



**REGENT UNIVERSITY**  
SCHOOL OF NURSING

# **MSN Program Student Handbook**

(2024-2025)



## Table of Contents

<i>Welcome To Regent University School of Nursing</i> .....	4
<i>Purpose of the Handbook</i> .....	5
<b>Mission, Vision, Philosophy</b> .....	6
<i>MSN Overview</i> .....	8
<b>Program Learning Outcomes</b> .....	Error! Bookmark not defined.
<b>MSN Nurse Educator</b> .....	Error! Bookmark not defined.
<b>MSN Nurse Leadership And Management</b> .....	Error! Bookmark not defined.3
<b>MSN APRN Program Learning Outcomes</b> .....	Error! Bookmark not defined.5
<b>MSN APRN Psychiatric Mental Health Nurse Practitioner</b> .....	Error! Bookmark not defined.6
<b>MSN APRN Family Nurse Practitioner</b> .....	Error! Bookmark not defined.7
<i>Curriculum</i> .....	18
<i>Policies for Admission, Progression &amp; Retention</i> .....	20
<b>Admission Requirements</b> .....	Error! Bookmark not defined.
<b>Progression Policy</b> .....	20
<b>Academic Probation</b> .....	21
<i>Graduation Requirements</i> .....	22
<i>MSN Policies and Procedures</i> .....	23
<b>Disability Services</b> .....	23
<b>Grading Scale</b> .....	23
<b>Preceptor and Affiliation Information</b> .....	25
<b>Preceptor Requirements</b> .....	25
<b>Clinical Requirements</b> .....	26
<b>Preceptor Site Compliance</b> .....	26
<b>Practicum Hour Clinical Logging System</b> .....	26
<b>Criminal Background Check and 10 Panel Drug Screen Progression</b> .....	26
<b>Substance Abuse Policy</b> .....	28
<b>Dress Code Policy</b> .....	28
<b>Unsafe and Unethical Nursing Practice</b> .....	28

Academic Integrity/ Plagiarism .....	28
Confidentiality and Privacy in Practice (HIPAA).....	299
Communication Policy .....	29
Late Assignment Policy .....	29
Participation Policies .....	30
Quizzes .....	30
Canvas Policy .....	30
<i>Student Expectations</i> .....	32
Student Responsibilities.....	32
Online Responsibilities/ Email Etiquette.....	32
Course Expectations .....	32
Shadow Health .....	32
Student Evaluation .....	33
Access to Records (FERPA).....	33
Academic Advising.....	33
Student Grievance and Procedure .....	33
<i>Appendix A</i> .....	34
<i>PROGRESSION POLICY ACKNOWLEDGEMENT</i> .....	34
<i>Appendix B</i> <i>REGENT UNIVERSITY'S NURSING PROGRAM HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA)</i> .....	36
<i>Appendix C</i> <i>ACKNOWLEDGMENT OF RECEIPT OF HIPAA PRIVACY GUIDELINES</i> .....	39
<i>Appendix D</i> .....	40
<i>NOTE OF CONCERN</i> .....	40
<i>APPENDIX E</i> .....	44
<i>GRADUATE HANDBOOK SIGNATURE PAGE</i> .....	44

## Welcome To Regent University School of Nursing

Dear Student,

It is our pleasure and honor to welcome you to Regent University. You have made a great investment in your future by selecting a school that will give you the high-quality, Christ-centered education necessary to bring innovative solutions to the field of nursing and to prepare you to be Christian leaders to change the world. We offer a supportive, collaborative environment to enhance your success as you progress through our program.

This handbook is a very important resource designed to provide you with information on life as a student at Regent University. Our highly trained faculty and staff will support you every step of the way and help you get the most out of your experience here.

Graduates of this program represent the future of nursing and are well-prepared to improve the care of the patients we serve. We extend our best wishes for a dynamic and rewarding educational experience. Thank you for being a part of Regent's mission to prepare Christian leaders for lives of significant purpose and service.

God's blessings,

Regent School of Nursing Faculty

**For this reason, since the day we heard about you, we have not stopped praying for you. We continually ask God to fill you with the knowledge of his will through all the wisdom and understanding that the Spirit gives, so that you may live a life worthy of the Lord and please him in every way: bearing fruit in every good work, growing in the knowledge of God, being strengthened with all power according to his glorious might so that you may have great endurance and patience, and giving joyful thanks to the Father, who has qualified you to share in the inheritance of his holy people in the kingdom of light. For he has rescued us from the dominion of darkness and brought us into the kingdom of the Son he loves, in whom we have redemption, the forgiveness of sins.**

**-Colossians 1: 9-1**

*This handbook offers additional information to that offered by other university policies and procedures (e.g., Regent University Student Handbook, University Catalog) to assist students with managing their academic programs. While every effort is made to ensure that there are no discrepancies between program/school handbooks and university policies, if those discrepancies do occur, university policies take precedence.*

## Purpose of the Handbook

This handbook is designed to provide information for graduate students seeking a master's degree at Regent University regarding policies, procedures, and resources. It is designed for students currently enrolled in graduate nursing programs. This handbook is intended to supplement Regent University [student handbook](#) the Regent University [graduate catalog](#) and other Regent University policies as indicated.

Changes made within the academic year will be communicated via e-mail and/or posted in Canvas. Students are responsible to use this handbook as a resource when questions arise as well as a guide through academic and non-academic policies and procedures.

It is the responsibility of the student to review and understand any changes made to the handbook during the entire time they are enrolled in Regent's nursing program as well as recognizing that changes made to policies and procedures may impact them as a student. The updated handbook will be located on the University's School of Nursing website.

Students are required to read the handbook in its entirety and to sign the Handbook Acknowledgement document. (Appendix E)

## **Mission, Vision, Philosophy**

### **Mission**

Regent University's nursing program exists to create a dynamic community of learning to develop exceptionally prepared nurses who will lead to improve health outcomes locally and globally. We promote excellence in teaching, research, service, and practice with a primary focus in faith integration and Christian leadership to change the world. We are committed to being purposeful, caring, disciplined, and celebrative with each student who enters our program.

### **Vision**

The vision of Regent University's nursing program is to be a premier nursing program dedicated to cultivating Christian leaders in the field of nursing to improve health outcomes both locally and globally.

### **Philosophy**

The philosophy of the Regent University nursing program is consistent with the mission, vision, and core values of Regent University in fostering Christian leaders to change the world in the discipline of nursing. The philosophy addresses the concepts of the nursing metaparadigm: patient, environment, health, and nursing. Additionally, it addresses learning. These pillars of nursing education and nursing practice reflect the views of the faculty regarding learning, teaching, and specifically nursing education.

### **Person**

The person is multidimensional and encompasses the physical, emotional, social, and spiritual components of the individual that is receiving nursing care. A holistic approach is necessary to care for the patient in body, mind and soul and extends to the family and community. The patient is valued and is to be treated with respect and dignity and should be empowered to manage their own health and retain the right to make informed decisions about their healthcare. Regent students value everyone as a creation of God complete with a giftedness to serve their unique purpose.

## Environment

The environment represents external and internal influences for the patient and student. The external environment goes beyond surrounding physical parameters to include historical, political, economic, cultural, and spiritual influences. Individual experiences and perceptions form the internal environment. Thus, there is a relationship between the health of the patient and the quality of their environment, both externally and internally. It is important that the patient responds and adapts to their environment in order to achieve healthy outcomes.

Likewise, it is important that the student responds and adapts to their learning environment in order to master their student outcomes. Regent University's nursing program seeks to support a healthy learning environment, with emphasis on spiritual adaptation and enlightenment, as an essential element in promoting wellness in student development and patient outcomes.

## Health

Health is a dynamic, multidimensional phenomenon that occurs on a wellness to illness continuum. It is influenced by a patient's body, mind, and spirit. The two concepts, wellness and illness, are mostly self-defined, allowing for individualized perceptions of health. Wellness is sought throughout the process of healing; therefore, wellness promotion and healthy patient goals are an integral element in nursing and patient education. Healing is an active process that is patient driven by perception, subjective information, and objective, physical evidence. It is therefore important to recognize the autonomy of patients in the healing process. Regent University's nursing program seeks to support the process of health and improving patient outcomes through creating a learning environment that emphasizes the three parts of the person and the definition of healing based on patient autonomy and world-view perspectives.

## Nursing

Nursing is a multifaceted healthcare profession that seeks to enhance the quality of life for individuals, families and communities. Through coordinated care, nurses effectively promote health and prevent illness. Regent University's nursing program seeks to develop caring, service-minded nurses who believe nursing is a calling and a ministry of healing.

## Learning Goals

Learning is a continuous, life-long process that occurs at any developmental level and is evidenced by consistent changes in behavior. Students bring previous life experiences to the learning environment. These previous experiences influence the student's attitudes and motivation to learn. To facilitate learning, Regent University nursing faculty serve as teachers, resources, mentors, and professional role models for students. Faculty use a variety of teaching and learning strategies to facilitate the student's practice of professional and advanced nursing. The goal of nursing education at Regent University is to assist the students to think critically, solve problems creatively, integrate faith in the decision-making process, and practice nursing from a caring perspective. Regent University's MSN program is designed to facilitate the development of advanced practice nurses and leaders. Graduates emerge ready to apply evidence-based practices, lead quality improvements, and contribute meaningfully to healthcare in a variety of settings, use cultural sensitivity, and adhere to the standards of professional practice guidelines. The focus is on developing expertise in leadership and advanced nursing roles to meet the health and educational needs of the patient, community, and overall profession.

## MSN Overview

The MSN program at Regent University has four MSN degree concentrations: Nurse Educator, Nurse Leadership and Management, APRN Psychiatric Mental Health Nurse Practitioner and APRN Family Nurse Practitioner.

