Graduate Student in Nursing:

This Handbook provides essential information about the Master of Science in Nursing (MSN) program, Nursing Care Management (NCM) graduate certificate, Healthcare Quality and Patient Safety (HQPS) graduate certificate and Doctor of Nursing Practice (DNP) programs at Rhode Island College. Please familiarize yourself with the contents since you are responsible for adhering to the stated policies. Periodically, the curriculum and policies and procedures of the program change. It is your responsibility to update your Handbook with changes as this information becomes available. This Handbook supplements the Rhode Island College Student Handbook, the Bulletin of Rhode Island College and the Graduate Studies Manual, all of which are available on the Rhode Island College website (www.ric.edu).

Every student is assigned a faculty advisor upon admission to the program. The faculty advisor is identified on the letter of admission. It is extremely important that you meet with your academic adviser to plan each semester’s course of study.

All Graduate students are encouraged to participate in professional activities and graduate student extracurricular activities. Information about activities is announced in classes, posted on the Graduate student bulletin board in the Graduate Student Lounge, on the web site: http://www.ric.edu/nursing/index.php, and via the SON Graduate student listserv. It is extremely important that you use and check your RIC email regularly as information sent via the listserv is sent exclusively to RIC accounts.

The School of Nursing makes every effort to assure that students, faculty, staff, and visitors with special needs are accommodated. It is the responsibility of the person with special needs to identify his/her needs so that accommodations can be made in a reasonable and timely fashion.

The faculty and staff of the School of Nursing are committed to working with you to help you achieve your professional goals. On behalf of the faculty and staff, we welcome you to the nursing program and wish you every success.

Jane Williams, PhD, RN
Dean and Professor

Debra Servello, DNP, APRN-ACNP-BC
Associate Professor and Graduate Chair

Cynthia Padula, PhD, RN
Professor and Master’s Program Co-Director

Marie A. Wilks, DNP, RN-BC, CRNI
Assistant Professor and DNP Director

Kara Misto
Assistant Professor and Master’s Program Co-Director
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THE SCHOOL OF NURSING
GRADUATE NURSING PROGRAM

Introduction
The Department of Nursing was established in 1970 and reorganized as a School of Nursing in 2006. The Nursing Program at Rhode Island College is the largest baccalaureate nursing program in the State of Rhode Island. Over 3000 nursing alumni, the majority of whom live and work in Rhode Island, serve the health care needs of residents of Rhode Island and beyond. In 2007, the Master of Science nursing program was established and admitted its first class. In 2016, the Doctor of Nursing Practice program was established and admitted its first class.

Accreditation
Rhode Island College is accredited by the North Eastern Association of Colleges and Schools. The baccalaureate program in Nursing is accredited by the Collegiate Commission on Nursing Education (CCNE) and approved by the Rhode Island State Board of Nursing Registration and Nursing education. The Master’s program was awarded full, 10 year accreditation status by CCNE in the spring of 2014. The nurse anesthesia program is accredited by the Council on Accreditation and is fully accredited through 2026. The DNP program will seek accreditation in 2018.

Mission
Educating and empowering nurses to enrich the health and well-being of all people (Approved May 6, 2015).

Vision Statement
The RIC School of Nursing will be increasingly recognized for its excellent, highly competitive programs, leadership in inter-professional education, and valuable contribution to making a difference in people’s lives. The SON will expand faculty scholarship and practice and strengthen professional and community partnerships to promote significant changes in healthcare. The SON will offer a wide array of educational opportunities to emerging student populations and communities. It will be known for embracing diversity and educating empowered nursing professionals who lead the dynamic healthcare delivery system local, nationally and globally. (Approved August 26, 2011)
THE MASTER OF SCIENCE IN NURSING PROGRAM

Study Options
Nursing education at the Master’s level offers opportunities to specialize in Adult/Gerontology Acute Care, Nurse Anesthesia, and Population/Public Health Nursing. Within the Adult/Gerontology Acute Care option, nurses may choose to prepare for either the Adult/Gerontology Acute Care Clinical Nurse Specialist (AGACNS) or the Adult/Gerontology Acute Care Nurse Practitioner (AGACNP) role.

All study options include a strong clinical focus. The ultimate aim of the program is to improve health and health care outcomes by preparing expert nurses for advanced practice roles. The graduate student is an active agent in the educational process, assuming the major responsibility for learning. The educator is a facilitator who fosters professional growth and educational mobility through recognition of individual difference, creative potential, and learning styles. Together, student and educator engage in the cooperative enterprise of education.

Curriculum Frameworks
The AACN Synergy Model for Patient Care (2003) guides the Adult/Gerontology Acute Care option. The focus of the specialty courses, NURS 510 (Adult/Older Adult Health and Illness I), NURS 530 (Synergy Model for CNS Practice), NURS 540 (Differential Diagnosis for NPs), NURS 610 (Adult/Older Adult Health and Illness II), and NURS 620 (Adult/Older Adult Health and Illness III), reflect the spheres of influence (e.g. NURS 510, patient/family; NURS 610, nursing/nursing practice; NURS 620, systems). The Synergy Model identifies patient needs that are matched with nurse characteristics in the provision of optimal care.

The Nurse Anesthesia option prepares nurses to provide the full scope of anesthesia care across the life span. Constructivist ideology guides nurse anesthesia education including the interdependent concepts of declarative, procedural, and conditional knowledge. The three interdependent components represent a “Skill-Will-Control” approach to nurse anesthesia education and practice. The adult learner possesses self-motivation to apply knowledge and skills, and continually adapt, to an ever-changing situation.

The Population/Public Health Nursing option prepares nurses to provide advanced level population-focused services that improve population health outcomes. The public health core functions of assessment, policy development, and assurance frame public health nursing practice. Ecological theory underpins the view of health and public health nursing and is used to promote the health of populations. This theory provides the framework from which community and public health nurses study the relationships between individual and aggregate health and the multiple determinants of their health (environmental, social, biological, and behavioral) that interact to affect health at the individual, family, community, organizational, and societal levels.

Curriculum
The curriculum of the MSN program is based on the Essentials of Master’s Education in Nursing. The nine Essentials are reflected in the program goals and learning outcomes.
Program Goals

1. Apply scientific knowledge from nursing and related disciplines to plan, direct, and evaluate health care.
2. Assume leadership responsibilities to shape nursing practice in adult/older adult care, nurse anesthesia, or population/public health nursing.
3. Implement quality and safety initiatives to assure positive individual and population health outcomes.
5. Incorporate innovative healthcare technologies and informatics to improve care management and enhance outcomes.
6. Promote policies that assure quality, cost effective and equitable care within a dynamic health care system.
7. Engage in interdisciplinary, collaborative practice to improve individual and population health outcomes.
8. Analyze population health needs of a diverse society for preventive health strategies.
9. Demonstrate master’s level nursing practice.
10. Assume advanced practice roles in adult/gerontology acute care, nurse anesthesia, or population/public health nursing.

Graduate Admissions Procedure

Admission to graduate study at the Rhode Island College School of Nursing is selective and determined by the quality of the total application. Applications are submitted on-line and are available for the MSN program at http://www.ric.edu/nursing/msn.php.

The application deadline for the Nurse Anesthesia options is December 15, and the AGACNP option is February 15th. Applications for the AGACCNS, Population/Public Health Nursing options, and the Nurse Care Management and Healthcare Quality and Patient Safety certificate program are accepted on an ongoing basis. In the event that space(s) remains in the NP option after the February 15th deadline, applications may be accepted for consideration at the discretion of the program director. Contact the MSN program director for further information. Note that the Nurse Anesthesia option plan of study begins in Summer Session II.

Admission requirements include:

1. A completed application accompanied by a $50 nonrefundable application fee.
2. A baccalaureate degree from an NLNAC or CCNE accredited program.
3. Applicants with international degrees must have their transcript evaluated for degree and grade equivalence to that of a regionally accredited institution in the United States.
4. Official transcripts of all undergraduate and graduate records.
5. Completion of a course in statistics (MATH 240 or its equivalent) with a minimum grade of C.
6. A minimum cumulative grade point average of 3.00 on a 4.00 scale in undergraduate course work.
7. An official report of scores on the Graduate Record Examination (GRE) or the Miller Analogies test (MAT). To schedule a test, visit the GRE or MAT websites at: GRE - http://www.ets.org/gre and MAT - http://www.pearsonassessments.com/postsecondaryeducation/graduate_admissions/mat.html
8. An official report of scores on the Test of English as a Foreign Language (TOEFL) from international applicants who are from countries where English is not the first language.
9. Current unrestricted licensure for the practice of nursing in Rhode Island.
10. A professional resume.
11. Three professional references (at least one from the clinical area).
12. A brief letter of intent, which includes a statement of goals.
13. Proof of residency is required for in-state tuition.
14. An interview may be required.

Additional Admission Requirements for RN to MSN Students
Students must fulfill all of the above requirements and successfully complete the RN to BSN program, including MATH 240. Students who have senior standing in the BSN program may complete NURS 501, 502, 503, 512 (up to 9 credits) as electives. MSN courses that are completed will be waived upon entry into the MSN program of study.

Additional Admission Requirements for Adult/Gerontology Acute Care Students
One year of relevant acute care experience.

Additional Admission Requirements for Nurse Anesthesia Option:

1. Due to the clinical rotations at hospitals in Massachusetts, a Massachusetts license will be required prior to clinical practicum.
2. Personal interview is required.
3. Completion of two courses in chemistry (CHEM 105, CHEM 106) (eight credits total) with minimum grades of C.
4. A preferred undergraduate science GPA of 3.0.
5. Of the three required references, one must be from a clinical supervisor.
7. Minimum of 1 year critical care experience.
8. Complete definition of accepted critical care experiences found on the SJHSNA website: www.sjhsna.com
9. Skills and abilities applicants and students must demonstrate are also on the SJHSNA website: www.sjhsna.com
International applicants must also submit:

- Official translated copies of all academic credentials.
- Proof of Residency
- Official Test of English as a Foreign Language (TOEFL) score report is required for International applicants who are from countries where English is not the first language.

Other Related Information:

1. The Dean of the School of Nursing and the Master’s Program Director will inform the candidate regarding acceptance to candidacy after receipt of the recommendation of the Graduate committee. A candidate is not formally accepted into a graduate program until an approved Plan of Study for the appropriate program to which application is made is on file in the School of Nursing Graduate Department Office.

(Note) Incomplete application materials will be kept for one year. Applicant files not completed within that time will be destroyed and applicants will need to reapply.

2. Persons who have completed a substantial amount of post-baccalaureate work before applying for admission will have this work evaluated with all other credentials submitted in support of admission. Such applicants should note particularly the requirements for Transfer Credit stated in Section III, F of the Rhode Island College Graduate Studies Manual.

3. To be accepted as a graduate degree candidate, applicants are expected to have attained an average of B (3.00 on a 4.00 scale) in their undergraduate work. However, provisional acceptance is occasionally granted to students with a cumulative grade point average of less than 3.0. Applicants with undergraduate averages below this level may be admitted to degree candidacy upon the submission of other evidence of academic potential, i.e., satisfactory performance in post-baccalaureate work, professional experience as evidenced by publications or letters of recommendation, and/or high scores in the standardized tests referred to above. Students who are provisionally admitted must achieve a minimum grade of B in three required nursing courses to qualify for full admission. Students who fail to achieve a minimum grade of B in those three courses will not be admitted to the Graduate Nursing program.

