



SCHOOL OF NURSING
UNIVERSITY OF MICHIGAN

**Graduate Programs Handbook
of
Academic Policies and Procedures
(Master's and DNP)**

2017-2019

Revised July 2018

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Graduate Programs Academic Policies & Procedures Handbook

Welcome to the University of Michigan School of Nursing!

This handbook for graduate students at the School of Nursing provides information regarding policies, procedures, available resources, and issues that are of concern to student academic life. It also outlines rights and responsibilities of the School of Nursing graduate students. These policies, and any additional School of Nursing policies and procedures relative to student records, publications, grievances and discipline, are consistent with the Family Rights and Privacy Act of 1974 and the Michigan Freedom of Information Act of 1977.

Students are responsible for using the handbook as a resource when questions arise and as a guide to academic and nonacademic policies and procedures. All students are required to sign the Handbook Certification document and upload it to their online compliance tracker with Certified Background. In the Handbook Certification document, students certify that they are responsible for:

- a. Reading the handbook in its entirety
- b. Reviewing and understanding any changes made to the Handbook during the entire time they are enrolled as a student in the School of Nursing
- c. Recognizing that changes made to policies and procedures may impact them as a student

Note that the information in this handbook is updated annually. Changes may also be made throughout the academic year and these changes will be posted on the School of Nursing website. Students will be notified of any changes to the handbook via e-mail to their @umich.edu address and published in *The Pulse*, the School of Nursing biweekly electronic newsletter. The information in this handbook is accurate as of September 2018. The *Master's Handbook of Academic Policies & Procedures* is available electronically in the [Handbooks & Policies](#) section of the University of Michigan, School of Nursing's [official website](#).

2018-2019 Academic Calendar

2018 FALL TERM

Labor Day (Holiday)	Sept 3, Mon
Classes begin	Sept 4, Tues
Fall Study Break	Oct 15-16, Mon-Tues
Thanksgiving recess 5:00 p.m.	Nov 21, Wed
Classes resume 8:00 a.m.	Nov 26, Mon
Classes end	Dec 11, Tues
Study Days	Dec 12, Weds & Dec 15-16, Sat-Sun
Examinations	Dec 13-14, Thur-Fri & Dec 17-20, Mon-Thur
Grades Due	72 Hours After Exam
Commencement	Dec 16, Sun

2019 WINTER TERM

Classes begin	Jan 9, Wed
Martin Luther King, Jr. Day University Symposia. No Regular Classes.	Jan 21, Mon
Vacation begins 12:00 noon	Mar 2, Sat
Classes resume	Mar 11, Mon
University Honors Convocation	Mar 24, Sun
Classes end	Apr 23, Tues
Study Days	Apr 24, Wed & Apr 27-28, Sat-Sun
Examinations	Apr 25-26, Thur-Fri & Apr 29-May 2, Mon-Thur
Grades Due	72 Hours After Exam
Commencement Activities	May 2-5, Thur-Sun

2019 SPRING/SUMMER TERM

Classes begin (Spring and Spring/Summer Terms)	May 7, Tues
Memorial Day (Holiday)	May 27, Mon
Classes end (Spring Half Term) 5:00 pm	June 124 Mon
Study Days	June 24-26, Tues-Wed
Examinations	June 27-28, Thur-Fri
Spring Half Term ends	June 28, Fri
Grades Due	72 Hours After Exam
Classes begin (Summer Half Term)	July 3, Wed
Independence Day (Holiday)	July 4, Thurs
Classes end 5:00 p.m.	Aug 15, Thurs
Study Day	Aug 16 -18, Fri-Sun
Examinations	Aug 19-20, Mon - Tues
Grades Due (Full and Summer Half Terms)	72 Hours After Exam
Full & Summer Half Terms end	Aug 20, Tues

(This calendar is subject to change.
Visit the [Office of the Registrar website](#) for the most up-to-date information.)

Chapter

1

School of Nursing

The Michigan Difference - A Statement of Aspiration

Spirited Leaders Who Make a Difference Everyday

We have a passion for the “Michigan Difference” which exemplifies rigorous scholarship, high expectations for students and ourselves, and accountability for continuous quality. We are committed to diversity and have a global reach in our research, education, practice and professional service. We prepare our students to be leaders and thinkers who also have cutting edge skills. The graduates of all of our programs are the ‘best of the best’ and populate leadership positions locally, regionally and around the world. We value interdisciplinary activity and are leaders on campus in areas of our expertise.

Our environment and activities are engaging for faculty and students and draw the best from each of us. We aspire to be good partners to each other in a spirit of ‘lifting others as we climb’. We want to function with flexibility, synergy and efficiency across programs and divisions.

Vision

Lead the nation and influence the world through the impact of our research, educational programs and practice innovations on health.

Mission

The School of Nursing is an integral part of the University of Michigan and as such, subscribes to the three purposes of the university: education, research and service. The primary mission of the School of Nursing is to improve the health and well-being of society through the impact of our research and by educating nurses for leadership in academic and practice roles. The school achieves its mission by building a community that draws its intellectual strength from the rich diversity of people.

The School of Nursing advances the science of our field as well as contributes to general knowledge development. The faculty and students engage in service activities that benefit our communities and that advance the profession of nursing. The school’s faculty practices are part of our service mission and are aligned with interdisciplinary partners and institutions that provide for integration of our research, education and practice activity. The school’s faculty practices are demonstrations for innovations in methods and set high standards for excellence.

Background Information Regarding Our Mission

Education

The University of Michigan, School of Nursing (UMSN) strives for excellence, offering innovative, high quality academic programs. By setting standards of intellectual rigor, a distinguished faculty provides leadership to the state and nation. The School of Nursing prepares nurses at the baccalaureate, masters, doctoral and postdoctoral levels who are capable of making significant contributions in meeting changing health needs. The School of Nursing utilizes educational models of clinical practice that address compelling societal needs related to health and illness.

Undergraduate study is designed to prepare nursing students to contribute to the health of individuals, families, groups, and communities through nursing science. The baccalaureate program is grounded upon a liberal education and prepares nurses with the general knowledge base and abilities necessary to function effectively in a variety of nursing careers.

Graduate study is designed to prepare scholarly, specialized nurses capable of assuming leadership responsibilities within both disciplinary and interdisciplinary contexts. Inherent in this learning process is the development of an understanding of scientific inquiry methods and research competencies. The master's program prepares advanced practice nurses who assume roles in practice, teaching, management, and research in current and emerging health care systems. The PhD and postdoctoral programs prepare nurse researchers to assume leadership roles in developing the empirical and theoretical of nursing practice, nursing science, and health policy.

Research

The School of Nursing, as part of the University of Michigan, is responsible for discovery, development, and transmission of new knowledge relevant to nursing practice and to the formulation of health policy in a multicultural society. Basic and applied nursing research is needed to test, refine, and advance knowledge. The School of Nursing faculty develops productive programs of disciplinary and interdisciplinary research and demonstrates excellence in teaching.

Service

The School of Nursing is committed to serving the University, the profession of nursing and society and to improving the health of the people of Michigan, our nation, and the world. This is accomplished by a faculty that responds to economic and social mandates. School of Nursing faculty hold local, national, and international leadership positions and respond to the public's health needs by developing and adhering to the highest standards of nursing care.

To provide a base for innovative education and research initiatives as well as facilitating the clinical capabilities of faculty, the School of Nursing sponsors and supports nurse managed services that are interdisciplinary in nature and serve diverse populations. Faculty direct health care services (including nurse-managed services), consult with health care systems and educational agencies, and participate in continuing education activities.

Philosophy of Nursing

A philosophy of nursing contains three essential elements: beliefs about the central phenomena of the discipline, mechanisms by which phenomena can be known or addressed, and values of the discipline. Taken together, these three elements guide the education, research, and practice of the School's students and faculty.

a. Beliefs About the Central Phenomena of the Discipline

Viewed holistically, humans are characterized by the dynamic interaction of biological, psychological, sociological, spiritual, and environmental factors. Clients' decisions about health care vary depending upon their stage in the life span, gender, ethnic/racial origin, sexual orientation, economic status and physical/mental ability. Nurses recognize that individuals' health and illness exist in a larger context of family, community, society, and the environment. Nurses provide consumer-centered services that assist individuals, families, groups, and communities to attain and maintain optimal well-being.

b. How Phenomena Are Addressed

Nurses support clients' rights to self-determination, to complete information, and to active participation in all aspects of care. They strive to promote familial, societal, and environmental conditions through education, research, and service, which contribute to health and well-being and inform health care policy. Nurses work both independently and in collaboration with consumers of health care, members of each of the health professions, and other individuals and organizations concerned with health to provide high quality, cost-effective care. Nursing shares with other health professions the goals of promotion and maintenance of wellness, prevention of illness and disability, restoration of the ill and disabled to health, and provision of support through the life cycle including a dignified death.

Rapidly changing health care systems have greatly expanded opportunities and ventures for the profession. Nurses recognize that optimal health care balances scientific knowledge and technology with effective resource utilization. Further, professional nursing practice includes leadership in local, state, and national professional organizations and in other health-related enterprises. Professional nurses collaborate with health professionals and other concerned persons in identifying the health needs of society and provide leadership in developing effective health care delivery systems and building the body of scientific knowledge to inform practice.

c. Values of the Discipline

Nurses are committed to the belief that every individual has the right to safe, satisfying health care that is based upon respect for human dignity and cultural variation. Professional nurses use decision-making and independent judgment consonant with responsible and accountable practice and based on multiple ways of knowing.

Core Values

The core values at the School of Nursing that define how we will work and interact with others are as follows:

- Accountability
- Diversity
- Excellence
- Initiative
- Integrity
- Respect

Accreditation

Accreditation

The University of Michigan is accredited by the North Central Association of Colleges and Schools. The baccalaureate and master's degree programs in the School of Nursing are accredited by the Commission on Collegiate Nursing Education and approved by the Michigan State Board of Nursing. As of April, 2014, the Post Masters Doctor of Nursing Practice program at the U-M School of Nursing also is accredited by the Commission on Collegiate Nursing Education. The Nurse-Midwifery programs are accredited by the Accreditation Commission on Midwifery Education to offer both a Masters and Doctor of Nursing Practice program. As part of the accreditation process and in the development of our graduate curriculum across all of our programs, the following documents are referenced to support meeting the Master and Doctor of Nursing Practice Essentials and the Advanced Practice Specialty Criteria for our advanced practice programs.

- *The Essentials of Master's Education in Nursing (AACN, 2011);*
- *The Essentials of Doctoral Education for Advanced Nursing Practice (American Association of Colleges of Nursing [AACN], 2006); and*
- *The Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2016].*
- National Council of State Boards of Nursing (2008). *Consensus model for APRN Regulation: Licensure, accreditation, certification and education.* APRN Consensus Work Group. Chicago: Author.
- American College of Nurse-Midwives (2011). *The Practice Doctorate.* Silver Spring, MD: Author.
- American College of Nurse-Midwives (2013). *Core Competencies.* Silver Spring, MD: Author.
- American Academy of Nursing (2015). *The Doctorate of Nursing Practice: Current Issues and Clarifying Information.* Washington D.C; Author.
- Adult-Gerontology NP Competencies Work Group. *Adult-Gerontology Acute Care and Primary Care Core Competencies (2016).*
- Population-Focused Competencies Task Force. *Population-Focused Nurse Practitioner Competencies: Family/Across the Lifespan, Neonatal, Pediatric Acute Care, Pediatric Primary Care, Psychiatric-Mental Health, Women's Health/Gender-Related (2013).*

Memberships Held By the School of Nursing

The School of Nursing holds charter membership in the Council of Member Agencies of the Department of Baccalaureate and Higher Degree Programs of the National League for Nursing, the Committee of Institutional Cooperation, the Midwest Alliance in Nursing, the American Association of Colleges of Nursing, and the Commission on Collegiate Nursing Education. The School is also a sustaining member of the National Student Nurses' Association and Sigma Theta Tau International (Rho Chapter).

Non-Discrimination Policy Notice

The University of Michigan, as an equal opportunity/affirmative action employer, complies with all applicable federal and state laws regarding nondiscrimination and affirmative action. The University of Michigan is committed to a policy of equal opportunity for all persons and does not discriminate on the basis of race, color, national origin, age marital status, sex, sexual orientation, gender identity, gender expression, disability, religion, height, weight, or veteran status in employment, educational programs and activities, and admissions.

Inquiries or complaints may be addressed to the Senior Director for Institutional Equity and Title IX/Section 504/ADA Coordinator, Office for Institutional Equity, 2072 Administrative Services Building, Ann Arbor, Michigan 48109-1432; (734) 763-0235 (TTY (734) 647-1388). For other University of Michigan information, call (734) 764-1817.

