary interviewing and communication skills for patient encounters.
4. Consider the patients' growth and development as part of assessing, planning and intervening.
5. Develop basic procedural skills commonly performed by nurse practitioners in primary care setting.

End of Second Semester (N6321 - First Clinical Rotation)

The emphasis in this Semester will be on data gathering, conducting routine H & P's, and health promotion/risk reduction activities. The student will:

1. Perform a thorough and complete screening history and physical, including developmental health history, psycho-social assessment.
2. Perform a focused history and physical on the common "walk-in" patient problems and report the findings to the preceptor. In doing focused histories and physicals, it is expected that the student will cover at least what is needed, but probably make the error of gathering too much data.
3. Demonstrate basic communications skills including active listening, acknowledging concerns of the patients, responding and using appropriate language, and avoiding medical jargon.

4. Recall and elicit through interviewing a review of systems for major organ systems. For example, if a patient comes in complaining of a respiratory complaint, the student will be able to state what the basic respiratory ROS he or she would obtain.
5. Develop and use diverse protocols as a basis for intervention and management of common health problems.
6. Plan appropriate health promotion/discuss prevention interventions. For example, if a patient has a history of smoking, the student will be able to encourage smoke cessation.
7. Assess family structure and support mechanisms as well as identify community resources.
8. Demonstrate a beginning level in interpretational laboratory findings.
9. Evaluate the assessment data to provide a preliminary diagnosis of health and developmental problems.
10. Be aware of their limitations. They have to be able to acknowledge areas of limited knowledge and say: "I don't know." The corollary of this is that they request appropriate preceptor help depending on the clinical problem at hand.
11. Continue to develop basic procedural skills commonly performed by nurse practitioners in primary care setting.

End of Third Semester (N6331)

Emphasis this semester will be on health promotion, disease prevention and management of patients with acute self-limiting illnesses across the life span. The student will start incorporating referrals to other health care professionals in their plan of care and understand the implications of this dimension in terms of coordinating primary care. The student will:

1. Collect a focused data base on common self-limiting and acute health problems including: bronchitis, otitis media, conjunctivitis, pharyngitis, chest pain, etc.
2. Make accurate assessments and differential diagnoses for common acute problems seen in the primary care setting.
3. Demonstrate basic counseling skills and improved communication skills with patients and their families.
4. Elicit and record developmental health history, psycho-social assessment and nutritional assessment.
5. Make consistent and accurate problem lists for all patients they see.
6. Order and interpret appropriate diagnostic tests, including radiology tests, and initiate and evaluate treatments, including pharmacotherapy, for health problems that have been covered in class or by standardized procedures.
7. Incorporate nutritional assessment and intervention into their assessment and management of chronic health problems.
8. Perform, when required, special physical exam techniques, for example, checking for jugular venous distension, testing for ascites, etc.

9. Provide an oral presentation to the preceptor or faculty member, in which the student gives pertinent positives and negatives for patient problems encountered.
10. Refine procedural skills commonly performed by nurse practitioners in primary care setting.

End of Fourth Semester (N6341)

Emphasis during this semester will be consolidation of prior skills, the management and follow up of patients with chronic diseases across the life span. The student will be expected to apply pathophysiological concepts to clinical practice and have knowledge of common differential diagnoses and develop sound assessments. The student will continue to emphasize risk reduction and health promotion activities. The student will:

1. Collect a focused data base on common chronic diseases, including: hypertension, diabetes, COPD, congestive heart failure, rheumatoid arthritis, coronary artery disease, and cerebral vascular disease.
2. Make accurate assessments and differential diagnoses for common chronic health problems.
3. Evaluate patients with common chronic diseases and, with preceptor consultation recommend appropriate pharmacological and non-pharmacological interventions. Provide appropriate follow up care.
4. Develop greater depth in determining the need to order laboratory tests and in interpreting those tests.
5. Refine oral presentation skills, in which the student gives pertinent positives and negatives for patient problems encountered in an organized and concise fashion.
6. Initiate and provide emergency treatments. For example, if a patient comes in with an allergic reaction, the student will provide initial treatment.
7. Continue to refine procedural skills commonly performed by nurse practitioners in primary care setting.

End of Fifth Semester (N6351)

Emphasis this Semester will be on the refinement of clinical skills. The student should be able to collect a focused database on patients with chronic multi-system disease, for example, COPD with underlying coronary artery disease, poorly controlled hypertension with underlying diabetes mellitus, etc. Any deficiency in depth or breadth of clinical experiences will be corrected by the end of the semester. The student will:

1. Compose condensed H & P notes and appropriate, but brief, SOAP notes.
2. Assess, diagnose, and treat common problems with some level of preceptor consultation.
3. Complete focused history and physicals, limited to the problem.
4. Evaluate patients with common chronic disease and acute self-limiting illness across the life span.

5. Develop greater depth in laboratory interpretation, Pharmacotherapeutics, and nutrition.
6. Refer and consult with other health professionals and specialists.
7. Complete any outstanding requirements for graduation.
8. Demonstrate efficiency in office practice.
9. Demonstrate patient follow up skills, especially regarding patients with chronic multi-system disease.
10. Focus on the professional aspects of the nurse practitioner's role, including legal and ethical implications of advanced practice.

Note to Preceptors: The student is responsible for working with you and your office staff in choosing appropriate patients to meet these requirements. The number of patients seen will depend upon the complexity of the patients' problems and the students' familiarity with the condition. Students are expected to be thorough and complete. Student productivity is expected to increase as the student progresses in the program. Typically, students see an average of 3-4 patients per day during their first clinical rotation (N6321), and 5-6 patients per day in their second semester (N6331) and gradually increasing in the subsequent semesters (N6341 and N6351).

G. Typhon Patient Log Records

Typhon is a clinical data management system that will aide in the student clinical experience and job search after graduation. Students pay a one-time fee to register for Typhon and can use the system through the clinical courses and after graduation. Typhon will be used to log clinical experiences, create an electronic student portfolio, manage external documents (resume, clinical schedule), generate reports of clinical experiences, administer evaluations, and store site and preceptor information. This electronic logging system becomes part of the student's permanent file and substantiates the Director's recommendation of the student in applying for certification upon graduation.

Account Information

- You will receive an email from the Typhon system with your account information. You must set up your account within 24 hours of receiving this email.
- The first time you log in, you will be prompted to pay the site fee and complete your account information. At this time, change your password from the default as well. You will also need to accept the end-user license agreement.
- When completing your account information, you will need to select "Sample, Preceptor" and "Sample Clinical Site" as the "Required Defaults" the first time so you are able to move to the main menu. Once you get to the main menu you will be able to add your preceptor and clinical site (this is explained in section "Adding a Preceptor/Clinical Site") and go back in and change your preceptor and clinical site defaults.

Adding a Preceptor/Clinical Site

- Please note that you must submit a separate request for your preceptor and clinical site.

- Go to “Setup Default Choices” under “Your Account” on the main menu. Under the “Required Defaults” you will notice a link to the side of the preceptor and clinical site drop down menus that says “REQUEST ADDITION.” Click this link and enter in the required information.
- Requests are approved in 1-2 business days. Once the addition is verified and approved, you will receive an email notifying you that your preceptor and/or clinical site have been added to the directory. At this point you will be able to select the preceptor/clinical site as your default setting or when inputting a case log.
- Note: you will need the preceptor/clinical site contact information including an address, phone number, and email address. Preceptor evaluation links are sent to the email address that you provide, so please ensure that the email address that you submit is your preceptor’s preferred email address.

Entering a Case Log

- Go to “Add New Case Log” from the main menu. Input the “Date of Encounter” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Then click “Save Data.”
- Input all relevant and required information and then click “Save Data” located in the center of the screen.
- At any point you can delete the case. That option is located in the bottom right hand corner. You can also save the case and begin a new one or go to the next case in your case log list by clicking on those options in the bottom left hand corner.

Reviewing Faculty Case Log Comments

- Go to “Case Log Highlights (by Day/Week/Month)” under “Case Log Reports” on the main menu. Input the “Date of Case Logs” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. You may also select the option to see the week, month, or daily totals incorporating that date by checking the corresponding box below. Then click “Apply Filters.” Any CFA comments will appear in the first column in red next to the case log number.

Entering a Time Log

- Go to “My Time Logs” from the main menu. Click on “Add a Daily Time Log” and input the “Date of Time Log” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Make sure your “Course” is listed correctly, then click “Save Data.”
- Input the number of hours and/or minutes for your clinical shift that day and click “Save Data.”
- You may also check the box “Display patient, consult & conference time” if you would like those totals made available on the screen. If you want to see your shift time parallel to your patient time, go to “My Hours by Course” under the “Other Activities & Reports” heading. You may also go into “My Time Logs” and select a date range and check the “Display patient, consult & conference time,” box in the top left corner, then hit "Apply Filters."

Completing an Evaluation

- Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Click on the appropriate link to complete the evaluation. Make sure you hit the “Submit Evaluation” button when finished.

Viewing Evaluations Completed About You

- Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Evaluations completed about you are listed on the bottom portion of the page.

Uploading External Documents

- Go to “My External Documents” under “Other Activities & Reports” on the main menu. Then click “Add a Document.”
- When uploading documents for your CFA to view, please select “Word” or “PDF” for category. CFAs are not able to view documents with the category of “My Portfolio.”

Missing Information

- The “Missing Information” link on the main menu will have a flashing red arrow next to it if any of your case logs are incomplete. You would simply click on “Missing Information,” view the entry and input the required data.

Instructions & Video Tutorials

- Helpful tutorials related to your use of Typhon can be accessed under the “Help” section on the main menu. Please view these tutorials prior to starting a clinical course.

Clinical logs are due each week of clinical. Please refer to your course syllabus for specific due date information.

Submission of a clinical log for each patient encounter into the Typhon system is a mandatory expectation of the clinical experience. Each student is responsible for maintaining his or her own clinical experience logs. *All* patient encounters, whether seen independently, in collaboration with preceptor, or as observation, require an entry into Typhon within 7 days of clinical encounter.

Every entry will include demographic information for the patient. You must select **three** patient encounters on each clinical day that will be entered as abbreviated SOAP notes. You may attach the SOAP notes as external documents (in Typhon). The remaining patient encounters will be entered as clinical summaries.