Non-Matriculated Status

1. Persons holding a baccalaureate degree who are not candidates for an advanced degree may take courses in a non-matriculating status on a space available basis.

2. Non-matriculating students follow the same course registration procedure as degree candidates. If non-matriculating students later wish to be admitted to a degree program, they must complete the regular admission procedure.

3. Credits earned at Rhode Island College by a student in non-matriculating status before admission to a degree program may be used toward degree requirements only upon the recommendation of the student’s advisor or Graduate Committee, and with the approval of the Academic Dean. The transfer credit cannot exceed one-fifth of the total credits in the program for the RIC degree (Rhode Island College Graduate Studies Manual).
GRADUATE CERTIFICATE OPTIONS

Admission requirement for the certificate options are the same as for the MSN program with the exception that the Graduate Record Examination (GRE) or the Miller Analogies test (MAT) are not required.

Nursing Care Management

Students who are interested in population-based care may complete a five-course (NURS 502, 503, 507, 508 and 518) graduate certificate program in Nursing Care Management (NCM). Students who successfully complete the NCM certificate may continue study in the Master of Science program to earn the MSN degree in Population/Public Health Nursing.

Healthcare Quality and Patient Safety

Students who are interested in quality and safety may complete a five-course (NURS 501, 502, 503, 505, and 519) graduate certificate program in Healthcare Quality and Patient Safety (HQPS). Students who successful complete the HQPS certificate may continue study in the MSN program to earn the MSN degree.
## RECOMMENDED PLANS OF STUDY

### Course Requirements – Full Time Students

#### A. Adult/Gerontology Acute Care - Full Time

<table>
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<tr>
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<tbody>
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<td>NURS 530 Synergy Model for CNS Practice</td>
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<td>NURS 540 Differential Diagnosis for Nurse Practitioners</td>
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<td>NURS 610 Adult/Older Adult Health/Illness II</td>
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**Elective**

Course must be chosen from restricted elective list or with advisor’s consent* 3

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B. Nurse Anesthesia - Full Time

Note that the Nurse Anesthesia option plan of study begins in Summer Session II.

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**Total Credit Hours** 56
C. Population/Public Health Nursing - Full Time

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| Total Credit Hours             |                                      | 42 |
Course Requirements – Part Time Students

1. Adult/Gerontology Acute Care - Part Time

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<tr>
<td>NURS 540</td>
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Elective

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<tr>
<th>Sixth Semester</th>
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<tbody>
<tr>
<td>NURS 609</td>
<td>Master’s Major Project</td>
</tr>
<tr>
<td>NURS 620</td>
<td>Adult/Older Adult Health/Illness III</td>
</tr>
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</table>

Total Credit Hours 45
2. Population/Public Health Nursing - Part Time

<table>
<thead>
<tr>
<th>First Semester</th>
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<tbody>
<tr>
<td>NURS 501</td>
<td>Advanced Nursing Research</td>
<td>3</td>
</tr>
<tr>
<td>NURS 502</td>
<td>Health Care Systems</td>
<td>3</td>
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<table>
<thead>
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<th>Second Semester</th>
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<tbody>
<tr>
<td>NURS 503</td>
<td>Professional Role Development</td>
<td>3</td>
</tr>
<tr>
<td>HPE 507</td>
<td>Epidemiology and Biostatistics</td>
<td>3</td>
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<tr>
<td>NURS 512</td>
<td>Genetics and Genomics in Health Care</td>
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<th>Third Semester</th>
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<tr>
<td>NURS 508</td>
<td>Public Health Science</td>
<td>3</td>
</tr>
<tr>
<td><strong>Elective</strong></td>
<td>Course must be chosen from restricted</td>
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</tr>
<tr>
<td></td>
<td>elective list or with advisor’s consent*</td>
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<tbody>
<tr>
<td>NURS 511</td>
<td>Population/Public Health Nursing I</td>
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<thead>
<tr>
<th>Summer Session I</th>
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<td>NURS 509</td>
<td>Professional Project Seminar</td>
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<td>NURS 609</td>
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<td>NURS 611</td>
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<td>Population/Public Health Nursing III</td>
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3. Nursing Care Management - Part Time

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<tr>
<td>NURS 518 Nursing Care Management 3</td>
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<tr>
<td>NURS 502 Health Care Systems 3</td>
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<table>
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<tr>
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<tbody>
<tr>
<td>NURS 503 Professional Role Development 3</td>
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<tr>
<td>HPE 507 Epidemiology and Biostatistics 3</td>
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</table>

<table>
<thead>
<tr>
<th>Third Semester</th>
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<tbody>
<tr>
<td>NURS 508 Public Health Science 3</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Total Credit Hours</th>
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<tbody>
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<td>15</td>
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</table>


<table>
<thead>
<tr>
<th>First Semester</th>
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</thead>
<tbody>
<tr>
<td>NURS 501 Advanced Nursing Research 3</td>
</tr>
<tr>
<td>NURS 502 Health Care Systems 3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Second Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 503 Professional Role Development 3</td>
</tr>
<tr>
<td>HPE 505 Advanced Pharmacology 3</td>
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<table>
<thead>
<tr>
<th>Third Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 519 Quality and Safety Measurement and Management 3</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Total Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
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</tbody>
</table>
*Restricted Electives*

Students in the MSN program are required to complete one elective course from the following list of restricted electives:

- NURS 513 Teaching in Nursing
- NURS 515 Using Simulation in Healthcare Provider Education
- NURS 518 Nursing Care/Case Management
- NURS 519 Quality/Safety for Advanced Practice Nursing
- NURS 521 Global Health and Advanced Practice Nursing
- NURS 522 Concepts and Practice of Palliative Care
- NURS 523 Surgical First Assistant Theory

On the occasional instance that a student has a strong rationale for enrolling in a course not identified as a restricted elective, and with approval of the faculty advisor, the student will be allowed to enroll in the alternative course.

**Advisement**

Faculty in the School of Nursing serve as advisors to graduate students in nursing. Students are assigned a nursing advisor when they are admitted to the graduate program; students in the nurse anesthesia option are also assigned a SJHSNA advisor. The faculty advisor and student plan a program of study before course work begins. The program of study outlines the sequence of courses to be taken. The student retains a written copy of the program and a copy is placed in the student’s file. Graduate students are required to meet with their advisor every semester to plan coursework for the upcoming semester. Graduate students are encouraged to schedule additional appointments to discuss matters of concern. Faculty office hours are posted outside individual faculty offices.
PRACTICUM POLICIES

*Students in the Nurse Anesthesia option should refer to the SJHNSA Student Handbook for further information related to clinical practicum requirements.

**CPR (Cardiopulmonary Resuscitation) Certification**

(Cardiopulmonary Resuscitation Certification) Students need to present proof of CPR Certification. CPR Courses are regularly offered by Ocean State Educational Seminars, Inc. (651-5777) or Medpro (273-9188). Courses are also offered by the American Heart Association (330-1700). The certification you need is “BLS Provider.”

**ACLS (Advanced Cardiac Life Support)**

ACLS is required for all MSN students in the Adult/Gerontology acute option and must be completed prior to the start of NURS 510.

**BCI**

All Master’s students must have a Background Criminal Identification (BCI) done through Castle Branch https://portal.castlebranch.com/RH11 prior to the start of clinical rotations. The BCI will be verified by the SON. An information sheet describing how to initiate a background check is available in the MSN Program office.

**RN License**

All Master’s students will submit a copy of their RN License prior to the start of clinical rotations.

**Attendance**

Master’s students are required to complete a minimum of 500 hours (NP students complete a minimum of 600 hours) of clinical practicum experience over the course of the program. Nurse anesthesia students complete an accreditation required minimum of 600 cases and 2000 hours of practicum experience. It is important to be aware that this is the minimum expectation required of all Master’s students. Faculty, in consultation with the identified preceptor as applicable and the student, may determine that additional time is needed to satisfactorily complete the outcomes of the course. Flexibility in scheduling is encouraged; students should negotiate clinical hours per week with the faculty member supervising the clinical experience and the clinical preceptor as applicable. In the event of an unavoidable absence, the student must contact the clinical faculty member and the preceptor and make arrangements to reschedule the time missed. Failure to do so may result in a clinical practicum warning.

In the event that a student is placed on a medical leave related to a medical illness, the student must notify the clinical faculty immediately. Students on a medical leave must be medically cleared in order to be able to return to clinical. Students in the NA option will follow the SJHSNA Student Handbook regarding clinical practicum scheduling and attendance.

**Practicum Placements**

Master’s student placements will be negotiated between the clinical faculty member, the clinical preceptor and the student. Students in the nurse anesthesia option will follow the SJHSNA Student Handbook regarding the clinical practicums. Prior to each semester, the student should meet with the faculty of the upcoming clinical course to plan placement for the upcoming semester. The student should identify clinical interests and personal objectives and meet with the clinical faculty member to discuss the
outcomes of the course and to identify ways that the student’s clinical learning needs can be best met. The faculty and student will discuss potential clinical sites and preceptors and identify an agreed upon plan of clinical experiences. The student will submit finalized personal clinical objectives to the clinical faculty for approval; it is essential that these meetings occur prior to the end of the semester before the clinical experience being planned. The student will be responsible for providing the approved objectives along with the course syllabi to the clinical preceptor as applicable prior to the start of the semester.

Students must correspond with the faculty member at least weekly via completion of the required clinical log or journal.

Students are expected to complete the semester’s required clinical hours during that semester, prior to when final grades are due. If 50% of the semester’s required clinical hours are NOT completed prior to mid-semester, students will be given a mid-semester clinical warning. If the semester’s required clinical hours are not completed when final grades are due, the student will receive an incomplete for the course. Students with an incomplete will not be allowed to progress to the next theory and clinical course.

Typhon Tracking System

The Typhon system will be used to track patient encounters, time logs and organize clinical experiences. Conference hours are entered in Typhon as well. Clinical log submission for each patient encounter into the Typhon system is mandatory for Acute Care NP students and DNP Students. Each student is responsible for maintaining clinical experience logs. All encounters, whether seen independently, in collaboration with preceptor, or as an observer, requires an entry into Typhon. These records are confidential and should not identify the client by name. Acute Care CNS, Acute Care NP and Population/Public Health students must enter clinical hours on a weekly basis; additionally, Population/Public Health students should select the most appropriate competency category for the activity. DNP Students will also record course work in external documents uploaded by students at the end of each semester and record clinical/immersion hours.

Faculty reserve the right, and periodically will, verify documented clinical hours with the assigned preceptors.

Conference Attendance

Master’s students may request to attend a clinical conference as part of the clinical hours requirement. Students must provide the clinical faculty and program option coordinator with a detailed description of the conference. Acute Care student requests must be approved by the program option coordinator and may not exceed 10% of clinical hours in any semester. Conferences must be aimed towards an advanced practice audience.