The Nurse Educator concentration prepares nurses to serve as faculty or in nurse educator roles within health care settings. The curriculum prepares graduates to develop and evaluate curriculum and to effectively implement innovative teaching strategies using multiple learning formats. The program will focus on curriculum design, delivery and evaluation, informatics integration, evidence-based educational strategies and supporting quality and safety in the classroom, clinical and healthcare settings. Coursework is on-line but clinical practice is required.

The Nursing Leadership and Management concentration prepares nurses to serve in leadership and administrative roles within health care settings. The curriculum uses diverse leadership and organizational theories as a foundation and is designed to provide the participant with advanced problem-solving skills to address issues in modern healthcare. The program focuses on models of leadership, strategic planning, program development and management, financial management, and evidence-based healthcare delivery. Coursework is on-line but clinical practice is required.

The Psychiatric Mental Health Nurse Practitioner and the Family Nurse Practitioner Concentrations offer tracks that lead to Advanced Practice Registered Nursing preparation. This program offers expert preparation in the identified populations and prepares students to function as change agents by bringing evidence to practice. Coursework is on-line but clinical practice, and an on-site residency is required for competency training and evaluation.

## Disclaimer

The purpose of this program is to provide individuals with a broad educational background, which integrates the Christian faith, liberal arts, behavioral and social sciences as well as nursing. Courses offered through the School of Nursing, as well as any accompanying materials and instruction, are intended for educational purposes. They are neither designed to give medical / legal advice nor take the place of appropriate legal, professional, or medical consultation. As laws vary from state to state, and from state to state, students are advised to discuss any specific questions with the proper authorities.



## MSN Program - Nurse Educator & Nursing Leadership & Management Concentrations Program Learning Outcomes (PLO's)

Graduates with a Master of Science in Nursing degree, Nursing Leadership and Management and Nursing Education Concentrations will be able to:

1. Synthesize research from education, nursing, business, the humanities, and the sciences.

(\***Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 4** (Competencies: 4.1, 4.2, 4.3; Sub-Competencies: 4.1h, i, j, k, l, m, 4.2f, g, h, i, j, k, 4.3e, f, g, h, l); **Concepts for Nursing Practice: 1, 2, 4, 5, 6, 7; AONE Competencies: 2, 4**).

2. Evaluate a broad range of change, leadership, teaching, and management strategies for influencing health policy, improving nursing practice and health care systems.

(\***Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 3** (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e, f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j); **Domain 5** (Competencies: 5.1, 5.2, 5.3; Sub-Competencies: 5.1i, j, k, l, m, n, o, 5.2g, h, i, j, 5.3e, f, g, h); **Domain 6** (Competencies: 6.1, 6.2, 6.3, 6.4; Sub-Competencies: 6.1g, h, i, j, k, l, 6.2g, h, i, j, 6.3d, 6.4e, f, g, h, l); **Domain 7** (Competencies: 7.1, 7.2, 7.3; Sub-Competencies: 7.1e, f, g, h, 7.2g, h, i, j, k, l, 7.3e, f, g, h); **Domain 9** (Competencies: 9.1, 9.2, 9.3, 9.4, 9.5, 9.6; Sub-Competencies: 9.1h, i, j, k, 9.2h, i, j, k, l, 9.3i, j, k, l, m, n, o, 9.4d, e, f, g, h, 9.5f, g, h, i, 9.6d, e, f, g, h, l); **Domain 10** (Competencies: 10.1, 10.2, 10.3; Sub-Competencies: 10.1c, d, 10.2g, h, i, j, 10.3j, k, l, m, n, o, p, q); **Concepts for Nursing Practice: 1-8; AONE Competencies: 2, 3**).

3. Analyze the ethical, legal, financial, social, political, and spiritual issues impacting diverse client populations, health care, nursing practice and education, with an emphasis on identifying and implementing strategies for enhancement or resolution.

(\***Essentials: Domain 2** (Competencies: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9; Sub-Competencies 2.1d, e, 2.2g, h, i, j, 2.3h, 2.4f, g, 2.5h, i, j, k, 2.6e, f, g, h, i, j, 2.7d, e, f, 2.8f, g, h, i, j, 2.9f, g, h, i, j); **Domain 3** (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e, f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j); **Domain 5** (Competencies: 5.1, 5.2, 5.3; Sub-Competencies: 5.1i, j, k, l, m, n, o, 5.2g, h, i, j, 5.3e, f, g, h); **Domain 7** (Competencies: 7.1, 7.2, 7.3; Sub-Competencies: 7.1e, f, g, h, 7.2g, h, i, j, k, l, 7.3e, f, g, h); **Domain 8** (Competencies: 8.1, 8.2, 8.3, 8.4, 8.5; Sub-Competencies: 8.1g, h, i, j, k, 8.2f, g, h, i, j, 8.3g, h, i, j, k, 8.4e, f, g, 8.5g, h, i, j, k, l); **Domain 9** (Competencies: 9.1, 9.2, 9.3, 9.4, 9.5, 9.6; Sub-Competencies: 9.1h, i, j, k, 9.2h, i, j, k, l, 9.3i, j, k, l, m, n, o, 9.4d, e, f, g, h, 9.5f, g, h, i, 9.6d, e, f, g, h, l); **Domain 10** (Competencies: 10.1, 10.2, 10.3; Sub-Competencies: 10.1c, d, 10.2g, h, i, j, 10.3j, k, l, m, n, o, p, q); **Concepts for Nursing Practice: 1-8**).

4. Synthesize theoretical foundations for nursing, education, business, and health sciences.

(\***Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 2** (Competencies: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9; Sub-Competencies 2.1d, e, 2.2g, h, i, j, 2.3h, 2.4f, g, 2.5h, i, j, k, 2.6e, f, g, h, i, j, 2.7d, e, f, 2.8f, g, h, i, j, 2.9f, g, h, i, j); **Domain 3** (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e, f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j); **Domain 10** (Competencies: 10.1, 10.2, 10.3; Sub-Competencies: 10.1c, d, 10.2g, h, i, j, 10.3j, k, l, m, n, o, p, q); **Concepts for Nursing Practice: 1-8**).

5. Apply knowledge, concepts, strategies, and evidence-based research findings to promote health, prevent disease, enhance the quality of health care and improve the environment in which health care is provided.

(\***Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 2** (Competencies: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9; Sub-Competencies 2.1d, e, 2.2g, h, i, j, 2.3h, 2.4f, g, 2.5h, i, j, k, 2.6e, f, g, h, i, j, 2.7d, e, f, 2.8f, g, h, i, j, 2.9f, g, h, i, j); **Domain 3** (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e, f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j); **Domain 4** (Competencies: 4.1, 4.2, 4.3; Sub-Competencies: 4.1h, i, j, k, l, m, 4.2f, g, h, i, j, k, 4.3e, f, g, h, l); **Domain 5** (Competencies: 5.1, 5.2, 5.3; Sub-Competencies: 5.1i, j, k, l, m, n, o, 5.2g, h, i, j, 5.3e, f, g, h); **Domain 7** (Competencies: 7.1, 7.2, 7.3; Sub-Competencies: 7.1e, f, g, h, 7.2g, h, i, j, k, l, 7.3e, f, g, h); **Concepts for Nursing Practice: 1-8; AONE Competencies: 2, 3**).

6. Synthesize knowledge from nursing science, business, economics, finance, marketing, and information technology to facilitate the practice of leading and managing in organizational and community arenas.  
(\***Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 6** (Competencies: 6.1, 6.2, 6.3, 6.4; Sub-Competencies: 6.1g, h, i, j, k, l, 6.2g, h, i, j, 6.3d, 6.4e, f, g, h, l); **Domain 8** (Competencies: 8.1, 8.2, 8.3, 8.4, 8.5; Sub-Competencies: 8.1g, h, i, j, k, 8.2f, g, h, i, j, 8.3g, h, i, j, k, 8.4e, f, g, 8.5g, h, i, j, k, l); **Domain 10** (Competencies: 10.1, 10.2, 10.3; Sub-Competencies: 10.1c, d, 10.2g, h, i, j, 10.3j, k, l, m, n, o, p, q); **Concepts for Nursing Practice:** 1-7; **AONE Competencies:** 2, 3, 4, 5).
  
7. Function effectively in the role of nurse administrator by communicating with other professionals and working collaboratively within a healthcare, institutional or community setting to establish a climate that fosters the development of others and facilitates a commitment to excellence in nursing and lifelong learning.  
(\***Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 4** (Competencies: 4.1, 4.2, 4.3; Sub-Competencies: 4.1h, i, j, k, l, m, 4.2f, g, h, i, j, k, 4.3e, f, g, h, l); **Domain 5** (Competencies: 5.1, 5.2, 5.3; Sub-Competencies: 5.1i, j, k, l, m, n, o, 5.2g, h, i, j, 5.3e, f, g, h); **Domain 6** (Competencies: 6.1, 6.2, 6.3, 6.4; Sub-Competencies: 6.1g, h, i, j, k, l, 6.2g, h, i, j, 6.3d, 6.4e, f, g, h, l); **Domain 7** (Competencies: 7.1, 7.2, 7.3; Sub-Competencies: 7.1e, f, g, h, 7.2g, h, i, j, k, l, 7.3e, f, g, h); **Domain 9** (Competencies: 9.1, 9.2, 9.3, 9.4, 9.5, 9.6; Sub-Competencies: 9.1h, i, j, k, 9.2h, i, j, k, l, 9.3i, j, k, l, m, n, o, 9.4d, e, f, g, h, 9.5f, g, h, i, 9.6d, e, f, g, h, l); **Domain 10** (Competencies: 10.1, 10.2, 10.3; Sub-Competencies: 10.1c, d, 10.2g, h, i, j, 10.3j, k, l, m, n, o, p, q); **Concepts for Nursing Practice:** 1-8; **AONE Competencies:** 2, 3).
  