Weekly log entries should include the following components:

1. The following five pieces of demographic information must be entered for each patient encounter:
 - Demographic information (age, sex, race)

- Chief complaint
 - ICD- 10 Code
 - CPT code
 - Level of student participation
2. Enter 3 abbreviated SOAP notes for each clinical day.
- Select 3 patients from each clinical day and write an abbreviated SOAP note for each one as described below.
 - Each of the 3 entries for the day should be for a different chief complaint.
 - Do not repeat the same chief complaints each week. Aim to write a SOAP note that you have not entered into Typhon in the past. This will allow faculty to provide valuable feedback about content specific to that chief complaint/system.
 - Write notes about patient encounters that assist you in meeting your current course objectives.
 - For example:
 - N6321 focus on patient encounters that entailed annual physical exams, well visits and prevention, risk assessment, counseling (eg. Smoking cessation)
 - N6331 focus on patient encounters for chronic illness management
 - N6341 focus on patient encounters regarding acute illness management
 - N6351 focus on complex case presentations
 - Note: Clinical faculty may request that additional SOAP notes be written for each clinical day based on need to refine SOAP writing skills or to demonstrate other clinical competencies. This need will be determined on an individual basis.
3. For all other encounters, include a Clinical Summary containing 1-2 sentences in the “Clinical Notes” section detailing the following information:
- a. Presenting Complaint
 - b. Assessment(s)/Diagnosis(es) List
 - c. Plan

Example: 52 yo white female presented for low abdominal pain and dysuria. Dx with UTI, prescribed Bactrim DS 1 PO Q12 x 3 days.

Abbreviated SOAP Guidelines:

Documentation in clinical logs does *not* need to be as thorough as charting in patient’s medical record. Entries should be abbreviated summaries of the visit. Please add pertinent information related to the chief complaint, pertinent (+) and (-) ROS, VS, pertinent normal and abnormal findings on physical exam, assessment, and plan to include medications prescribed and teaching/counseling provided. These records are considered confidential, but should not overtly

identify a client by name.

Example abbreviated SOAP notes:

Example 1

S: 66 yo Asian female presents with c/o pain to R ear and sore throat for one week. Pt wears a hearing aid in R ear. Pain reported 5/10 and is constant. She notes that the pain is worse when she is wearing her hearing aid. Pt has taken Ibuprofen with some relief. No drainage from ear. No fever.

O: T 100.2 BP 128/72 P 82 WT 132 BMI 22 R auditory canal erythematous with mild edema. R TM cloudy. No bulging or retraction. R pinna tender to palpation. L ear pearly gray with positive light reflex. Oropharynx mildly erythematous. No uvular deviation. No exudates or lesions noted. CV – RRR without murmur, rubs, or gallops. Lungs CTA bilaterally without rales or ronchi.

A: Otitis Externa

P: Ciprodex gtts. 2 gtts to R ear BID for 7 days. Warm salt gargles. Discussed how to clean hearing aid. Call if condition worsens or persists.

Example 2

S: 50 yo BF presents of annual well woman exam. Patient denies pain, burning discharge. Post-menopausal. LMP 2 years ago. Sexually active. Married. Monogamous relationship. No children. Performs monthly SBE. Last mammogram – 15 months ago – WNL. Last pap 15 months ago – WNL. No history of abnormal pap.

O: T 98.2 P 74 BP 126/76 WT 142 BMI 25.6.

Neck: supple, FROM. Thyroid smooth nontender, no masses noted. CV: S1S2
RRR no M/R/C

Lungs: CTA

Abdomen: soft, nontender, positive bowel sounds, no HSM.

Breast exam: symmetrical, nontender with no visible lesions, retractions or dimpling. No nipple discharge. Tissue dense, no palpable masses or lymphadenopathy.

Pelvic exam:

External vulva: female hair distribution. no lesions, masses, or swelling noted. Vagina – mucosa pink and moist with rugae present. without odor or discharge noted. Cervix smooth, firm and mobile. No CMT. Pap obtained. ADNEXA nonpalpable and nontender. Rectal – Sphincter tone intact. No masses or lesions. HemoCCult negative.

A: Annual gyn exam

P: Await pap results and will call with abnormal results. Counseled regarding importance of health screening. Schedule mammogram and refer to GI for initial colonoscopy. Encouraged SBE monthly.

Example 3

S: 17 yo WM presents for physical and clearance for soccer. Pt states he generally feels well, but experiences dizziness when stands quickly. Symptoms present for 6 months. Denies acute illness in the past 6 year. PMH – strep multiple times as child and teen. PSH – neg Meds – occ Tylenol prn headache 1---2 times per month. FH – GF with lung CA. Immunizations --- no Gardasil/otherwise UTD. SOC – denies ETOH/drugs/sexual activity.

ROS – HEENT – Headache frontal and temporal. 1---2 times per month for 3 years. No aura. Otherwise ROS unremarkable.

O: BP recumbent 100/60 to standing 90/48. P 88. BMI 18.6. CV – RRR, S1 with split S2. No M/R/G. No bruits or JVD. Pulses 2+ and equal bilaterally. Cap refills

NL. Neuro: A and Ox3. Speech clear and gait coordinated. CN II---XII grossly intact. Romberg Negative. RAM coordinated. Sensory – light touch intact bilaterally. DTRs equal bilaterally all extremities. Strength 5/5 bilaterally.

EKG – abnormal T wave changes CMC/Chem 12 --- WNL

A: Vertigo with abnormal EKG

P: Schedule echocardiogram. RTC in one week to review. ER if experiencing palpitations, SOB, chest pain or pressure. Discuss need for Gardasil with patient/parents at f/u visit. Defer clearance for sports physical pending further work-up.

Example 4

S: 44 yo AA F presents with sx of vaginal itching, burning, and white d/c for 2 days. Pt. states she has had yeast infections in the past and this feels similar. No noted exacerbating or relieving factors. She has not tried any OTC treatments. Pt is married, monogamous relationship and is not concerned about the possibility of STDs. Denies fever, chills, blood in the urine, pelvic pain or tenderness. No medications. LMP 20 days ago.

O: T 98.8 P 82 BP 118/72 WT 131 BMI 23.36. GI – WNL. GU: external vulvovaginal, vaginal canal and cervix with white curd like d/c. No odor. Adenexa without masses or tenderness. CV – RRR. Lungs CTA. Abd – nontender, nondistended with BS x4.

A: Vaginitis

P: Culture of vagina and cervix obtained. Empirically treat for vaginal candidiasis with fluconazole 150 mg – 1 tab by mouth. Can repeat in 3 days if remains symptomatic. RTC if symptoms do not improve

H. Summary of Minimum Clinical Requirements for FNP Students

Introduction

The following information is intended to serve as a guide for the student's *selection of clinical experiences* required of the FNP courses: N6321, N6331, N6341, and N6351. It is recognized that patient problems encountered in the clinical setting do not always coincide with the order of gaining didactic knowledge through the scheduled classes and assignments. However, the student is expected to gather complete subjective and objective data, even though the student may not currently be able to *fully assess the problem or to develop a complete treatment plan*. At any given time, the student will be responsible for the diagnoses and treatment of only those conditions covered didactically in the FNP courses.

Each patient seen will be recorded on the Typhon Patient Log Record. Level of responsibility (LOR) is to be recorded along with other pertinent information. Patients designated with a LOR of 1 (observed care) will count as clinical time, but not as a Minimal Clinical Requirement. Only patients seen in categories 2-4 (level of responsibility) may be counted toward the MCR. In addition, only the problems addressed by the student should be recorded, even though the patient may have additional problems on their problem list. All problems addressed by the student should be recorded each time the patient is seen. Typhon Patient Log Records are reviewed on a weekly basis by faculty. Students must tally their clinical hours information on a weekly basis on the *Clinical Hours Log* and provide a copy to faculty and preceptor. This will assure faculty and preceptor alike that the student is making timely progress.

Level of Responsibility (LOR)

- LEVEL 1 Observation Only: Student observes provider or "assists" peripherally in procedure. Utilized when student observes surgery or other procedures without scrubbing. Can be recorded on Patient Log Records but not MCRs.

- LEVEL 2 Major Consultation: Preceptor rechecks almost all of history and or exam and provides most of the assessment and plan. Utilized for students very early in the Program or for a patient with very complex or potentially life-threatening problems.

- LEVEL 3 Dual Responsibility: Approximately half FNP student responsibility; utilized for beginning students or complex patient problems.

- LEVEL 4 Complete Encounter: The student sees a patient without preceptor consultation during the patient visit. However, the student must briefly present the patient's case to the preceptor prior to the patient leaving.

OR

Brief Consultation: The student utilizes the preceptor for less than 5 minutes, usually for presentation or to confirm positive exam findings. The student is responsible for assessment and plan with preceptor approval.

IMPORTANT:

Students are expected to write the progress note on the chart for Levels 2-4, although preceptor may write an additional note for patients who require consultation for potentially life-threatening problems. This is a legal requirement.

Minimum Clinical Requirements (MCR)

The impetus for using the MCR is twofold:

1. Provide necessary record keeping of depth and breadth of nurse practitioner student experiences as mandated by the Board of Registered Nursing.
2. Assure a broad foundation of clinical experience that is oriented to primary health care of families.

MINIMUM CLINICAL REQUIREMENTS For Family Nurse Practitioner Students

A total of 585 hours of clinical practice is required in the Family Nurse Practitioner program. FNP student must complete a minimum of

- 400 hours in primary care settings,
- 120 hours with a nurse practitioner, and a minimum of
- 120 hours in state or nationally designated medically under-served areas or rural areas.

Definitions of primary care settings, medically underserved areas and rural areas can be found in Health Resources and Services Administration (HRSA) Workforce Glossary. <https://bhw.hrsa.gov/grants/resourcecenter/glossary>

A balance in clinical experience is important. The desirable distribution of adult health, women's health and child health should be 60%, 20% and 20%.

The following detailed the minimum clinical encounters required in the program. Encounter refers to one client. The detail of requirements can be counted in two areas or twice in the same area but not more than twice.

Encounter refers to one client. The detail of requirements can be counted in two areas or twice in the same area but not more than twice

Pediatrics (less than 18 years old):

- a. 10 or more encounters. These count for other disease categories as well.
- b. 5 or more encounters in well baby/child visits or sports physicals.

Respiratory – ENT: 20 or more encounters, including but not limited to COPD, asthma, rhinitis, bronchitis, pneumonia, otitis media, otitis externa, or sinusitis.

Eye: 5 or more encounters including but not limited to performing fundoscopic examination, conjunctivitis, foreign body or wood lamp.

Cardiovascular: 20 or more encounters including but not limited to congestive heart failure chest pain, valve disease, hypertension, or CAD.

GI: 15 or more encounters including but not limited to abdominal pain, hepatitis, duodenal ulcer, GERD, appendicitis, pancreatitis, biliary disease or other acute abdomen.

Musculo-Skeletal: 10 or more encounters, including but not limited to extremity injury, joint disease, or low back pain.

Neurology: 10 or more encounters including but not limited to headache, vertigo, CVA/TIA, head trauma, movement or sensory disorders.

Endocrine: 10 or more encounters including but not limited to diabetes, thyroid disorders, parathyroid disorders, hypothalamus or pituitary disorders, or amenorrhea.

GU: 10 or more encounters including but not limited to prostate exams, urinary tract infection, BPH, renal stone, or pyelonephritis.