Student Uniform

1. Students in all clinical settings must carry Rhode Island College identification and wear a Rhode Island College name pin. This requirement does not apply to students in the nurse anesthesia option whose primary clinical site is the operating room. Students must comply with parking and security regulations as specified at each agency.
2. Graduate students should wear attire appropriate to the clinical site and clinical activities to be accomplished. For example, Master’s students providing direct care may wear scrub clothes. Acute Care students not providing direct care may wear a laboratory coat with the appropriate identification. Population/Public Health students may wear attire deemed appropriate for the activity by their clinical preceptor and faculty.

3. Artificial nails are prohibited. Fingernail polish, long fingernails, excessive makeup, jewelry and rings other than wedding or class rings are not appropriate for the clinical setting. Female and male students with long hair will wear their hair so that it does not fall on the collar. Student attire will be neat and clean at all times. Faculty reserve the right to dismiss a student from the clinical area, if in their judgment, the student does not appear professional.

**Transporting Clients**
Under NO circumstances shall students transport clients in any motor vehicle.

**Incident Reports**
If an incident report (exposure or non-exposure) is indicated in a practicum setting, it will be completed according to agency policy and a report will be submitted to the Chair of the School of Nursing, the Master’s Program Director, and the coordinator of the specialty option immediately, or at least within 24 hours of the incident. The report is signed by the student who was involved and by the faculty member responsible for supervision of the student. The report becomes part of the student’s official file. Copies of the incident reports for exposure and non-exposure follow on the next pages.
RHODE ISLAND COLLEGE - SCHOOL OF NURSING
EXPOSURE INCIDENT REPORT

Student’s Name: ___________________  Faculty Name: ___________________

Agency/Location of Exposure: _______________________________________________

Nursing Course: _________________  Date: ____________________

SUMMARY OF EXPOSURE INCIDENT:
(Describe circumstances of exposure incident and results of immediate follow-up, i.e. blood testing of student/source of contact)

FOLLOW-UP
The Agency representative has informed the student of the results of the medical evaluation and told him/her of any medical conditions which may result from exposure to blood or other potentially infectious materials which require further evaluation or treatment. A copy of this document has been provided to the student.

Agency Name: ___________________________  Date: ____________________

Agency Representative Name: ___________________________  Date: ____________________

I have been given a copy of the CDC, US Public Health Service Guidelines for the Management of Occupational Exposure to HBV, HCV, and HIV and Recommendations for Post Exposure Prophylaxis (June 29, 2001)

SIGNATURES:

Student Name (please print) ___________________________  Date ____________________

Student Signature ___________________________

Faculty Name (please print) ___________________________  Date ____________________

Faculty Signature ___________________________
RHODE ISLAND COLLEGE - SCHOOL OF NURSING
NON-EXPOSURE INCIDENT REPORT

Student’s Name: __________________________ Date: __________________________
Nursing Course: __________________________ Faculty Name: __________________________
Date of Incident: _______ Time of Incident: _______ Location of Incident: __________________________

SUMMARY OF INCIDENT:
(Describe circumstances of incident, including names of individuals involved.)

Who was notified regarding the incident? (check all that apply)

☐ Campus Police ☐ Health Services ☐ Agency Security ☐ Human Resources

☐ Other (please specify): __________________________________________________________

FOLLOW-UP/ACTION PLAN

Was an incident report filed at the site of the incident? Yes ______ No ______
Site Name: __________________________________________
Site Representative Name: __________________________________ Date: ________________

A copy of this document has been provided to the student, Dean, Department Chairperson, and site representative.

SIGNATURES:

______________________________ Date __________________________
Student Name (please print) Student Signature

______________________________ Date __________________________
Faculty Name (please print) Faculty Signature
Practicum Warning Notices

If at any time a student’s performance in the practicum is considered to be unsatisfactory, the student will be notified with a written warning notice from the clinical instructor. Copies are to be completed and distributed to the student, faculty member, and the Master’s Program Director. Students in the nurse anesthesia option will follow the SJHSNA Student Handbook.

Liability Insurance

Graduate students should maintain their own malpractice insurance. In addition, students who are actively enrolled as majors in nursing at Rhode Island College are covered by a Medical Malpractice Policy by the Board of Governors for Higher Education. Students in the nurse anesthesia option will be covered by a SJHSNA liability policy.

Privacy Policy

During clinical rotations, students shall not provide care for any client with whom they are personally acquainted, including members of the Rhode Island College community (i.e., faculty, fellow students, or staff). Should students become aware that they have inadvertently been given such an assignment, they are to notify the instructor or preceptor immediately. Students in the nurse anesthesia option will follow the SJHSNA Student Handbook.

Cosigning of Orders

Acute Care NP student orders must be co-signed by the Licensed Independent Practitioner (LIP) with whom they are assigned in the clinical setting.
DNP Study Option

Advanced Practice Nursing Focus

The DNP is an advanced practice nursing focus.

DNP Aims, Goals and Expected Outcomes

The ultimate aim of the program is to improve health and health care outcomes by preparing expert nurses for advanced practice roles. The graduate student is an active agent in the educational process, assuming the major responsibility for learning. The educator is a facilitator who fosters professional growth and educational mobility through recognition of individual difference, creative potential, and learning styles. Together, student and educator engage in the cooperative enterprise of education.

The DNP program at RIC was designed with an emphasis on guided by the American Association of Colleges of Nursing, Essentials of Doctoral Education (October 2006).

Program Goals/Expected Outcomes

<table>
<thead>
<tr>
<th>MSN to DNP Program Goals</th>
<th>MSN to DNP Program Expected Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integrate scientific knowledge from nursing and related disciplines as the basis for</td>
<td>Competency in scientific underpinnings for practice</td>
</tr>
<tr>
<td>clinical practice and practice scholarship.</td>
<td>-------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Demonstrate leadership and systems thinking to design, implement, and evaluate innovative</td>
<td>Competency in organizational and systems leadership for quality improvement and systems thinking</td>
</tr>
<tr>
<td>strategies to ensure quality, cost-effective health care for individuals and populations</td>
<td>-------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Develop, analyze, implement, evaluate and disseminate evidence based best practice and</td>
<td>Competency in clinical scholarship and analytic methods for evidence-based practice</td>
</tr>
<tr>
<td>clinical scholarship</td>
<td>-------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Impact the selection of and evaluate system, patient care, and population-focused</td>
<td>Competency in systems/technology and patient care technology for the improvement and transformation</td>
</tr>
<tr>
<td>technologies to improve health outcomes</td>
<td>of health care</td>
</tr>
<tr>
<td>Influence health care policy and advocate for ethical policies, equity and social justice,</td>
<td>Competency in health care policy for advocacy in health care</td>
</tr>
<tr>
<td>access to quality, culturally relevant health care, and elimination of health disparities</td>
<td>-------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Lead interprofessional collaborative teams to improve individual, system, and population-</td>
<td>Competency in interprofessional collaboration and improving patient and population health outcomes</td>
</tr>
<tr>
<td>focused health outcomes</td>
<td>-------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Implement and evaluate health promotion and disease prevention approaches and initiatives to improve individual and population health outcomes</td>
<td>Competency in clinical prevention and population health for improving the nation’s health</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>Demonstrate advanced clinical judgment and systems thinking to impact health care at the individual, system, and population level</td>
<td>Competency in advanced nursing practice</td>
</tr>
</tbody>
</table>

**DNP Admission Procedures**

Admission to the DNP program at the Rhode Island College School of Nursing is selective and determined by the quality of the total application. Applications are submitted on-line through CollegeNET and are available at: http://www.ric.edu/nursing/dnp.php.

The application deadline for the DNP Program is March 15th. In the event that space(s) remains in the DNP Program after the March 15th deadline, applications may be accepted for consideration at the discretion of the DNP program director. Contact the DNP program director for further information (mwilks@ric.edu)

**ADMISSION REQUIREMENTS FOR DOCTOR OF NURSING PRACTICE**

Advanced Practice focus

1. Master’s in Nursing in advanced practice specialty from a nationally accredited CCNE program; Certification as an advanced practice nurse (as applicable, based on role);

OR

Master’s in Nursing from a nationally accredited CCNE Program and submission of narrative to demonstrate advanced knowledge and clinical expertise in a defined area of practice. Applicants should summarize clinical experiences post-Master’s with an emphasis on demonstrated achievement of professional objectives in alignment with the Essentials of Master’s Education in Nursing (AACN, 2011). Using these components, identify areas in your clinical practice that exemplify these categories in narrative format:

- Sciences and Humanities
- Organizational and systems leadership
- Quality Improvement and Safety
- Translating and Integrating Scholarship in Practice
- Informatics and Healthcare Technologies
- Health Policy and Advocacy
- Interprofessional Collaboration for Improving Patient and Population Health Outcomes.
- Clinical Prevention and Population Health for Improving Health -Master’s-level Nursing Practice

Master’s in Nursing from a nationally accredited CCNE Program. Criteria based on MSN Essentials, (AACN, 2011).
2. Master’s GPA of 3.0 or higher;

3. Current licensure as a Registered Nurse in the state of intended practice;

4. Letter of intent;

5. Statement of intended area of study for DNP project;

6. Current CV;

7. Transcripts from all post-secondary study;

8. Three letters of recommendation;

9. Verification of number of supervised clinical hours from prior advanced practice or advanced specialty master’s program;

10. Completion of a graduate level inferential statistics course within the prior three years is required prior to matriculation.

**Accepted Status**

1. To be accepted as a DNP degree candidate, applicants are expected to have attained an average of B (3.00 on a 4.00 scale) in their undergraduate and graduate work. However, provisional acceptance may be granted and determined on an individual bases to students with a cumulative grade point average of less than 3.0. Applicants with graduate averages below this level may be admitted to degree candidacy upon the submission of other evidence of academic potential, i.e., satisfactory performance in post-baccalaureate work, professional experience as evidenced by publications or letters of recommendation.

2. Students who are considering admission must also meet program pre-requisites before they are considered matriculated.

**Non-Matriculated Status**

1. Persons holding a Master’s degree who are pending DNP application may take courses in a non-matriculating status on a space available basis.

2. Non-matriculating students must contact the graduate office in order to register for classes. If non-matriculating students later wish to be admitted to a degree program, they must complete the regular admission procedure.