Chapter

2

Student Services and Resources

Office of Practice and Professional Graduate Programs

The Office of Practice and Professional Graduate Programs (The Graduate Programs Office) provides service and support to help students to be successful academically, and offers opportunities for students to enrich their leadership experiences. The Graduate Programs Office provides academic services including academic advising for graduate students, degree audits, and credit transfers.

The Graduate Programs Office also plans, funds and manages student activities such as all orientations, All School Welcome, Welcome Week, convocation and other school-wide activities.

Academic Advising

Specialty Program Leads

The School of Nursing Master's and DNP Programs Leads meet at least twice a year with their students to discuss career goals, approve course transfers, and to serve as mentors. Talk with your Program Lead if you are considering dropping a course or if you are changing the sequence of courses from your original program plan.

Academic Advisors

The Office of Practice and Professional Graduate Programs (The Graduate Programs Office) has academic advisors who assist all students with advising, course selection, support with any changes to program plans or program plans of study, and help them to utilize the resources available in the school and at the university. Advisors perform degree audits to ensure that students complete requirements for graduation. Degrees are not conferred by the university until approximately a month and a half after the last day of classes.

Students who have other academic questions or concerns about curriculum, transfer credit information, Mcard forms, or are in need of academic-related information should e-mail the academic advisors UMSN-GradAdvisors@med.umich.edu or stop by Room 3160, North Ingalls Building. The Graduate Programs Office also offers open academic advising hours every Monday, Tuesday, Wednesday, Thursday, and Friday from 9:00am - 4:00pm. No appointment is necessary but is advisable.

Group Advising

Each semester, faculty leads for the respective graduate specialties, along with the Graduate Programs Office Advisors, will host a group advising session for each graduate program. These group advising sessions will occur near the beginning of the Fall and Winter semesters. More information on dates, topics, and locations will be sent out to students in the weeks prior. If students have advising questions outside of these group advising sessions, they should direct them to the Graduate Programs Office Advisors at UMSN-GradAdvisors@med.umich.edu. The Graduate Programs Office Advisor will review and respond to the question, in consultation with the student's program faculty lead, as needed.

School of Nursing Buildings Information

Buildings

The School of Nursing is housed in two buildings, the School of Nursing Building, located at 426 North Ingalls and the 400 North Ingalls Building.

School of Nursing Computing Site

The School of Nursing computing site is located in Room 4210 of the 400 North Ingalls Building. The site contains 15 Windows workstations. It is a card-key access site, meaning that users must have a valid Mcard to enter.

Electronic Classroom: The School of Nursing Computing Site can be reserved through [Sites Instruction Support Classroom Reservation](#) however, it is not equipped with an instructor station or with AV projection equipment.

4-HELP: The School of Nursing Computing site is an Unstaffed Site. If the site is in need of maintenance, call (734) 764-HELP (4357) to report the problem, and a staff member of the Sites Environment Support Team will be sent to troubleshoot the problem or restock the Site.

Site Access: Access to the School of Nursing is restricted to University of Michigan students, staff, faculty and those having business with the U-M School of Nursing. The School of Nursing Building is equipped with an extensive card access system, which will necessitate frequent use of your M-Card. As such, anyone entering the 426 N. Ingalls Building will be required to prominently display their M-Card.

Normal business hours for the south exterior doors facing Cornwell Street to be unlocked are 7:30 a.m. – 5:30 p.m., Monday – Friday.

Normal business hours for the 1st and 2nd floor classrooms to be unlocked are 7:30 a.m. – 6:00 p.m., Monday – Friday.

Printers: [M-Print](#) printers are available in room 4210 400NIB and in the lower level of the School of Nursing Building near room A135. Standard student printing charges apply. For more information on M-Print services visit the [ITS Campus Computing Sites web page](#).

Student Lounge and Reading Room

Student lounge and study areas are located throughout the School of Nursing Buildings. The fourth floor of the 426 North Ingalls Building hosts a graduate student lounge in Room 4116. A reading

room for quiet study space is located on the first floor in Room 1219 of the 400 North Ingalls Building. These are areas where students are encouraged to gather, relax and study.

Vending

Vending is available in the School of Nursing Building on the Lower Level and Level 2. Students will also find a microwave for their use in the Level 2 vending area. In the 400 North Ingalls Building, vending, a microwave and a refrigerator are located in the undergraduate student lounge in Room 1188.

Student Lockers

Students may sign out lockers from The Graduate Programs Office (Room 3160, 400 North Ingalls Building) on a first-come, first-serve basis. Master's students' lockers are located on Floor 2 of the School of Nursing Building. Lockers may be signed out in September, after classes begin. Lockers can only be signed out for the current school year. Student lockers must be emptied by June 30 of each year. On July 1, any items remaining in lockers are moved to the Lost and Found. There is no fee to sign out a locker.

Wellness Rooms

Students may utilize the wellness rooms which are designated for use by nursing mothers. Rooms are available in both School of Nursing buildings. Room 4104 in the new School of Nursing Building (SNB) is kept locked during normal business hours Mon-Fri, 8:00 a.m. – 5:00 p.m. See the 1st Floor Reception Desk for a key. Room 3337 in 400 North Ingalls Building (NIB) is unlocked and available on a first come first serve basis.

Lost and Found

Found items should be turned in to the Facilities Manager Office (Room 1343 B, 400 North Ingalls Building).

For inquires about lost or misplaced items in the North Ingalls Building or surrounding grounds, please visit the Facilities Managers Office. In the event your item has not yet been turned in, you may leave a brief description of the item and your contact information at the front desk where it will be posted for two weeks.

Most lost and found items will be held in for one month. After one month they will be sent to the University of Michigan Police Department (UMPD). Please Note: Items such as water bottles, coffee mugs, and food containers, which may easily spread germs and/or grow bacteria, will be thrown away at 5:00pm each day.

If you are looking for items you have lost, contact the University of Michigan Police Department Records/Evidence Unit at 734-936-2791 between 8:00am and 4:30pm Monday through Friday, or by email at lost-and-found@police.umich.edu. Items with no known owner are held for safekeeping for up to six months, depending on the value of the article. After the appropriate time has elapsed, the items are disposed according to applicable state law.

Communication in the School of Nursing

All persons in the School of Nursing community (students, staff and faculty) are expected to conduct themselves in a professional manner when communicating with one another in person, e-mail or on the telephone.

Use of Technology and Social Media

All students are responsible for respectable communication on social media sites (e.g. twitter, Facebook, etc.). Any technology, tool, or on-line space in clinical agencies cannot be used for personal business. This applies to social media platforms. Students must follow clinical agency policies regarding use of technology and social media. At times, a clinical setting may allow use of technology or on-line space or use of social media for work purposes. They are only to be used as they relate directly to patient care or specified agency activities.

- Agency computers cannot be used for personal business such as checking email or Facebook.
- Any personal communication such as cell phone use or texting must be done outside of agency clinical areas on the student's personal time.
- Posting or discussing any information about patients or families on social media or on-line space is not permitted and is a violation of the Student Code of Academic and Professional Conduct (see [Appendix A](#)).
- Non-compliance with policies regarding the use of technology and social media may affect course grades and result in the violation of the Student Code of Academic and Professional Conduct, up to and including disenrollment from the School of Nursing.

E-Mail

All students automatically become members of a School of Nursing user group. Students' campus e-mail address (uniquename@umich.edu) is the only address used in these groups. Forwarding your @umich.edu email to a personal email account introduces unwelcome challenges and is not recommended. The Graduate Programs Office is not responsible for any information not received from e-mails sent to the UMSN student body e-mail groups that may be of importance to students, including scholarship, employment, event and class information.

Students should not share School of Nursing student email distribution lists with external parties who wish to contact students. Instead students should refer all external parties to the Graduate Programs Office at UMSN-GradAdvisors@med.umich.edu so that information can be distributed if appropriate.

Contact the Graduate Programs Office via e-mail at UMSN-GradAdvisors@med.umich.edu about problems with School of Nursing user groups. Usage guidelines, which are included in [Appendix B](#), address the management of student user groups. It is important all students review and abide by these guidelines.

Students need to check for e-mail messages frequently. Students are held responsible for School of Nursing, course and University information communicated via e-mail. Students should use their @umich.edu account to communicate on e-mail for any School of Nursing and University business.

Level 1 and Level 2 Passwords

A Level-1 password, also referred to as your UMich password or Kerberos password, is used to access your @umich.edu email account and campus resources such as libraries, benefits, and Wolverine Access. To obtain a UMich (Level-1) password, contact the ITS accounts office.

A Level-2 password, also known as Novell (UMMED) or Michigan Medicine Exchange password, is used to access your @med.umich.edu account ([MICHIGAN MEDICINE Exchange](#)) and other hospital resources. Please Note: your @med.umich.edu account is only available while in clinical at Michigan Medicine. This email account also does not forward to your @umich.edu.

Computing and Technology

Computing at the School of Nursing (Fall 2017 Computer System Requirements)

School of Nursing students in all graduate programs must have access to a laptop while enrolled to complete the coursework in their respective programs. While UMSN does not require the purchase of any specific computing hardware, students must acquire a computer that meets the standards set forth in this document. It is each student's responsibility to ensure that they have the required hardware and software for every course for which they are enrolled. **Please review these standards each term as they may change to stay current with technology upgrades.**

The School of Nursing has set computer requirements to ensure that student computers have the functionality needed for their coursework. Students may choose either Option A or Option B below, choosing the best fit for their needs. If you already own a computer, please compare your specifications with the requirements listed below. **At a minimum, your computer must meet the requirements listed for Option B. If your computer does not meet the standards outlined here you must acquire computer hardware and software that is compliant.**

Option A

Students who will be at the University for 4 years or more should choose this option. Option A specifications are based on a 4-year replacement cycle, which means that students will be able to use their computer for at least 4 years.

Option B

Though the requirements listed in Option B meet the School of Nursing's minimum computing requirements, these systems are not adequate for more than 2 years of use. Option B is only appropriate for students who have less than 2 years of coursework to complete. If you are enrolled for longer than two years, you are required to acquire computer hardware and software to meet the School's computing requirements.

School of Nursing Information Technology Support (Nursing IT)

The School of Nursing Service Desk is available to assist you in selecting a system that is compatible with the University's computing environment and meets the School's computing requirements. Please contact the School of Nursing IT Service Desk if you need assistance identifying systems appropriate for your needs.

Email: 4help@umich.edu

Phone: 734-764-6300

Computer Requirements

COMPONENT	OPTION A REQUIREMENTS	OPTION B REQUIREMENTS
Operating Systems	<ul style="list-style-type: none"> • Windows (current release-Windows 10) • Mac OS (current release-Sierra) 	<ul style="list-style-type: none"> • Windows 7 (64bit) • Mac OS X (Mountain Lion or Greater)
Laptop Hardware	<ul style="list-style-type: none"> • Processor: i7 2.6 GHz (or equivalent) • RAM: 8G (expandable to 16GB or more) • HD: 250GB (Solid State optional) • Built-in Wifi (802.11 ac/g/n) • Webcam • Built-in ethernet jack or external USB ethernet jack • 5 Hour Battery • 3-4 Year Warranty 	<ul style="list-style-type: none"> • Processor: i5 Quad core 2.4 GHz (or equivalent) • RAM: 8GB • HD: 250GB (Solid State optional) • Built-in Wifi (802.11 g/n) • Webcam • Built-in ethernet jack or external USB ethernet jack • 4 Hour Battery • 3-4 Year Warranty
Software	<ul style="list-style-type: none"> • Microsoft Office Suite 2016 (or compatible Office Suite) • Adobe Acrobat Reader • Chrome Web Browser • Antivirus Software (current release) 	<ul style="list-style-type: none"> • Microsoft Office Suite 2013 or compatible office suite • Adobe Acrobat Reader (current) • Chrome Web Browser • Antivirus Software (current release)

Optional Accessories/Peripherals

ACCESORY	RECOMMENDED USE
Laptop/Mobile Device Bag or Case	Recommended for protecting laptops and mobile devices when traveling.
Laptop Security Cable	Recommended for securing laptops when in use in public spaces.
Mobile Wifi Hotspot	Recommended for students who may need internet access in areas that may have restricted or limited internet connectivity.
Webcam	Recommended for use with desktop systems when using collaboration and web conferencing software.
USB Headset w/Microphone	Recommended for reducing feedback when using web conferencing software. REQUIRED if participating in online synchronous class (check course syllabi for details).
External Laptop Battery	Recommended to provide additional run time when power receptacles are not readily available.
External Backup Drive	Recommended for backup of data and data sharing when connectivity is not readily available.
External Mobile Device Battery Pack	Recommended to provide additional run time when power receptacles are not readily available.
Laptop Video Adapters (DVI/VGA/HDMI)	Recommended for students who will use their laptops and mobile devices to connect to various projection systems.
Mobile Devices	<ul style="list-style-type: none"> • Android Devices (current release) • iOS Devices (current release) • Wifi (802.11 g/n)

Technology Policies

POLICY	REFERENCE
Sensitive Data	Sensitive Data Policies Proper Use Policy
Ethics	UMSN Student Handbooks
Netiquette	UM Safecomputing Student Guidelines URespect
E-Mail policies for UMSN Students	UMSN Student Handbooks
UMich IT Policies	UM Student IT Policies

Please Note: Students should be able to perform basic computing tasks such as performing internet searches, uploading and downloading documents, using email, and installing software. Students should also have a basic level of proficiency using standard productivity applications such as Microsoft Word, PowerPoint, and Excel.