Dermatology: 10 or more encounters including but not limited to acne, eczema/atopic dermatitis, contact dermatitis, actinic keratosis, tinea/candidiasis, cellulitis or abscess.

OB/GYN: 10 or more encounters, including but not limited to PAP Smears, pelvic exam, STD, contraception, obstetric care, intrapartum or postpartum care.

Psychiatry: 10 encounters including but not limited to situational/individual/family crises, anxiety, depression, bipolar, schizophrenia, drug/alcohol dependency or abuse.

Approved by GPC 2020

Student Responsibilities:

The student is responsible for indicating the level of responsibility for each patient encounter:

1. Student practitioner observes care given by preceptor.
2. Extensive preceptor consultation on any/all aspects of the case. Less than shared responsibility.
3. Equal responsibility between student nurse practitioner and preceptor with some review of history and/or physical examination.
4. Primary responsibility for patient encounter (>50%).

Patient encounters in category 1 will not be counted in these clinical requirements. Only patient contacts in categories 2 through 4 will be accepted as meeting the requirement.

It is expected that approximately 1/4 of these requirements will be completed each semester, from the second to the fifth semester.

It is anticipated, however, that overlap will occur and that students may see fewer patients in the second and third Semesters but considerably more in the remaining semesters as their efficiency and ability to manage more complex patients improves.

HOW TO DETERMINE IF A PATIENT ENCOUNTER WOULD BE ACCEPTABLE TO COUNT TOWARDS THE MCR

1. Patient cannot just be observed. LOR must be 2-4 (if you are watching your preceptor handle the encounter, you may not count it).
2. The encounter must be diagnosis specific for the MCR counted e.g., if the MCR is contact dermatitis, the diagnosis must state contact dermatitis not rule out contact dermatitis or contact dermatitis vs. psoriasis.
3. The SOAP must contain questions (i.e., Review of Systems, HPI) about the MCR, a physical exam of the part, an assessment with the diagnosis (which is the same as the MCR) and a treatment plan for the diagnosis.

I. Required BRN Curriculum Content

Indicate where in the curriculum each of the following subject areas are addressed. [Title 16, CCR Section 1484(d) (12)]

Subject Area	Course Number(s)	Theory Hours	Clinical Hours
A. Normal growth and development	N5200	4	20*
	N6320	8	
B. Pathophysiology	N6300	30	20*
C. Interviewing & communication skills	N5200	3	18 32*
D. Eliciting, recording & maintaining a developmental health history	N5200	3	10
	N6330	4	15*
	N6340	4	
	N6351	4	
E. Comprehensive physical examination	N5200	10	24 85*
F. Psycho-social assessment	N5200	2	10
	N6320	7	25*
	N6330	2	
	N6340	2	
	N6351	4	
G. Interpretation of laboratory findings	N5200	2	25*
	N6320	7	
	N6330	2	
	N6340	4	
	N6351	4	
H. Evaluation of assessment data to define health & developmental problems	N5200	2	6
	N6320	7	50*
	N6330	8	
	N6340	4	
	N6351	12	
I. Pharmacology	N6310	48	40*
	N6320	5	
	N6330	8	
	N6340	6	
	N6351	10	
J. Nutrition	N5200	2	20*
	N6320	2	
	N6330	2	
	N6340	2	
	N6351	5	

K. Disease management	N6320	3	155*
	N6330	20	
	N6340	20	
	N6351	20	
	N6300	18	
L. Principles of health maintenance	N5200	2	20*
	N6320	6	
	N6330	2	
	N6340	2	
	N6351	5	
M. Assessment of community resources	N5240	12	15*
	N5250	30	
	N6320	3	
N. Initiating & providing emergency treatments	N6340	4	20
	N6341		
O. Nurse practitioner role development	N5240	12	6
	N5230	4	
	N6351	2	
P. Legal implications of advanced practice	N5240	12	12*
	N5230	2	
	N5200	2	
	N6331	2	
	N6341	2	
	N6351	2	
Q. Health care delivery system	N5240	12	10*
	N5230	2	
	N5250	18	

*Clinical experience in N5201, N6321, N6331, N6341, N6351

J. FNP Preceptor Program

Preceptor Policies and Procedures (based on California BRN Regulations for Preceptorships)

1. Definition: The Graduate Preceptor Program at California State University, Bakersfield (CSUB) is a component of the Nursing Program that includes a teaching strategy designed to provide students with learning experiences that are guided by a Primary Health Care Provider who may also be an expert in his or her area of specialty.
2. Selection of Preceptors
 - a. A preceptor must have:
 - i. A current license to practice in the state of California as a physician or nurse practitioner.

- ii. at least one year of clinical experience either as a physician or nurse practitioner providing primary care.
 - iii. In a group practice, any other provider participating in supervision of the student must also meet the same qualifications with regard to education and clinical experience.
 - b. With the advance permission of the clinical instructor, a relief preceptor, who meets the qualifications specified by CSUB Nursing Department, shall be available on the designated preceptor's days off to:
 - i. Ensure continuity of the student's precepted learning experience.
 - ii. Ensure that a preceptor is present and available on the patient care unit at all times while the student is providing care/nursing services.
 - c. Preceptors will be evaluated by the Department of Nursing at least every two years.
- 3. The student shall be enrolled in the designated CSUB course in which he/she is assigned to a preceptor and will not be compensated by the clinical facility where the clinical rotation occurs.
- 4. The Preceptor Program files shall be kept in the CSUB Nursing Department office and includes the following information for the designated semester/year assigned:
 - a. Dates of preceptorship
 - b. Preceptor's name
 - c. Preceptor's current licenses
 - d. Preceptor responsibilities (as designated by the assigned course)
- 5. Preceptorship Orientation
 - a. The Preceptor Handbook orients preceptors and serves as the written guidelines regarding the program, courses, role, and responsibilities of Nursing Faculty (Course Team Leader, Clinical Instructor), Preceptor, and Student and the required forms.
 - b. The Preceptor Handbook and syllabus are kept on file in the Nursing Department for all graduate clinical courses.
 - c. Clinical faculty orient the preceptor to ensure adequate identification of performance expectations and goals/objectives for the students' learning experience.
 - d. Faculty/Graduate Student ratio shall not exceed 1:6.

K. Roles and Responsibilities

1. Graduate Nursing Student

The Students are responsible for being self-directed in identifying initial and ongoing learning needs, for seeking learning opportunities to meet identified needs, and for being accountable for their performance in advanced practice nursing. The Student responsibilities include:

- a. Provide the preceptor with the preceptor handbook
- b. Present the preceptor with a copy of the student's resume and clinical objectives
- c. Review the clinical objectives and negotiate clinical schedule with the preceptor prior to actual clinical experience
- d. Maintain a clinical log online through Typhon Group Software for NP clinical
- e. Track clinical hours in Typhon and have all clinical hours verified by the preceptor using the Clinical Hour Verification form. Clinical hours should be initialed by the preceptor at the end of each clinical day.
- f. Demonstrate progressive independence and competency in the advanced practice role in accordance with one's academic progression
- g. Arrive at clinical sites on time and prepared to perform in accordance with the assigned learning activities in accordance with the course
- h. Perform the advanced practice role under the supervision of the preceptor recognizing the limitations of educational preparation and complying with professional standards, clinical site policies, and advanced practice protocols
- i. Demonstrate professional student behavior in the advanced practice nursing role.
- j. Demonstrate accountability for thoroughness and timeliness in completing assigned role responsibilities
- k. Actively seek input into the evaluation process and participate in self-evaluation of strengths and identified areas for professional growth with preceptor and clinical faculty
- l. Contact clinical faculty if faculty assistance is necessary
- m. Respect patient confidentiality at all times during the clinical experience
- n. Complete preceptor and clinical site evaluations at the end of the clinical rotation
- o. Ensure patient safety
- p. Seek guidance from preceptor and clinical faculty. ~~advisor~~

(Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013)
Revised by GPC 11/2016. 9/2020

2. Clinical Faculty

- a. Collaborates with the Graduate Nursing Student and the Preceptor to ensure adequate identification of performance expectations and goals/objectives for the student's learning experience. This includes assisting with the assessment, planning, implementation, and evaluation of the student's individualized learning experience.
- b. Provides guidance and learning materials or tools to assist in identifying and meeting the student's learning needs.
- c. Serves as a resource to the Graduate Nursing Student and to the Preceptor; assisting as needed with the implementation of an action plan to address identified areas for improvement of the student's performance.

- d. Provides reliable contact information to preceptors and students. Maintains availability by phone with prompt message return.
 - e. Performs site visits to evaluate both clinical placement sites and student performance.
 - f. Provides feedback and assigns grades for all required written assignments and on-campus conference participation/performance.
 - g. Completes student's evaluation with input from the preceptor and the graduate nursing student.
3. Preceptor
- The preceptor serves as a mentor to the students. The preceptor will support students by:
- A. Assist the student by arranging opportunities and resources to obtain learning experiences appropriate to the course and individual learning objectives.
 - B. Assign patients as appropriate to the daily or course objectives.
 - C. Assign patients consistent with the education and experience level of the student.
 - D. Enable the student to perform comprehensive and focused history and physical exams, rechecking any history or physical assessment as necessary.
 - E. Guide the student in developing appropriate patient management plans including pharmacologic and nonpharmacologic management.
 - F. Guide the student in developing differential diagnoses for patients.
 - G. Encourage the student to investigate and participate in clinical inquiry or research.
 - H. Contact the clinical faculty advisor if any problems arise.
 - I. Complete the student evaluation at mid-term and upon completion of the semester, verify Clinical hours at the end of each clinical day by signing the Clinical Hour Verification form.
 - J. Complete Preceptor Evaluation of Clinical Preceptor Experience at the end of the term.

(Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013),
Revised by GPC 11/16, 9/2020

L. Dress Code Policy

CSUB nursing students must follow CSUB and agency policy regarding uniform dress and professional behavior.

Dress

CSUB Department of Nursing Program photo identification/name tags **MUST** be worn while in all clinical areas including clinical rotations on campus. All students must be clearly and continuously identified as students during clinical experiences. Students are expected to dress in accordance with clinical policy with their identification tag exposed. Pressed white laboratory coats must be worn in all clinical agency or healthcare settings including clinical rotations on campus. Additionally, every FNP student must properly display the CSUB Department of Nursing Patch on the left side of their white coat.

Business casual attire as a minimum standard is expected where contact with other professionals is possible. Examples of these activities include but are not limited to:

- Classes held on- and off-campus
- Non-classroom professional or academic activities held on campus
- Conferences, affiliate luncheons, etc.
- Professional related meetings
- Visits to clinical agencies, including patient visits, etc.

Footwear

Wear clean closed toe shoes. Must be appropriate for clinical practice.

Hair

Hair is neatly maintained and clean. Any extreme look or color is not permitted. Men may choose a neatly trimmed mustache or beard. Facial hair is maintained in short style to insure adequate seal for respiratory isolation masks/particulate respirators. No handle bar style mustaches or long beards are acceptable.