3. Credits earned at Rhode Island College by a student in non-matriculating status before admission to a degree program may be used toward degree requirements only upon the recommendation of the student’s advisor or SON Graduate Committee, and with the approval of the Academic Dean. No more than a total of nine credits of work taken at Rhode Island College by a non-matriculating student may be applied towards degree requirements for the DNP program (Rhode Island College Graduate Studies Manual).
**RECOMMENDED PLANS OF STUDY**

**DOCTOR OF NURSING PRACTICE**

**Course Requirements - Full Time Students**

(Two Years; 5 Semesters)

<table>
<thead>
<tr>
<th>Semester One (Fall)</th>
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</thead>
<tbody>
<tr>
<td><strong>NURS 701</strong></td>
<td>Scientific Underpinnings for Clinical Scholarship</td>
</tr>
<tr>
<td><strong>NURS 702</strong></td>
<td>Systems Leadership/Quality Improvement (Practice immersion opportunity: 65 hours)</td>
</tr>
<tr>
<td><strong>NURS 703</strong></td>
<td>Advanced Epidemiology and Biostatistics (Practice immersion opportunity: 65 hours)</td>
</tr>
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<td><strong>Total</strong></td>
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<th>Semester Two (Spring)</th>
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<tbody>
<tr>
<td><strong>NURS 704</strong></td>
<td>Clinical Research/Analytic Methods (Practice immersion opportunity: 65 hours)</td>
</tr>
<tr>
<td><strong>NURS 791</strong></td>
<td>Directed Readings I (concurrent with NURS 704)</td>
</tr>
<tr>
<td><strong>NURS 705</strong></td>
<td>Health Policy and Advocacy (Practice immersion opportunity: 65 hours)</td>
</tr>
<tr>
<td><strong>NURS 706</strong></td>
<td>Economics, Finance Business Management</td>
</tr>
<tr>
<td><strong>NURS 720</strong></td>
<td>DNP Project Planning Seminar (Practice immersion: 50 hours)</td>
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<td><strong>Total</strong></td>
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<tr>
<th>Semester Three (Summer)</th>
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<tbody>
<tr>
<td><strong>NURS 730</strong></td>
<td>DNP Proposal Development (Practice immersion: 75 hours)</td>
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<td><strong>Total</strong></td>
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<p>| Semester Four (Fall) |  |</p>
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS 707</td>
<td>Information Technology/Decision Support (Practice immersion opportunity: 65 hours)</td>
<td>3 cr</td>
</tr>
<tr>
<td>NURS 709</td>
<td>Population Health Practice immersion required: 65 hours</td>
<td>3 cr</td>
</tr>
<tr>
<td>NURS 792</td>
<td>Directed Readings II (concurrent with NURS 709)</td>
<td>1 cr</td>
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<tr>
<td>NURS 740</td>
<td>DNP Project Implementation Practice immersion required: 75 hours</td>
<td>2 cr</td>
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**Total - 9 cr**

**Semester Five (Spring)**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
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</thead>
<tbody>
<tr>
<td>NURS 708</td>
<td>Interprofessional Collaborative Practice (Practice immersion opportunity: 65 hours)</td>
<td>3 cr</td>
</tr>
<tr>
<td>NURS 750</td>
<td>DNP Project Evaluation &amp; Dissemination (Practice immersion required: 50 hours)</td>
<td>1 cr</td>
</tr>
</tbody>
</table>

**Total - 7 cr**

**TOTAL - 36 cr**
Course Requirements - Part Time students

(Three Years; 7 Semesters)

<table>
<thead>
<tr>
<th>Semester One (Fall)</th>
<th>Semester Two (Spring)</th>
<th>Semester Three (Fall)</th>
<th>Semester Four (Spring)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NURS 701</strong> Scientific Underpinnings for Clinical Scholarship</td>
<td><strong>NURS 704</strong> Clinical Research/Analytic Methods (Practice immersion opportunity: 65 hours)</td>
<td><strong>NURS 702</strong> Systems Leadership/Quality Improvement (Practice immersion opportunity: 65 hours)</td>
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</tr>
<tr>
<td>3 cr</td>
<td>3 cr</td>
<td>3 cr</td>
<td></td>
</tr>
<tr>
<td><strong>NURS 703</strong> Advanced Epidemiology and Biostatistics (Practice immersion opportunity: 65 hours)</td>
<td><strong>NURS 701</strong> Directed Readings I (Concurrent with NURS 704)</td>
<td><strong>NURS 705</strong> Health Policy and Advocacy (Practice immersion opportunity: 65 hours)</td>
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<td>3 cr</td>
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<tr>
<td><strong>Total - 6 cr</strong></td>
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<td><strong>Total - 7 cr</strong></td>
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**Semester Three (Fall)**

| **NURS 709** Population Health Practice immersion required: 65 hours | **NURS 702** Systems Leadership/Quality Improvement (Practice immersion opportunity: 65 hours) | **NURS 709** Population Health Practice immersion required: 65 hours |                                                            |
| 3 cr                                                               | 3 cr                                                       | 3 cr                                                       |                                                            |
| **NURS 792** Directed Readings II (Concurrent with NURS 709) |                                                            |                                                            |                                                            |
| 1 cr                                                               |                                                            |                                                            |                                                            |
| **Total - 7 cr**                                                     |                                                            |                                                            |                                                            |
### Semester Five (Summer)

<table>
<thead>
<tr>
<th>Course</th>
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<tr>
<td>NURS 730</td>
<td>DNP Proposal Development</td>
<td>3 cr</td>
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<tr>
<td></td>
<td>(Practice immersion: 75 hours)</td>
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### Semester Six (Fall)

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<tr>
<td>NURS 707</td>
<td>Information Technology/Decision Support</td>
<td>3 cr</td>
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<tr>
<td></td>
<td>(Practice immersion opportunity: 65 hours)</td>
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<tr>
<td>NURS 740</td>
<td>DNP Project Implementation</td>
<td>2 cr</td>
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<tr>
<td></td>
<td>(Practice immersion: 75 hours)</td>
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### Semester Seven (Spring)

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<tr>
<td>NURS 708</td>
<td>Interprofessional Collaborative Practice</td>
<td>3 cr</td>
</tr>
<tr>
<td></td>
<td>(Practice immersion opportunity: 65 hours)</td>
<td></td>
</tr>
<tr>
<td>NURS 750</td>
<td>DNP Project Evaluation &amp; Dissemination</td>
<td>1 cr</td>
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<tr>
<td></td>
<td>(Practice immersion: 50 hours)</td>
<td></td>
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<td></td>
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<td><strong>Total - 6 cr</strong></td>
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</table>

**TOTAL - 36 cr**

### Advisement

Students are assigned a nursing academic advisor when they are admitted to the DNP program. The academic advisor and student develop a plan of study before course work begins. The plan of study outlines the sequence of courses. The student retains a written copy of the plan and a copy is placed in the student’s file. All graduate students are required to meet with their academic advisor every semester to plan coursework for the upcoming semester. DNP students are encouraged to schedule
additional appointments to discuss matters of concern. Faculty office hours are posted outside individual faculty offices.

DNP students in addition to an academic advisor will be assigned a Project Advisor who will serve as first reader on the DNP Project. The Project Advisor will be assigned when student is enrolled in NURS 704 Nursing Research and NURS 791 Directed Readings I or in NURS 709 and NURS 792 (for full-time students).

**DNP Clinical Immersion Overview**

**Background**

As described in The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006), “practice immersion experiences afford the opportunity to integrate and synthesize the essentials and specialty requirements necessary to demonstrate competency in an area of specialized nursing practice” (p. 19-20).

**Aims, Required Hours, and Developing the Practicum Plan**

The aims of the practicum experience are to enhance existing clinical knowledge, foster student achievement of self-identified learning objectives, and expand knowledge in the DNP Project area of study.

A total of 1000 hours post BSN is required; consistent with CCNE guidelines, credit for clinical hours may be granted for validated, supervised clinical practicum hours completed in the Master’s program. Documentation of supervised clinical practicum hours is required upon admission.

The selection of courses for practice immersion will expand the breadth and depth of students’ clinical knowledge and should complement the proposed intent of the DNP Project. Clinical/immersion plan will be refined as the student continues to develop their individual learning objectives and focus of the DNP project. The project advisor will oversee the practicum immersion experiences of their assigned student(s).

**Practicum Immersion Experiences Completed Prior to the DNP Project Courses** (Total = 260 Hours).

Two didactic courses have required practice immersion hours (65 hours per course; total = 130 hours):

- NURS 704 Clinical Research /Analytic Methods
- NURS 709 Population Health

In addition, Students must complete required practice immersion hours (65 hours per course; total = 130 hours) in two other courses, selected from the following course list:

- NURS 702 Systems Leadership/Quality Improvement for DNP
- NURS 703 Advanced Epidemiology and Biostatistics
- NURS 705 Health Care Policy and Advocacy for DNP Clinical Practice
- NURS 707 Information Technology/Decision Support for DNP
- NURS 708 Interprofessional Collaborative Practice
Practicum Immersion Experiences Completed in the Capstone Courses (Total = 250 Hours)
The remaining 250 immersion hours occur in the capstone courses, as indicated below:

- NURS 720 DNP Project Planning Seminar: 50 hours
- NURS 730 DNP Proposal Development: 75 hours
- NURS 740 DNP Project Implementation: 75 hours
- NURS 750 DNP Project Evaluation & Dissemination: 50 hours.
DNP PRACTICE IMMERSION HOURS DOCUMENTATION FORM

Complete at the beginning of each semester

__________________________________________________________
Student Name

__________________________________________________________
Course

Practice/Immersion Hours  Required  Optional

__________________________________________________________
Project Title

Objectives:

1. __________________________________________________________________________________

2. __________________________________________________________________________________

Mentor Name: _________________________________ contact ________________________________
(Email or phone)

Project Advisor Signature/date   _________________________________________________________

Complete at end of semester  (Circle response and sign)

Immiscion hours completed  Yes  No
Objectives met  Yes  No
Confirmation of objectives by mentor  Yes  No

Project Advisor __________________________________________   ______________________
(Date)

Student Signature ________________________________________         ______________________
(Date)
Practicum Immersion Experiences Completed Prior to the Capstone Courses (Total = 260 Hours)

Two didactic courses include required practice immersion hours (65 hours per course; total = 130 hours), including:

- NURS 704 Clinical Research /Analytic Methods for DNP
- NURS 709 Population Health

Additional students are required to complete 130 practice immersion hours in two other courses, selected from the following course list: (Select 2)

- NURS 702 Systems Leadership/Quality Improvement for DNP
- NURS 703 Advanced Epidemiology and Biostatistics
- NURS 705 Health Care Policy and Advocacy for DNP Clinical Practice
- NURS 707 Information Technology/Decision Support for DNP
- NURS 708 Interprofessional Collaborative Practice

Practicum Immersion Experiences Completed in the DNP Project Courses (Total = 250 Hours)

- NURS 720 DNP Project Planning Seminar: 50 hours
- NURS 730 DNP Proposal Development: 75 hours
- NURS 740 DNP Project Implementation: 75 hours
- NURS 750 DNP Project Evaluation & Dissemination: 50 hours

**Student, Faculty Advisor/DNP Project First Reader, and Mentor Responsibilities**

Students. Practicum experiences are intended to be a self-directed but are a collaborative endeavor involving the faculty, the student, and mentors. Students will work with the faculty project advisor to develop the initial plan of study and practicum plan, and identify the need to modify that plan as learning needs are identified. Students are responsible for formulating individual learning objectives and for identifying mentors in clinical sites able and willing to work with them. Prior to each course where practice immersion hours are planned, the student will identify objectives for the immersion experience, identify a site and a mentor, and obtain approval from the faculty project advisor. Same comment Mentors are recruited by the student and approved by the faculty project advisor.

Professional/Organizational Mentors: Mentors should be identified who are best able to assist the student to accomplish identified learning objectives and to facilitate the area of study identified in the DNP project proposal. Students will document immersion hours in Typhon on an on-going basis. A final summary of the immersion experience and achievement of identified objectives will be submitted to the project advisor at the beginning of the semester in which they are intended to be completed and signed-off at the end of semester demonstrating completion. The student is responsible for notifying the faculty academic advisor of any situations that arise that may impact completion of the immersion experience by the end of the semester in which it is scheduled.
Faculty Academic Advisor. The faculty academic advisor will be assigned upon admission, based on the student’s intended area of study for the DNP project and the advanced practice specialty. Upon admission, the faculty academic advisor will assist with the plan of study and develop a tentative practice immersion plan with the student, based upon the students’ identified DNP Project and individual learning objectives.