8. Participate in decision-making, risk management, strategic and succession planning to analyze governance, care delivery, relationships, advocacy, policy, quality, and outcome measurement within a diverse modern healthcare environment.  
(\***Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 2** (Competencies: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9; Sub-Competencies 2.1d, e, 2.2g, h, i, j, 2.3h, 2.4f, g, 2.5h, i, j, k, 2.6e, f, g, h, i, j, 2.7d, e, f, 2.8f, g, h, i, j, 2.9f, g, h, i, j); **Domain 3** (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e, f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j); **Domain 5** (Competencies: 5.1, 5.2, 5.3; Sub-Competencies: 5.1i, j, k, l, m, n, o, 5.2g, h, i, j, 5.3e, f, g, h); **Domain 6** (Competencies: 6.1, 6.2, 6.3, 6.4; Sub-Competencies: 6.1g, h, i, j, k, l, 6.2g, h, i, j, 6.3d, 6.4e, f, g, h, l); **Domain 7** (Competencies: 7.1, 7.2, 7.3; Sub-Competencies: 7.1e, f, g, h, 7.2g, h, i, j, k, l, 7.3e, f, g, h); **Domain 8** (Competencies: 8.1, 8.2, 8.3, 8.4, 8.5; Sub-Competencies: 8.1g, h, i, j, k, 8.2f, g, h, i, j, 8.3g, h, i, j, k, 8.4e, f, g, 8.5g, h, i, j, k, l); **Domain 9** (Competencies: 9.1, 9.2, 9.3, 9.4, 9.5, 9.6; Sub-Competencies: 9.1h, i, j, k, 9.2h, i, j, k, l, 9.3i, j, k, l, m, n, o, 9.4d, e, f, g, h, 9.5f, g, h, i, 9.6d, e, f, g, h, l); **Domain 10** (Competencies: 10.1, 10.2, 10.3; Sub-Competencies: 10.1c, d, 10.2g, h, i, j, 10.3j, k, l, m, n, o, p, q); **Concepts for Nursing Practice:** 1-8; **AONE Competencies:** 1, 2, 3, 4, 5).

## MSN-Nurse Educator Concentration Student Learning Objectives (NE-SLO's)

The Nurse Educator concentration prepares nurses to serve as faculty or in nurse educator roles within health care settings. The curriculum prepares graduates to develop and evaluate curriculum and to effectively implement innovative teaching strategies using multiple learning formats. The program will focus on curriculum design, delivery and evaluation, informatics integration, evidence-based educational strategies and supporting quality and safety in the classroom, clinical and healthcare settings.

The Student Learning Outcomes (SLOs) of the Nurse Educator at the Regent University provide additional support for the program content by supporting the MSN Program PLO's as well as providing student experiences consistent with the nursing educator competencies of the \*National Nursing League *Core Competencies of Novice Nurse Educators*.

Graduates with a Master of Science in Nursing degree, Nurse Educator Concentration will:

1. Synthesize research from education, nursing, the humanities, and the sciences. (MSN PLO 1; \*NLN Novice Nurse Educator Competency VII – *Engage in Scholarship*).
2. Evaluate a broad range of change, leadership, teaching, and management strategies for influencing health policy, improving nursing practice and health care systems. (MSN PLO 2; \*NLN Novice Nurse Educator Competency V - *Function as a Change Agent and Leader*).
3. Analyze the ethical, legal, financial, social, political, and spiritual issues impacting diverse client populations, health care, nursing practice and education, with an emphasis on identifying and implementing strategies for enhancement or resolution. (MSN PLO 3).
4. Synthesize theoretical foundations for nursing, education, and health sciences. (MSN PLO 4; \*NLN Novice Nurse Educator Competency I – *Facilitate Learning*).
5. Apply knowledge, concepts, strategies, and evidence-based research findings to promote health, prevent disease, enhance the quality of health care and improve the environment in which health care is provided. (MSN PLO 5; \*NLN Novice Nurse Educator Competency VI - *Pursue Continuous Quality Improvement in the Nurse Educator Role*).
6. Synthesize knowledge from nursing science, learning theory and information technology to facilitate the application and practice of teaching in the classroom, clinical and community arenas. (MSN PLO 6; \*NLN Novice Nurse Educator Competency I – *Facilitate Learning*).
7. Function effectively in the role of nurse educator by working collaboratively within an academic, institutional or community setting to establish a climate that fosters the development of learners and facilitates a commitment to excellence in nursing education and lifelong learning. (MSN PLO 7; \*NLN Novice Nurse Educator Competency I, II, VIII – *Facilitate Learning, Facilitate Learner Development and Socialization, & Function within the Educational Environment*).
8. Develop and implement educational curriculum and teaching-learning activities based on

theories, knowledge, and principles of learning and pedagogy and andragogy (\*NLN *Novice Nurse Educator* Competency IV – *Participate in Curriculum Design and Evaluation of Program Outcomes*).

9. Engage in formative and summative evaluation of teaching-learning and use results of evaluation to revise and enhance nursing education. (\*NLN *Novice Nurse Educator* Competency III – *Use Assessment and Evaluation Strategies*).

\*National League for Nursing, (2020). *Novice Nurse Educator Competencies*. Accessible online at <https://www.nln.org/news/newsroom/nln-position-documents/novice-nurse-educator-competencies-with-task-statements>

## MSN-Nursing Leadership and Management Concentration Student Learning Objectives (NLM-SLO's)

The Nursing Leadership and Management concentration prepares nurses to serve in leadership and administrative roles within health care settings. The curriculum uses diverse leadership and organizational theories as a foundation and is designed to provide the participant with advanced problem-solving skills to address issues in modern healthcare. The program focuses on models of leadership, strategic planning, program development and management, financial management, and evidence-based healthcare delivery.

The Student Learning Outcomes (SLOs) of the Nursing Leadership and Management Concentration at Regent University will provide additional support for the program content by supporting the MSN Program PLO's as well as providing student experiences consistent with the nursing leadership and management competencies of the \*\*American Organization of Nurse Executives AONE Nurse Executive Competencies (AONE, 2015).

Graduates with a Master of Science in Nursing degree, Nursing Leadership and Management and concentration will be able to:

1. Synthesize research from education, nursing, business, the humanities, and the sciences. (MSN PLO 1; \*\*AONE Competencies: 2, ,4).
2. Evaluate a broad range of change, leadership, teaching, and management strategies for influencing health policy, improving nursing practice and health care systems. (MSN PLO 2; \*\*AONE Competencies: 2, 3).
3. Analyze the ethical, legal, financial, social, political, and spiritual issues impacting diverse client populations, health care, nursing practice and education, with an emphasis on identifying and implementing strategies for enhancement or resolution. (MSN PLO 3).
4. Synthesize theoretical foundations for nursing, education, business, and health sciences. (MSN PLO 4).
5. Apply knowledge, concepts, strategies, and evidence-based research findings to promote health, prevent disease, enhance the quality of health care and improve the environment in which health care is provided. (MSN PLO 5; \*\*AONE Competencies: 2, 3).
6. Synthesize knowledge from nursing science, business, economics, finance, marketing, and information technology to facilitate the practice of leading and managing in organizational and community arenas. (MSN PLO 6; \*\*AONE Competencies: 2, 3, 4, 5).
7. Function effectively in the role of nurse administrator by communicating with other professionals and working collaboratively within a healthcare, institutional or community setting to establish a climate that fosters the development of others and facilitates a commitment to excellence in nursing and lifelong learning. (MSN PLO 7; \*\*AONE Competencies: 2, 3).
8. Participate in decision-making, risk management, strategic and succession planning to analyze governance, care delivery, relationships, advocacy, policy, quality, and outcome measurement within a diverse modern healthcare environment. (MSN PLO 8; \*\*AONE Competencies: 1, 2, 3, 4, 5).

\*\*American Organization of Nurse Executives. (2015). AONE Nurse Executive Competencies. Accessed at: <https://www.aonl.org/sites/default/files/aone/nec.pdf>

## MSN-APRN Program Learning Outcomes (PLO's)

The Psychiatric Mental Health Nurse Practitioner and FNP Concentrations offer tracks that lead to Advanced Practice Registered Nursing preparation. This program offers expert preparation in the identified populations and prepares students to function as change agents by bringing evidence to practice. Coursework is on-line but clinical practice is required.