Makeup

Makeup is fresh and natural. Extremes in color, glitter, or amount are not acceptable.

Nails

No acrylic nails, extenders, polish or long nails are permitted. Hands and nails are clean and free of any stains.

Perfume

Close contact with patients and staff requires students to not wear fragrance/perfume or after shave.

Sunglasses

Sunglasses may be perceived as blocking interpersonal communication. Do not wear them indoors; however, polarized glasses that tint light gray in bright light are acceptable.

Jewelry

The following jewelry is allowed: a) One small post earring (with no dangles) in each ear; b) One small ring; c) Small necklaces and neck chains inside the uniform; d) ankle chains that are not visible or audible; and e) small wrist watches with second hands. No other jewelry and/or visible body piercing is allowed in the clinical area. (Please do not assume because the pierced ornament is in your tongue that it is invisible. It is not acceptable professional dress).

Tattoos

No visible tattoos are permitted. Cover any tattoos that may be visible.

Hygiene

Personal hygiene must be of high standards. Absence of body, mouth and clothes odor is necessary. Do not chew gum or smokeless tobacco while in clinical areas. Students may smoke only in the designated areas during assigned meal or break time.

Exceptions

Requests for exceptions must be submitted to the Clinical Instructor and/or agency in writing a minimum of five working days prior to the day of the clinical experience.

The guidelines, established by CSUB students and nursing faculty, will be enforced for all students in the Nursing program. Any student failing to comply will be asked to leave the clinical area and may not return until modifications are made. Any desired deviation from this code must be presented to the Clinical Instructor for their consideration. Students should be aware that additional dress restrictions and infection control policies might be required in specific departments of agencies, clinical sites, or hospitals.

Revised Graduate Program Committee 2014, Revised GPC 11/2016

Section VI. Forms

A. Honor Commitment

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing
Family Nurse Practitioner Program

Nursing Student Honor Commitment

The Honor Commitment is a personal commitment to honor and integrity which is self-imposed and not enforced by an outside authority. All students in the Department of Nursing pledge to follow the Honor Commitment.

The commitment reads as follows:

A unique aspect of higher education is its attempt to instill in the student a sense of honor and high principles that includes but extends beyond academics. An essential feature of the Department of Nursing at California State University, Bakersfield, is its commitment to an atmosphere of integrity and ethical conduct. As a nursing student at CSUB, I accept as my personal responsibility the vigorous maintenance of high standards of honesty, truth, fairness, civility, and concern for others. My devotion to integrity establishes that I will not cheat in academic work and that I will adhere to the established and required community code of conduct. According to the dictates of my own conscience, I will report behavior in the violation of such established standards. In addition and beyond the requirements of any code or law, I confirm my own commitment to personal honor and integrity in all matters large and small. Even though the idea of honor is an abstract one, by implementing this ideal, I join the men and women of the Department of Nursing at California State University, Bakersfield, in making the concept of honor a reality.

(Adapted from the Honor Commitment of Duke University)

I have read, received, and will abide by the Nursing Honor Commitment.

Print Your Name: _____

Signature: _____

Date: _____

B. Essential Functions Form

California State University, Bakersfield
Department of Nursing

Essential Functions: Physical and Mental Qualifications

A student with a disability has to have the disability verified by the Disability Services office at CSUB. It is to the student's advantage to do this as soon as possible in the semester to assure that approved accommodations can be granted in a timely manner.

Essential Functions

There are essential functions or abilities necessary for admission and progression in the complex discipline of nursing at CSU Bakersfield. The candidate must be able to perform all of the essential functions each semester. The Department of Nursing follows the CSUB nondiscrimination policy, and students requesting accommodations should contact the Disability Services office. These essential functions include, but are not limited to, the following:

A. Critical Thinking:

A student must demonstrate critical thinking ability sufficient for clinical judgment.

1. Make effective clinical decisions.
2. Identify cause and effect relationships with clinical data.
3. Develop nursing care plans.
4. Perform math calculations requisite to safe dosage calculations and medication administration.
5. Read, synthesize, analyze, evaluate, and integrate material in the classroom and the clinical setting.

B. Professional-Ethical Conduct:

A Student must possess the ability to reason morally and practice nursing in a professional and ethical manner.

1. Demonstrate integrity, honesty, responsibility and tolerance.
2. Abide by professional standards of practice.
3. Deliver compassionate care to all patient populations.

C. Interpersonal Skills:

A student must demonstrate appropriate interpersonal abilities while interacting with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.

1. Communicate effectively and sensitively with other students, faculty, staff, patients, families, and other professionals.
2. Demonstrate willingness and ability to give and receive feedback.
3. Develop mature, sensitive and effective relationships with clients.
4. Establish trust and rapport with clients and colleagues.

D. Communication:

A student must have the ability to clearly communicate in oral and written forms, and to effectively interpret communication with others.

1. Use appropriate grammar, vocabulary, and syntax.
2. Effectively communicate nursing actions.
3. Appropriately interpret client responses.
4. Initiate health teaching.
5. Demonstrate accurate nursing documentation.
6. Accurately report patient information to members of the health care team.

E. Mobility and Stamina:

A student must possess sufficient gross and fine motor skills and endurance to provide safe and effective nursing care in all health care settings.

1. Perform basic life support, including BLS.
2. Function in an emergency situation.
3. Safely assist a patient in moving (e.g., from wheelchair to commode, from chair to bed, lift and transfer from gurney to bed).
4. Calibrate and use equipment.
5. Perform treatments and procedures.
6. Apply pressure to stop bleeding.
7. Manipulate diagnostic instruments to adequately perform all aspects of a physical assessment.
8. Sit, stand, and move about in patient environments for 12 hour periods.

F. Tactile:

1. Perform palpation and other functions necessary for a physical exam.
2. Assess texture, shape, size and vibration.
3. Note temperature changes in skin and equipment.
4. Perform therapeutic functions (e.g., inserting a urinary catheter or IV, change dressings, give medications).

G. Auditory:

A student must have sufficient auditory ability to effectively monitor and assess health needs of patients.

1. Hear cries for help.
2. Hear alarms on equipment and overhead codes.
3. Hear auscultatory sounds using a stethoscope.
4. Hear and interpret verbal communication from patients.
5. Communicate over the telephone.

H. Visual:

A student must possess visual ability for observation and assessment necessary in nursing care.

1. Observe patient responses (e.g., changes in skin color, grimaces).
2. See drainage on dressings and note characteristics of body fluids.
3. Note fluid levels in collection devices, syringes and infusion devices.
4. Read gauges that monitor patient progress (e.g., sphygmomanometer).
5. Discriminate colors for diagnostic purposes.
6. Assess movements of patients.
7. Observe patient behavior (e.g., in rehab or psychiatric facilities).

I. Behavioral-Emotional Health:

A student must possess the emotional health required for full use of his or her intellectual abilities, the exercise of good judgment, and the prompt completion of all responsibilities attendant to the care of patients.

1. Maintain mature, sensitive, and effective relationships with patients, students, staff, faculty and other professionals under even highly stressful situations.
2. Experience empathy for the situations and circumstances of others and effectively communicate that empathy.
3. Be willing to examine and change his or her behavior when it interferes with productive individual or team relationships.
4. Prioritize competing demands.
5. Function in stressful circumstances.
6. Separate own needs and experiences in order to maintain objectivity and client-centered care.
7. Adjust to changing circumstances.
8. Plan effectively and complete all assigned duties carefully.

I, _____ have read, understand, and comply with the Essential Functions list (A-I). I acknowledge the physical and mental requirements for the Masters of Science in Nursing program and I meet all of these requirements.

Sign _____ Date _____

- C. Policy for Students Practicing Procedures on Each Other
- D. Verification of Contract for Family Nurse Practitioner Placement

Department of Nursing
Family Nurse Practitioner Program

Verification of Contract for Family Nurse Practitioner Placement

<p>Name of Student: _____</p> <p>Course Number: _____</p> <p>Clinical Instructor: _____</p> <p>Semester/Year: _____</p> <p>Name of Agency: _____</p> <p>Address of Agency: </p> <p>Telephone/Agency: _____</p> <p>Fax/Agency: _____</p> <p>Name of Preceptor: _____</p>
<p>(for the Administrative Support Coordinator at the Department of Nursing to complete)</p> <p>Verification of Contract: Yes ____ No ____ Initiated but not signed ____</p> <p>Date of Contract: _____</p> <p>Expiration Date of Contract: _____</p> <p>Verified by: _____ Date: _____</p>
<p>Please return to instructor after verification of contract has been completed by Nursing Department staff.</p> <p>Name of Instructor: _____</p> <p>Signature of Instructor: _____</p> <p>Date: _____</p>

E. Confirmation of Agreement to Precept

Department of Nursing
Family Nurse Practitioner Program
Confirmation of Agreement to Precept

I, _____ (Printed name of Preceptor) have met with the graduate student regarding a preceptorship at this agency. I have reviewed the preceptorship agreement, and we have discussed the course objectives, clinical requirements, and the FNP Student Evaluation document for _____ (course name) and agree to act as Clinical Preceptor to _____ RN (Printed name of Graduate Student) as part of his/her enrollment in the CSUB Graduate Nursing Program clinical course. I am aware that I will need to confer with the Clinical Instructor during and at the end of the semester to provide any information I believe is necessary regarding the student's progress in the clinical practicum. A written evaluation of the student, on the provided form should be submitted at the end of the semester.

I meet the following minimum qualifications to precept this student:

- Possession of a current California license to practice as a physician or nurse practitioner.
- A copy of my California License to Practice is available at my facility.
- At least one year of clinical experience either as a physician or nurse practitioner providing primary care.
- In a group practice, any other provider participating in supervision of the student must also meet the same qualifications with regard to education and clinical experience.

I am willing to serve and be available as a preceptor for this student enrolled in the above named course during the period of _____ (semester), in _____ (year).

I am also aware that I must complete the FNP Student Evaluation document prior to the end of the semester in which this student is enrolled.

Preceptor (Print): _____

Telephone: _____ FAX: _____

Most convenient time to call: _____

Email: _____

Agency: _____

Address: _____

City/State: _____ Zip: _____

Preceptor's Signature

Date

F. Preceptor Profile Form: Biography

Family Nurse Practitioner Program
Preceptor Profile Form: Biography

A Curriculum Vitae may be submitted in lieu of this form

Name: _____ Credential(s): _____
 License # _____ Expiration Date: _____
 Area of Specialization: _____ Years of Experience: _____
 Facility: _____ Business Address: _____
 Work Phone: _____ Work Fax: _____
 Email Address: _____

Education: List your basic medical/nursing education/advanced education as a physician or in nursing or other fields

Name of College	Location	Degree Earned	Dates of Attendance

Certifications: List any certifications that you hold.

Name of Certification	Organization Providing Certification	Dates of Certification

Clinical Experience: List your most recent clinical experience other than your present employment.