Computing at the University

The Information Technology Central Services (ITCS) provides a central focus for computing and telecommunications at the University. Within ITCS are a number of units that provide direct services to students. Students can use computers, take advantage of many free educational services including classes and consulting, and benefit from special purchase plans which make it possible to purchase computers and software at reduced prices. For additional information about all services offered by ITCS, please visit the [ITS General Computing website](#). The University of Michigan dictates standard practice and proper use policies for technology resources. These can be reviewed on the [Office of the Chief Information Officer's website](#).

Creating and Changing Uniqnames

After matriculating, new students will receive an email from ITS Accounts instructing them on how to create a uniqname. If students would like to change their uniqname they should contact the ITS Accounts Office at 734-764-HELP (4357) and select option three. Students should also notify all their contacts of their uniqname change. Any individual sending an e-mail to an old uniqname will receive a "bounced message" alert. However, by changing your uniqname through the ITS Accounts Office, all U-M Directory membership groups you are a member of will be automatically updated with your new uniqname. Problems occur when other units, such as Michigan Medicine, change someone's uniqname and do not contact ITS Directory Accounts.

Assistive Technology Resources On-Campus

[Adaptive Technology Computing Services](#) – "meets the needs of any U-M community members who have questions about modifications or alternatives to standard monitors, keyboards or mice, or who are seeking high-tech tools to help with reading and writing."

James Edward Knox Center
1128 Shapiro Library
Jane Vincent, Assistive Technology Lead
Phone: 734-936-3794; Knox Center direct line 734-647-6437
Email: sites.knox@umich.edu

[Google Accessibility - Barriers and Alternative Options](#) – "provides a list of examples of accessibility barriers of Google Apps for Education's core applications and U-M accommodations and alternative options." Questions about the accessibility of U-M's implementation of Google Apps for Education or other ITS-provided applications can be directed to Jane Vincent at jbvincen@umich.edu.

[M+Google Accessibility](#) – "provides information about known accessibility barriers and work-arounds." For general information about Information Technology (IT) Accessibility at the University of Michigan, please see the CIO's IT [Accessibility](#) page.

ITS Service Center
Phone: 734-764-4357
Email: 4HELP@umich.edu

[Assistive Technology Funding Sources](#) – lists several assistive technology funding sources for students with specific types of disabilities.

Services for Students with Disabilities
G-664 Haven Hall
Phone: 734-763-3000
Email: ssdoffice@umich.edu

[Ergonomics Awareness Program](#) – “helps increase faculty and staff awareness of, access to, and the effectiveness of ergonomic resources within the U-M community. The program helps departments and employees apply ergonomic principles to everyday work practices. The Ergonomics Team provides a combination of education and ergonomic consultations to minimize the effects of ergonomic risk factors on our health and productivity and to help us emphasize personal responsibility for safe behavior and environmental factors within our control.”

Ergonomics Awareness Program – Medical Ergonomics and Occupational Therapy Work Services
Suzanne Bade, Senior Clinical Specialist and Ergonomics Consultant
Phone: 734-647-0852
Email: mhealthvergo@umich.edu

Student Organizations

There are a number of ways for students to become involved with extra-curricular activities at the School of Nursing and within the greater University.

Sigma Theta Tau

[Sigma Theta Tau International Honor Society of Nursing](#) establishes chapters at degree-granting colleges and university schools, and in 1959, established the Rho Chapter at the University of Michigan. Rho Chapter of Sigma Theta Tau seeks students who have demonstrated the qualities of scholarship, leadership and service, integrity, and commitment to nursing. Rho Chapter typically extends offers of membership to graduate students in September based on the following criteria. That said, any student who has met the criteria below is welcome to request a membership application by contacting the Rho Chapter Faculty Counselor.

The criteria for membership for masters and doctoral students are:

1. Completion of 1/4 of the required graduate curriculum
2. GPA of 6.5 or higher for master students; 7.0 or higher for doctoral students (using the Rackham scale)
3. Academic integrity and professional goals

Upon receiving a membership invitation via email during the fall term, students must reply to indicate interest and provide approval for release of information to Sigma Theta Tau International (STTI). STTI will then contact the student and request completion of an online application.

The ceremony for induction into membership is usually held in late October or early November.

Visit the [About Rho Chapter](#) section of the UMSN website for more information.

Michigan Council of Nurse Practitioners

[Michigan Council of Nurse Practitioners, University of Michigan School of Nursing Student Affiliate Chapter](#) (MICNP UMSN) seeks to provide Student Nurse Practitioners a venue to understand the professional issues that impact Advanced Practice Registered Nurse practice in the state of Michigan and advocate for the Nurse Practitioner role. MICNP UMSN seeks to aid in the development of the whole student, his/her professional role, and his/her responsibility for the health care of people from all walks of life. MICNP UMSN aims to increase understanding of the role of a professional organization in improving health care outcomes.

To join MICNP, please visit the [website!](#) You will be contacted by our membership chair after submitting the interest form.

School of Nursing and University Resources

Nursing Clinical Learning Center (CLC)

The Nursing Clinical Learning Center (CLC), on the lower level of the School of Nursing Building and is comprised of the following areas:

Two Physical Assessment Labs (A250, A270) are equipped with a conference table in the center and an overhead projection system. There are 8 Exam tables in each lab with Welch-Allyn diagnostic tool and bedside computers. Anatomical charts and models are provided as visual aids to enhance learning and practice. The room can be opened to teach in both sections at once.

The Anatomy Lab (A265) is equipped with a Plastinated full body model, an Anatomage table and various skeletal and bone models. There are LCD displays in the room and at tables.

The Nursing Skills Lab (A210) is equipped with 12 beds, a Pyxis Medication Station, two ceiling lifts, functioning head walls, mid-fidelity mannequins, computers at the bedside and a 'nursing station'.

The Skills/Task Training Lab (A204) is equipped with various task trainers to support advanced skill development.

The Simulation Suite had six simulation rooms each with their own control rooms. Each room is equipped with a functioning headwall, computer, AV equipment to support a full debriefing system with 3 cameras and vital sign/data capture from the high-fidelity mannequins. The suite is further equipped with high-fidelity birthing simulators, pediatric simulators and adult simulators and a comprehensive integrated debriefing system.

Students may borrow diagnostic tools from the Reception Area during posted hours. Equipment may be borrowed for 24-48 hours and is subject to the short-term loan policy, which can be found at the website below.

The Clinical Learning Center is accessible through M-Card access only so make sure to wear your ID card at all times when using the resources in the Lower Level.

For more information on the Nursing Clinical Learning Center, visit the [Clinical Learning Center](#) section of the UMSN website.

Sweetland Writing Center

To help students with their writing for courses at the University of Michigan, Sweetland Writing Center offers free Writing Workshop consultations with Sweetland's trained writers.

[Sweetland Writing Center](#)

1310 North Quad

Phone: 734-764-0429

Fax: 734-763-9148

sweetlandinfo@umich.edu

Counseling and Psychological Services (CAPS)

Counseling and Psychological Services (CAPS) provides students with short-term counseling to help address and overcome personal and interpersonal difficulties that interfere with the pursuit of academic and career objectives. Common concerns that CAPS staff work with students about include self-esteem, academic difficulties, test anxieties, stress, problems with relationships, sexuality, anxiety, depression, insomnia, substance abuse, suicide, and others.

CAPS services are free, confidential, and available to currently enrolled students. Services include: brief counseling for individuals, couples and groups; consultation to students, faculty, staff, and parents; assistance with referrals to community resources; and crisis interventions. The staff at CAPS includes professional therapists, psychiatric staff, and interns from graduate programs in Psychology and Social Work. More information is available at:

School of Nursing Counseling and Psychological Services

Kristen Adams, Psychologist

426 North Ingalls

Suite 3100

adamskri@umich.edu

[Counseling and Psychological Services](#)

3100 Michigan Union

Phone: 734-764-8312

Fax: 734-763-0454

Diversity, Equity and Inclusion Officer

The Chief Inclusion Officer provides referrals and direct support to individual students and groups who would like to further explore various topics, experiences and critical issues related to any aspect of inclusion at UMSN and in the larger campus community, and that bear relevance to the pursuit of their academic, professional and personal goals. The Chief Inclusion Officer also offers a range of opportunities for students who are interested in offering service to the school by participating and leading in the schools ongoing commitment to creating an inclusive learning environment where all can grow and thrive. These opportunities include but are not limited to participation in the Gateways Fellowship Program, Nursing Story Slams Project, Diversity, Equity and Inclusion Innovation Grants program, and professional development opportunities to grow in one's own ability to demonstrate inclusive leadership and work towards organizational well-being.

For more information please contact Dr. Rushika Patel at rushika@med.umich.edu. To make an appointment, please contact Coreen Abston at cabston@med.umich.edu.

Services for Students with Disabilities (SSD)

Services for Students with Disabilities (SSD) provides services to students with all types of disabilities, including visual impairments, learning disabilities, mobility impairments, or hearing impairments. They also work with students who have chronic health problems or psychological disabilities. SSD offers services which are not provided by other University offices or outside organizations. They provide accessible campus transportation, adaptive technology, sign language and oral interpreting, readers, guidance for course accommodations, requests to modify degree requirements, and more, all free of charge.

Before and after a student enrolls at the University, the staff of SSD is available to answer questions and give referrals concerning admission, registration, services available, and financial aid. In addition, SSD is able to assist students in assessing needs for modified housing, attendants, interpreters, transportation, classroom accommodations, note-takers, and adaptive equipment. For more information, contact:

[Services for Students with Disabilities](#)

G-664 Haven Hall
Phone: 734-763-3000
TDD: 734-615-4461
VP: 734-619-6661
ssdoffice@umich.edu

Chapter

3

Master's Program Details

Objectives of the Master's Degree Program

Consistent with the School's Philosophy of Nursing, the Master's Degree programs are designed to prepare graduates to:

- Expand knowledge and expertise in a specialty area of nursing
- Investigate various theories related to the practice of nursing
- Examine health issues and care delivery systems with regard to their implications for nursing
- Evaluate nursing roles and their articulation with other health care roles in the planning and delivery of health care
- Gain advanced knowledge in related physical, social and behavioral sciences and humanities
- Develop abilities in facilitating collegial relationships in the planning and delivery of health care and conduct of collaborative research
- Engage in directed scholarly study
- Develop knowledge and skills in planning and implementing data/evidence-based change in nursing practice and health care delivery systems
- Assume leadership roles in clinical nursing, teaching, or management, from a strong theory, evidence, and practice base
- Develop skills in analyzing the social, political, ethical, technological, economic, and professional issues and their implications for nurses, nursing, and health care
- Value the diversity of people of different genders, sexual orientation, ages, races, cultures, religions, nationalities, and beliefs and the ways in which these affect health and health care delivery

Graduate study at the master's level builds on baccalaureate education and is designed to prepare scholarly, specialized nurses capable of assuming leadership responsibilities in current and emerging health care systems. Inherent in this learning process is the development of a multi-cultural perspective and research competencies. The master's programs combine theory and practice in a specialty area with core content related to the discipline and practice of nursing. The curriculum emphasizes the systematic study of nursing through specialization, research, and elective and cognate courses.

The Master's Degree programs in Nursing provide students with diverse theoretical, clinical and managerial learning experiences, which allow them to function in a broad variety of roles in advanced nursing practice. The specialty areas build upon previous nursing knowledge and skills learned at the undergraduate level. At the graduate level, students develop specialized competencies and greater capability to function in changing, complex health care delivery systems.

Guidelines for Theory, Research, and Leadership Core Requirements

The "core" courses are N527, N528, and N529. Course descriptions can be found in [Appendix G](#).

- Nursing 527: Promoting Optimal Models and Systems for Healthcare Delivery
- Nursing 528: Models, Theories and Methods to Promote Optimal Health Outcomes
- Nursing 529: Scientific and Analytic Approaches for Advanced Practice

Statistics

An approved, upper level undergraduate statistics course is a prerequisite for the N529 (master's core course) at the University of Michigan School of Nursing. The statistics course must meet **each** of the five requirements listed below:

1. Your course must be completed at a University. Courses completed at a community college will not be considered. Completely online statistics courses may be considered on a case-by-case basis.
2. The statistics course must be an upper division undergraduate level. A 300 level or above course would meet this requirement, while a 100 or 200 level course would not as they are considered lower division.
3. You are required to complete the course within 5 years of the term in which you are applying for admission consideration.
4. You must earn a satisfactory grade of a "B-" or above (grades of C+ or below and Pass/Fail courses will not be accepted or considered).
5. The statistics course should be a general, social science, health care related or comparable course (courses that focus in business analytics, economics or finance do not meet the requirement).