The Faculty Project Advisor. The faculty project advisor will review and approve the student’s plan for immersion objectives, site, and mentor and will oversee all practice immersion experiences. The faculty project advisor will be responsible for: approving the semester learning objectives, practicum plan and mentors; initiating agency contracts as needed; reviewing documented immersion hours in Typhon; providing feedback to journals/correspondence; evaluation student accomplishment of learning objectives, reviewing student assignments in core courses and evaluating linkage to and student progress toward development of the DNP project proposal. The faculty project advisor will be the first reader for the student’s DNP Project.
ACADEMIC POLICIES

Leave of Absence from Nursing Courses
A graduate student who interrupts his/her nursing program of study or who withdraws from the program must submit a letter to the Master’s or DNP Program Director. The request should be endorsed by the student’s advisor and should be sufficiently specific to determine whether the leave is warranted. The decision to grant the leave of absence will be made by the Master’s or DNP Program Director in consultation with the Dean. A leave of absence has the effect of suspending time limitations such as those for completion of the degree or for the removal of incomplete grades. Accordingly, a leave will be granted only for sufficient reason and only if it is to be for one year or less.

A student who interrupts his/her program for two semesters without notifying the Graduate Nursing office may be eligible to register for course(s) needed to complete the program on a space available basis. If the student interrupts his/her nursing program for three semesters or longer, the student must apply for re-admission to the Master’s in Nursing or DNP Program and must meet current admission requirements.

Study Option Transfer Request Policy: MSN STUDENTS
Master’s students are admitted to one of the following study options: Adult/Gerontology Acute CNS or NP; Nurse Anesthesia; Population/Public Health. Transfer among study options is competitive, based on meeting overall admission criteria. Admission into some study options, including the Acute Care NP and the Nurse Anesthesia options, is extremely competitive, and permission to transfer cannot be guaranteed.

Students wishing to transfer to a different study option must:

- First, discuss the proposed transfer with their academic advisor;
- Next, discuss the proposed transfer with the Coordinator of the study option being requested;
- If transfer is desired, submit to the program director (1) a letter of intent, which includes a rationale for the requested change and a discussion related to how the personal/professional goals have changed; and (2) an updated resume.

A request for change in a study option will be considered by the Graduate Committee during the next admission cycle, typically in the spring semester. Additional materials and an interview may be requested. Students will be notified of the Committee’s decision by the Program Director.

Grading System:

<table>
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<tr>
<th>Cum Index Grade Ranges</th>
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<tbody>
<tr>
<td>4.0</td>
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<tr>
<td>3.67</td>
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<tr>
<td>3.33</td>
</tr>
<tr>
<td>3.00</td>
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<tr>
<td>2.67</td>
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</table>
Retention
All students are expected to maintain a cumulative average of B (3.00) or better in their graduate program. Students who do not maintain a cumulative B (3.00) average will have their status reviewed by the Master’s or DNP Program Director. Students who achieve less than a B in a required nursing course (electives excluded) will be placed on probationary status. Students in the Nurse Anesthesia option who earn a grade of less than B- in the required science courses, including CHEM 519, BIO 535 and BIO 536, will be placed on probationary status. Students on probationary status must achieve a B or better in each required course over the next 9 credits. Two grades below B are sufficient cause for consideration of dismissal; the decision regarding students’ status will be made by the Master’s or DNP Program Director in consult with the Dean. Students may be required to repeat a course at the discretion of the Master’s or DNP Program Director. Please also refer to Section VI of the RIC Graduate Studies manual.

Petitions
Students seeking appeal of Master’s or DNP program policies related to academic progression can petition in writing to the Graduate Committee. The form for describing the petition process and the petition forms are available from the secretary of the Graduate Program and are also included in this Handbook. Petitions are due to the Graduate Department Student and Graduate Outcomes Committee by the Monday of the full week prior to the start of classes in the fall and spring semesters.
Process of Submission of Petitions

The following steps outline the process a student will follow to petition a waiver of a School of Nursing Policy* that is affecting the individual student.

1. The student brings the concern to the attention of his/her advisor within 10 working days of becoming aware of the situation.
2. The student completes the Petition Form (see p. 37-38). The form must be signed by the Advisor, or in the absence of the Advisor, the Program Director.
3. The completed form along with supporting documents is submitted to the Chair of the Graduate Student and Graduate Outcomes Committee within five (5) working days of having met with the Advisor.
4. The Graduate Student and Graduate Outcomes Committee will consider the petition at its next scheduled meeting (meeting days and times are posted on the Master’s student Bulletin Board located in the Graduate Student Lounge).
5. Within five (5) working days following the Graduate Student and Graduate Outcomes Committee meeting, the Committee’s decision is forwarded to the student and his/her advisor.
6. If the decision is unsatisfactory the student has the option to appeal the decision. The Academic Grievance Procedure that outlines this process is available in the college handbook section 3.11.

*The above process is to be utilized only when the student is appealing a policy of the School of Nursing. If you are appealing a decision made by an individual faculty member (grade dispute) or if you have an issue with a College Policy (i.e. disagreement regarding dismissal/probation) you should utilize the Academic Grievance Procedure (see p. 39 of this Handbook).
RHODE ISLAND COLLEGE - SCHOOL OF NURSING

Petition

The *Handbook for Graduate Students in Nursing* includes the policies governing students who are enrolled in the School of Nursing Graduate Program. The policies concern issues such as retention, progression and dismissal. You may wish to refer to these policies when submitting a petition to the Graduate Student and Graduate Outcomes Committee. Please follow the process outlined below:

1. Confer with Faculty Advisor or Program Director.
2. Complete identification and request sections.
3. Obtain faculty Advisor’s/ Program Director’s signature.
4. Submit completed form to the Chair of the Graduate Student and Graduate Outcomes Committee.
5. Chair of Graduate Student and Graduate Outcomes Committee will notify student and student's advisor of the decision.

---

**IDENTIFICATION SECTION**

Date: ___________________________ Student ID# ___________________________

Name (print): ___________________________ Phone #: ___________________________

Address: ___________________________ City/State/Zip: ___________________________

RIC email address: ___________________________

Student Signature: ___________________________

I have discussed this petition with the student:

______________________________ Date: ___________________________

(Signature* of Faculty Advisor &/or Program Director)

*Signature does not imply approval or disapproval, although the advisor may provide additional information in support or opposition to the petition.
REQUEST SECTION
(Please type or print clearly)

1. Clearly state the nature of your petition (refer to the policy in the “Handbook”):

2. Below, please state the reasons for thinking your petition should be granted. What were the extenuating circumstances? Supporting documents should be attached. If you feel these extenuating circumstances are of a confidential nature, you may wish to discuss them with the Chair of the Committee or a member designated by the Chair. A personal appearance may be requested by the Committee.

COMMITTEE DECISION

Date Received: ______________________   Date of Committee Decision: ______________________

Approved: ______________________   Denied: ______________________

Signature of Chair of Graduate Student and Graduate Outcomes Committee:

__________________________________________________________________________
Complaints and Grievances

The *College Handbook of Policies, Practices and Regulations* clearly distinguishes between a complaint and a grievance in Section 3.11.2:

(a) A *complaint* may be any point at issue between a faculty member and a student in which a student feels that an abridgement of personal rights or benefits has occurred. A complaint may, but need not, constitute a grievance.

(b) A *grievance* means a difference, presented in writing that may arise between a faculty member and a student with respect to, but not necessarily limited to:
   
   i. violation of established academic policies and regulations (e.g., examination policies, advisement policies, registration procedures);
   
   ii. arbitrary and capricious grading practices;
   
   iii. violation of the student’s academic freedom, defined in the *Student Handbook* as... “the freedom to inquire, to discuss, to seek evidence, to speak, and to exchange ideas”;
   
   iv. failure to meet obligations to students (adherence to regular class hours, taking timely action, or correcting errors.”

As noted in the *College Handbook of Policies, Practices and Regulations* (3.11.1), the primary purpose of the grievance procedure is to secure, at the lowest level possible, an equitable solution to the problems of students who have disputes with either an academic unit or classroom or grading conduct of faculty.

According to MSN and DNP program policy, student complaints are first discussed with the faculty member involved. If a resolution is not reached, the student may then institute a formal grievance as outlined below.

**Grade Grievances.** Consistent with the *College Handbook of Policies, Practices, and Regulations* (3.11.14), MSN or DNP students who believe that they have received a grade in an arbitrary or capricious manner, meaning that the grading was not properly applied, may request that the grade be reconsidered. Students must first discuss the issue with the faculty member. If resolution is not reached, the student must submit, within 10 working days of the initial discussion (except in the case of final grades and then no later than the 10th working day of next full semester), a written grievance to the faculty member. The grievance must include a maximum one-page summary stating the specific complaint, the specific acting upon which it is based, and the remedy being sought. Within 10 days of receipt of the grievance, the faculty member will meet with the student to discuss the grievance. The grievant and faculty may each choose to bring to the meeting one person from the RIC community who is not a family member of either participant. Within 10 working days of the meeting, the faculty member will issue a decision in writing to the student.

**Academic Dismissal Grievance.** Following the procedure as outlined above, if the issue is not resolved at the Chair level, the student may submit the grievance in writing to the Dean within 10 working days, and the Dean will meet the student within 10 working days of receipt. The Dean shall meet either jointly or separately with participants and each may choose to bring one person to the meeting from the RIC community who is not a family member of either participant. Within 10 days the Dean will issue a decision in writing. If not resolved at the Dean’s level, the grievant may appeal to the Vice President of Academic...
Affairs (VPAA), following the same procedure. If not resolved at the VPAA level, the student may appeal to the President by submitting the grievance to the President within 10 working days of receipt of the VPAA decision. Within 10 working days of receipt of the grievance, the President will meet with the student and faculty member (either jointly or separately) to discuss the grievance. Each may again choose to bring to the meeting one person from the RIC community who is not a family member of either participant. Within 10 working days of the meeting, the President shall issue a decision, setting forth the reasons therefore in writing to the grievant, the faculty member involved, the Department Chair, the appropriate Dean, and the VPAA.

Registration
General registration procedures are described in the Bulletin of Rhode Island College. Nursing majors may register online for required nursing courses during the regular registration period.

Summer Courses
Selected courses are offered during summer sessions. Master’s students are encouraged to complete elective course work during the summer after consultation with their advisor.
HEALTH AND WELLNESS POLCIES

Nursing Health & Immunization Requirements

All Nursing Graduate Students enrolled in a clinical course must have the following information on file in RIC HEALTH SERVICES, located in Brown Hall. Tel (401) 456-8055; FAX: (401) 456-8890.