- 1. Demonstrate** competence in the integration of nursing and the related sciences required to analyze, design, implement, and evaluate aggregate outcomes of nursing care in diverse populations. (*\*Essentials: Domain 1* (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 2** (Competencies: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9; Sub-Competencies 2.1d, e, 2.2g, h, i, j, 2.3h, 2.4f, g, 2.5h, i, j, k, 2.6e, f, g, h, i, j, 2.7d, e, f, 2.8f, g, h, i, j, 2.9f, g, h, i, j)); **Concepts for Nursing Practice: 1-8; \*\*NONPF NP Domains: 1, 2).**
- 2. Analyze and apply** research outcomes in the practice setting, resolve practice outcomes across healthcare environments and communicate results intended to advance clinical practice. (*\*Essentials: Domain 1* (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 3** (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e, f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j)); **Domain 4** (Competencies: 4.1, 4.2, 4.3; Sub-Competencies: 4.1h, i, j, k, l, m, 4.2f, g, h, i, j, k, 4.3e, f, g, h, l); **Concepts for Nursing Practice: 1, 2, 4, 5, 6, 7, 8; \*\*NONPF NP Domains: 1, 3, 4).**
- 3. Demonstrate** competence in the application and determination of appropriate health care informatics and emergent technologies designed to improve health care outcomes (*\*Essentials: Domain 8* (Competencies: 8.1, 8.2, 8.3, 8.4, 8.5; Sub-Competencies: 8.1g, h, i, j, k, 8.2f, g, h, i, j, 8.3g, h, i, j, k, 8.4e, f, g, 8.5g, h, i, j, k, l)); **Concepts for Nursing Practice: 1, 2, 4, 5, 6, 7; \*\*NONPF NP Domain: 8).**
- 4. Advocate** for policies and contribute to the development of policies that lead to improved health outcomes for populations and improvement of the quality of the healthcare system (*\*Essentials: Domain 3* (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e, f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j)); **Domain 6** (Competencies: 6.1, 6.2, 6.3, 6.4; Sub-Competencies: 6.1g, h, i, j, k, l, 6.2g, h, i, j, 6.3d, 6.4e, f, g, h, l); **Domain 7** (Competencies: 7.1, 7.2, 7.3; Sub-Competencies: 7.1e, f, g, h, 7.2g, h, i, j, k, l, 7.3e, f, g, h); **Concepts for Nursing Practice: 1, 2, 4, 5, 6, 7, 8; \*\*NONPF NP Domains: 3, 6, 7).**
- 5. Demonstrate** competence in the leadership, communication, collaboration, and consultation skills required to advance interprofessional teams and partnerships and provide quality and safe care. (*\*Essentials: Domain 2* (Competencies: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9; Sub-Competencies 2.1d, e, 2.2g, h, i, j, 2.3h, 2.4f, g, 2.5h, i, j, k, 2.6e, f, g, h, i, j, 2.7d, e, f, 2.8f, g, h, i, j, 2.9f, g, h, i, j)); **Domain 5** (Competencies: 5.1, 5.2, 5.3; Sub-Competencies: 5.1i, j, k, l, m, n, o, 5.2g, h, i, j, 5.3e, f, g, h); **Domain 6** (Competencies: 6.1, 6.2, 6.3, 6.4; Sub-Competencies: 6.1g, h, i, j, k, l, 6.2g, h, i, j, 6.3d, 6.4e, f, g, h, l); **Domain 7** (Competencies: 7.1, 7.2, 7.3; Sub-Competencies: 7.1e, f, g, h, 7.2g, h, i, j, k, l, 7.3e, f, g, h); **Domain 8** (Competencies: 8.1, 8.2, 8.3, 8.4, 8.5; Sub-Competencies: 8.1g, h, i, j, k, 8.2f, g, h, i, j, 8.3g, h, i, j, k, 8.4e, f, g, 8.5g, h, i, j, k, l); **Domain 9** (Competencies: 9.1, 9.2, 9.3, 9.4, 9.5, 9.6; Sub-Competencies: 9.1h, i, j, k, 9.2h, i, j, k, l, 9.3i, j, k, l, m, n, o, 9.4d, e, f, g, h, 9.5f, g, h, i, 9.6d, e, f, g, h, l); **Domain 10** (Competencies: 10.1, 10.2, 10.3; Sub-Competencies: 10.1c, d, 10.2g, h, i, j, 10.3j, k, l, m, n, o, p, q); **Concepts for Nursing Practice: 1-8; \*\*NONPF NP Domains: 2, 5, 6, 7, 8, 9, 10).**
- 6. Apply** evidence-based advanced clinical decision making to deliver ethical, person-centered, and culturally competent care to diverse individuals, families, and populations. (*\*Essentials: Domain 2* (Competencies: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9; Sub-Competencies 2.1d, e, 2.2g, h, i, j, 2.3h, 2.4f, g, 2.5h, i, j, k, 2.6e, f, g, h, i, j, 2.7d, e, f, 2.8f, g, h, i, j, 2.9f, g, h, i, j)); **Domain 3** (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e,

f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j); **Domain 5** (Competencies: 5.1, 5.2, 5.3; Sub-Competencies: 5.1i, j, k, l, m, n, o, 5.2g, h, i, j, 5.3e, f, g, h); **Concepts for Nursing Practice:** 1-8; **\*\*NONPF NP Domains:** 2, 3, 5).

- 7. Demonstrate** an advanced level of understanding of nursing and relevant sciences as well as the ability to translate this knowledge into practice in order to promote positive health care outcomes for individuals, populations, or systems. (**\*Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 3** (Competencies: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; Sub-Competencies: 3.1j, k, l, m, n, 3.2d, e, f, g, h, 3.3c, d, e, f, 3.4f, g, h, i, j, k, l, 3.5f, g, h, i, 3.6f, g, h, i, j); **Domain 4** (Competencies: 4.1, 4.2, 4.3; Sub-Competencies: 4.1h, i, j, k, l, m, 4.2f, g, h, i, j, k, 4.3e, f, g, h, l); **Concepts for Nursing Practice:** 1, 2, 4, 5, 6, 7, 8; **\*\*NONPF NP Domain:** 1, 3, 4).
- 8. Demonstrate** skills necessary for independent, person-centered, advanced-level nursing practice and apply best available evidence to continuously improve quality of clinical practice. (**\*Essentials: Domain 1** (Competencies: 1.1, 1.2, 1.3; Sub-Competencies: 1.1e, f, g, 1.2f, g, h, i, 1.3 d, e, f); **Domain 2** (Competencies: 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9; Sub-Competencies 2.1d, e, 2.2g, h, i, j, 2.3h, 2.4f, g, 2.5h, i, j, k, 2.6e, f, g, h, i, j, 2.7d, e, f, 2.8f, g, h, i, j, 2.9f, g, h, i, j); **Domain 5** (Competencies: 5.1, 5.2, 5.3; Sub-Competencies: 5.1i, j, k, l, m, n, o, 5.2g, h, i, j, 5.3e, f, g, h); **Domain 9** (Competencies: 9.1, 9.2, 9.3, 9.4, 9.5, 9.6; Sub-Competencies: 9.1h, i, j, k, 9.2h, i, j, k, l, 9.3i, j, k, l, m, n, o, 9.4d, e, f, g, h, 9.5f, g, h, i, 9.6d, e, f, g, h, l); **Domain 10** (Competencies: 10.1, 10.2, 10.3; Sub-Competencies: 10.1c, d, 10.2g, h, i, j, 10.3j, k, l, m, n, o, p, q); **Concepts for Nursing Practice:** 1-8; **\*\*NONPF NP Domain:** 1, 2, 5, 9, 10).

\* American Association of Colleges of Nursing [AACN]. (2021). *The Essentials: Core competencies for professional nursing education*. Accessible online at <https://www.aacnnursing.org/Portals/0/PDFs/Publications/Essentials-2021.pdf>

\*\*National Organization of Nurse Practitioner Faculties [NONPF]. (2022) *Nurse Practitioner Role Core Competencies*. Accessible online at [https://www.nonpf.org/page/NP\\_Role\\_Core\\_Competencies](https://www.nonpf.org/page/NP_Role_Core_Competencies)

## **MSN-APRN Program Psychiatric Mental Health Nurse Practitioner (PMHNP) Concentration Student Learning Objectives (PMHNP-SLO's)**

The Student Learning Outcomes (SLOs) of the Psychiatric Mental Health Nurse Practitioner Concentration at Regent University will provide additional support for the program content.

Those who complete this concentration with a certificate in Psychiatric Mental Health Nurse Practitioner will:

- 1. Demonstrate** leadership and collaboration with interprofessional colleagues to advocate at the local, state, and national levels for increased awareness of mental disorders, reduction of health disparities and stigma, and improvement of clinical outcomes for populations with mental health problems and psychiatric disorders. (PLO's 1, 2, 4, 5)
- 2. Evaluate** how the structure of health delivery systems, organizational practices, financing, marketing, cost, and access impact health care in order to continuously improve the quality and safety of mental health services (PLO's 1, 3, 4, 5, 6)
- 3. Demonstrate** advanced knowledge of neurobiology, psychopathology, psychopharmacology, and psychotherapeutic interventions, and translate this knowledge from research into clinical practice in order to improve mental health outcomes in diverse populations (PLO's 1, 2, 4, 5, 6, 7, 8).

4. **Display** information literacy and **utilize** appropriate information technologies to evaluate and improve mental health care within the multidisciplinary collaborative context of advanced practice nursing (*PLO's 2, 3*).
5. **Advocate** for ethical healthcare policies that promote awareness, access, equity, improved quality, and reduced cost of mental health services (*PLO's 4, 5, 6, 7*).
6. **Provide** ethical and culturally competent mental health services (including assessment, diagnosis, and treatment of psychiatric disorders and co-morbid physical and mental disorders) to diverse populations across the lifespan (*PLO's 1, 5, 6, 7, 8*).



## MSN-APRN Program Family Nurse Practitioner (FNP) Concentration Student Learning Objectives (FNP-SLO's)

The Student Learning Outcomes (SLOs) of the Family Nurse Practitioner Concentration at Regent University will provide additional support for the program content.