If you have not successfully completed a statistics course that meets the above guidelines prior to your first term in the program, you may enroll in the University of Michigan School of Nursing graduate statistics course, HS550: Scientific Methods for Health Sciences: Fundamentals or N800: Graduate Statistics for Advanced Practice and Research, which is required in the DNP Program.

Computer Skills

For students to be successful in the program, they need to acquire essential skills in the use of The University of Michigan computing facilities and personal computers. This includes use of e-mail, Internet; word processing, graphics, spreadsheets and statistical packages (such as SPSS and SAS). These skills may be acquired through short computer training courses offered by the University of Michigan Computing Center or other units on campus. Schedules for computer classes are published at the beginning of each academic term, and are distributed at all computer workstation sites on campus.

Program Options

The University of Michigan School of Nursing offers the [Master's](#) and [Post-Master's Certificate](#) programs.

Master's Programs

1. Health Behavior and Biological Sciences:
 - Adult-Gerontology Acute Care Nurse Practitioner & Clinical Nurse Specialist
 - Adult-Gerontology Primary Care Nurse Practitioner
 - Acute Care Pediatric Nurse Practitioner
 - Primary Care Pediatric Nurse Practitioner
 - Primary Care Family Nurse Practitioner
 - Nurse Midwife
 - Nurse Midwife and Family Nurse Practitioner (Combined)
 - Nurse Midwife and Primary Care Pediatric Nurse Practitioner (Combined)
2. Systems, Populations, and Leadership:

Focus areas within this program include:

 - Health Informatics
 - Leadership
 - Population Health

Certificate Options

- Certificate in Nurse Education
- Certificate in Health Informatics
- Post-Master's Advanced Certificate Options
 - Post-Masters Certificate Acute Care Pediatric Nurse Practitioner
 - Post-Masters Certificate Adult-Gerontology Acute Care Nurse Practitioner
 - Post-Masters Certificate Adult-Gerontology Primary Care Nurse Practitioner
 - Post-Masters Certificate Primary Care Family Nurse Practitioner
 - Post-Masters Certificate Primary Care Pediatric Nurse Practitioner
 - Post-Masters Certificate Nurse Midwife

Master's Concentration Options

- Global Health Concentration
- Occupational Health Nursing (Adult-Gerontology Primary Care Nurse Practitioner, Primary Care Family Nurse Practitioner and Systems, Populations Health and Leadership only)

Adult-Gerontology Nursing Programs

Acute Care Nurse Practitioner and Clinical Nurse Specialist

The Adult-Gerontology Nursing Programs at the University of Michigan, School of Nursing (UMSN) focus on the care of patients with complex health problems, including young adults, adults, and older adults with acute, critical, and chronic illnesses. Students are prepared to be advocates and leaders in the assessment and development of comprehensive plans of care for their patient populations in an integrative and inter-professional approach. The UMSN program foundation includes:

- Pathophysiology
- Pharmacology
- Evidence-based management of complex patient problems.

Hands-on instruction and training is provided in procedures commonly encountered in the acute and critical care settings (e.g. suturing, performing a lumbar puncture, developing advanced airway management skills, and central line placement). Students are given the opportunity to specialize in an area of interest, and UMSN facilitates clinical placements with a wide range of partners.

Graduates of UMSN's adult acute-care programs enjoy an extremely high pass rate on the national certification exam. Included among potential employment opportunities for graduates are intensive care units, trauma units, specialty practices, emergency department, long term care facilities, cardiopulmonary/neurology/surgery/oncology fields, home health care, and other options.

Faculty and student research includes a vast array of topics, including chronic disease diagnosis and management, mental health care, substance abuse, self-care management, health promotion, decision science, and health disparities.

Curriculum

The Adult-Gerontology Acute Care NP program and the Adult-Gerontology CNS program are offered in a 2 year (primarily full-time enrollment, 9 or more credits each fall, winter and spring-summer term of the curriculum) or a 3 year (primarily part-time enrollment, less than 9 credits each fall, winter and spring-summer term of the curriculum) program plan.

The Adult-Gerontology Acute Care NP students will be placed in clinical settings appropriate to the NP role while the Adult-Gerontology CNS students will be placed in clinical setting appropriate to the CNS role.

Adult-Gerontology Nursing Programs Acute Care Nurse Practitioner and Clinical Nurse Specialist

**Fall Start, 2 Year Plan (Full-Time)
Effective Fall 2017**

FALL 2017		CREDITS	WINTER 2018		CREDITS	SPRING-SUMMER 2018		CREDITS
YEAR 1	N503: Advanced Health Assessment	4	N573: Adult-Gerontology Acute Care Nurse Practitioner and Clinical Nurse Specialist Nursing Theory I (CDM I)	3	N575: Adult-Gero Acute Care Nurse Specialist Nursing Theory II (CDM II)	4		
	N502: Advanced Pathophysiology	4	N529: Scientific & Analytic Approaches for Advanced Practice*	4	N553: Advanced Practice Specialty Procedures and Skills	3		
	P620: Pharmacotherapeutics I	4	P621: Pharmacotherapeutics II	4				
					N523: Role Transition to APRN	3		
Total	12	Total	11	Total	10			

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
YEAR 2	N577: Advanced Practice Nursing Clinical Practicum I (125 hrs)	3	N527: Promoting Optimal Models and Systems for Healthcare Delivery	3	N611: Advanced Practice Nursing Clinical Practicum III, (250 hrs)	4		
	N528: Models, Theories and Methods to Promote Optimal Health Outcomes	3	HS505: Team-Based Clinical Decision Making	2				
			N579: Advanced Practice Nursing Clinical Practicum II, (125 hrs)	3				
	Total	6	Total	8	Total	4		

**Total credits: 51
Clinical Hours: 500 (min)**

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Adult-Gero Acute Care NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-51 (depending on previous Nursing Masters and Post-Master's program of interest).**

Adult-Gerontology Nursing Programs Acute Care Nurse Practitioner and Clinical Nurse Specialist

Fall Start, 3 Year Plan (part-time) Effective Fall 2017

**YEAR
1**

FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
N502: Advanced Pathophysiology	4	N529: Scientific & Analytic Approaches for Advanced Practice*	3		
P620: Pharmacotherapeutics I	4	P621 : Pharmacotherapeutics II	4		
Total	8	Total	7	Total	0

**YEAR
2**

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N503: Advanced Health Assessment	4	N573: Adult-Gerontology Acute Care Nurse Practitioner and Clinical Nurse Specialist Nursing Theory I (CDM I)	4	N575: Adult-Gerontology Acute Care Nurse Practitioner and Clinical Nurse Specialist Nursing Theory II (CDM II)	4
N523: Role Transition to APRN	3	HS505: Team-Based Clinical Decision Making	2	N553: Advanced Practice Specialty Procedures and Skills	3
Total	7	Total	6	Total	7

**YEAR
3**

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N577: Advanced Practice Nursing Clinical Practicum I, (125 hrs)	3	N579: Advanced Practice Nursing Clinical Practicum II, (125 hrs)	3	N611: Advanced Practice Nursing Clinical Practicum, (250 hrs)	4
N528: Models, Theories and Methods to Promote Optimal Health Outcomes	3	N527: Promoting Optimal Models and Systems for Healthcare Delivery	3		
Total	6	Total	6	Total	4

**Total credits: 51
Clinical Hours: 500 (min)**

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Adult-Gero Acute Care NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-51 (depending on previous Nursing Masters and Post-Master's program of interest).**

Acute Care Pediatric Nurse Practitioner Program

Acute care pediatric nurse practitioners are leaders who care for infants, children, adolescents, and young adults with rapidly changing clinical conditions. The University of Michigan School of Nursing (UMSN) Acute Care Pediatric Nurse Practitioner program focuses on treatment for complex health problems including acute, critical, and chronic illnesses.

Emphasis is placed on advanced assessment, diagnostic reasoning and decision-making, therapeutic interventions, and consultation and referral skills. Preparation is broad with increasing opportunities to specialize toward the end of the program, which enables students to focus on a particular area of interest. Graduates enjoy an extremely high pass rate on the national certification exam.

The foundation for students includes:

- Pathophysiology and pharmacology
- Evidence-based management of complex patient problems
- Leadership within the health care system.

UMSN utilizes partnerships with private and public organizations, including nationally recognized University of Michigan C.S. Mott Children's Hospital, to give students a wide variety of health care educational opportunities, from clinical placements to guest lectures. We also foster professional connections with peers in pharmacy, medicine, dentistry, and other fields. Potential employment opportunities include: intensive care units, trauma units, specialty practices, cardiopulmonary/neurology/surgery/oncology fields, emergency departments, long-term care facilities, and home health care

Faculty research focuses on health promotion in infants, children, and adolescents—as well as injury prevention, chronic disease management, adolescent substance abuse, and social and environmental health for adolescent well-being.

Curriculum

The Acute Care Pediatric NP program is offered in a 2 year (primarily full-time enrollment, 9 or more credits each fall, winter and spring-summer term of the curriculum) or a 3 year (primarily part-time enrollment, 9 credits or less each fall, winter and spring-summer term of the curriculum).

Acute Care Pediatric Nurse Practitioner Program

**Fall Start, 2 Year Plan (full-time)
Effective Fall 2017**

**YEAR
1**

FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
N502: Advanced Pathophysiology	4	N527: Promoting Optimal Models and Systems for Healthcare Delivery	3	N551: Acute Care Pediatric Management Part I (CDM III)	2
N503: Advanced Health Assessment	4	P621: Pharmacotherapeutics II	4	N544: Wellness for ACPNP (clinical only – 56 hrs)	1
P620: Pharmacotherapeutics I	4	N541: Wellness and Illness for the Acute Care PNP (CDM I)	3	N553: Advanced Practice Specialty Procedures and Skills	3
N523: Role Transition to APRN	3	N550: Foundations for Practice: Common Acute Illness for the Acute Care PNP (CDM II)	2		
		HS505: Team-Based Clinical Decision Making	2		
Total	15	Total	14	Total	6

**YEAR
2**

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N552: Acute Care Pediatric Management (Part 2)	4	N529: Scientific and Analytic Approaches for Advanced Practice*	3	N639: Acute Care Pediatric Advanced Practice Nursing Clinical Practicum (224 hrs)	5
N637: Advanced Practice Nursing Clinical Practicum II (1 credit seminar, 3 credits clinical) (168 hrs)	4	N638: Advanced Practice Nursing Clinical Practicum III (1 credit seminar, 3 credits clinical) (168 hrs)	4		
N528: Models, Theories, and Methods to Promote Optimal Health Outcomes	3				
Total	11	Total	7	Total	

**Total credits: 58
Clinical Hours: 616 (min)**

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Acute Care Pediatric NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-58 (depending on previous Nursing Masters and Post-Master's program of interest).**

Acute Care Pediatric Nurse Practitioner Program

**Fall Start, 3 Year Plan (part-time)
Effective Fall 2017**

		YEAR 1		YEAR 2		YEAR 3	
		FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
	N502: Advanced Pathophysiology	4	N527: Promoting Optimal Models and Systems for Healthcare Delivery	3			
	P620: Pharmacotherapeutics I	4	P621: Pharmacotherapeutics II	4			
			HS505: Team-Based Clinical Decision Making	2			
	Total	8	Total	9	Total	0	

		YEAR 1		YEAR 2		YEAR 3	
		FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
	N523: Role Transition to APRN	3	N541: Wellness and Illness for the Acute Care PNP (CDM I)	3	N551: Acute Care Pediatric Management Part I (CDMIII)	2	
	N503: Advanced Health Assessment	4	N550: Foundations for Practice: Common Acute Illness for the Acute Care PNP (CDM II)	2	N544: Wellness for ACPNP (Clinical Only - 56 hours)	1	
	N528: Models, Theories, and Methods to Promote Optimal Health Outcomes	3	N529: Scientific and Analytic Approaches for Advanced Practice*	3	N553: Advanced Practice Specialty Procedures and Skills	3	
	Total	10	Total	8	Total	6	

		YEAR 1		YEAR 2		YEAR 3	
		FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
	N552: Acute Care Pediatric Management Part 2 (CDM IV)	4	N638: Advanced Practice Nursing Clinical Practicum III (1 credit seminar, 3 credits clinical) (168 hrs)	4	N639: Acute Care Pediatric Advanced Practice Nursing Clinical Practicum III (224 hrs)	5	
	N637: Advanced Practice Nursing Clinical Practicum II (1 credit seminar, 3 credits clinical) (168 hrs)	4					
	Total	8	Total	4	Total		

**Total credits: 58
Clinical Hours: 616 (min)**

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Acute Care Pediatric NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-58 (depending on previous Nursing Masters and Post-Master's program of interest).**

Adult-Gerontology Primary Care Nurse Practitioner Program

The practice of an Adult-Gerontology Primary Care Nurse Practitioner (AGPCNP) focuses on independent management of adolescent and adult health care. Nurse practitioners take health histories and provide complete physical examinations, diagnose and treat many acute and chronic problems, interpret laboratory results and diagnostic procedures, are trained to prescribe and manage medications and other therapies, provide health teaching and supportive counseling, and refer patients to other health professionals as needed.