Name of Employer	Job Title/Responsibilities	Dates of Employment

Professional Honors and Awards: List any special professional honors/awards you have received (e.g., Sigma Theta Tau and other professional organizations; conference presentations; scholarships; publications; recognition).

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Preceptor Experience: List prior preceptor experience with CSUB, other colleges, hospitals, & health care organizations

Name of Organization	Type of Student	Dates/Length of Preceptorship

PLEASE RETURN TO: California State University, Bakersfield
 Attn: Administrative Support
 Department of Nursing 29 RNC
 9001 Stockdale Highway
 Bakersfield, CA 93311-1022

H. Student Evaluation of the Clinical Site

	Responses				
Questions					
Course Number	Spring year 1 - N6321 APN: Care for Individual & Families Across Lifespan I (1)	Summer year 1 - N6331 APN: Care for Individual & Families Across Lifespan II (2)	Fall year 2 - N6341 APN: Care for Individual & Families Across Lifespan III (3)	Spring year 2 - N6351 Advanced Practice Practicum (4)	
Student Name					
Agency Name					
Student is given adequate time to see patients	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
There are sufficient numbers of clients with varied ages, types of problems, etc	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Student is allowed to select the clients according to the students need	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Student is given the opportunity to follow up with clients and/or problems of interest.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Reports from lab and/or radiology are available for student to review.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Support staff are helpful to student and accepting of the student's role.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The philosophy of the clinic supports health promotion and disease prevention.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Instructional materials are available for clients to supplement their learning, such as pamphlets.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Community resources, other agencies, and professional disciplines are involved with client's welfare.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Please give examples or comments (especially if you choose strongly disagree):					
How many miles do you travel from CSUB to clinical site?					

I. Student Evaluation of Preceptors

	Responses				
Questions					
Course Number	Spring year 1 - N6321 APN: Care for Individual & Families Across Lifespan I (1)	Summer year 1 - N6331 APN: Care for Individual & Families Across Lifespan II (2)	Fall year 2 - N6341 APN: Care for Individual & Families Across Lifespan III (3)	Spring year 2 - N6351 Advanced Practice Practicum (4)	
Student Name					
Preceptor Name					
Agency Name and Address					
Preceptor is available to students, serves as a good model and demonstrates as a competent APN.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor demonstrates effective rapport with clients.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor utilizes student's strengths and knowledge.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor assists student in identifying appropriate goals and needs for experience (relative to that particular semester).	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor considers student's limits according to level of training.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor provides constructive feedback on student's performance throughout the day.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor leads student through decision making process and facilitate differential diagnoses.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Q12 Preceptor reviews/co-signs each documentation/note, if appropriate.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor encourages questions from student.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor thoughtfully reviews diagnosis and differential diagnosis with student.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor discusses alternative management with the student.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor allows student opportunities to suggest drug of choice, calculate dosages, suggest lab and/or radiology to be ordered.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor communicates clinical knowledge well with the student.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Please give additional comments and/or examples: _____					

J. Midterm Evaluation of CSUB FNP Student

	Responses					
Questions						
Course Number	Spring year 1 - N6321 APN: Care for Individual & Families Across Lifespan I (1)	Summer year 1 - N6331 APN: Care for Individual & Families Across Lifespan II (2)	Fall year 2 - N6341 APN: Care for Individual & Families Across Lifespan III (3)	Spring year 2 - N6351 Advanced Practice Practicum (4)		
Student Name						
Preceptor Name						
Agency Name and Address						
The student is progressing towards meeting the clinical objectives.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
The student is progressing towards safe clinical practice.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
The student exhibits professionalism.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
Please provide your comments if you disagree with any of the above statements.						
Would you like to speak with the Faculty in Charge?	Yes, please provide phone number	No				
Please sign here						
Thank you very much for your support of our FNP students. If you disagree in students progression as listed above the faculty on record will contact you.						

K. Preceptor Evaluation of CSUB FNP Students

	Responses					
Questions						
Course Number	Spring year 1 - N6321 APN: Care for Individual & Families Across Lifespan I (1)	Summer year 1 - N6331 APN: Care for Individual & Families Across Lifespan II (2)	Fall year 2 - N6341 APN: Care for Individual & Families Across Lifespan III (3)	Spring year 2 - N6351 Advanced Practice Practicum (4)		
Student Name						
Preceptor Name						
Agency Name	Adventist Physician Network	Clinica Sierra Vista	Kern Medical Clinics	Family Healthcare Network	Other	
Clinic Address						

The student critically analyzes data and translates new knowledge into practice using evidence-based guidelines.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student takes initiatives to provide safe patient care in related to access, equity, cost, and quality.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student utilizes appropriate technologies at the clinical setting effectively.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student seeks out opportunities to increase levels of independence.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student utilizes effective verbal and nonverbal skills to provide good communications with patients and the health care team.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student collects relevant and appropriate subjective and objective data during patient encounters.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student develops appropriate differential diagnoses during patient encounters.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student integrates health promotion/disease prevention with appropriate patient plan of care including diagnostics, therapies, interventions, pharmacology and referrals.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student records patient data in complete, concise and well-organized format.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student submits preceptor's assistance with unfamiliar and/or complicated situations.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student arrives on time and is appropriate in time management.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
The student accepts constructive criticism from the health care team.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
You are satisfied with this student's ability to meet the Family Nurse Practitioner competencies.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Please provide comments if you strongly disagree with any of the above statements or any additional comments.					

L. Preceptor Evaluation of Clinical Preceptor Experience

	Responses						
Questions							
Course Number	Spring year 1 - N6321 APN: Care for	Summer year 1 - N6331 APN:	Fall year 2 - N6341 APN: Care for	Spring year 2 - N6351 Advanced			

	Individual & Families Across Lifespan I (1)	Care for Individual & Families Across Lifespan II (2)	Individual & Families Across Lifespan III (3)	Practice Practicum (4)		
Student Name						
Preceptor Name						
Agency Name and Address						
The Graduate Preceptor Handbook helped me understand my role as a preceptor.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
The course objectives increased my understanding of FNP student performance expectations.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
Ongoing communication with the CSUB nursing faculty increased my ability to identify appropriate learning experiences for FNP students.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
The course expectations seemed appropriate for preparing the student to function in an advanced practice nursing role.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
I am able to contact the CSUB nursing facility when necessary to fulfill my role as a preceptor.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
Overall, I have had a positive experience as a preceptor.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
Please comment if you disagree with any of the above statements or have any additional comment.						
Would you like to speak with a faculty on your experience	No	Yes, please provide your best contact				

M. Faculty Evaluation of FNP Student at Site Visit

	Responses					
Questions						
Course Number	Spring year 1 - N6321 APN: Care for Individual & Families Across Lifespan I (1)	Summer year 1 - N6331 APN: Care for Individual & Families Across Lifespan II (2)	Fall year 2 - N6341 APN: Care for Individual & Families Across Lifespan III (3)	Spring year 2 - N6351 Advanced Practice Practicum (4)		
Student Name						
Preceptor Name						
Agency Name and Address						

Students performance is thorough and detailed in patient assessment.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
The student maintains accuracy and completeness of patient records, as allowed by agency.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
The student is at his/her current level of functioning/progress.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
There are positive responses from preceptor on student skills and progress.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
Suggestions for the students or additional objectives/goals						
Faculty Name						

N. Faculty Evaluation of the Clinical Agency at Site Visit

	Responses					
Questions						
Please select the term.	Spring year 1 - N6321 APN: Care for Individual & Families Across Lifespan I (1)	Summer year 1 - N6331 APN: Care for Individual & Families Across Lifespan II (2)	Fall year 2 - N6341 APN: Care for Individual & Families Across Lifespan III (3)	Spring year 2 - N6351 Advanced Practice Practicum (4)		
Please indicate the clinical site	Adventist Physician Network	Clinica Sierra Vista	Kern Medical Clinics	Family Health Care Network	Other, please be specific	
Agency Address						
Clinic Staff were open and helpful.						
The environment of the clinical setting was conducive to learning.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
The clinical setting provides for application of theory, knowledge, and skills to meet course and individual objectives.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
The agency practices the principles of safe patient care.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
Current clinical practices are reflected in agency policies and procedures.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree	
Suggestions to improve the agency experience, please give comments and/or examples						
Faculty Name						

O. Faculty Evaluation of Preceptors at Site Visit

	Responses				
Questions					
Please select the term.	Spring year 1 - N6321 APN: Care for Individual & Families Across Lifespan I (1)	Summer year 1 - N6331 APN: Care for Individual & Families Across Lifespan II (2)	Fall year 2 - N6341 APN: Care for Individual & Families Across Lifespan III (3)	Spring year 2 - N6351 Advanced Practice Practicum (4)	
Please indicate the clinical site	Adventist Physician Network	Clinica Sierra Vista	Kern Medical Clinics	Family Health Care Network	Other, please be specific
Preceptor name.					
Preceptor is available to student.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor demonstrates understanding of the advanced practice nurse role.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor utilizes student's strength/knowledge and considers students limit according to the level of training.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor serves as a good role model and has effective rapport with clients.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor assists student in identifying appropriate goals and needs for student experiences (relative to the particular semester).	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor leads student through decision-making process and facilitate differential diagnoses.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor reviews and co-signs student's documentation or notes, as appropriate.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor offers constructive comments on student's progress.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor encourages questions from the student.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor discusses alternative management with the student.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Preceptor allows student opportunities to suggest drug of choice, calculate dosages, suggest lab and/or radiology necessary for the client.	Strongly Agree	Somewhat Agree	Neutral	Somewhat Disagree	Strongly Disagree
Type of visit.	In person	Virtual			
Additional comments and/or examples.					
Faculty Name.					

P. Sue Fujiki Emergency Loan Application Form

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
DEPARTMENT OF NURSING
ROSA Committee

Sue Fujiki Emergency Loan Application Form

To: CSUB Foundation Office

Subject: Sue Fujiki Nursing Student Emergency Loan Fund Application

This is to verify that _____ is enrolled in the _____ class in the CSUB Department of Nursing, is eligible for a loan according to the criteria of the loan fund, and has been approved by the ROSA Committee to borrow \$_____ from the fund. The student agrees to pay back the loan by _____ or seek an extension from the Committee.

Faculty Name: _____ Student Name: _____

Faculty Signature: _____ Student Signature: _____

Date: _____ Date: _____

Section VII. APPENDICES

A. COVID-19 Clinical Rotation Attestation Graduate Nursing Program

**California State University, Bakersfield
Department of Nursing**

**COVID-19 CLINICAL ROTATION ATTESTATION
Graduate Nursing Program**

Students attending in-person clinical rotations are required to complete the COVID- 19 Clinical Rotation Attestation form. Students who are unable to participate in their clinical rotations for any reason, should contact their Clinical Faculty immediately.