1. An Admission PE
2. One dose of Tetanus-Diphtheria-Pertussis (Tdap) if it has been 2 or more years since the last dose of Td.
3. Two doses of live Measles vaccine* (preferably MMR) or a blood titer confirming immunity.
4. Two doses of Mumps vaccine* (preferably MMR) or blood titer confirming immunity.
5. One dose of Rubella vaccine or blood titer confirming immunity.
6. Three doses of Hepatitis B vaccine. A Hepatitis B Surface Antibody titer to confirm seroconversion is recommended 1-2 months after the final dose.
7. Provider documented proof of Chicken Pox disease or Varicella titer confirming immunity or Varicella vaccine (2 doses).
8. An initial 2-Step PPD tuberculin skin test and yearly PPD updates (or Chest X-Ray if PPD positive and yearly TB Assessment).
9. Flu vaccine during fall semester.

*Health care workers born o or before December 31, 1956 are only required to have documentation of one dose of measles, mumps and rubella or titers confirming immunity.

Rhode Island College, Browne Hall, Immunization Notice:

If you wish to schedule an appointment for immunization at Health Services, please note:

1. All immunizations must be pre-paid at the Bursar’s Office located on East Campus in Building #4. Office hours are 8:30 a.m. to 4:30 p.m. Monday-Friday. Cash, check or credit cards (Discover, Master Card or Visa) are accepted. A receipt from the Bursars must be presented at Health Services to schedule an appointment.
2. Health Services does not bill insurance companies (private or school insurance). Most major carriers do not reimburse for immunizations given to students over 18. Check with your insurance company for details.
3. Cost of vaccines (subject to change based on availability):
   - Measles, Mumps, Rubella (MMR): $50.00
   - Tetanus (Td) vaccine: $20.00
   - Tetanus with Pertussis (Tdap): $36.00
   - Hepatitis B (requires as series of 3): $30.00 for each vaccine
4. Plan to spend 15 minutes at Health Services after the vaccine is administered to be sure there is no reaction. If you feel you have had adequate immunizations in the past but are unable to access your records (from provider, high school or other college), you may elect to have a blood titer drawn to document immunity. These titers are available through Health Services. The approximate costs of these titers (done by Roger Williams Medical Center lab) are:
- Mumps: $18.00
- Rubella: $20.00
- Rubeola (measles): $18.00
- Varicella B (HBs Ab): $15.00
- Hepatitis B (HBs Ab): $34.00

(Add $3.00 drawing and handling fee to total cost)

***These prices are ONLY available through RIC Health Services. Private insurance does not generally cover the cost of titers. Any questions, please call Health Services at (401) 456-8055.

Substance Abuse Policy

**Philosophy:** Nursing students at Rhode Island College are expected to conduct themselves as professionals at all times. This professionalism includes dress, in-class attendance, academic integrity and the successful completion of course responsibilities as well as behavior in nursing courses on campus and at practicum locations. Adherence to student policies of the College and the Nursing School fosters professionalism. Non-adherence to the professional standards of behavior requires corrective action. Failure by the student to comply with expectations will result in discipline ranging from written warning to dismissal from the Nursing major. Rhode Island College School of Nursing is committed to health promotion and maintenance of a healthy lifestyle. To fulfill this expectation, nursing students must be free of chemical impairment during participation in any aspect of the nursing program including classroom, laboratory and clinical settings. Substance abuse is a major problem that compromises the learning environment and impairs judgment interfering with the ability to provide safe, effective and supportive care. Appropriate treatment of substance abuse and addiction is critical to nursing education and practice.

**Definition:** A chemically impaired student is a person who, while in the academic or clinical setting, is under the influence of, or has abused, either separately or in combination: alcohol, over-the-counter medication, illegal drugs, prescribed medications, inhalants, or synthetic designer drugs. Abuse of the substances includes episodic chronic use that has produced psychological and/or physical symptomatology, which interfere with the student’s ability to fulfill role expectations.

**Procedures:** This health problem must be immediately addressed when identified within the nursing student population. Following are the procedures to be followed when a student is suspected of being chemically impaired.

1. Remove the student to a private area. Discuss the sign(s) and/or behavior(s) observed and allow the student to provide an explanation. Question the student regarding the use of any substance and, if used, what, when, and how much was used and by what route it was taken. When impairment signs/behaviors are observed during a clinical practicum session, the student is removed from the area and relieved of further nursing responsibilities for the day. A written warning is issued, a make-up assignment may be given and the student is instructed to arrange for transportation home.

2. A report of observed student behavior is prepared by the involved faculty member in concert with the clinical preceptor when applicable and is submitted to the Master’s Program Director. A copy of the report will be placed in the student’s file.

3. A group conference will be convened within one week. The conference group consists of the involved student and faculty member, the Master’s Program Director and the Chairperson. The
The purpose of the group conference will be to convey concern for the student’s welfare and to present the student with procedural requirements. If chemical impairment is the problem, these procedures require student agreement to enter into a “Student Wellness Contract” for professional evaluation of chemical dependency status and determination of a treatment plan.

4. During the conference the academic consequences resulting from chemical impairment will be explained. The student will be requested to agree to the contract and to confirm understanding of both the terms and the academic consequences of the contract by signature. Should the student choose not to agree to the contract, he/she will be dismissed from the nursing major.
   a. Participation in clinical nursing courses will not be permitted until the terms of the contract are fulfilled.
   b. A semester grade of “I” (Incomplete) or “W” (Withdraw) will be assigned for these courses depending upon the amount of course work completed to date, the time remaining in the semester, the ability of the student to satisfactorily complete the course requirements and the treatment recommendation of the chemical dependence evaluator.

5. Following the initial screening, the evaluator will determine the prescribed treatment. If no treatment is required, the evaluator will prepare a written report to the Master’s Program Director and Chairperson. Upon receipt of the written recommendation of the chemical dependency evaluator that no treatment for chemical impairment is required, the student may return to all courses in progress.

6. When treatment is indicated, completion terms of the contract must be fulfilled. Upon completion of the program, the student may resume participation in clinical nursing courses contingent upon the approval of a written request for reinstatement submitted for the semester he/she desires to return. If additional chemical impairment occurs subsequent to implementation of these procedures, the student will be dismissed from the nursing major.

(Sources noted in Policy Manual)

Prevention of and/exposure to HIV, HBV, and HCV Infections Policy

In order to reduce the possibility of exposure to HUMAN IMMUNODEFICIENCY VIRUS (HIV), HEPATITIS B VIRUS (HBV), and HEPATITIS C VIRUS (HCV) by nursing students, Rhode Island College School of Nursing has adopted a policy encompassing vaccination for HBV, and education and prevention techniques for HIV and HCV including standard precautions. Education about and prevention of exposure to body fluids and transmission of blood-borne pathogens including, but not limited to, HIV, HBV, and HCV is the focus of this policy. The attached procedures, guidelines and forms have been developed in compliance with State and Federal laws, the Centers for Disease Control (CDC) Guidelines, and the policies and practices of Rhode Island College and affiliating clinical practicum placements. The School of Nursing recognizes individual rights, equal opportunity, voluntary testing, and confidentiality of test results and health records.

The purpose of the policy is to:

1. Protect students from exposure to body fluids and blood-borne pathogens and other potentially infectious materials.
2. Outline the HBV immunization protocol for students.
3. Describe the policies regarding students caring for HIV, HBV, and HCV infected clients.
4. Describe the policies regarding students with HIV infection.
5. Describe the Exposure Control Plan (ECP) for students.

1. Protecting the student from exposure to HIV/HBV/HCV
The Centers for Disease Control (CDC) recommends that Standard Blood and Body Fluid Precautions will be used with all clients regardless of known or suspected blood-borne pathogens.

- **Standard Blood And Body Fluid Precautions:**

Standard precautions are intended to prevent parenteral, mucous membrane, and non-intact skin exposures of nursing student to blood-borne pathogens. Blood is the single most important source of HIV, HBV, HCV, and other blood-borne pathogens in clinical settings. The following Standard Blood and Body Fluid Precautions can eliminate the risk of work exposure to HIV, HBV, and HCV. These guidelines should be used with all clients regardless of known or unknown risk factors.

The guidelines for Standard Blood and Body Fluid Precautions include:

1. Students who come into direct contact with body fluids of clients should wear gloves. This includes: direct client care, handling of soiled linen or lab specimens, etc. The gloves should be changed with each client and hands washed immediately after removing gloves.

2. Masks, protective eyewear, and gowns should be worn during all procedures that are likely to generate an exposure event.

3. Wounds and skin sites that have been in contact with blood or body fluids should be washed with soap and water; mucous membranes should be flushed with water. (No evidence exists that using antiseptics for wound care or expressing fluid by squeezing the wound further reduced the risk for blood-borne pathogen transmission; however, the use of antiseptics is not contraindicated. The application of caustic agents (e.g., bleach) or the injection of antiseptics or disinfectants into the wound is not recommended). (CDC Guidelines, 2001)

4. To prevent needle stick injuries, students should immediately dispose of needles and syringes in an appropriate sharps container. They should NOT recap used needles, purposely bend or break needles or in any way manipulate used syringes. This holds true for scalpels and other sharp disposable items.

5. To minimize the need for mouth-to-mouth resuscitation, ambu bags, barriers or other ventilation devices should be used when available.

6. Students who have exudative lesions or weeping dermatitis should refrain from all direct client care and from handling client equipment until the condition resolves.

7. All students who participate in invasive procedures should wear gloves, gown, mask, and protective eyewear.

8. Students assisting in vaginal deliveries and cesarean sections should wear gloves, gowns, masks, protective eyewear, and footwear.

9. Breast milk and saliva: occupational exposure via breast milk and saliva have not been documented. However, the viruses have been isolated from these secretions and therefore standard precautions are required. Gloves should be used during oral exams. Nurses having extensive exposure to human breast milk should routinely use gloves while handling specimens.

10. Human tissues and other body fluids: Standard precautions apply to human tissues and the following fluids: cerebrospinal, peritoneal, synovial, pleural, pericardial, and amniotic fluids. Standard precautions apply to feces, nasal secretions, sputum, sweat, tears, urine and vomitus.

2. **Hepatitis B Immunization Protocol**

The Hepatitis B vaccination series will be initiated if indicated Hepatitis B vaccine will be available to students through Student Health Services. Students are encouraged to inquire about HBV
immunization at their place of employment. All students who decline to comply with the HBV requirement shall be advised of their risk and be required to sign the Hepatitis B Vaccination Declination Form. Refusal to comply with the above requirement does not negate future availability of immunization. Documentation of compliance or refusal shall be included in the student health record in Rhode Island College Health Services.

3. **Policies regarding students caring for HIV, HBV, and HCV infected clients**
   The Rhode Island College School of Nursing believes that master’s nursing students have a responsibility to provide care to all clients and that refusal to care for an individual with HIV, HBV, or HCV is contrary to the ethics of the nursing profession. The School of Nursing recognizes that infectious diseases pose considerable psychological as well as physical threats to students and will address any fears, misinformation or prejudices the student may be experiencing by:
   (1) Providing the most current information on occupational transmission of viruses.
   (2) Providing thorough instructions on the ways students can prevent exposure.