Students who complete the highly ranked University of Michigan School of Nursing (UMSN) AGPCNP program enjoy an extremely high pass rate on the national certification exam. They have the understanding and expertise to care for patients in challenging environments locally, nationally, and internationally.

Students in this comprehensive and high-value program:

- Experience diverse clinical and community settings
- Benefit from engaged preceptors who help make connections between the classroom and clinical practice
- Develop professional connections with peers in pharmacy, medicine, dentistry, and other fields
- Have strong support as they pursue projects and research with populations of interest.

The program is based on an understanding of health sciences theory and clinical preparation. It develops the knowledge, judgment, and skills to provide primary health care management, health promotion, and disease prevention to adolescents and adults.

Adult-Gerontology primary care nurse practitioners are in demand with changing demographics, can practice in multiple settings, and are able to utilize their skills in ways that are meaningful both to their patients and their patients' families.

UMSN faculty are experienced instructors and expert clinicians with active practices. Many have leadership roles at the state and national level. Research areas for AGPCNP faculty and students include health promotion, population health, and risk reduction.

Curriculum

The set program plan for the Adult-Gerontology Primary Care Nurse Practitioner curriculum is 3 years in length, primarily at part-time enrollment status (9 credits or less each fall, winter and spring-summer term of the curriculum).

Adult-Gerontology Primary Care Nurse Practitioner Program

**Fall Start, 2 Year Plan
Effective Fall 2017**

YEAR 1	FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
	N502: Advanced Pathophysiology	4	N566: Advanced Primary Care Nursing, (CDM I) (Clinical 112hrs)	5	N666: Advanced Primary Care Nursing of Chronically Ill Adults and their Families (CDM II) (Clinical 168 hrs)	6
	N503: Advanced Health Assessment	4	N568: Critical Elements and the Study of Family Health	3	N554: Advanced Practice Specialty Procedures and Skills for Primary Care	2
	P620: Pharmacotherapeutics I	4	P621: Pharmacotherapeutics II	4	N646: Primary Care Of Older Adults	3
	N523: Role Transition to APRN	3				
	Total	15	Total	12	Total	11

YEAR 2	FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
	N674: Advanced Primary Care Nursing of Adults and Families with Complex Systems (CDM III – (224 clinical hrs)	8	N529: Scientific & Analytic Approaches For Advanced Practice*	3		
	N528: Models, Theories, and Methods to Promote Optimal Health Outcomes	3	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3		
			HS505: Team-Based Clinical Decision Making	2		
	Total	11	Total	8	Total	

**Total credits: 57
Clinical Hours: 504 (min)**

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Adult-Gero Primary Care NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-57 (depending on previous Nursing Masters and Post-Master's program of interest).**

Adult-Gerontology Primary Care Nurse Practitioner Program

**Fall Start, 3 Year Plan
Effective Fall 2017**

	FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
YEAR 1	N502: Advanced Pathophysiology	4	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3	N554: Advanced Practice Specialty Procedures and Skills for Primary Care	2
	N523: Role Transition to APRN	4	N529: Scientific & Analytic Approaches For Advanced Practice*	3	N646: Primary Care Of Older Adults	3
	N528: Models, Theories, and Methods to Promote Optimal Health Outcomes	3	N568: Critical Elements and the Study of Family Health	3		
	Total	10	Total	9	Total	5

	FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
YEAR 2	N503: Advanced Health Assessment	4	N566: Clinical Decision Making I (3 credits. didactic,2 credits clinical, 112 hrs)	5	N666: Clinical Decision Making I (3 cr. Didactic, 3 clinical, 168 hrs)	6
	P620: Pharmacotherapeutics I	4	P621: Pharmacotherapeutics II	4		
			HS505: Team-Based Clinical Decision Making	2		
	Total	8	Total	11	Total	

	FALL 2019	CREDITS				
YEAR 3	N674: : Advanced Primary Care Nursing of Adults and Families with Complex Systems (CDM III – (4 cr. Didactic, 4 cr. clinical 224 hrs)	8				
	Total	8	Total		Total	

**Total credits: 57
Clinical Hours: 504 (min)**

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Adult-Gero Primary Care NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-57 (depending on previous Nursing Masters and Post-Master's program of interest.**

Primary Care Family Nurse Practitioner Program

The Primary Care Family Nurse Practitioner (FNP) program at University of Michigan School of Nursing (UMSN) prepares students to deliver primary health care to individuals and families across the lifespan. Graduates are well suited to work in a wide range of settings and specialty areas, including family practice, internal medicine, pediatrics, and women's health.

UMSN's FNP graduates enjoy an extremely high pass rate on the national certification exam.

The high-value FNP program includes emphasis on:

- Health promotion and development of positive behaviors
- Care for diverse populations at different ages
- Research, education, and policy activities directed at population health
- Interdisciplinary professional connections with peers in pharmacy, medicine, dentistry, and other fields.

With the many partnerships of the University of Michigan, our students are offered opportunities to practice in varied clinical environments and participate in community-based projects. UMSN is a designated World Health Organization (WHO) Collaborating Center, and primary care family nurse practitioner students have worked with faculty in global settings including Africa, Central America, and other locations around the world.

Current research among FNP faculty includes working with homeless families and high-risk youth, promoting health and encouraging smoking cessation in adults, and designing interventions to increase management self-efficacy in individuals with diabetes and other chronic illnesses. Students are encouraged to publish their projects and/or present their findings in local or national conferences, often jointly with their faculty mentors.

Curriculum

The set program plan for the Family Primary Care Nurse Practitioner curriculum is 3 years in length, primarily at part-time enrollment status (9 credits or less each fall, winter and spring-summer term of the curriculum).

Primary Care Family Nurse Practitioner

**Fall Start, 2.5 Year Plan
Effective Fall 2017**

	FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
YEAR 1	N502: Advanced Pathophysiology	4	N529: Scientific & Analytic Approaches For Advanced Practice*	3	N554: Advanced Practice Specialty Procedures and Skills for Primary Care	2
	N523: Role Transition to APRN	3	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3	N646: Primary Care Of Older Adults	3
			N568: Critical Elements And The Studies Of Family And Health	3		
			H505: Team-Based Clinical Decision Making	2		
	Total	7	Total	11	Total	5

	FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
YEAR 2	N503: Advanced Health Assessment	3	N566: Advanced Primary Care Nursing, (CDM I) (Clinical 112 hrs)	3	N693: Advanced Primary Care Nursing Practicum II-FNP, (224 hrs)	4
	N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N593: Advanced Primary Care Nursing Practicum II-FNP, (168 hrs)	3	N666: Advanced Primary Care Nursing of Chronically Ill Adults and Their Families (CDMII)	3
			N557: PCPNP CDMI (Clinical Decision Making I): Infant, Child, and Adolescent Health: Wellness and Management of Common Illness (Didactic Only)	6		
	Pharm 620: Pharmacotherapeutics I	4	Pharm 621: Pharmacotherapeutics II	4		
	Total	11	Total	16	Total	7

	FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
YEAR 3	N674: Advanced Primary Care Nursing of Adults and Families with Complex Systems (CDM III) (Clinical 224 hrs)	8				
	N640: Nursing Care Of Childbearing Families Clinical	2				
	Total	10	Total		Total	

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Total credits: 67
Clinical Hours: 728 (min)**

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Primary Care Family NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-67 (depending on previous Nursing Masters and Post-Master's program of interest).**

Primary Care Pediatric Nurse Practitioner Program

Primary Care Pediatric Nurse Practitioners (PCPNPs) have continuously evolving roles and are highly in demand to meet the increasing and increasingly complex health care needs of pediatric populations. They provide primary care to infants, children, and adolescents in various health settings, such as schools, community clinics, and ambulatory care.

Graduates and students of the University of Michigan, School of Nursing (UMSN) PCPNP program work in nurse-managed clinics, rural clinics, research laboratories, and group clinical practices and HMOs. In our high-value program, PCPNP students learn to:

- Educate children and families about positive practices and implement relevant health promotion interventions
- Assess, diagnose, and manage minor, acute, and chronic health conditions
- Provide family-centered and specialized care to children and families
- Participate in multidisciplinary collaborations, research, and community projects.

The result is a focus on the overall well-being of children that recognizes and respects the family's strengths as caregivers.

UMSN faculty maintain active clinical practices and are actively involved in pediatric research on topics including diabetes, obesity, oncology, health promotion, and injury prevention. Students have many opportunities to work with faculty on research and other projects. With far-reaching influence and connections, the University of Michigan, School of Nursing also fosters leadership and learning opportunities in health policy and professional organizations at state and national levels.

Curriculum

The set program plan for the Pediatric Primary Care Nurse Practitioner curriculum is 2 year and 2.5 years in length, primarily at part-time enrollment status (9 credits or less each fall, winter and spring-summer term of the curriculum).

Primary Care Pediatric Nurse Practitioner Program

**Fall Start, 2 Year Plan
Effective Fall 2017**

FALL 2017		CREDITS	WINTER 2018		CREDITS	SPRING-SUMMER 2018		CREDITS
YEAR 1	N503: Advanced Health Assessment	4	N557: CDM I: Infant, Child and Adolescent Health: Wellness and Management of Common Illness (CDM I) (Clinical 112 hrs)	8	N589: Advanced Pediatric Nurse Practitioner Clinical Practicum (224 hrs)	4		
	N502: Advanced Pathophysiology	4	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3				
	N620: Pharmacotherapeutics I	4	N621: Pharmacotherapeutics II	4				
	N523: Role Transition to APRN	3						
	Total	15	Total	15	Total	4		

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
YEAR 2	N617: CDMII: Infant, Child and Adolescent Health: Primary Health Care Across Multiple Settings (Clinical 224 hrs)	7	N529: Scientific & Analytic Approaches for Advanced Practice*	3				
	N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	HS 505: Team-Based Clinical Decision Making	2				
	Total	10	Total	5	Total			

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Total credits: 49
Clinical Hours: 560 (min)**

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to Primary Care Pediatric NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-49 (depending on previous Nursing Masters and Post-Master's program of interest).**

Primary Care Pediatric Nurse Practitioner Program

**Fall Start, 2.5 Year Plan
Effective Fall 2017**

YEAR 1		FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
		N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N529: Scientific & Analytic Approaches for Advanced Practice*	3		
		N502: Advanced Pathophysiology	4	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3		
				HS505: Team-Based Clinical Decision Making	2		
		Total	7	Total	8	Total	

YEAR 2		FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
		N503: Advanced Health Assessment	4	N557: CDM I: Infant, Child and Adolescent Health: Wellness and Management of Common Illness (CDM I) (Clinical 112 hrs)	8		
		N523: Role Transition to APRN	3	N621: Pharmacotherapeutics II	4	N589: Advanced Pediatric Nurse Practitioner Clinical Practicum (224 hrs)	4
		N620: Pharmacotherapeutics I	4				
		Total	11	Total	12	Total	4

YEAR 3		FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
		N617: CDMII: Infant, Child and Adolescent Health: Primary Health Care Across Multiple Settings (Clinical 224 hrs)	7				
		Total	7			Total	

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Total credits: 49
Clinical Hours: 560 (min)**

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to Primary Care Pediatric NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-49 (depending on previous Nursing Masters and Post-Master's program of interest.**

Nurse Midwife Program

Nurse midwifery practice as conducted by nurse-midwives (NMWs) is the independent management of women's health care, focusing particularly on pregnancy, childbirth, the postpartum period, care of the newborn, and the primary health care needs of women including family planning and gynecologic care.

The University of Michigan, School of Nursing (UMSN) has been a leader in midwifery education for more than two decades. We created the first graduate nurse midwifery program in the state of Michigan, to address challenges with high infant-mortality rates. We continue to prepare scholarly, clinically competent nurse-midwives to promote women's health across the life span, as well as to provide care for normal newborns.

UMSN students gain clinical experience in a variety of diverse practice settings with experienced preceptors and clinical faculty. Clinical settings include high-volume hospitals, private practices, and birth centers. There are also numerous opportunities for international experiences. UMSN is designated a World Health Organization (WHO) Collaborating Center and many faculty are actively engaged globally. Settings include Liberia, Ghana, Uganda, the Netherlands, and Haiti, to name a few.