Please confirm by initialing each statement

_____ Symptoms check/attestation (screening): You must complete Graduate CSUB Nursing Department COVID-19 Symptoms Screening Survey on every scheduled clinical day **prior to** going to the clinical.

_____ Student acknowledges that some clinical sites may not allow students who have cared for COVID-19 patients, even if appropriate PPE measures have been followed.

_____ Student has received training on COVID -19 provided by CSUB Department of Nursing <https://csub.techsmithrelay.com/wWDe> , and video training on appropriate use of PPE (see Centers for Disease Control on the use of PPE at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>

_____ PPE, as needed, will be provided by either the clinical site or by the DON. Students will use PPE in accordance with the current policies and guidelines of the agency.

_____ The clinical site may require students to be tested for Covid-19. Free screening and testing sites available at the California Department of Public Health at <https://covid19.ca.gov/testing-and-treatment/#top>

_____ Student is aware of requirement to self-monitor for symptoms; will not engage in a clinical rotation if symptomatic; will inform their Clinical Faculty if not attending clinical; and will seek medical attention if necessary.

_____ Student acknowledges potential risk for contracting communicable illness as part of work in a health care setting. Such risk occurs even when not seeing known Covid-19 positive or persons under investigation.

_____ Student agrees to abide by the Centers for Disease Control and Prevention, state and local health officials and other authorities, including the office of CSU chancellor COVID safe practices as applicable to the clinical setting as well as any policies in place at the hospital or clinic setting.

Student Signature _____

Type or Print Name _____ Date _____

B. CSUB Nursing Department COVID-19 Policy

The CSUB Nursing Policy and Guidelines were developed to ensure the health and safety of our students, staff, and faculty.

I. Mandatory Entrance Requirements

- A. This policy and guidelines are subject to change based on instructions from Federal, State, Local, and University authorities. They are based on the current COVID-19 guidelines requiring 6 feet of social distancing and a limited number of students, lab staff, and faculty in the labs.
- B. A personal face mask or covering is required prior to entering the building. The mask must be clean and free of tears or holes, and the mask must be worn at all times.
- C. Appropriate dress/professional appearance must be maintained, as required by the Graduate/Undergraduate Student Handbooks.
- D. A CSUB Nursing Name Tag is required.
- E. Influenza vaccination is required for all students, staff, and faculty.

II. Self-monitoring

- A. All students, lab staff, and faculty are required to self-monitor for signs and symptoms of COVID-19: www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html

You should NOT report to clinical experiences or face-to-face learning activities if you have:

1. Fever (100.4F or higher)
2. Chills
3. Cough
4. Shortness of breath or difficulty breathing
5. Fatigue
6. Muscle or body aches
7. Headache
8. New loss of taste or smell
9. Sore throat
10. Congestion or runny nose
11. Nausea or vomiting
12. Diarrhea
13. Close Contact Exposure, as defined by:
 - a. Face-to-face contact with a probable or confirmed case within 6 feet, and for more than 15 minutes, or
 - b. Direct physical contact with a probable or confirmed case, or
 - c. Direct care for a patient with probably or confirmed COVID without use of personal protective equipment.

Having one of these will be treated as a POSITIVE screen.



- B. Students, lab staff, and faculty are held accountable for truthful reporting during screening and must fully cooperate with contact tracing should disease exposure or illness occur.
 - 1. Withholding relevant information about symptoms, exposures, positive screening results, or positive test results is a violation of basic ethical principles and public health responsibilities.
 - 2. Faculty and lab staff who fail to abide by this policy may face personnel action as determined by the Dean of the School of Natural Sciences, Mathematics and Engineering.
 - 3. Students who fail to abide by this policy will be considered in violation of the Department of Nursing Student Conduct Code. This may result in penalties up to and including dismissal from the nursing program.

III. **Screening:** Applicable to students, lab staff, and faculty

- A. **BEFORE YOU LEAVE YOUR HOUSE:** Prior to going to CSUB or an off-campus clinical site, you **MUST** complete the CSUB COVID Screening: www.csub.edu/covid-screen/
- B. **BEFORE YOU ENTER THE BUILDING:** Prior to entering the CSUB Skills Lab or Sim Center or an off-campus clinical site, you **MUST** complete the Nursing Department COVID Screening: csub.co1.qualtrics.com/jfe/form/SV_2rSrEMIF8tidE33 (see **Appendix A**)
- C. Temperature screening will be performed prior to entering the CSUB Skills Lab and Sim Center
- D. Negative Screening
 - 1. No reported COVID symptoms or Close Contact Exposure
 - 2. No elevated temperature (must be within normal range **WITHOUT** the use of antipyretics such as acetaminophen, ibuprofen, etc.)
 - 3. Cleared by both CSUB COVID Screening **AND** CSUB Nursing Department Screening
 - 4. Permitted to enter Skills Lab, Sim Center, or off-campus clinical site
- E. Positive Screening
 - 1. **ANY** COVID symptom or Close Contact Exposure or elevated temperature
 - 2. A positive screening through the CSUB COVID Screening or Nursing Department COVID Screening is a **POSITIVE SCREEN**
 - 3. **DO NOT GO TO CAMPUS OR AN OFF-CAMPUS CLINICAL SITE. STAY HOME.**
 - 4. **DO NOT** enter Skills Lab or Sim Center. **GO DIRECTLY HOME.**
 - 5. **DO NOT** enter clinical facility. **GO DIRECTLY HOME.**
 - 6. Contact immediately:
 - a. Your Clinical Instructor, prior to class start time, by phone/text
 - b. Deborah Boschini, Nursing Department Chair, by email: dboschini@csub.edu

- c. CSUB COVID Reporting Team using the procedure found at: www.csub.edu/returntocampus/fall2020/covid-19-reporting
- 7. Students who have a positive screen must get a medical clearance from either the Student Health Center or their private medical provider. Call in advance for instructions. Do not “walk in.”
- F. Declined Screening
 - 1. Will NOT be permitted to enter Skills Lab, Sim Center, or off-campus clinical site
 - 2. Will be assigned an unexcused absence if associated with a course
 - 3. Declination will be noted
 - 4. Clinical Instructor and Department Chair will be notified for follow up action(s)
- G. Screening Station Set Up
 - 1. Table outside of lab entrance
 - a. Hand sanitizer
 - b. Touch free thermometer
 - c. Trash receptacles
 - d. Signage for social distancing requirements/screening guidelines
 - e. Masks for Screeners
 - f. Plastic bags for belongings (one per student, to keep and reuse)
- H. Students MUST print, read, sign, and submit the **CSUB Nursing COVID Agreement** in order to participate in face-to-face activities, including on campus activities in the Skills Lab and Sim Center and off-campus clinical experiences.

IV. Lab Expectations

- A. What can be brought into the lab:
 - 1. Nursing equipment (Stethoscope, watch, scissors, etc.)
 - 2. Personal belongings (to be kept in the plastic bag)
 - a. Jacket/sweater
 - b. Cell phone
 - c. Keys
 - d. Wallet
 - e. Laptop or tablet
- B. What cannot be brought into the lab:
 - 1. No food/drinks
 - 2. No personal items not secured in the Personal Belongings bag
 - 3. No animals (unless certified service animal)
- C. Hand hygiene upon entrance (either hand washing or hand sanitizer) using CDC guidelines (**See Appendix B**)
- D. Social distancing
 - 1. 6-foot distance must be maintained, except when coursework requires working in pairs
 - 2. 6-foot distance must be maintained at all other times, including before and after class and on breaks
 - 3. Face mask/cover must be used at all times (unless performing face/mouth inspection)
 - 4. No sharing of personal belongings
- E. Maximum occupancy
 - 1. RNEC Skills Lab: 13

2. Sim Center Conference Room: 6
 3. Sim Center Exam Room: 9
 4. Sim Center Simulation Rooms: 3 in each room
- F. Skills Lab and Sim Center Traffic Control
1. Students are grouped into cohorts. To reduce the risk of COVID transmission, student cohorts should not be mixed.
 2. Cohort Groups:
 - a. Level 2
 - b. Level 3, (Peds/Gero), Section 1
 - c. Level 3, (Peds/Gero), Section 2
 - d. Level 3, (Peds/Gero), Section 3
 - e. Level 3, (Psych/OB), Section 1
 - f. Level 3, (Psych/OB), Section 2
 - g. Level 3, (Psych/OB), Section 3
 - h. Level 4, Section 1
 - i. Level 4, Section 2
 - j. Level 4, Section 3
 - k. Level 4, Section 4
 - l. Level 4, Section 5
 - m. Level 4, Section 6
 - n. RN-BSN Program (all online for Fall 2020)
 - o. MSN/FNP Program, Year 1 (3 sections, working in small groups)
 - p. MSN/FNP Program, Year 2 (all off-campus, individual placements)
- G. Acceptable Skills Lab and Sim Center Activities
1. Skills Practice/Demonstration, Evaluation, and Remediation
 2. Open Lab and Refresher
 3. Demos of psychomotor skills:
 - a. Pre-recorded videos must be viewed prior to class time
 - b. Required activities must be completed prior to class time

V. Lab Set-up and Diagram

- A. Supplies:
1. Limited supplies provided on an as-needed basis
 2. Disposable linen preferred
 3. Cleaning supplies provided
 4. COVID posters visible both inside and outside of lab
- B. RNEC Skills Lab (**See Appendix C**)
- C. Simulation Center (**See Appendix D**)
- D. COVID-related signage (**See Appendix E**)

VI. Supplies and Equipment

- A. Supplies should be labeled as discard or re-use
- B. Needed equipment should be requested and supplied from lab staff

VII. Hand Hygiene

- A. Hand washing by CDC Guidelines (**See Appendix B**)

- B. Hand sanitizer

VIII. **Cleaning and Disinfection**

- A. All students, staff, and faculty using the CSUB Skills Lab or Simulation Center will be required to complete disinfectant/sanitation training found at:
apps.cdpr.ca.gov/schoolipm/
 - 1. Instructions for completing this training can be found in **Appendix H**
- B. Schedule
 - 1. Stations will be cleaned between students (See **Appendix F** for Cleaning Checklist)
 - 2. Manikins will be cleaned frequently and according to manufacturer guidelines (See **Appendix F** for Cleaning Checklist)
 - 3. Visible dirt should be cleaned prior to disinfecting surfaces
 - 4. Appropriate cleaning/disinfecting solutions will be used (See **Appendix G** for Cleaning Product Table)
- C. Waste and Janitorial Service
 - 1. Expected Services
 - a. CSUB Skills Lab/Simulation Center will be terminally cleaned at the end of each scheduled day.
 - b. Simulation Center Directors will provide Facilities Management with a schedule of expected use at the beginning of each semester.
 - 2. Urgent Requests
 - a. Contact Facilities Management

IX. **Post-Exposure Procedures**

- A. Post-exposure procedures are based on the most recent CDC guidelines for return to work: www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html
- B. The following procedures will be followed by students and faculty who have had a close contact exposure or experience COVID-19 symptoms in order to be cleared to return to a clinical site or the CSUB Skills Lab/Sim Center:
 - 1. Asymptomatic:
 - a. Quarantine at home, away from others, for 10 days after confirmed positive.
 - b. If symptoms develop, immediately follow the symptomatic guidelines below.
 - 2. Symptomatic:
 - a. Contact your healthcare provider or seek medical attention as soon as possible.
 - b. Quarantine at home, away from others, immediately at onset of symptoms and continue quarantine until the following criteria are met:
 - i. 24 hours with no fever reducing medication **AND**
 - ii. Symptoms have improved **AND**
 - iii. 10 days since symptoms first appeared
 - c. If symptoms recur, the quarantine period must be repeated.