Graduates with a Master of Science in Nursing degree, Family Nurse Practitioner Concentration will:

1. **Demonstrate** leadership and collaboration with interprofessional colleagues to advocate for the improvement of clinical outcomes in diverse populations across the lifespan. (*PLO's 1, 2,4, 5*).
2. **Evaluate** how the structure of health delivery systems, organizational practices, financing, marketing, and access impact health care in order to continuously improve the quality and safety of healthcare services (*PLO's 1, 3, 4, 5, 6*).
3. **Demonstrate** advanced knowledge of pharmacology, pathophysiology, and advanced health assessment, and translate this knowledge from research into clinical practice in order to improve health outcomes of diverse individuals and families (*PLO's 1, 2, 4, 5, 6, 7, 8*).
4. **Display** information literacy and utilize appropriate information technologies to evaluate and improve healthcare outcomes within the multidisciplinary collaborative context of advanced practice nursing (*PLO's 2, 3*).
5. **Advocate** for ethical healthcare policies that promote awareness, access, equity, improved quality, and reduced cost of healthcare services for diverse individuals and families across the lifespan (*PLO's 4, 5, 6, 7*).
6. **Provide** ethical and culturally competent healthcare services to diverse populations across the lifespan (including assessment, diagnosis, and treatment of acute and chronic disease) through the lens of a Christian worldview (*PLO's 1, 5, 6, 7, 8*).

## Curriculum

The MSN program will offer four concentrations: Nurse Educator (36 credits), Nurse Leadership and Management (36 credits), Psychiatric Mental Health Nurse Practitioner Concentration (47 credits) and Family Nurse Practitioner (47 credits).

### **Required Core Courses** (24 credits):

- NURS 508 Theoretical and Ethical Nursing Foundations (3 credits)
- NURS 520 Nursing Informatics (3 credits)
- NURS 540 Advanced Pathophysiology (3 credits)
- NURS 541 Advanced Pharmacology (3 credits)
- NURS 550 Advanced Health Assessment (3 credits)
- NURS 605 Organization of Nursing and Healthcare Delivery Systems (3 credits)
- NURS 633 Research Methods and Biostatistics I (3 credits)
- NURS 634 Research Methods and Biostatistics II (3 credits)

In addition to the above required 24 credit hours of core courses, The Nurse Educator concentration and Nurse Leadership and Management concentration will require an additional 12 credit hours each and the Psychiatric Mental Health Nurse Practitioner and Family Nurse Practitioner Concentrations will require 23 additional credit hours.

### **Nurse Educator Concentration** (12 credits)

- NURS 642 Curriculum Development (3 credits)
- NURS 650 Engaged Instruction and Learning (3 credits)
- NURS 684 Assessment Strategies- Practicum I (3 credit hours)
- NURS 685 Evaluation Strategies- Practicum II (3 credits)

### **Nurse Leadership & Management Concentration** (12 credits):

- NURS 610 Administrative Strategies in Nursing (3 credits)
- NURS 620 Financial Management in Health Systems (3 credits)
- NURS 684 Assessment Strategies- Practicum I (3 credit hours)
- NURS 685 Evaluation Strategies- Practicum II (3 credits)

### **Psychiatric Mental Health Nurse Practitioner Concentration (23 specialty credit hours)**

- APRN 551 Advanced Physical Practice Health Assessment Evaluation (0)
- APRN 705 Global Health Challenges and Disparities of Mental Health (2)
- APRN 775 Neurobiology & Differential Diagnosis of Mental Disorders (3)
- APRN 777 Psychopharmacology (3)
- APRN 779 Psychotherapeutic Theories and Clinical Interventions (3)
- APRN 780 Psychiatric Mental Health Nurse Practitioner Practicum I (3)
- APRN 781 Psychiatric Mental Health Nurse Practitioner Practicum II (4)

APRN 782 Psychiatric Mental Health Nurse Practitioner Practicum III (4)

APRN 797 Comprehensive Concentration Review (1)

**Family Nurse Practitioner Concentration (23 specialty credit hours)**

APRN 551 Advanced Physical Practice Health Assessment Evaluation (0)

APRN 707 Primary Care Approaches for Children, Adolescence, & Families (3)

APRN 762 Family Nurse Practitioner I: Management of Acute Disease Across the Lifespan (3)

APRN 763 Family Nurse Practitioner II: Management of Chronic Disease Across the Lifespan (3)

APRN 764 Women's Health and Wellness Promotion in Primary Care (2)

APRN 787 Family Nurse Practitioner Practicum I (3)

APRN 788 Family Nurse Practitioner Practicum II (4)

APRN 789 Family Nurse Practitioner Practicum III (4)

APRN 797 Comprehensive Concentration Review (1)

## Policies for Admission, Progression & Retention

### Admission Requirements

Post-Graduate APRN Certification Graduate Program (all concentrations)

University requirements:

- 1) Submit an Online Application to Regent University with unofficial transcripts.
- 2) Submit Official Transcripts
  - International transcripts must be evaluated by a NACES, AACRAO or NAFSA approved agency.
  - A Bachelorette of Science in Nursing (BSN) and Masters of Science in Nursing (MSN) from an accredited institution, with a minimum of a 3.0 grade point average or better in nursing courses as verified by official transcripts are required.
- 3) Complete an admissions questionnaire based on professional goals and interests. The Questionnaire should reflect an understanding of the role of the graduate nurse as it relates to the pursued degree and population foci.
- 4) Submit your Resume or CV. A resume showing at least one year of recent clinical nursing practice experience is preferred and is required for APRN concentrations.
- 5) Submit Nursing and APRN licenses. Unrestricted and unencumbered nursing license(s) in the student's state of practice are required.
- 6) Application fee and Government ID
- 7) Faculty Interview is required.

### Progression Policy

- Students in graduate nursing programs must meet the requirements of the School of Graduate Studies to remain in good standing. An overall grade point average (GPA) of 3.0 or better must be maintained to continue in the MSN program.
- In addition, a nursing student must achieve a "B" or better in every graduate nursing course. If a student achieves a failing grade in a nursing course, they must repeat that course when it is next offered to remain in the program.
- If a student's cumulative grade point average falls below 3.0, they will be placed on academic probation the following semester. If the student does not achieve a 3.0 cumulative grade point average after one probationary semester, the Director of the School of Nursing will determine if the student should be dismissed from graduate study or continue academic probation. No student will be allowed more than two probationary semesters, whether consecutive or cumulative. At the end of a second probationary semester, a student whose cumulative grade point average is still below 3.0 will be dismissed from graduate study.

- Students whose performance results in a GPA so far below 3.0 as to make it mathematically impossible to attain an overall GPA of 3.0 after one semester may be subject to dismissal without a probationary term.
- An incomplete grade (“I”) indicates that the student was passing the course at the end of the semester but, due to circumstances beyond the student’s control, was unable to complete the course work for which the “I” is assigned. The “I” grade cannot be used to allow a student to do additional work to raise a deficient grade or to repeat a course.
- Students must maintain an unencumbered registered nurse license in all states where they are currently licensed throughout the duration of the graduate program and in the state(s) where they fulfill clinical course requirements. If at any time during enrollment in the graduate program a student’s nursing license becomes encumbered, suspended, or revoked, the student must immediately report this to the Director of the School of Nursing. If a student’s registered nurse license is suspended or revoked, or a student fails to report any changes in licensure status to the Director of the School of Nursing, the student will be administratively withdrawn from the graduate program. A student’s ability to continue enrollment in the graduate program with an encumbered license will be reviewed on an individual basis considering the restriction/limitations placed on the student’s practice as a registered nurse by the board of nursing in the state issuing the encumbered license.
- W/F will be treated as unsuccessful attempts in nursing courses.
- Students can only enroll in a nursing course twice.

Students are required to read the progression policy and sign the Progression Policy acknowledgement document. (Appendix A)

## Academic Probation

Academic probation notifies the student that the quality of work is below the required standard and that continuation of unsatisfactory work will result in dismissal from the School of Nursing. A student is placed on probation following one failure in a nursing course or if the GPA falls below 3.0. The maximum load for students on probation is 12 credit hours. Students can remain on probation for only one semester. To be removed from probation, the student must pass the nursing course in question and/or raise the GPA to a minimum of 3.0. If this does not occur, the student is dismissed from the nursing program.

## Graduation Requirements

### General MSN Graduation Requirements

All requirements for a Master of Science in Nursing (MSN) degree must be met. In addition, a grade of B-, 80%, or better must be earned in each nursing course. Students must follow the Regent University policy for Intent to graduate and fulfill all Regent University requirements for graduation.

To qualify for graduation, master's degree candidates must complete all the requirements on the following checklist and any listed within the University catalog. A student deficient in any area will not receive a diploma until the requirement is complete.

- Submit a completed Graduation Application to the Registrar by the posted deadline.
- Maintain a 3.0 GPA or higher.
- Complete all required coursework with a minimum of B-, 80%, or better.
- Fulfill all financial obligations to Regent University.
- Submit all required completed practicum paperwork.

### APRN Graduation Requirements

To qualify for graduation, master's degree candidates seeking APRN must complete all the requirements on the following checklist and any listed within the University catalog. A student deficient in any area will not receive a diploma until the requirement is complete.

- Submit a completed Graduation Application to the Registrar by the posted deadline.
- Maintain a 3.0 GPA or higher.
- Complete all required coursework with a minimum of B, 83%, or better.
- Fulfill all financial obligations to Regent University.
- Submit a completed practicum paperwork.

## MSN Policies and Procedures

### Disability Services

Regent University and the nursing program strive to make courses and facilities as accessible as possible for all individuals. Please visit the Disability Services website at <https://www.regent.edu/community-spiritual-life/disability-services/> for further information.