Nurse midwife faculty from UMSN are recognized by the American College of Nurse Midwives as well as other organizations as leaders in midwifery care, research, and education.

Curriculum

The set program plan for the Nurse Midwife curriculum is 2 years full-time or 3 years part-time in length, primarily at part-time enrollment status (less than 9 credits each fall and winter term of the curriculum).

For more information regarding expectations and clinical requirements, please refer to the midwifery program handbook

Nurse Midwife Program

Fall Start, 2 Year Plan Effective Fall 2017

		FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
YEAR 1	N503: Advanced Health Assessment for Advanced Practice Nurses		4	N566: Advanced Primary Care Nursing: Health Promotion and Management of Acute Health Problems of Adults and Well Woman/GYN Care	3	N546: Antepartum Care of Essentially Normal Women (Clinical 168 hrs)	6
	N502: Advanced Pathophysiology		4	N561: Care of the Childbearing Woman	1		
	PHARM 620: Pharmacotherapeutics I		4	N571: Advanced Midwifery (Clinical 112 hrs)	2		
	N678: Professional Issues in Nurse Midwifery		3	N527: Promoting Optimal Models and Systems for Healthcare Delivery	3		
				N529: Scientific and Analytic Approaches*	3		
Total			15	Total	12	Total	6

		FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
YEAR 2	N676: Intrapartum, Postpartum Newborn (Clinical 225 hrs)		7	N677: Integration of Midwifery Care of Scope of Practice (Clinical 225 hrs)	5		
	N528: Models, Theories And Methods To Promote Optimal Health Outcomes		3				
	Total		10	Total	5	Total	

Total credits: 48
Clinical Hours: 730 (min)

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Nurse Midwife NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-48 (depending on previous Nursing Masters and Post-Master's program of interest).**

Nurse Midwife Program

Fall Start, 3 Year Plan Effective Fall 2017

YEAR 1

FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
N502: Advanced Pathophysiology	4	N527: Promoting Optimal Models and Systems for Healthcare Delivery	3		
PHARM 620: Pharmacotherapeutics	4	N529: Scientific and Analytic Approaches*	3		
Total	8	Total	6	Total	

YEAR 2

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N503: Advanced Health Assessment for Advanced Practice Nurses	4	N566: Advanced Primary Care Nursing: Health Promotion and Management of Acute Health Problems of Adults and Well Woman/GYN Care	3	N546: Antepartum Care (Clinical 168 hrs)	6
N678: Professional Issues in Nurse Midwifery	3	N561: Care of the Childbearing Woman	1		
N528: Models, Theories and Methods to Promote Optimal Health Outcomes	3	N571: Advanced Midwifery (Clinical 112 hrs)	2		
Total	10	Total	6	Total	

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N676: Intrapartum, Postpartum and Newborn (Clinical 225 hrs)	7	N677: Integration of Midwifery Care Scope of Practice (Clinical 225 hrs)	5		
Total	7	Total	5	Total	

Total credits: 48
Clinical Hours: 730 (min)

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's certificate curriculum varies depending on the student's previous educational experience. Please refer to the Nurse Midwife NP program plan for general curriculum information. To note differences, compare the courses listed to your previously completed Master's degree coursework. **Please Note: the number of credit hours needed to complete a post-master's program will range from 12-48 (depending on previous Nursing Masters and Post-Master's program of interest).**

Nurse Midwife and Family Nurse Practitioner (Combined) Program

Program Focus

The Nurse Midwife and Family Nurse Practitioner curriculum combines the Primary Care Family Nurse Practitioner and the Nurse Midwife programs, allowing students to sit for certification exams in both of these areas upon full program completion. The program is based on an understanding of health sciences theory and clinical preparation that shapes knowledge, judgment, and skills necessary to provide primary health care to individuals across the lifespan, including during pregnancy and childbirth and from infancy to old age. With a strong emphasis on health promotion, our program focuses on the development of healthy behaviors as they pertain to diverse groups at different developmental stages.

Dually prepared Nurse Midwives and Family Nurse Practitioners are in demand. Using their dual preparation, students are able to provide women's health care and primary family health care across the lifespan. Because of this, they are ideally trained to care for whole communities in urban, rural, or international locations where their expertise can support increased access to health promotion and provide added healthcare options that might otherwise be severely limited.

Graduates of this type of program can practice in a number of settings (e.g. birth centers, hospitals, private or public clinics) and apply their training to multiple ends (e.g. teaching, advocacy, research, public education). As well as being in demand locally, their skills can be used globally, meaning graduates from our dual program can work almost anywhere in the world.

Faculty that teach in the Nurse Midwife and Family Nurse Practitioner program are not only excellent instructors and researchers, but also expert clinicians who maintain active practices at prestigious institutions such as the Michigan Medicine- a premier health care organization- as well as in international settings. In addition to their teaching, research, and practice, our faculty are actively involved in leadership roles in national organizations, using their expertise to help shape and advance the future of FNP and CNM care and education.

Curriculum

The set program plan for the Nurse Midwife and Family NP combined program is 4 years in length, primarily at full-time enrollment (9 or more credits each fall, winter and spring-summer term of the curriculum). Students in the Nurse Midwife and Family NP combined program will be placed in clinical settings appropriate to the Nurse Midwife and to the Family NP role.

Nurse Midwife and Family Nurse Practitioner (Combined) Program

**Fall Start, 3.5 Year Plan
Effective Fall 2017**

FALL 2017		CREDITS	WINTER 2018		CREDITS	SPRING-SUMMER 2018		CREDITS
YEAR 1	N502: Advanced Pathophysiology	4	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3	N646: Primary Care of Older Adults	3		
	Pharm 620: Pharmacotherapeutics I	4	N568: Critical Elements And The Studies Of Family And Health	3				
			Pharm 621: Pharmacotherapeutics II	4				
	Total	8	Total	10	Total	3		
FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
Year 2	N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N566: Advanced Primary Care Nursing: Health Promotion and Management of Acute Health Problems of Adults and Well Woman/GYN Care	3	N546: Antepartum Care (Clinical 168 hrs)	6		
	N678: Professional Issues In Nurse Midwifery	3	N561: Care of the Childbearing Woman	1	N554: Advanced Practice Specialty Procedures and Skills for Family NPs	2		
	N503: Advanced Health Assessment For Advanced Practice Nurses	4	N571: Advanced Midwifery (Clinical 112 hrs)	2				
			N529: Scientific and Analytic Approaches*	3				
			HS 505: Team-Based Clinical Decision Making	2				
	Total	10	Total	11	Total	8		
FALL 2019		CREDITS	WINTER 2020		CREDITS	SPRING-SUMMER 2020		CREDITS
YEAR 3	N676: Intrapartum, Postpartum Newborn (Clinical 225 hrs)	7	N557: PCPNP CDMI (Clinical Decision Making I): Infant, Child, and Adolescent Health: Wellness and Management of Common Illness (Didactic Only)	2	N666: Advanced Primary Care Nursing of Chronically Ill Adults and Their Families (CDM II) (Clinical 168 hrs)	6		
			N677: Integration of Midwifery Care Scope of Practice (Clinical 225 hrs)	5	N589: Advanced Pediatric Nurse Practitioner Clinical Practicum (224 hrs)	2		
	Total	7	Total	7	Total	8		

YEAR 4

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N674: Advanced Primary Care Nursing of Adults and Families with Complex Systems (CDM III) (Clinical 224 hrs)	8				
Total	8	Total		Total	

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-Advisors@med.umich.edu for questions about prior program plans.

Total credits: 80
Clinical Hours: 1346 (min; 730 FNP + 616)

Nurse Midwife and Primary Care Pediatric Nurse Practitioner (Combined) Program

The Nurse Midwife and Primary Care Pediatric Nurse Practitioner (combined) program prepares advanced practice nurses to provide primary health management to women and their infants, children, and adolescents. Relying on framework of midwifery and adolescent development, students learn to provide direct care for women and children as well as promote healthy habits that reduce the risk of illness and disease. Graduates also learn the skills unique to participating in multidisciplinary collaborations, research, and community education. Graduates are eligible for the American Midwifery Certification Board Exam to become certified as a CNM or the American Nurse Credentialing Center (ANCC).

Graduates from our dual program are in demand as more women seek the personal care midwives provide. Midwives have been ushering American women through pregnancy and other normal stages of life since the early 1900s, and today, women seek midwives for prenatal care, birth, postpartum care, gynecologic exams, vaginal infections, and birth control. With their expanded practice, Nurse Midwives/Primary Care Pediatric Nurse Practitioners can then continue to care for the mother while also providing primary care for her child throughout adolescence.

The role of Nurse Midwives/Primary Care Pediatric Nurse Practitioners is continuously evolving and expanding to meet the increasingly complex healthcare needs of the maternal and pediatric populations. As a result, graduates can practice in a wide variety of settings including nurse-managed clinics, rural health clinics, specialty clinics, research laboratories, group clinical practice/HMOs, the list goes on.

Faculty that teach in our program are excellent instructors and researchers, as well as expert clinicians who maintain active practices at the Michigan Medicine- a premier health care organization- and other local primary care settings, such as private practices and nurse managed centers. In addition to their teaching, research, and practice, our faculty are actively involved in leadership roles in national organizations (e.g. Michigan Chapter of the National Association of Pediatric Nurse Practitioners and the American College of Nurse Midwives) using their expertise to help shape and advance the future of midwifery and pediatric care and education.

Curriculum

The set program plan for the Nurse Midwife and Pediatric NP combined program is 3 years in length, primarily at full-time enrollment (9 or more credits each fall, winter and spring-summer term of the curriculum). Students in the Nurse Midwife and Pediatric NP combined program will be placed in clinical settings appropriate to the Nurse Midwife and to the Pediatric NP role.

Nurse Midwife and Primary Care Pediatric Nurse Practitioner (Combined) Program

**Fall Start, 3 Year Plan
Effective Fall 2017**

FALL 2017		CREDITS	WINTER 2018		CREDITS	SPRING-SUMMER 2018		CREDITS
YEAR 1	N502: Advanced Pathophysiology	4	N527: Promoting Optimal Models and Systems for Healthcare Delivery	3	N546: Antepartum Care (Clinical 168 hrs)			6
	PHARM 620: Pharmacotherapeutics I	4	N566: Advanced Primary Care Nursing: Health Promotion and Management of Acute Health Problems of Adults and Well Woman/Gyn Care	3	N555: Advanced Practice Specialty Procedures and Skills for Primary Care Pediatrics			1
	N503: Advanced Health Assessment for Advanced Practice Nurses	3	N561: Care of the Childbearing Woman	1				
	N678: Professional Issues in Nurse Midwifery	3	N571: Advanced Midwifery (Clinical 112 hrs)	2				
			Pharm 621: Pharmacotherapeutics II	4				
	Total	15	Total	13	Total			7

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
YEAR 2	N528: Models, Theories and Methods to Promote Optimal Health Outcomes	3	N557: Infant, Child & Adolescent Health: Management of Minor Common Illnesses (168 Hours Minimum)	2	N589: Advanced Pediatric Nurse Practitioner Clinical Practicum (224 hrs)			6
	N676: Intrapartum, Postpartum Newborn Care (Clinical 225 hrs)	7	N677: Integration of Midwifery Care Scope of Practice (Clinical 225 hrs)	5				
	Total	10	Total	7	Total			6

FALL 2019		CREDITS	WINTER 2020		CREDITS	SPRING-SUMMER 2020		CREDITS
	N617: Infant, Child and Adolescent Health: Primary Health Care Across Multiple Settings (CDMII) (Clinical 224 hrs)	8	N529: Scientific and Analytic Approaches*	3				
			HS505: Team-Based Decision Making	2				
Total	8	Total	5	Total				

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-Advisors@med.umich.edu for questions about prior program plans.

**Total credits: 71
Clinical Hours: 1346
(min; 616 Primary Pediatrics + 730 NMW)**

Nurse Midwife and Primary Care Pediatric Nurse Practitioner (Combined) Program

**Fall Start, 3.5 Year Plan
Effective Fall 2017**

YEAR 1	FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
	N502: Advanced Physiology	4	N527: Promoting Optimal Models and Systems for Healthcare Delivery	3		
	PHARM 620: Pharmacotherapeutics I	4	N529: Scientific and Analytic Approaches*	3		
			P621: Pharmacotherapeutics II	4		
	Total	8	Total	10	Total	

YEAR 2	FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
	N528: Models, Theories and Methods to Promote Optimal Health Outcomes	3	N566: Advanced Primary Care Nursing: Health Promotion and Management of Acute Health Problems of Adults and Well Woman/GYN Care	3	N546: Antepartum Care (Clinical 168 hrs)	6
	N678: Professional Issues in Nurse Midwifery	3	N561: Care of the Childbearing Woman	1	N555: Advanced Practice Specialty Procedures and Skills for Primary Care Pediatrics	1
	N503: Advanced Health Assessment for Advanced Practice Nurses	4	N571: Advanced Midwifery Clinical (112 hrs)	2		
			HS505: Team-Based Decision Making	2		
	Total	10	Total	8	Total	7

YEAR 3	FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
	N676: Intrapartum, Postpartum and Newborn Care (Clinical 225 hrs)	7	N557: CDM I: Infant, Child and Adolescent Health: Wellness and Management of Common Illness (112 hrs)	2	N589: Advanced Pediatric Nurse Practitioner Clinical Practicum (224 hrs)	6
			N677: Integration of Midwifery Care Scope of Practice (Clinical 225 hrs)	5		
	Total	7	Total	7	Total	6

YEAR 4

FALL 2020	CREDITS	WINTER 2021	CREDITS	SPRING-SUMMER 2021	CREDITS
N671: CDMII: Infant, Child and Adolescent Health: Primary Health Care Across Multiple Settings (224 hrs)					
Total	8	Total		Total	

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-Advisors@med.umich.edu for questions about prior program plans.