X. **Contact Tracing**

- A. A positive COVID-19 Test **MUST** be reported immediately to:
 - 1. Deborah Boschini, Nursing Department Chair, by email: dboschini@csub.edu

2. The CSUB COVID Reporting Team, using the procedure found at:
www.csub.edu/returntocampus/fall2020/covid-19-reporting
- B. In the event of an exposure risk or if there is a confirmed positive COVID-19 test result, students, staff, and faculty will be contacted to disclose potential exposure of others within the Nursing Department or clinical facilities
- C. This contact tracing does not replace Department of Public Health contact tracing. The purpose of this is to assess for potential COVID-19 exposure to others at CSUB, the Nursing Department, or clinical facilities.
- D. Identification of Contacts:
 1. Collect names and details of all contacts ranging back to 2 days prior to symptom onset or known exposure to COVID-19
 2. Collect details of all campus locations or clinical facilities visited ranging back to 2 days prior to symptom onset or known exposure to COVID-19
 3. Collect details of Nursing Department associations of potential close contacts such as cohort peers, roommates, carpool members, study group students, and in-person training attendees
 4. Data will be collected by the Clinical Learning Coordinator and submitted to the Department Chair

XI. Missed Course Time

- A. It is **mandatory** for students, staff, and faculty to remain home when sick
- B. **The health and safety of students, staff, and faculty are our top priorities**
- C. **Faculty will make every effort to assist students who must be absent**
- D. Students should contact clinical instructors regarding missed clinical time
- E. Clinical instructors will consult with course Team Leaders and the Clinical Learning Coordinator to establish a plan for missed clinical time with consideration for the Nursing Department policy for the allowed number of missed clinical hours
- F. Every attempt will be made to ensure clinical hour requirements are met; however, lengthy or excessive absences may result in an incomplete for the course or a medical withdrawal from the term

(FO approved Aug 2020)

APPENDICES

Appendix A: Qualtrics Screening Questions

https://csub.co1.qualtrics.com/jfe/form/SV_6M8zPdKCiUmcC3z

Q1

LEGAL DISCLAIMER:



This survey is a tool based on generally-available information related to the coronavirus (COVID-19). It is not intended to provide official medical advice, treatment, or diagnosis.

If you have specific medical concerns, you should contact a doctor, healthcare practitioner or Student Health Services.

Q2

Location of activities



- Skills Lab - RNEC Building
- Simulation Center - Science Building
- Hospital / Clinic

Q3

Which course are you utilizing the facility for?



- N2111 Health Assessment & Physical Exam
- N2121 Fundamentals of Nursing Practice
- N2131 Med/Surg Nursing
- N3111 Nursing Care Women/Childbearing Family
- N3121 Nursing Care Children/Adolescents
- N3131 Psychiatric/Mental Health Nursing
- N3141 Gerontological Nursing
- N4111 Critical Care Nursing
- N4121 Community Health Nursing
- N4901 Professional Nursing Practicum
- Open Skills Lab Practice Session



Q4

You are:



- Student
- Faculty
- Visitor

Q5

Please provide your name



First name

Last name

Q6

Your age



- Under 18
- Between 18 and 64
- 65 and older

Q7

Have you recently traveled to an area that is at high-risk for COVID-19, such as:



- Brazil - China - Europe (Schengen area: Switzerland, Norway, Liechtenstein, Iceland) - Iran - Ireland - South Korea - UK

*As the CDC's areas of high-risk change frequently, please check <https://www.cdc.gov/coronavirus/2019-ncov/travelers/from-other-countries.html>

*You must stay home for 14 days from the time you returned home from international travel

- No
- Yes

Q8 In the past two weeks, have you had unprotected (no PPE) close contact with a suspected or confirmed COVID-19 positive person?



Close Contact Exposure, as defined by:

1. Face-to-face contact with a probable or confirmed case within 6 feet, and for more than 15 minutes
2. Direct physical contact with a probable or confirmed case
3. Direct care for a patient with probable or confirmed COVID without use of personal protective equipment

- No
 Yes

Q9 Are you experiencing any of the following symptoms (check all that apply):



- | | |
|--|--|
| <input type="checkbox"/> NO SYMPTOMS | <input type="checkbox"/> Shortness of breath or difficulty breathing |
| <input type="checkbox"/> Fever or feeling feverish, chills, sweating | <input type="checkbox"/> Body aches or muscle pain |
| <input type="checkbox"/> Vomiting or diarrhea | <input type="checkbox"/> Change in smell or taste |
| <input type="checkbox"/> Cough | <input type="checkbox"/> Headache |
| <input type="checkbox"/> Sore throat | |

Q10 Document your temperature at the time of screening

Q10



Appendix B: CDC Handwashing Guidelines



Hand Washing per CDC Guidelines

Follow Five Steps to Wash Your Hands the Right Way

Washing your hands is easy, and it's one of the most effective ways to prevent the spread of germs. Clean hands can stop germs from spreading from one person to another and throughout an entire community—from your home and workplace to childcare facilities and hospitals.

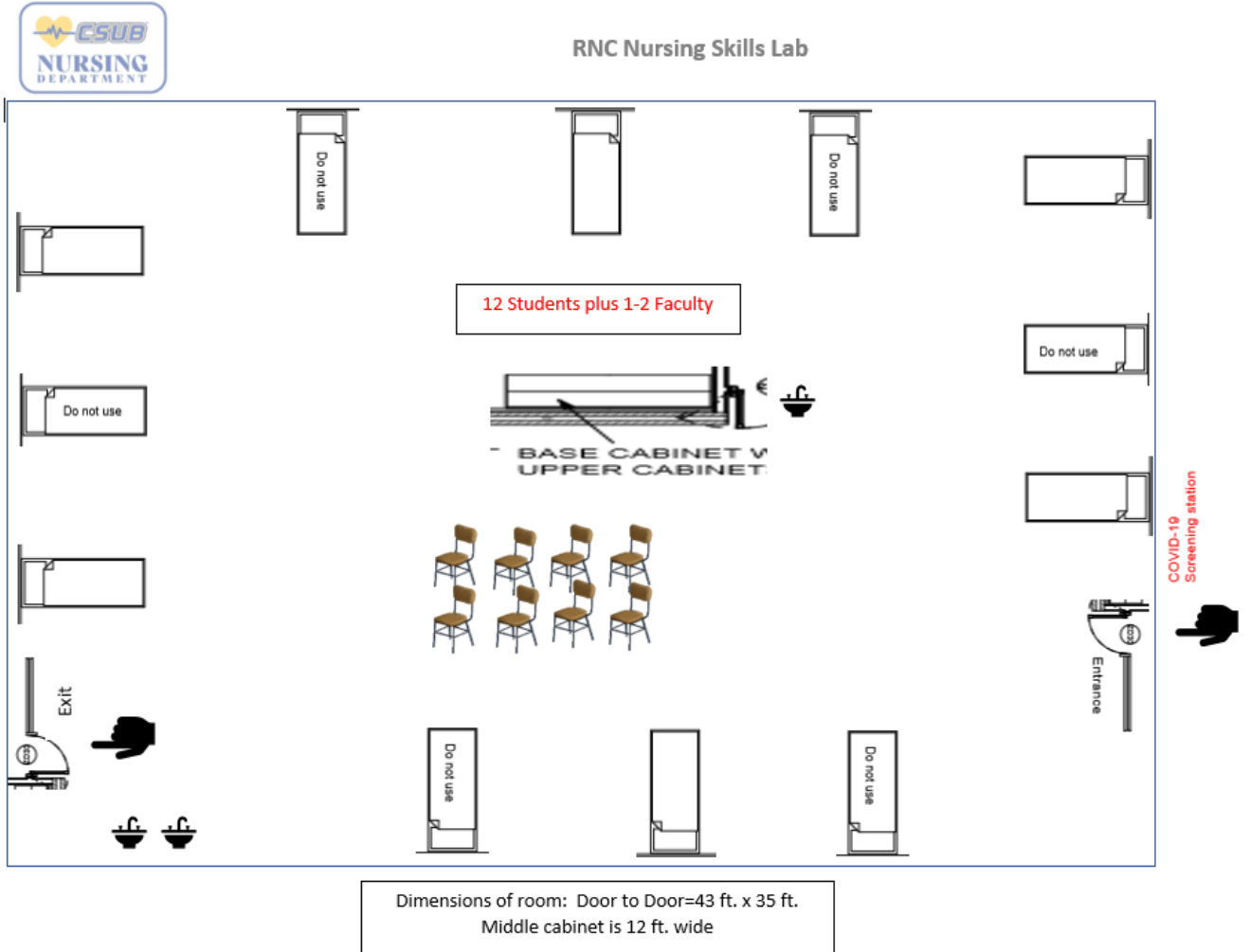
Follow these five steps every time.

1. **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
3. **Scrub** your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
4. **Rinse** your hands well under clean, running water.
5. **Dry** your hands using a clean towel or air dry them.

How to Use Hand Sanitizer per CDC Guidelines

- Apply the gel product to the palm of one hand (read the label to learn the correct amount).
- Rub your hands together.
- Rub the gel over all the surfaces of your hands and fingers until your hands are dry. This should take around 20 seconds.

Appendix C: CSUB Skills Lab Diagram



Appendix E: COVID Signage

Facemask Do's and Don'ts

For Healthcare Personnel

When putting on a facemask

Clean your hands and put on your facemask so it fully covers your mouth and nose.



DO secure the elastic bands around your ears.



DO secure the ties at the middle of your head and the base of your head.

When wearing a facemask, don't do the following:



DON'T wear your facemask under your nose or mouth.



DON'T allow a strap to hang down. DON'T cross the straps.



DON'T touch or adjust your facemask without cleaning your hands before and after.



DON'T wear your facemask on your head.



DON'T wear your facemask around your neck.



DON'T wear your facemask around your arm.

When removing a facemask

Clean your hands and remove your facemask touching only the straps or ties.



DO leave the patient care area, then clean your hands with alcohol-based hand sanitizer or soap and water.



DO remove your facemask touching ONLY the straps or ties, throw it away*, and clean your hands again.