### Grading Scale

The following grading system is followed in the School of Nursing for the Master of Science in Nursing (MSN) Program **in Nursing Educator and Leadership**:

Grade	Percentage	Quality Points	Meaning of Grade
A	93–100	4.00	Superior
A-	90-92	3.67	
B+	87-89	3.33	
B	83-86	3.00	Good
B-	80-82	2.67	Satisfactory
C+	77-79	2.33	Failing
C	73-76	2.00	Failing
F	0-72	0	Failing

The following grading system is followed in the School of Nursing for the Master of Science in Nursing (MSN) Program **in Advanced Practice Registered Nursing (APRN)\*\*\***:

Grade	Percentage	Quality Points	Meaning of Grade
A	93–100	4.00	Superior
A-	90-92	3.67	
B+	87-89	3.33	Good
B	83-86	3.00	Satisfactory
B-	80-82	2.67	Failing
C+	77-79	2.33	Failing
C	73-76	2.00	Failing
F	0-72	0	Failing

**Students in the MSN-APRN Program must receive a grade of B or higher to pass their courses (!)**. Moreover, students must maintain a cumulative grade point average of 3.0 or higher in order to remain in the MSN-APRN Program and remain in good standing at the School of Nursing at Regent University.

## Length of Courses

The following MSN CORE courses will be 15 weeks long: NURS 540 (Advanced Pathophysiology), NURS 541 (Advanced Pharmacology), NURS 550 (Advanced Health Assessment), NURS 633 and NURS 634 (Research Methods and Biostatistics) and Practicum courses NURS 684 and NURS 685.

All MSN-APRN specialty courses (courses with the code APRN in the University Catalog) are 15 weeks long, with the exception of APRN 551 and APRN 797.

## Disenrollment

A student's enrollment may be terminated by the School of Nursing for any of the following reasons:

### **1. Academic:**

- a. For failure to perform satisfactorily at the graduate level and/or make satisfactory progress toward the degree. Examples of unsatisfactory performance include, but are not limited to, the following: failure to maintain an overall 3.0 or better grade point average (GPA) or inability to complete academic courses within reasonable time frames.
- b. For failure to register for more than one semester without an authorized leave of absence.
- c. For failure to graduate within the maximum time limit allowed by the graduate school (5 years for the MSN program). The student may petition to the University's Vice President of Academic Affairs to have this requirement waived / length of the program extended for an appropriate cause.

### **2. Unprofessional Personal Conduct:**

- a. For failure to behave consistently with the code of ethics of the nursing profession and the rules, regulations, and code of conduct of the School of Nursing, the College of Health and Behavioral Sciences, and Regent University.
- b. For failure to uphold principles of academic honesty and integrity.
- c. For failure to demonstrate suitability for clinical practice and as defined by professional standards of practice.

### **3. Failure to maintain the required cumulative GPA (3.00):**

- a. In order to remain in good standing, the required cumulative GPA for courses taken at Regent University is 3.00. (You may be required to maintain a higher GPA to meet some financial aid requirements.)

### **4. Multiple Failures of Coursework:**

- a. Students who fail to pass two or more classes may be subject to academic dismissal, even if the initial failed course is taken again with a passing grade. Courses are considered not passed if a student earns a grade below B- (or **below B for the MSN-APRN Program**) or a grade of FX, WF, or NP is posted.

### **5. Failure to Demonstrate Clinical Competence:**

- a. Faculty members evaluate students for clinical competence and serve as "gatekeepers" to the profession. This role exists outside of a student's academic performance. Rather, it focuses on the student's ability to meet the plurality of professional competencies such as, but not limited to professional judgment, competence, adherence to ethical standards, conducting oneself with compassion and respect for others, displaying personal accountability and responsibility, integrity, boundary management, psychological well-being, and personal maturity. Students who



fail to demonstrate appropriate conduct and competencies described above, students who do not achieve a passing level of clinical competency during clinical placements, those who are judged to be clinically unsuitable for continued patient responsibilities (because of personal or professional conduct), or unsuitable for advanced nursing practice by the SON / CHBS faculty and leadership may be dismissed from the program.

b. Because of the risk to the public for failing to prevent a person from advanced nursing practice who is not properly suited, the presumption in any dismissal case will be in favor of the program's judgment and the student must produce a successfully compelling argument demonstrating that the program acted arbitrarily or capriciously in reaching its decision to win an appeal.

**6. Financial:**

a. For failure to meet tuition and financial obligations to Regent University.

## Preceptor and Affiliation Information

The nursing program at Regent University will utilize preceptors in the monitoring of student experience within clinical settings. Faculty, not preceptors, will be responsible for student evaluation. For the purposes of Regent University's MSN program, preceptor is defined as one who meets the criteria to facilitate the learning process in the clinical setting with the responsibility of serving as a practitioner and mentor for role acclimation. Preceptors are provided opportunity to give feedback and guidance to the student but are not responsible for evaluating students. Preceptors serve as a mediator of the student's professional clinical performance and the pre-established clinical goals for the assigned course. **Students are responsible for knowing the laws and rules of their state board of nursing for clinical practice.**

## Preceptor Requirements

- Must hold an MSN in Nursing or Higher.
- APRN MSN Preceptors must have a valid and active licenses in the state and field pursued.
- Must be actively employed in the specified fields.
- Must have an un-restricted, active RN license.
- Must be willing to adhere to mutually established goals/objectives of the course.
- More than 1-year of experience is preferred.
- Must be willing to offer the necessary clinical hours required to complete clinical courses.
- Must actively work with the patient population to ensure efficient role orientation for the student.
- MSN preceptors will be provided with the Field Placement Guide that further explains their role.

## Clinical Requirements

To complete the nursing curriculum, students within the MSN program are required to complete precepted clinical hours as outlined by accrediting entities. Students could possibly enter clinical courses at different times according to their individualized degree plans. Prior to entering preceptorship courses, **students** must ensure all proper documentation is complete prior to obtaining precepted clinical hours. Faculty will work with students to develop preceptorships, and aid students with the documentation of preceptors and facilities for their practicum sites

## Preceptor Site Compliance

The Nursing Program requires students to enroll in an electronic management of student screenings as required by Regent University. The system is both FERPA and HIPAA compliant. Components include a background check, drug screen, CPR certification, immunizations, and signed program forms (including verification of meeting program technical standards). All forms are available for download. Students are responsible for completing all documentation and proper filing of documents with the clinical compliance vendor. Students must maintain current documentation throughout program progression.

## Practicum Hour Clinical Logging System

This policy outlines the requirements and guidelines for all graduate nursing students at Regent University regarding the use of the Practicum Hour Clinical Logging System for maintaining and demonstrating effective completion of the required patient care experiences applicable to their degree. The purpose of this policy is to ensure consistency, accuracy, and compliance with regulatory bodies while documenting clinical hours and experiences during the practicum. Additional information is in the Graduate Nursing Practicum Guide.

## Criminal Background Check and 10 Panel Drug Screen Progression

1. Students must complete a background check, and drug screen application. A report is generated and sent to the Director of Clinical Training.
2. Reports are reviewed by the Director of Clinical Training as part of the pre-enrollment approval process and before student may enroll in nursing classes.
3. On receipt of the background check, the Director of Clinical Training will review the results of the background check as well as the 10-panel drug screen. The results will be placed in to one of two categories: no concern or concerns.

### No Concern

The student has no discrepancies or areas of concern and may proceed with enrollment.

### Concern

Results of the background check or 10-panel drug screen have results that present concern. When this occurs, the Director of Clinical Training will meet with the Director of the School of Nursing. A hold will be placed on the enrollment process until the nursing program has cleared the applicant's background check and/or drug screen or has rejected the applicant.

### Progression of Concerns (NOTE OF CONCERN APPENDIX D)

1. The student is contacted and asked to review the report.
2. The student must submit a written explanation to include.
  - A. The circumstances surrounding the reported incident or provide proof of prescription medication for a positive drug screen.
  - B. The reason the information reported should not be a disqualifying factor for continuation in the nursing program.
3. A conference or conference call may be scheduled with the student and the Director of Clinical Training will meet with the Director of the School of Nursing to discuss results to allow the applicant to answer questions or provide additional information.
4. Director of the School of Nursing will contact the applicable Board of Nursing (per the student's license) and explain the circumstances and provide supporting documentation and ask for the BON recommendation.
5. Director of the School of Nursing will present the circumstances and the applicable BON recommendation to the Nursing Faculty Council.
6. The Nursing Faculty Council reserves the right to make a decision regarding eligibility for admission into the program.
7. If approved for admission into the program, the student must sign a release of information document that may be shared within the University or the affiliating clinical sites. Some criminal convictions and pending criminal charges may result in limitations on a student's practicum placement and in some cases dismissal from the nursing program.

## Substance Abuse Policy

The substance abuse policy of the nursing program is consistent with that of the University. The Regent University nursing program is committed to maintaining a healthy and drug and alcohol-free environment for the safety of our students, faculty and staff, visitors, and patients. The program believes that each nursing student has a personal obligation to practice health conscious behaviors intended to foster clear and rational decision making as well as function in a safe and therapeutic manner throughout the program. Our patients' safety is paramount; this concern serves as the foundation of the Substance Use Policy. Use, possession or distribution of illegal drugs, impairment while in the educational setting, and/or abuse of drugs or alcohol that impacts a student's ability to operate in the nursing program will subject a student to dismissal from the program.

## Dress Code Policy

All students, regardless of education concentration, will present to all practicum and clinical simulation experiences in a manner that demonstrates professionalism. Students will appear in business casual dress with mid-thigh length white lab coat and School of Nursing name tag. Women will wear dresses, or skirts or dress pants with modest blouses and appear neatly groomed. All dresses and skirts must be between mid-knee and ankle length. Men will wear dress pants with dress shirts and appear neatly groomed. Pants and skirts must cover all undergarments completely and student's midriff and waist area such that the top fit is appropriate, conservative, and modest in nature. All students should wear dress shoes that are slip resistant, and closed toe. No attire should restrict the student's mobility or ability to participate in clinical activities or sterile procedures. All hair color should be natural in color and maintained in a style that does not interfere with clinical procedures as long hair should be pulled back and off the patient's face and neck. Facial hair must be trim and hygienic such that it would fit under a mask for sterile procedures and not interfere with N95 mask fitting appropriate. Nails should be kept short and neutral tones. Students should not have any visible facial piercings; students are permitted a single piercing per ear lobe with a single stud. Any deviation from this standard of dress code will require prior approval by the Graduate Nursing Program Director and Director of School of Nursing

## Unsafe and Unethical Nursing Practice

The safety of the students, faculty and staff, and patients is of utmost importance to Regent University and the Regent University nursing program. Any behavior that is deemed unsafe or unethical will immediately be addressed by the Department of Nursing and Regent University. The Department of Nursing will follow the discipline procedures as outlined in the Regent University Handbook: *The Student Discipline Process*.