Total credits: 71
Clinical Hours: 1290
(min; 560 Primary Pediatrics + 730 NMW)

Systems, Populations and Leadership Program

University of Michigan School of Nursing (UMSN) program in Systems, Populations and Leadership uses comparisons and context to improve individual and population-level care by always using the best possible evidence. We prepare graduates for leadership in complex organizations to improve health outcomes, and to direct application of health informatics in a variety of settings.

The Master of Science degree program in Systems, Populations and Leadership with two distinct areas of focus: leadership and informatics.

The leadership focus area provides the knowledge and skills needed to lead inter-professional teams in complex environments, assess the impact of health technology, and improve efficiency of health systems and organizations. It also offers an access point for collaborative research and development of methods for integrating evidence-based practice in clinical and community settings. Among the likely jobs for graduates: nurse executive, health care consultant, nurse manager, quality specialist, patient safety officer, risk manager, and chief nursing officer.

The informatics focus area centers on transformative approaches to health and health care delivery via health information technologies (HIT), and on using these approaches to influence and effect change in health-related environments. Application areas include hospitals, accountable care organizations, ambulatory care facilities, public health settings, research facilities, HIT corporations, educational institutions, and government agencies. Careers available to graduates of this health IT program are varied—enabling graduates to apply concepts and skills in specialty areas of interest.

Systems, Populations and Leadership faculty are conducting research on numerous topics including teamwork, capacity to rescue, change management, health information technology in diverse and remote settings (mHealth/eHealth), research methodology and statistics, social networking, study of outcomes and effectiveness interventions, human-centered design, interdisciplinary communication, and simulation science.

Curriculum

Students in the Systems, Populations and Leadership program may elect one area of focus for master's study: Leadership or Informatics. Each area of focus is offered in an 18 month (full-time) or 3 year (part-time) set program plan of study. Students in this program attend approximately four to eight distributed days of on-site classes each semester (see dates below), supplemented by virtual learning experiences.

Semester	On-Campus Dates
Spring/Summer 2018	May 3-4; June 7-8; July 5-6; August 3-4
Fall 2018	September 6-7; October 4-5; November 1-2; December 6-7
Winter 2019	January 10-11; February 7-8; March 14-15; April 4-5

Systems, Population and Leadership Program

Informatics Emphasis Fall Start, 18 Month Plan (Full-Time) Effective Fall 2017

YEAR 1		FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
		N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3		
		HS 510: Foundations Of Informatics	4	N529: Scientific & Analytic Approaches For Advanced Practice	3		
		N533: Effective Resource And Operations Management	3	N539: Foundations Of Quality Science And Analytics	4		
				HS 610: Sociotechnical Components Of HIT Systems	3		
		Total	10	Total	13	Total	

YEAR 2		FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
		HS 710: Informatics Practicum	3				
		HS 612: Evaluation Methods For Health Informatics	3				
		Elective	3				
		Total	9	Total		Total	

Total credits: 32

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Systems, Population and Leadership Program
Informatics Emphasis
Fall Start, 3 Year Plan (Part-Time)
Effective Fall 2017

	FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
YEAR 1	N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3		
	HS 510: Foundations Of Informatics	4	HS 610: Sociotechnical Components Of HIT Systems	3		
	Total	7	Total	6	Total	

	FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
YEAR 2	HS 612: Evaluation Methods For Health Informatics	3	N529: Scientific & Analytic Approaches For Advanced Practice	3		
	Elective	3	N539: Foundations Of Quality Science And Analytics	4		
	Total	6	Total	7	Total	

	FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
YEAR 3	HS 710: Informatics Practicum	3				
	N533: Effective Resource And Operations Management	3				
	Total	6	Total		Total	

Total credits: 32

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Systems, Population and Leadership Program
Population Health Emphasis
Fall Start, 18 Month Plan (Full-Time)
Effective Fall 2017

YEAR 1

FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3		
HS520: Assessment for Population Health	4	N529: Scientific & Analytic Approaches For Advanced Practice	3		
HS 802: EPI for Health Professionals	3	N539: Foundations Of Quality Science And Analytics	4		
		HS620: Health Program Planning, Implementation and Evaluation	4		
Total	10	Total	14	Total	

YEAR 2

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N681: Decision Science For Population Health	3				
Elective	3				
N533: Effective Resource and Operations Management	3				
Total	9	Total		Total	

Total credits: 33

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Systems, Population and Leadership Program
Population Health Emphasis
Fall Start, 3 Year Plan (Part-Time)
Effective Fall 2017

FALL 2017		CREDITS	WINTER 2018		CREDITS	SPRING-SUMMER 2018		CREDITS
YEAR 1	N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3				
	HS802:EPI for Health Professionals	3	N539: Foundations Of Quality Science And Analytics	4				
Total		6	Total		7	Total		

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
YEAR 2	HS520: Assessment for Population Health	4	N529: Scientific & Analytic Approaches for Advance Practice	3				
	N533: Effective Resource And Operations Management	3	HS620: Health Program Planning, Implementation and Evaluation	4				
Total		7	Total		4	Total		

FALL 2019		CREDITS	WINTER 2020		CREDITS	SPRING-SUMMER 2020		CREDITS
YEAR 3	N681: Decision Science For Population Health	3						
	Elective	3						
	Total	6	Total			Total		

Total credits: 33

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Systems, Population and Leadership Program
Leadership Emphasis
Fall Start, 18 Month Plan (Full-Time)
Effective Fall 2017

YEAR 1

FALL 2017	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3		
N581: Foundations for Systems and Organizational Science	2	N529: Scientific & Analytic Approaches For Advanced Practice	3		
N533: Effective Resources and Operations Management	3	N539: Foundations Of Quality Science And Analytics	4		
N588: Policy analysis and Development for Healthcare Leaders	2				
Elective	3				
Total	13	Total	10	Total	

YEAR 2

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N681: Decision Science For Population Health	3				
N682: Systems Assessment and Leadership Effectiveness	3				
N781: Leadership Immersion for Impact	3				
Total	9	Total		Total	

Total credits: 32

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Systems, Population and Leadership Program
Leadership Emphasis
Fall Start, 3 Year Plan (Part-Time)
Effective Fall 2017

FALL 2017		CREDITS	WINTER 2018		CREDITS	SPRING-SUMMER 2018		CREDITS
YEAR 1	N528: Models, Theories And Methods To Promote Optimal Health Outcomes	3	N527: Promoting Optimal Models And Systems For Healthcare Delivery	3				
	N581: Foundations for Systems and organizational Science	2	N529: Scientific & Analytic Approaches for Advance Practice	3				
	N588: Policy Analysis and Development for Healthcare leaders	2						
Total		7	Total		6	Total		

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
YEAR 2	Elective	3	N539: Foundations Of Quality Science And Analytics	4				
	N533: Effective Resource And Operations Management	3						
	Total	6	Total		4	Total		

FALL 2019		CREDITS	WINTER 2020		CREDITS	SPRING-SUMMER 2020		CREDITS
YEAR 3	N681: Decision Science For Population Health	3	N781: Leadership Immersion for Impact	2				
	N682: Systems Assessment and Leadership Effectiveness	4						
	Total	7	Total		2	Total		

Total credits: 32

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Certificate in Nursing Education

Description

The School of Nursing Certificate in Nursing Education (CNE) is offered to students who are currently enrolled in a Master's, DNP, or PhD program in the School of Nursing. Students will work with the Graduate Programs Office Advisors to develop an individualized plan to fulfill the CNE requirements.

Students interested in the pursuing the Certificate in Nursing Education should submit [the CNE Intent and Approval Form](#) to the Graduate Programs Office Advisors UMSN-GradAdvisors@med.umich.edu. The Associate Dean, Practice and Professional Graduate Programs coordinates this program in collaboration with the Graduate Advisors, and meets with students in yearly group advising sessions to answer questions (see below).

Completion and submission of the Intent and Approval Form will grant students access to the CNE Canvas site whereby students will have access to CNE-related materials and information.

Objectives

Upon completion of the School of Nursing CNE program, the learner will be able to:

- Articulate philosophies of teaching and learning with particular focus on clinical education.
- Apply principles of teaching and learning in nursing education.
- Participate in curriculum design and evaluation in nursing education.
- Apply educational assessment and evaluation strategies in nursing education.
- Articulate optimal educational outcomes and strategies to achieve them.
- Apply key teaching responsibilities to the nurse faculty role.

The CNE has five required components:

- a. Intent and Approval Form;
- b. Didactic component:
 - i. course work in an approved nursing education course;
 - ii. mentored teaching experience taken as an independent study for 1-4 credits (N697);
- c. Completion of at least two Center for Research on Teaching and Learning (CRLT) modules, with documentation;
- d. Experiential observations of faculty role with documentation and a reflective summary (e.g., Curriculum Committee, Faculty Meeting).

Didactic Component

Coursework in Nursing Education

Successful completion of a graduate level course in Nursing Education fulfills this requirement. Approved courses, along with the requirements for completion, are listed on the CNE Canvas site. Other proposed equivalent courses will be considered on an individual basis; to do so, students must submit a course syllabus to the Graduate Advisor for review. Graded courses must be successfully completed with a grade of "B-" or higher. Upon successful completion of an approved course, students should submit an official transcript for an outside university course or a "Statement of Accomplishment" for the U-M Coursera.

Mentored Teaching Experience (N697 1-4 credits)

The mentored teaching experience allows the student to practice teaching skills in either a clinical or classroom setting under the supervision of an experienced faculty. The mentored teaching experience should be arranged with the mentoring faculty. Students enrolling in a N697 course should read/follow the Independent Study instructions listed on page 1 of the [Master's Independent Study Form](#) and complete/submit page 2 to the Graduate Advisor

CRLT Sessions

Students will be required to complete two CRLT Sessions. A list of offerings is published each term by the CRLT and is available on their [website](#). Equivalent experiences such as attendance at School of Nursing faculty development programs, are acceptable with approval and appropriate documentation.

Tracking attendance on the CRLT website:

1. Go to the CRLT website: <http://www.crlt.umich.edu/>
2. Go to the "Programs & Services" tab
3. Select "Seminar Series"
4. Click on the log-in option in the top left-hand corner of the page
5. Log-in using your Level 1 Kerberos unique name and password
6. Click "here" in the statement: "To view a printable list of CRLT events that you have attended, click here."
7. A list of your attended seminars will appear
8. Print or forward this documentation to the appropriate faculty or staff responsible for tracking your CNE and/or NFLP requirements

Experiential Component

Students will have the opportunity to participate in meetings/groups that reflect other components of the faculty role. Students will be required to complete at least two observations with two different groups and complete a 1 to 2 page reaction brief for each experience. Potential observational experiences include Curriculum Committee, Undergraduate Program Faculty meeting, Faculty Meeting, Department Meetings, Graduate Program Meeting, Doctoral Steering Committee and Course Meetings. These meetings are posted on the UMSN website's [Events Calendar](#) under Administrative Events (select this option on the lower left hand side of the page) and often require special permission to attend; students will need to contact the chairperson for permission to attend.

Certificate in Health Informatics

Description

The Certificate in Health Informatics is an interdisciplinary program designed for individuals who seek to enhance their understanding and application of informatics to health and health care, and help drive the improvement and innovation that is necessary in a new era.

The program is only available to those who have already completed a minimum of a bachelor's degree from an accredited institution and who have at least one year of current experience in a health-related position. We do not require licensure as a health professional (such as a MD, RN, PharmD, etc.), although a solid understanding of health systems is strongly advised. Students who complete the Certificate in the Health Informatics program obtain content and practice hours that may qualify them to sit for a variety of informatics certifications.

Curriculum

Listed below is the required curriculum for the Certificate in Health Informatics Program. The courses taken as part of this certificate program are awarded full academic credit from the University of Michigan Rackham Graduate School; and the certificate is issued by the University of Michigan School of Nursing.