*If implementing limited-reuse: Facemasks should be carefully folded so that the outer surface is held inward and against itself to reduce contact with the outer surface during storage. Folded facemasks can be stored between uses in a clean, sealable paper bag or breathable container.

Additional information is available about how to safely put on and remove personal protective equipment, including facemasks:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>.



CS 338808 Rev 2, 2021.03.04

cdc.gov/coronavirus



Avoid grouping together
(in hallways or any part of the campus)



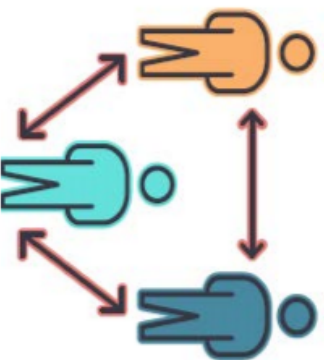
Wear a mask in all areas of the campus



Perform hand hygiene WASH YOUR HANDS or use hand sanitizer



Avoid entering the facility if you have a cough, fever or COVID-19 symptoms



Maintain 6 feet apart (2 arms length) as much as possible



Sneeze or cough into a cloth or tissue, or your elbow



Avoid unnecessary physical contact with others, including shaking hands

6 Steps for Safe & Effective Disinfectant Use



Step 1: Check that your product Is EPA-approved

Find the EPA registration number on the product. Then, check to see if it is on EPA's list of approved disinfectants at: [epa.gov/11stn](https://www.epa.gov/11stn)



Step 2: Read the directions

Follow the product's directions. Check "use sites" and "surface types" to see where you can use the product. Read the "precautionary statements."

Step 3: Pre-clean the surface

Make sure to wash the surface with soap and water if the directions mention pre-cleaning or if the surface is visibly dirty.



Step 4: Follow the contact time

You can find the contact time in the directions. The surface should remain wet the whole time to ensure the product is effective.

Step 5: Wear gloves and wash your hands

For disposable gloves, discard them after each cleaning. For reusable gloves, dedicate a pair to disinfecting COVID-19. Wash your hands after removing the gloves.



Step 6: Lock It up

Keep lids tightly closed and store out of reach of children.

[coronavirus.gov](https://www.coronavirus.gov)

Cleaning Checklist

- Wear disposable gloves for cleaning and disinfecting
- Clean surfaces with soap and water before disinfecting if visibly soiled
- Tables (Sani Spritz)
- Chairs (Sani Spritz)
- Beds (Sani Spritz)
- Bedside tables (Sani Spritz)
- Door handles (Sani Spritz)
- Computers avoid bleach, alcohol, & abrasives on touch screens
 - Keyboard (Sani Spritz)
 - Mouse (Sani Spritz)
 - Computer screen monitor screen cleaner only
- Counters (Sani Spritz)
- Linen
 - Strip after every class
 - Place soiled linen in proper hamper
 - Discard disposable linen in waste bin
- Cabinet doors and handles (Sani Spritz)
- Manikins: see separate instructions
- Equipment (Sani Spritz)
 - IV pumps, IV poles, BP machine, BP cuff, etc.

Student Guide: How to Disinfect Your Bedside Station Checklist

- Remove gown from manikin if used
- Dispose of cloth linen in soiled linen hamper and disposable linen in trash can
- Wipe down bed mattress with Sani Spritz
- Wipe down handrails, controls, and any other part of bed that has been in contact with Sani Spritz
- Wipe down manikin with Sani Spritz (except high fidelity manikins)
 - Clean all manikins with soap and water to remove visible dirt prior to disinfecting
 - Laerdal and CAE recommend disinfecting with 70% isopropyl alcohol
 - Do not scrub manikin skins
- Wipe down bedside table with Sani-Spritz
- Wipe down flow meter, suction, medical air with Sani Spritz if used
- Wipe down Wireless on Wheels (WOW) station with Sani Spritz
 - Keyboard
 - Mouse
 - Table surface and handles
 - Monitor screens use only monitor cleaner to prevent damage
 - Medication drawers
- Wipe down any equipment used with Sani Spritz (IV pump, IV pole, feeding pump, etc.)
- Wipe down your designated chair with Sani Spritz

How to Clean Manikins

- Perform hand hygiene and don gloves
- Remove disposable linens and discard
- Clean bed including rails and mattress with hospital-grade disinfectant
- Moisten front and side of manikin with soap and water solution including under flaps and skin attachments
- Wipe front and sides of manikin with paper towel—DO NOT SCRUB
- Roll manikin onto side
- Clean mattress with hospital-grade disinfectant
- Moisten back of manikin with soap and water solution including under flaps and skin attachments
- Wipe back of manikin with paper towel—DO NOT SCRUB
- Moisten back of manikin with Purell wipes and allow to dry
- Roll manikin onto back
- Moisten front of manikin with Purell wipes and allow to dry
- Replace clean disposable linens
- Doff gloves and perform hand hygiene

Appendix G: Cleaning Product Table

Cleaner & Disinfectant Information

Approved Cleaners:

Soap and water

Available Approved Disinfectants:

Hand sanitizer (various brands—all brands stocked in Skills/SIM lab meet CDC requirements)

Nyco Sani-Spritz:

- Gloves must be worn as it is toxic to your skin
- Allow treated surface to remain wet for 1 minutes and let air dry
- Only use on hard surfaces that do not touch food

Laundry detergent (CSUB campus): Brands dependent on availability

Bleach

Appendix H: Disinfectant Training Instructions

Hello CSUB Nursing Students,

I hope you are enjoying your summer! We are working on plans for the Fall to do our best to keep you safe in our clinical rotations, SIM, and open skills lab experiences. Part of that safety plan will be for students and faculty to wipe down the lab after use before you rotate to the next station. Because of this and the fact that we will be using cleaning solutions, the state requires that you take a brief training on handling cleaners/disinfectants so that you do so safely. I have included the online module training that will take about 45 minutes to an hour.

Please complete this by August 17th, 2020. See directions below:

Step 1: Here is the link for the training: <http://apps.cdpr.ca.gov/schoolipm/>

Step 2: Click on the arrow for training on the right:

Step 3: Click the 3rd one down: **“Take a DPR Healthy Schools Act Online Course”**

Step 4: At this point it will ask you to create a new account. Make sure to use your CSUB email to create your account.

Step 5: Once your account is created, look for **“Available Courses”** and select the second one **“Integrated Germ Management 2019/2020”**. The module will take approximately 45-60 minutes.

Step 6: Once you are completed with the module, it should give you an option to download your certificate. Save a record of this with your name in it:

(Example File name: DPR104_Certificate of Completion_2019-2020_Ball.Krystal) and **email it to Professor Ball at kball1@csub.edu**

C. Typhon Instructions

1. Getting Started

- You will receive an email from the Typhon system with your account information. You should set up your account within 24 hours of receiving this email. If your temporary password has expired, you can generate a new temporary password yourself by going to the login page and clicking “Forgot login or password”.
- The first time you log in, you will be prompted to pay the site fee and complete your account information. At this time, change your password from the default as well. You will also need to accept the end-user license agreement.

2. Instructions & Video Tutorials

- a. Helpful tutorials related to your use of Typhon can be accessed under the “Help” section on the main menu. Please view these tutorials prior to starting a clinical course. The videos are somewhat lengthy and you may want to space them out, watching one or two a day so that you can absorb all of the information.

3. Adding a Preceptor/Clinical Site

- a. Go to “Setup Default Choices” under “Your Account” on the main menu. Under the “Required Defaults” you will notice a link to the side of the preceptor and clinical site drop down menus that says “REQUEST ADDITION.” Click this link and enter in the required information.
- b. Once the addition is verified and approved, you will receive an email notifying you that your preceptor and/or clinical site have been added to the directory. At this point you will be able to select the preceptor/clinical site as your default setting or when inputting a case log.
- c. Note: you will need the preceptor/clinical site contact information including an address, phone number, and email address. Preceptor evaluation links are sent to the email address that you provide, so please ensure that the email address that you submit is your preceptor’s preferred email address.

4. Entering a Case Log

- a. Go to “Add New Case Log” from the main menu. Input the “Date of Encounter” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Then click “Save Data.”
- b. Input all relevant and required information and then click “Save Data” located in the center of the screen.
- c. At any point you can delete the case. That option is located in the bottom right hand corner. You can also save the case and begin a new one or go to the next case in your case log list by clicking on those options in the bottom left hand corner.

5. Reviewing Faculty Case Log Comments

- a. Go to “Case Log Highlights (by Day/Week/Month)” under “Case Log Reports” on the main menu. Input the “Date of Case Logs” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. You may also select the option to see the week, month, or daily totals incorporating that

date by checking the corresponding box below. Then click “Apply Filters.” Any faculty comments will appear in the first column in red next to the case log number.

6. Entering a Time Log

- a. Go to “My Time Logs” from the main menu. Click on “Add a Daily Time Log” and input the “Date of Time Log” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Make sure your “Course” is listed correctly, then click “Save Data.”
- b. Input the number of hours and/or minutes for your clinical shift that day and click “Save Data.”
- c. You may also check the box “Display patient, consult & conference time” if you would like those totals made available on the screen. If you want to see your shift time parallel to your patient time, go to “My Hours by Course” under the “Other Activities & Reports” heading. You may also go into “My Time Logs” and select a date range and check the “Display patient, consult & conference time,” box in the top left corner, then hit “Apply Filters.”

7. Completing an Evaluation

- a. Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Click on the appropriate link to complete the evaluation. Make sure you hit the “Submit Evaluation” button when finished.

8. Viewing Evaluations Completed About You

- a. Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Evaluations completed about you are listed on the bottom portion of the page.

9. Uploading External Documents

- a. Go to “My External Documents” under “Other Activities & Reports” on the main menu. Then click “Add a Document.”
- b. When uploading documents for your faculty to view, please select “Word” or “PDF” for category. Your faculty is not able to view documents with the category of “My Portfolio.”

10. Missing Information

- a. The “Missing Information” link on the main menu will have a flashing red arrow next to it if any of your case logs are incomplete. You would simply click on “Missing Information,” view the entry and input the required data.

(Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013)
Revised GPC 11/2016

D. Resources

NONPF (2013). Population-Focused Nurse Practitioner Competencies. www.nonpf.org

NONPF (2017). Nurse Practitioner Core Competencies Content. www.nonpf.org

E. General Instructions and Application Requirements for California Nurse Practitioner (NP) Certification

Instructions for Applying for a Nurse Practitioner Certification

<http://www.rn.ca.gov/pdfs/applicants/np-app.pdf>

Instructions for Applying for a Nurse Practitioner Furnishing Number

<http://www.rn.ca.gov/pdfs/applicants/npf-app.pdf>

Application Process for AANP certification

<https://www.aanpcert.org/ptistore/control/certs/process>

Application process for ANCC certification

<https://www.nursingworld.org/our-certifications/family-nurse-practitioner/>