## Academic Integrity/ Plagiarism

All students are expected to adhere to the Regent University Honor Code, which can be found within the Student Handbook at [https://www.regent.edu/admin/stusrv/student\\_handbook.cfm](https://www.regent.edu/admin/stusrv/student_handbook.cfm). Each examination, paper, and other written or electronically submitted assignment is submitted

pursuant to the Honor Code Plagiarism.

## Confidentiality and Privacy in Practice (HIPAA)

HIPAA - Health Insurance Portability and Accountability Act- "The Department of Health and Human Services and all other health care agencies must ensure that their customers (ex: clients, insured individuals, providers and health plans) that the integrity, confidentiality, and availability of electronic protected health information they collect, maintain, use, or transmit is protected" (Federal Register, 2003, p1). Individual clinical sites may require students to attend their own HIPAA training sessions.

All students of the Department of Nursing are required to sign the HIPAA form and upload to the tracking database. (See Appendix C)

## Communication Policy

The Regent University nursing program strives to maintain open and clear communication with all students and constituents. As such, it is the policy to update students on changes via their Regent University email address and Canvas. As outlined in this handbook, students are expected to check their email on a regular basis.

Necessary changes to curriculum will be communicated and approved via the Curriculum and Instruction Review Committee (CIRC).

## Late Assignment Policy

- Quizzes and written assignments will have 5 % taken off each day it is not submitted up to 7 days and after 7 days a student will receive a zero.
- Discussion Posts- Discussion Posts- Due to the nature of discussions (specifically, regarding responses), Discussion posts are more time-sensitive than other assignments, because of this both the initial post and the responses are due as scheduled by the professor and participation is required.

***Please note: Regardless of the details described above for late assignments, it is very important that you keep your instructor apprised of your progress and any significant factors that may be contributing to your delay and requiring additional time.***

**Emergent situations** may include, but are not limited to:

- Hospitalization
- Serious illness
- Military service obligation
- Natural disaster
- Death or serious injury/illness of an immediate family member

***All non-emergent situations will be subjected to the late assignment penalty outlined above.***

**Non-Emergent** situations may include, but not limited to:

- Work and or family obligations.
- Vacations
- Computer or internet problems
- Other personal reasons that may interfere with the student's ability to submit assignments by the due date.

## Participation Policies

There will be 8 synchronous live Zoom sessions. Attendance of live sessions is expected. However, we understand that work schedules and other circumstances can preclude students from attending every live session. In those situations, students can earn their credit for attendance by watching the recording of the live session and providing a brief write up of what they learned in that session. Therefore, credit for each live session can be earned by: (1) either attending the session live or (2) watching the recorded session and providing the write up. Students must attend the live session or provide an alternative assignment per course instruction.

## Quizzes

Quizzes will be completed in Canvas. The quizzes are timed and require students to have adequately studied the material prior to taking each quiz. The utilization of Lockdown Browser and a webcam should be anticipated by students for all quizzes and exams.

## Canvas Policy

Students are expected to log in to Canvas and check the Announcements section of Canvas at least once a week beginning one week before the start of the course. Students must keep their e-mail address current in Canvas; they are expected to check their Regent e-mail daily to ensure timely receipt of messages from the professor.

For courses with online discussions, they will be posted in Canvas. Unless otherwise instructed, the student's postings have word limits. The purpose of these parameters is to promote writing that is both thorough and concise. The instructor will post questions and activities weekly. Discussion questions will be posted in advance. Since not everyone will see things identically, students are to review one another's postings in order to further their insight and learning. This is an important benefit of dialogue.

Note that the expectations for quality work in the Canvas group discussions differ from the *minimal* requirements for attendance.

Please check the RU Resources tab in Canvas for University Library and Academic Support

information, Student Services, Canvas Tutorials and Resources, and Disability Services, among others.

Some basic computer skills you are expected to have mastered before taking an online course include the following: sending and receiving emails, opening, or sending an email attachment, searching the Internet, using Microsoft Word and downloading files. Numerous online tutorials are available to teach you how to use Canvas. When you log into Canvas, access the [RU Resources](#) tab at the top right of your screen.

If you have technical problems with Canvas and/or are not able to log in, please contact the Help Desk/IT department. You can e-mail the Help Desk at: [helpdesk@regent.edu](mailto:helpdesk@regent.edu) or call at (757) 352-4076.

## Student Expectations

## Student Responsibilities

It is the responsibility of the Regent University nursing student to adhere to the Regent University Code of Conduct and to the policies and procedures described in this Handbook. It is the student's responsibility to periodically check the student handbook for changes and updates.

## Online Responsibilities/ Email Etiquette

Regent University MSN Nursing students must also demonstrate academic readiness and technological proficiency.

- **Academic Readiness-** It is the responsibility of the student to have those supplies necessary to participate in the online environment and clinical setting. This includes but is not limited to a computer, secure internet connection and Microsoft Word software.
- **Technology Proficiency-** All Regent University students should demonstrate a minimum level of technological proficiency in order to be successful in the online environment. The Help Desk is available to students via telephone at 757-352-4076.
- **Email Etiquette** – Students are expected to read, and when appropriate, respond to emails within 24 hours. Email will be utilized as the standard mode of communication and will be utilized to disseminate changes. The student's Regent University email address will be used for all communication.

## Course Expectations

Didactic courses will occur via the online learning platform Canvas. Student engagement and attendance will be closely monitored by the instructor. Assessments will include dialogues, quizzes/tests, presentations, case studies and presentations. It is the responsibility of the student to access the course at least once weekly to be considered present. Attendance and participation policies are clearly outlined in course syllabi.

## Shadow Health

Shadow Health is a Digital Clinical Experience (DCE) found in some courses. Students are expected to participate in the DCE in assigned. These experiences prepare students for the practicum. Learning from the Shadow Health modules and other class assignments should be incorporated into the practicum experience to meet the course objectives. Students will receive a PIN number in the specific class. Once enrolled in Shadow Health, students will only need to add course and will not re-enroll.



## Student Evaluation

At the end of each course, students are given the opportunity to evaluate the course and the instructor/s. Evaluations will be reviewed by faculty and leadership. Evaluations will be used to continually improve the program.

## Access to Records (FERPA)

FERPA is a Federal law that protects the privacy of student education records and information. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. The rights transfer to the student when they reach the age of 18 or attends a school beyond high school level. Please see: <http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>. Faculty must have documented written permission from a student before they can speak to a parent/spouse regarding the student's education record or academic progress.

## Academic Advising

Students will have access to an academic advisor and faculty mentor upon admission to the University. The advisor and nursing faculty collaborate to ensure the best experience possible for the student. Students have assigned faculty mentors who provide academic direction, feedback and monitoring of student progress as they matriculate through the program. Mentor assignments are managed by the programs. Any time a student fails a course or required clinical task; the evaluating faculty member should also enter an alert in Advise even if that faculty member is not assigned as a student's mentor. The Advising office can be reached by email at [advising@regent.edu](mailto:advising@regent.edu).

## Student Grievance and Procedure

Student appeals and grievances must follow the procedures as outlined in the Regent University Student Handbook.

## Appendix A

### PROGRESSION POLICY ACKNOWLEDGEMENT

*Regent University School of Nursing  
Graduate Studies Progression Policy*

1. Students in graduate nursing programs must meet the requirements of the School of Graduate Studies to remain in good standing. An overall grade point average (GPA) of 3.0 or better must be maintained to continue in the MSN programs.
2. In addition, a nursing student must achieve a “B-” or better in every MSN graduate nursing course and “B” in MSN APRN graduate nursing courses. If a student achieves a failing grade in a nursing course, they must repeat that course when it is next offered to remain in the program.
3. If a student’s cumulative grade point average falls below 3.0, they will be placed on academic probation the following semester. If the student does not achieve a 3.0 cumulative grade point average after one probationary semester, the Director of the School of Nursing will determine if the student should be dismissed from graduate study or continue on academic probation. No student will be allowed more than two probationary semesters, whether consecutive or cumulative. At the end of a second probationary semester, a student whose cumulative grade point average is still below 3.0 will be dismissed from graduate study.
4. Students whose performance results in a GPA so far below 3.0 as to make it mathematically impossible to attain an overall GPA of 3.0 after one semester may be subject to dismissal without a probationary term.
5. An incomplete grade (“I”) indicates that the student was passing the course at the end of the semester but, due to circumstances beyond the student’s control, was unable to complete the course work for which the “I” is assigned. The “I” grade cannot be used to allow a student to do additional work to raise a deficient grade or to repeat a course.
6. Students must maintain an unencumbered registered nurse license in all states where they are currently licensed throughout the duration of the graduate program and in the state(s) where they fulfill clinical course requirements. If at any time during enrollment in the graduate program student’s nursing license becomes encumbered, suspended, or revoked, the student must immediately report this to the Director of the School of Nursing. If a student’s registered nurse license is suspended or revoked, or a student fails to report any changes in licensure status to the Director of the School of Nursing, the student will be administratively withdrawn from the graduate program. A student’s ability to continue enrollment in the graduate program with an encumbered license will be reviewed on an individual basis considering the restriction/limitations placed on the student’s practice as a registered nurse by the board of nursing in the state issuing the encumbered license.