4. **Policies regarding students who have been diagnosed with HIV/HBV/HCV**
   The following statements summarize the School of Nursing policy regarding HIV-infected students:
   (1) The School of Nursing will not consider HIV status in the admission decision. The exclusion of people with HIV infection constitutes unwarranted discrimination. An infected individual will be treated in the same manner as any student diagnosed as having any other illness, injury or disability.
   (2) Students with HIV will be allowed access to clinical, academic, and College-related social activities as their medical condition permits. In the instances where a student is unable to fulfill his/her responsibilities, the School of Nursing faculty will seek advice according to the Rhode Island College Handbook of Policies Practices and Regulations.
   (3) HIV positive students are encouraged to seek competent medical and psychological consultation early in the disease.
   (4) No specific information about HIV status will be documented in the student’s file. Information will not be shared verbally or in writing with anyone unless the student requests so in writing. A student who informs the faculty and/or staff of his/her HIV/HBV/HCV status will be accorded confidentiality by faculty and staff members in whom he or she confides.
   (5) Students with known deficiencies are at an increased risk for hospital-acquired infections. Clinical assignments for these students will be evaluated accordingly.

5. **Exposure Control Plan – Post-exposure evaluation and follow-up**
   A. **Nursing Resource Laboratory**
   Students exposed to blood or other body fluids in the Nursing Resource Laboratory will follow the Post Exposure Evaluation and Follow-up Procedure (as described in the Rhode Island College Occupational Exposure to Blood-borne Pathogens Exposure Control Plan Section IV – pages 10-11). In the event of an exposure, the supervising faculty member will initiate the process by reporting the incident to the Dean of Nursing and the Safety and Security Department (Campus Security Office). If no faculty member is present in the Laboratory, the student is to report the incident to the School of Nursing Chairperson for appropriate action. In addition to the above, the supervising faculty member is responsible for completing a Rhode Island College School of Nursing Incident Report (p. 29-31) and submitting it to the Rhode Island College School of Nursing Dean within 24 hours. The exposed student will be referred to Health Services Office or personal care provider for follow-up medical care, including counseling. The College Insurance Rider provides financial coverage for follow-up.
B. Off-campus Clinical Experiences

Students exposed to blood or other body fluids during an off-campus clinical experience will follow the initial Post Exposure Evaluation and Follow-up Procedure of the respective agency. For follow-up and further testing/intervention, the exposed student will be referred to the Rhode Island College Health Services Office or personal care provider. In addition, the supervising faculty member will initiate the process by reporting the incident to the School of Nursing Dean immediately after the incident. The supervising faculty member is also responsible for completing a Rhode Island College School of Nursing Incident Report (see pages 30-31) and submitting it to the Rhode Island College School of Nursing Dean within 24 hours. In addition, the supervising faculty member will provide the student with the pertinent sections of the CDC’s US Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Post Exposure Prophylaxis. http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm

Cleaning and Disinfection – Nursing Resource Laboratory

The NRL shall be maintained in a clean and sanitary condition. All equipment and environmental and working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials. Contaminated work surfaces shall be decontaminated with an appropriate disinfectant, immediately or as soon as feasible, when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials. Protective coverings used to cover equipment and environmental surfaces shall be removed and replaced as soon as feasible when they become overtly contaminated. All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated according to the cleaning schedule and decontaminated immediately or as soon as feasible upon visible contamination. Broken glassware which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dust pan, tongs, or forceps. Contaminated sharps shall be discarded immediately or as soon as feasible in containers that are closable, puncture resistant, leak proof on sides and bottom and labeled. During use, containers for contaminated sharps shall be easily accessible to students and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found, maintained upright throughout use, and replaced routinely and not be allowed to overfill. When moving containers of contaminated sharps from the area of use, the containers shall be closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, or transport, and placed in a secondary container if leakage is possible. Sharps containers shall not be opened, emptied, cleaned manually or handled in any other manner which would expose students to the risk of percutaneous injury. Disposal of all sharps and medical waste shall be in accordance with applicable regulations and Rhode Island College.

Laundry Practices

In the event that linen used for practice in the NRL becomes contaminated with blood or other potentially infectious materials, it shall be handled following standard precautions. Contaminated laundry shall be placed and transported in bags or containers labeled or in red bags substituted for labels. Contaminated laundry shall be handled as little as possible and shall be bagged or containerized at the location where it was used and shall not be sorted or rinsed. Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through or of leakage from the bag or container, the laundry shall be placed
and transported off campus in bags or containers which prevent soak-through or leakage of fluids to the exterior. All students who have contact with contaminated laundry shall wear protective gloves and other appropriate personal protective equipment.
SELECTED POLICIES

Code of Academic Honesty
The School of Nursing at Rhode Island College recognizes that the nursing profession is based on a standard of honesty and personal and professional integrity. In order to achieve the mission of the College and the School of Nursing, and develop the high ethical standards required for nursing practice, academic honesty is an integral part of the nursing program. Students and faculty are jointly responsible for maintaining an honest environment and all must work together to ensure the success of the academic honesty policy. All students within the School of Nursing are expected to maintain the code of academic honesty. This means that all academic work is presented without plagiarism, cheating or unauthorized assistance.

The Goals of the Academic Honesty Policy in the School of Nursing are to:

- Promote a culture of academic honesty within the School of Nursing.
- Increase understanding of acts that are designated as academically dishonest behaviors.
- Maintain the academic reputation of the School of Nursing.
- Clearly define the process related to matters of academic dishonesty.

Violation of the Code of Academic Honesty
Incidents of academic dishonesty will be adjudicated through the College’s usual disciplinary process. Specifically, when a faculty member suspects a student has committed academic dishonesty, the faculty member will confront the student and may determine the appropriate action to be taken. Penalties could include repercussions on the assignment/test, up through failure for the course. A student who disagrees with the faculty member’s decision may appeal to the Board of College Discipline; or a faculty member may elect to send the case immediately to the Board without passing judgment. The Board has a full range of sanctions available to it, from a warning up through suspension or expulsion from the College.

Behaviors that constitute Academic Dishonesty are prohibited. Examples of academic dishonesty include but are not limited to the following:
(Adopted from Academic Honesty policies from West Hills Community College, University of Maryland Baltimore, School of Nursing; University of Rochester, University of Arkansas/Fayetteville, University of Houston/Clear Lake, University of Michigan, and Rhode Island College Handbook of Policies, Practices and Regulations).

- Plagiarism – Any attempt to present someone else’s work as one’s own, on quizzes, examinations, reports, or term papers, etc., constitutes plagiarism, an act closely analogous to the theft of money or goods to any form of swindling or fraud, and in the academic world, just as deplorable. There are various forms of plagiarism of which the following are most common:
  - Word-for-word plagiarism. This includes (a) the submission of another person’s work as one’s own; (b) the submission of work from any source whatever (book, magazine, or newspaper article, unpublished paper, or thesis) without proper acknowledgement by
footnote or reference within the text of the paper; (c) the submission of any part of another’s work without proper use of the quotation marks.

- **Patchwork plagiarism.** This consists of piecing together of unacknowledged phrases and sentences quoted verbatim (or nearly verbatim) from a variety of sources. The mere reshuffling of other people’s words does not constitute “original” work.

- **Unacknowledged paraphrase.** It is perfectly legitimate to set forth another author’s facts or ideas in one’s own words, but if one is genuinely indebted to the other author for these facts or ideas, the debt must be acknowledged by footnote or reference within the text of the paper.

- **Unauthorized assistance:**
  - Using books, notes, calculators and technological devices in an unauthorized manner to assist with quizzes, exams or lab work.
  - Copying answers to an exam.
  - Giving or receiving answers to a scheduled exam.
  - Submitting work done by another individual and portraying it as one’s own.

- **Providing false information:**
  - Giving false reasons (in advance or after the fact) for failure to complete academic work. This includes, for example, giving false excuses for failure to attend an exam or attend the clinical practicum.
  - Falsifying the results of any laboratory or clinical work or fabricating any data or information, including patient related information.
  - Giving false information or testimony in connection with any investigation or hearing under this policy.
  - Presenting previously submitted academic work and portraying it as new material.
  - Multiple Submissions: Submitting for credit, when a student has not been given permission to do so, any work that is the same or substantially the same as work that has been submitted for credit in another course. Many professors allow reworking or building on prior work; however, multiple submissions are permitted only with the prior permission of the instructor(s), and only when the student acknowledges the multiple submission in the work itself.

- **Theft:**
  - Procuring unauthorized materials related to academic work such as exams, grade books, and class files.

Faculty and students share the responsibility for upholding the Academic Honesty Policy. Students are expected to report instances of academic dishonesty to the faculty. A faculty member is responsible for confronting a student who violates the code and determining the appropriate action to be taken with respect to the class. As noted in the *Rhode Island College Handbook of Policies, Practices, and Regulations* (3.9.1[b]), a faculty member may take action up to and including failing a student accused of academic dishonesty. In all cases, a report describing the nature of the dishonesty and subsequent action taken by the faculty member shall be filled with the Vice President for Academic Affairs. Additionally, the faculty member may recommend that the Academic Integrity Board recommend further action. In the case of
graduate students, the faculty member will also inform the Director of the Graduate Program of the nature of the dishonesty and the subsequent action taken by the faculty member, and may recommend that the Director of the Graduate Program take further action.

As per section 3.9.1(c), in the case of graduate students, the director of the graduate program may convey the recommendations of a penalty of probation or dismissal form the program to the academic dean of the school in which the student is enrolled (revised by vote of the Council (May 3, 2013), and approved by the President (May 24, 2013).

The School of Nursing reserves the right to impose additional penalties when students have been found in violation of the code of Academic Honesty, including dismissal from the School of Nursing. Such penalties will be imposed by the Dean in consultation with the faculty member. Students have the right to appeal to the academic Integrity Board. The appeals procedure is outlined in the Rhode Island College Handbook of Policies, Practices, and Regulations, section 3.9.1.d.ii (p. 35).

All graduate students will be asked to sign an attestation stating they have read the Academic Honesty statement and attest to maintaining academic honesty in all academic assignments, clinical documentation and to maintain professional integrity.
Academic Honesty Attestation

The School of Nursing at Rhode Island College recognizes that the nursing profession is based on a standard of honesty and personal and professional integrity. In order to achieve the mission of the College and the School of Nursing and develop the high ethical standards required for nursing practice, academic honesty is an integral part of the nursing program. Students and faculty are jointly responsible for maintaining an honest environment and all must work together to ensure the success of the academic honesty policy. All students within the School of Nursing are expected to maintain the code of academic honesty. This means that all academic work is presented without plagiarism, cheating, unauthorized assistance or falsifying records.

The Goals of the Academic Honesty Policy in the School of Nursing are to:

- Promote a culture of academic honesty within the School of Nursing.
- Increase understanding of acts that are designated as academically dishonest behaviors.
- Maintain the academic reputation of the School of Nursing.
- Clearly define the process related to matters of academic dishonesty.

As cited in the Graduate Studies Manual, Section VI Academic Integrity:

In pursuing graduate study, all students are expected to adhere to the accepted standards of scholarly integrity in all presentations, examinations, research and writing of papers and theses/projects. Academic integrity is the foundation of the academic community. Students who violate college rules on academic dishonesty are subject to disciplinary penalties, including the possibility of failure or removal from a course, disciplinary probation, and/or dismissal from the college. Individual schools may have additional standards and policies related to academic honesty. See section 3.9.1 Academic Honesty in Chapter III of the College Handbook.