7. W/F will be treated as unsuccessful attempts in nursing courses.

8. Students can only enroll in a nursing course twice.

I have read and understand the expectations and regulations of the Regent University Graduate Nursing Progression Policy.

---

Printed Name

---

Signature

Date

## Appendix B

### Regent University's Nursing Program Health Insurance Portability and Accountability Act of 1996 (HIPAA)

Information Packet Protecting the Privacy of Patient's Health Information

**Overview:** The first-ever federal privacy standards to protect patient's medical records and other health information provided to health plans, doctors, hospitals, and other health care providers took effect on April 14, 2003. Developed by the Department of Health and Human Services (HHS), these new standards provide patients with access to their medical records and more control over how their personal health information is used and disclosed. They represent a uniform, federal base of privacy protections for consumers across the country. State laws providing additional protections to consumers are not affected by this new rule.

The HIPAA legislation had four primary objectives:

1. Assure health insurance portability by eliminating some instances of failure to insure due to pre-existing conditions.
2. Reduce healthcare fraud and abuse.
3. Enforce standards for health information.
4. Guarantee security and privacy of health information.

Congress called on HHS to issue patient privacy protections as part of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HIPAA included provisions designed to encourage electronic transactions and also required new safeguards to protect the security and confidentiality of health information.

#### **Patient Protections:**

The new privacy regulations ensure a national floor of privacy protections for patients by limiting the ways that health plans, pharmacies, hospitals, and other covered entities can use patients' personal medical information. The regulations protect medical records and other individually identifiable health information, whether it is on paper, in computers, or communicated orally. Key provisions of these new standards include:

- *Access to Medical Records.* Patients generally should be able to see and obtain copies of their medical records and request corrections if they identify errors. Health plans, doctors, hospitals, clinics, nursing homes, and other covered entities generally should provide access to these records within 30 days and may charge patients for the cost of copying and sending the records.
- *Notice of Privacy Practices.* Covered health plans, doctors, and other health care providers must provide a notice to their patients how they may use personal medical information and their rights under the new regulation. Patients will be asked to sign, initial, or otherwise acknowledge that they received this notice.

- *Limits on Use of Personal Medical Information.* The privacy rule sets limits on how health plans and covered providers may use individually identifiable health information. To promote the best quality care for patients, the rule does not restrict the ability of doctors, nurses, or other health care providers to share information needed to treat their patients. In other situations, though, personal health information generally may not be used for purposes not related to health care, and covered entities may use or share only the minimum amount of protected information needed for a particular purpose. In addition, patients would have to sign a specific authorization before a covered entity could release their medical information to a life insurer, a bank, a marketing firm or another outside business for purposes not related to their health care.
- *Prohibition on Marketing.* The privacy rule sets new restrictions and limits on the use of patient information for marketing purposes. Pharmacies, health plans, and other covered entities must first obtain an individual's specific authorization before disclosing their patient information for marketing. At the same time, the rule permits doctors, and other covered entities to communicate freely with patients about treatment options and other health-related information, including disease management programs.
- *Stronger State Laws.* The new federal privacy standards do not affect state laws that provide additional privacy protections for patients. They confidentiality protections are cumulative; the privacy rule will set a nations "floor" of privacy standards that protect all Americans, and any state law providing additional protections would continue to apply. When a state law requires a certain disclosure---such as reporting an infectious disease outbreak to the public health authorities---the federal privacy regulations would not preempt the state law.
- *Confidential Communications.* Under the privacy rule, patients can request that their doctors, health plans, and other covered entities take reasonable steps to ensure that their communications with the patient are confidential. For example, a patient could ask a doctor to call his or her office rather than home, and the doctor's office should comply with that request if it can be reasonably accommodated.
- *Complaints.* Consumers may file a formal complaint regarding the privacy practices of a covered health plan or provider. Such complaints can be made directly to the covered provider or health plan or to HHS' Office for Civil Rights (OCR), which is charged with investigating compiling and enforcing the privacy regulations.
- Information about filing complaints should be included in each covered entity's notice or privacy practices. NOTE: 866-627-7748 or <http://www.hhs.gov/ocr/hipaa>.

**Civil and Criminal Penalties.** Congress provided civil and criminal penalties for covered entities that misuse personal health information. Penalties may range from \$100 per violation up to \$25,000 per year for each requirement or prohibition violated. A more severe penalty may be levied (up to \$250,000 and 10 years in prison) if the offenses are committed with the intent to sell, transfer, or use protected health information for commercial advantage, personal gain, or malicious harm.

A major outcome of HIPAA is the creation of security rules that ensure the safety and privacy of individually identifiable healthcare information and records.

**REFERENCES/RESOURCES:**

U. S. Department of Health & Human Services. (2003). *Fact sheet: protecting the privacy of patients' health information*. Available online: <http://www.hhs.gov/ocr/hipaa>

University of California, San Francisco. (2002). UCSF Campus & UCSF Medical Center:

What is HIPAA? Available online

<http://www.fresno.ucsf.edu/housestaffportal/documents/HIPAA101module.pdf>

## Appendix C

### Acknowledgement of Receipt of HIPAA Privacy Guidelines

I have received a copy of the HIPAA Privacy Guidelines. I have read and understand the privacy regulations set forth in the Health Insurance Portability and Accountability Act of 1996. I will not violate these guidelines in any way when working with clients, patients, or residents in healthcare facilities.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

## Appendix D

### NOTE OF CONCERN

Student Name:

Faculty Name:

Date:

Course (if applicable):

The Note of Concern refers to the initial point of contact when concerns about student’s professional behavior or academic performance have been observed by faculty/instructor. This form is to serve primarily as a communication tool. The specific categories of concern and observations are noted below.

The note of concern serves to complete four goals:

- Identify the specific area to be addressed by faculty to the student.
- Schedule a meeting with the faculty and student at an agreed-upon time.
- Conduct a meeting with the faculty and student; and
- Determine the need for further action to include a potential remediation plan with specific expectations and timeline for meeting said expectations.
  
- The Note of Concern remains on file in the School of Nursing until graduation.
- If the Note of Concern is completed satisfactorily, the Note of Concern will reflect student improvement.
- If unsatisfactory resolution of the Note of Concern (a guidance document), the concern may warrant the utilization of additional measures per the Regent University Student Handbook. University Disciplinary actions are reserved for extreme situations yet are available if guidance documents do not yield an appropriate resolution.

#### 1) Identified Areas of Concern and reason for Note of Concern

___Lack of participation in class discussions/collaborate/Zoom. Explanation:
___Assignment(s) late or missing. Explanation:
___Repeated missed classes/required meetings. Explanation:
___Written and/or oral communication not at graduate level standard. Explanation:



\_\_\_ Response to faculty requests not appropriate/respectful/lacks professionalism  
Explanation:

\_\_\_ Inability to be open, flexible, and cooperative.  
Explanation:

\_\_\_ Repeated excuses for late or inadequate work  
Explanation:

\_\_\_ Amenability to supervision/ Lack of responding to faculty and professional supervision/Inability to be flexible.  
Explanation:

\_\_\_ Inability to demonstrate basic clinical skills.  
Explanation:

1<sup>st</sup> Note of Concern

2<sup>nd</sup> Note of Concern

2) Schedule meeting with the faculty and student at an agreed-upon time

\_\_\_ Persistent difficulties with technology.  
Explanation:

3) Conduct a meeting with the faculty and student.

Conference with Faculty/Instructor Scheduled:

Student refused to meet or sign the Note of Concern:

**Instructions:** Clearly indicate the expectation to be taken by the student with the following timeline: initial task & begin date, mid-review (and follow up meeting), and expected completion date

4) Professor Recommendations & Collaborative Action Plan to be taken by student:

- Referred to Writing Center for assistance with writing skills/paper preparation.
- Referred to Writing Mentor to assist in more detailed and comprehensive remediation for writing skills development.
- Remedial work or additional assignments to include:
- Referred to outside counseling
- Other (Specify):

Begin Date:

Mid-Review Date:

Meeting Scheduled?  Yes  No If no, reason:

Expected Completion:

**STUDENT ACKNOWLEDGEMENT/UNDERSTANDING of RECOMMENDATIONS**

I have met with the faculty and discussed the recommendations. I understand and agree to complete the steps required.

I have met with the faculty and do not agree with the recommendations and requirements. I understand that this concern may be upgraded to a Professional Development Form (PDF) and subsequent meetings.

*The Note of Concern, NOC, is intended to guide students and give them an opportunity to improve before their academic progress is affected. If a student does not sign and return the NOC in 7 days, it may result in the receipt of a Professional Development Form.*

---

Student Signature

---

Date

---

Faculty Signature

---

Date

*Instructor: Please send this completed form to the Director of Nursing*

**APPENDIX E****GRADUATE HANDBOOK SIGNATURE PAGE**

I, \_\_\_\_\_, have read the Graduate Student Handbook in its entirety. I understand that I am bound to the policies and procedures outlined in the handbook and those in the University Catalog and Regent University Student Handbook.

I have read and understand the Progression Policy \_\_\_\_\_ (initial)

I have read and understand that while didactic courses are in an asynchronous online format, per CCNE requirements, I must complete clinical hours. \_\_\_\_\_ (initial)

I have read and understand the necessity of medical clearance prior to obtaining clinical hours. Medical clearance will be documented and reviewed by the Director of Clinical Training \_\_\_\_\_ (initial)

I understand that a background check and drug screening will be complete using the tracking database program prior to obtaining clinical hours. \_\_\_\_\_ (initial)

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

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date