According to Chapter 3 of the College Handbook, Adjudicating Alleged Violations of Academic Integrity

In the case of graduate students, the faculty member will also inform the director of the graduate program of the nature of the violation and the subsequent action taken by the faculty member, and may recommend that the director of the graduate program take further action.

Graduate Programs Role. In the case of graduate students, the director of the graduate program may convey the recommendation of a penalty of probation or dismissal from the program to the academic dean of the school in which the student is enrolled. (Revised by vote of the Council (May 3, 2013, and approval
Academic Integrity Board Role. The Council of Rhode Island College created the Academic Integrity Board (AIB), composed of students, faculty and administration. The AIB has authority to establish, publish and implement procedures for adjudicating alleged violations of academic integrity by students. It is authorized to hear and adjudicate charges against individual students in cases of violations of academic integrity. Details regarding the AIB can be found at http://www.ric.edu/aib/.

The Academic Integrity Board shall consider cases referred to it by a faculty member or the Vice President for Academic Affairs, and has the option to recommend any penalties ranging from those available to the faculty member to placing the student on academic probation or expelling the student from the College.

Appeal. Any student accused of a violation of academic integrity may appeal action taken by the instructor in a case to the Academic Integrity Board.

Appeals Procedure:

• Appeals or referrals to the Board will follow the standard procedure of the Board.

• The Board shall inform the student, the faculty member, and Vice President for Academic Affairs of its decision

I have read this document and attest to maintaining academic honesty in all academic assignments, clinical documentation and to maintain professional integrity.

Student signature: _______________________________________

Student printed name: _______________________________________

Date: ______________________________________________________

Faculty signature: _________________________________________

Date: ______________________________________________________
Social Media Policy

HIPAA – Compliant use of Mobile Devices, Social Media and the Internet

The purpose of this policy is to maintain the protection of sensitive and confidential information related to the School of Nursing and uphold the professional reputation of the School of Nursing and Rhode Island College. This policy applies to the use of mobile devices, social media and internet communications related to confidential information about the School of Nursing (including the faculty, staff, students, classroom and clinical activities), patients, and (SON) clinical affiliates.

SON students, faculty and staff must always protect individuals’ rights to privacy and confidentiality, and communicate sensitive and confidential information in accordance with the Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA). Social media are web-based or mobile technologies used for interactive communication. RICSON encourages responsible use of Mobile Devices to access electronic information that can be helpful in forming plans of care for patients and for professional communication. Examples of social media include but are not limited to, collaborative projects (e.g. Wikipedia), blogs and microblogs (e.g. Twitter), content communities (e.g. YouTube), social networking sites (Facebook), virtual game worlds, and virtual social worlds (e.g. Second Life).

Members of the SON community are expected to observe the American Nurses Association’s (ANA) Principles for Social Networking (American Nurses Association, 2011. Navigating the World of Social Media).

ANA’s Principles for Social Networking
1. Nurses must not transmit or place online individually identifiable patient information.
2. Nurses must observe ethically prescribed professional patient – nurse boundaries.
3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm a patient’s privacy, rights or welfare to the attention of appropriate authorities.
6. Nurses should participate in developing institutional policies governing online conduct.

The policy requires that all:
- Be aware of the necessity of maintaining professional boundaries while using electronic media.
- Follow HIPAA guidelines at all times. Identifiable information concerning patients/clinical activities must not be posted in any online forum.
- Protect confidential, sensitive and proprietary information. Do not share or post any information related to nurse-patient contact or about the SON.
- Do not post comments on social media sites about patients, clinical facilities, employees of facilities, faculty or other students as these posts violate the individual’s right to privacy and may incur liability – even if the posts do not specifically identify individuals.
- Do not use mobile devices to take photos of patients or patient information.
- Use PDAs and other devices only as authorized by faculty and clinical affiliates.
- Have a responsibility to report any breach of confidentiality or privacy to a School of Nursing administrator or faculty member.
Consequences:

- Violations of patient privacy will be subject to HIPAA and FERPA procedures/guidelines and consequences.
- Students who share confidential or unprofessional communication may be subject to disciplinary action, up to and including dismissal from the program.

Classroom Etiquette

Class participation and attendance are expected. Students who are unable to attend class should notify the faculty member in advance. Students should come to class prepared, having completed all assignments so that constructive class participation is likely. Students will be engaged and respectful of others in the classroom; as reflected by not talking while others are speaking, using electronic devices only for class activities, being on time and staying until the class ends. Students who do not conform to expected classroom etiquette may be asked to leave the classroom.

Cancellation of Classes

Students are informed about cancellation of classes or clinical practice, e.g., snow days, by announcements on local radio stations, communications from individual instructors, or by calling the General College Number 456-9500—calling the School of Nursing office is NOT APPROPRIATE. The current Rhode Island College Student Handbook contains complete information about policies and rules and can be accessed at http://www.ric.edu/studentlife/handbook.php. Students in the nurse anesthesia option follow the SJHSNA Student Handbook during the clinical internship.
NURSING RESOURCE LABORATORY AND SIMULATION CENTER

Location
The Nursing Education Center (NEC) is located at South Street Landing, 350 Eddy Street, Providence, RI. The NEC includes multiple high fidelity simulated rooms, health assessment laboratories, practice rooms, standardized patient rooms, and classrooms in a high tech setting. The various areas are used for both scheduled and independent learning and practice.

Mission
Nursing is a profession of practitioners. As nursing faculty we are committed to preparing students to practice the art and science of professional nursing. The Nursing Resource Laboratory and Simulation Center plays a vital role in enhancing students’ preparedness to practice through a multimedia approach that combines faculty-directed and independent learning. Students learn the rationale for nursing actions, and correctly and safely practice many of the cognitive and psychomotor skills needed to work with clients to promote, maintain and restore health. The laboratory also serves as a resource to faculty. Multimedia and audiovisuals including videos, models, and computers contribute to faculty development and enhance and facilitate teaching.

RESOURCES
The faculty of the School of nursing recognizes that students generally have a need to work. However, to succeed in the Graduate program, caution should be used in scheduling work hours. This recommendation is based on the belief that an excessive employment commitment interferes with the educational experience of the students, including opportunities for participation in cultural, social and other activities. Students engaged in the clinical internship of the nurse anesthesia option must adhere to the Council on Accreditation Standard for reasonable time commitment requiring a ten hour rest period between scheduled clinical duty periods.

Assistantships
Opportunities are available for students to apply for graduate assistantships; details are available on the RIC website. For further information contact the Graduate Department Chairperson.

Financial Aid
The Office of Student Financial Aid (Craig Lee 050) at the College administers a program of grants, loans and part-time employment opportunities for students who require financial assistance. Their phone number is 456-8033.
Bulletin Boards
The official School of Nursing bulletin boards are located in the hallway on the one-hundred level of the Fogarty Life Science Building near the Nursing office. Official notices of meetings and events are posted on these boards. The bulletin boards located in the Student Lounge are used for notices and items of interest to students. Students and faculty post items at their discretion on these bulletin boards. **NO Notices are to POSTED ON CORRIDOR WALLS.**

The Graduate student bulletin board is located in the Graduate Student Lounge. Information related to Graduate students’ activities, such as certification information and relevant professional publications are posted on the bulletin board.

Graduate Student Manual, College Catalog, and Student Handbook
*The Graduate Student Policies and Procedures Manual, The RIC Catalog, and The Rhode Island College Student Handbook* are important sources of information for students. These publications may be obtained from the College’s website: [www.ric.edu](http://www.ric.edu). Students in the nurse anesthesia option will receive the SJHSNA Student Handbook at the start of clinical Practicum I.

Additional Resources include:

- **The Writing Center** in Craig Lee Room 225; phone number 456-8141. There is a graduate assistant assigned to the Writing Center specifically to work with MSN students. Please contact the Writing Center for the graduate assistant’s regularly scheduled hours.
- **The Counseling Center** in Craig Lee Room 130; phone number 456-8094
- **The Office of Academic Support** in Craig Lee Room 154; phone number 456-8083
- **Disability Services** in Craig Lee Room 127; phone number 456-2776
- **The Technology Help Center** in Craig Lee basement; phone number 456-8803
- **The Whipple Computer Lab** in Room 102; phone 456-9113
- **Adams Library** contact Rachel Carpenter, School of Nursing Liaison; phone number 456-2812/8125 or rcarpenter@ric.edu.
AWARDS & SCHOLARSHIPS

Caring Award
The Caring Award is given to one graduate student each year. The award recipient will be selected by the Master’s Committee with nominations solicited from faculty teaching master’s courses. Requirements of this award include: full or part-time enrollment in the Master of Science in Nursing program. Award recipient will receive an award certificate and a check for $500.00.

Scholarships
Information about scholarships is available on the School of Nursing website and upon request through the nursing office. The Program Directors regularly sends notification related to scholarship opportunities via the graduate student listserv.

STUDENT ORGANIZATIONS/COMMITTEES

Sigma Theta Tau International - Honor Society of Nursing
Sigma Theta Tau, Inc., the International Honor Society of Nursing, has established Delta Upsilon Chapter-at-Large with the University of Rhode Island, Rhode Island College, and Salve Regina University. The purposes of Sigma Theta Tau are to: recognize superior achievement and scholarship; recognize the development of leadership qualities; foster high professional standards; encourage creative work; and strengthen commitment to the ideals and purposes of the profession. Qualifications for membership include: must be enrolled in an accredited institution, have completed at least ¼ of the nursing curriculum, and have mastered excellence by achieving at least 3.5 grade point average on a 4.0 grade point average system. Students who are notified of their eligibility should complete required application materials by the required due date. Induction takes place in the spring.

Rhode Island State Nurses Association (RISNA)
Master’s students are encouraged to apply to RISNA for membership. Note: the reduced student rate is for undergraduates only. For more information, go to the website at www.risna.org.

American Association of Nurse Anesthetists (AANA)
Students in the nurse anesthesia option will be enrolled as Associate members. The reduced student rate is $200. Enrollment in the Rhode Island Association of Nurse Anesthetists (RIANA) is also included.

NP Alliance of Rhode Island (NPARI)
Students in the NP option are encouraged to join as a student member. The mission of the Nurse Practitioner Alliance of Rhode Island is to promote the profession of nurse practitioners through education of the public, other health professionals and legislators. The intent is to improve the professional and business environments for nurse practitioners and the educational support of NP students. Membership
provides information on educational opportunities and scholarships as well as developing professional relationships.

**RIC SON Alumni Organization**
The Nursing Alumni Organization was organized in 2001. The organization plans programs and events for alumni, including the Annual Nursing Reunion Breakfast at Homecoming.

**School of Nursing Committee Participation**
Master’s and Doctoral students are invited to participate on committees at the beginning of each academic year. Please contact the SON Graduate Department chairperson for further information.

**Peer Mentorship**
Newly enrolled students who are interested in being mentored by a currently enrolled student are encouraged to contact the Master’s Program Director for further information.

**Master’s Student events**
A new student orientation is held early in the fall semester for students entering into the MSN program. Every January, a welcome back reception is held prior to the start of classes, and the Caring Award is also given at this reception. Events are periodically scheduled during the academic year and are announced via the MSN student listserv. Contact the Master’s Program Director for further information.