Certificate in Health Informatics		
Course Number	Course Name	Credits
HS510	Foundations of Informatics	4
HS610	Sociotechnical Components of HIT Systems	3
HS612	Evaluation Methods for Health Informatics	3
HS710	Informatics Practicum	3
	Cognate*	3
Total Number of Credits for Health Informatics Certificate		16

*Students will need to elect at least one graduate level cognate course (minimum 3 credits) in area of focus & approved by advisor.

Global Health Concentration (GHC)

The Global Health Concentration (GHC) is open to any UMSN graduate student. It is designed to educate students about global health issues and provide an opportunity for practical field experience. The program promotes multidisciplinary approaches and community based service.

The GHC is a combination of supportive coursework, an immersion experience and a mentored independent study. The GHC has three required components:

1. Administrative: Complete the GHC Intent & Approval Form, with signatures from OGA and the UMSN Graduate Advising Office
2. Didactic
 - a. Two 3-credit courses on Global Health
 - b. Two pre-departure trainings and one post-travel session
 - c. Independent study project (2 cr.)
3. Experiential: a global health immersion experience approved by faculty and advisors in the OGA

Didactic Component

Coursework in Global Health

NURS 521, Introduction to Global Health: Issues and Challenges (3 cr.)

Graduate level Global Health elective (3 cr.)

It is recommended (but not required) that students complete these courses before immersion experience.

Pre-departure training

The content of this component varies widely depending on the nature of the planned immersion experience. It may include regional cultural training, study abroad training, or even selected readings and meetings with other students going abroad. Whatever pre-departure experience is carried out, documentation will be provided to the Office of Global Affairs Advisor.

Independent Study (N697 2 credits)

Ideally, students will select a mentor who will work with the student to develop the goals and objectives of the independent study. The final product might be a paper, a position statement, a grant proposal, or any other mutually-agreed upon project.

Experiential Component

The Global Health Immersion Experience

The immersion experience is defined as a “live and work” experience of sufficient length and/or cultural distance to challenge the student to develop self-awareness and critical thinking about culture and social determinants of health, and to gain first-hand insight into the challenges of global health care. Potential experiences will be reviewed and approved by the Office of Global Affairs.

Option A: An approved substantive experience that results in University of Michigan credit.

- UMSN or other U-M study abroad program
- Work, internship or volunteering for which U-M credit is awarded (including independent study with a UMSN faculty member)
- A non-U-M study abroad program for which U-M transfer credit results

Option B: An approved substantive experience that does not result in University of Michigan credit.

- A study abroad program that does not result in U-M credit
- An international work, volunteer, or internship experience that does not result in U-M credit
- An independently proposed international research or service project

Potential experiences will be reviewed and approved by GHC Faculty Advisor and the Director of Graduate and Professional Programs. The Office of Global Outreach will be consulted to provide input into the proposed experience.

Regardless of which option students choose to fulfill the immersion experience requirement, an OGA advisor must sign off on their completion of mandatory pre-travel education sessions and post-travel session.

Students interested in the Global Health Concentration should inform their academic advisor, meet with the OGA advisor and complete the [GHC Intent & Approval Form](#).

Occupational Health Nursing Concentration

The Occupational Health Nursing (OHN) concentration may be added to the following Masters programs:

- Adult-Gerontology Primary Care Nurse Practitioner
- Primary Care Family Nurse Practitioner
- Population Health and Leadership

Adult-Gerontology Primary Care Nurse Practitioner, Primary Care Family Nurse Practitioner or Population Health and Leadership students interested in the Occupational Health Concentration should Associate Professor, Marjorie McCullagh, at mcculla@med.umich.edu.

Requirements

Adult-Gerontology Primary Care Nurse Practitioner, Primary Care Family Nurse Practitioner or Population Health and Leadership students accepted into the OHN concentration must take additional credits of coursework in interdisciplinary occupational health and public health courses, including, but not limited to, occupational and environmental health, occupational diseases, ergonomics, and safety to fulfill the concentration in addition to all required courses to complete the Master's program.

Transfer of Credit

Students who enroll, with their Faculty Advisor's approval in courses offered at other colleges or universities can receive up to 6 credits toward the program if the course is transferable and the student earns at least a "B". The courses will appear on the Michigan transcript with the name of the school where the course was taken. However, such courses are not calculated into the Michigan honor point average and will not affect this average. Transfer courses cannot have been applied in whole or in part toward a bachelor's, previous master's degree, or certificate, and cannot have been taken more than 5 years prior to the current Rackham enrollment.

If a course is transferred into the School of Nursing with fewer credit hours than is listed in the School of Nursing curriculum, the student must earn additional credit in elective courses to earn the total credit hours needed for the MS.

Students interested in a transfer of credit, should contact the Graduate Programs Office Advisors UMSN-GradAdvisors@med.umich.edu.

Change of Master's Program

Students interested in being considered for a change of program should contact UMSN-GradAdvisors@med.umich.edu. This change requires full consideration by the new program's Program Lead. International students must supply documentation of additional funding if a change of field will result in an extension of the expected study period.

Degree Requirements and Program Time Limit

All degree requirements must be completed within five years from the date of first enrollment in the program. The minimum credit requirement for the master's degree varies by program. Students must take the required core courses plus additional required specialization courses as specified in each program description.

Program Interruptions and Readmission

A student in good academic standing, who interrupts their program for any reason including approved Leave of Absences (LOA), after 2 consecutive semesters (not including Spring/Summer), must apply for readmission. Students looking to take a LOA must successfully complete at least one semester in their current Program, and be in good standing. Students who were not in good academic standing at the time they left the program, or who need more than 5 years to complete their program, may seek permission their Program Lead and/or petition CAASS to request readmission. Readmission is dependent upon approval by the graduate program and upon availability of space and facilities for the term in which readmission is requested. International students seeking readmission will need to certify proof of adequate funding in order for Admissions to issue the appropriate documents to obtain a visa. Students with questions regarding program interruptions and/or readmission should contact the Graduate Programs Office Advisors at UMSN-GradAdvisors@med.umich.edu.

Chapter

4

Doctor of Nursing Practice Degree

Post Master's DNP Program Details

Program Focus

The Post-Master's DNP (PM DNP) Program has been designed with an aggregate/systems /organizational focus consistent with *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006). Students are admitted to the PM DNP Program with master's degrees in advanced practice specialties (e.g., clinical nurse specialist; nurse practitioner; nurse midwife; nurse anesthetist) or community health, nursing systems administration or nursing education foci. All students then progress through the PM DNP Program designed to prepare nurse leaders with expertise in evidence-based practice, analytical decision-making, and leadership with aggregates and in systems. Students build on their master's level specialization and develop a scholarly project around that specialization. The PM DNP Program offers a curriculum that prepares graduates for advanced leadership roles and has been structured to award a professional degree.

Program Objectives

Graduates of the program will meet outcome competencies and upon completion of the program will be able to:

- Design and evaluate new models of care based on integration of theoretical and empirical knowledge from nursing and related disciplines
- Translate evidence to guide practice and improve outcomes of care
- Analyze data that predict and explain variations in practice
- Provide inter-professional leadership within an increasingly complex health care delivery system
- Prepare leaders to use information systems and technology to support and improve patient care and health care systems
- Prepare leaders to direct and deliver high quality, cost-effective care
- Shape health policy and systems of health care in local, regional, state, national, and international forums
- Perform independently at the most advanced level of ethical specialty nursing practice

The Doctor of Nursing Practice Program is a practice focused doctoral program designed to prepare expert nurse clinicians and executive leaders for the highest level of practice to improve health and healthcare outcomes. The emphasis is on innovative and evidence-based nursing practice, applying research processes to decision-making, and translating research findings to increase the effectiveness of both direct and indirect patient care outcomes.

Curriculum

The Post-Master’s DNP program is specifically designed to prepare expert level clinicians. The curriculum is based on an analytic sequence consisting of four courses: N800 Graduate Statistics for Advanced Practice and Research (3 credits); N802 Epidemiology for Health Professionals (3 credits); N900 Seminar on Research Synthesis (3 credits); and N910 Translation, Implementation Science, and Comparative Effectiveness (3 credits). This sequence provides the foundation for students to identify a clinical problem of interest, synthesize and evaluate the research evidence on this problem, and design a project to implement the evidence and evaluate its effectiveness in a clinical setting. Where possible, students will identify a clinical problem of interest, and the courses will help build the skills needed to carry out their scholarly project. The courses articulate closely and are intended to be completed in a sequence, beginning in the fall term. N802 and N900 serve as prerequisites to N910. This course sequence enables students to begin to focus as early as possible on their clinical problem of interest and thus begin working on the DNP scholarly project while completing the remaining program requirements.

On-Campus Dates

The curriculum is a web-blended format, students are required to attend on-campus class two consecutive days per month (see **DNP On-Campus Dates Table**); additional course time is in synchronized and unsynchronized format.

Semester	On-Campus Dates
Spring/Summer 2018	May 3-4; June 7-8; July 5-6; August 3-4
Fall 2018	September 6-7; October 4-5; November 1-2; December 6-7
Winter 2019	January 10-11; February 7-8; March 14-15; April 4-5

PM DNP Residency Hours

All candidates enrolled in the DNP Program complete mentored leadership experiences through the DNP residency. Residency placements are individualized based on students' learning objectives, leadership experiences, and career goals. All DNP students must complete a minimum of 3 credits in residency and a minimum of 1,000 clinical hours (combination of clinical hours from master's degree and during the DNP program) of mentored experiences. Clinical hours are defined as any direct patient care, leadership, or community-based experiences credited in the student's previous master's program. Up to 500 clinical hours can be counted from the student's master's degree program.

Students vary in the number of clinical hours completed in their master's program. Thus, the residency (N950) requirements for the program, therefore varies from 3 to 6 credits. The School has developed a rubric to help estimate the number of residency hours needed to complete the 1000 hours needed for a DNP (see table below). For example, a student has completed less than 200 hours in his/her master's program, he/she will need to complete 6 residency credits. A full time student could accomplish this over three terms; 2 credits in their first Spring-Summer term, 2 credits in the second Fall term, and 2 credits in the second Winter term, for a total of 6 credits over the three terms). For details about specific residency requirements, see the [DNP Residency Guidelines](#) section.

Clinical Hours Completed in Master's Program	Number of Residency Credits Needed for DNP	Recommended Sequencing of Credits	Number of Terms Required to Complete Residency
<200	6 cr.	2/2/2	3
200-300	5 cr.	1/2/2	3
301-400	4 cr.	2/2	2
401+	3 cr.	1/2	2

PM-DNP Scholarly Project Requirement

All candidates will prepare a DNP scholarly project that demonstrates a synthesis of the student's abilities, lays the groundwork for future practice scholarship, and that demonstrates mastery of leadership in an advanced practice specialization. The scholarly project is 6 credits for all DNP students admitted prior to Fall 2014. For DNP students who matriculate in Fall 2014 or later, the scholarly project is 5 credits and the course, N803 Responsible Conduct of Research and Scholarship (1 credit), is required.

Sample Program Plans

The curriculum has been designed to be completed over two to three years, depending on whether a student enrolls on a full-time (2 year) or part-time (3 year) basis. For students admitted Fall 2015 or later, there are 11 required courses. Of these required courses, 9 are didactic. The two additional courses include a residency and a scholarly project. See sample programs plans for Fall 2017 and Fall 18 admitted students.

Post-Master's DNP Program Plan
Fall Start, 2 Year Program Plan
Effective Fall 2017

FALL 2017		CREDITS	WINTER 2018		CREDITS	SPRING-SUMMER 2018		CREDITS
YEAR 1	HS802: Epidemiology for Health Professionals	3	N800: Graduate Statistics for Advanced Practice and Research	3	N816: Policy Analysis, Transformation	3		
	N900: Research Synthesis	4	N812: Clinical Leadership in Complex Systems	4	N950: Residency	1-3		
	N811: Health Informatics	3	N910: Translation, Implementation, Effectiveness	3	N955: Scholarly Project	1		
	Total	10	Total	10	Total	5-7		

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
YEAR 2	N815: Quality and Safety	3	N955: Scholarly Project	2				
	N955: Scholarly Project	2	N950: Residency	1-3				
	N950: Residency	1-3						
	N803: Responsible Conduct of Research and Scholarship	1						
	Total	7-9	Total	3-5	Total			

Total credits: 35-38

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's DNP Program Plan
Fall Start, 3 Year Program Plan
Effective Fall 2017

FALL 2017		CREDITS	WINTER 2018		CREDITS	SPRING-SUMMER 2018		CREDITS
Year 1	HS802: Epidemiology for Health Professionals	3	N800: Graduate Statistics for Advanced Practice and Research	3	N816: Policy Analysis, Transformation	3		
	N900: Research Synthesis	4	N910: Translation, Implementation, Effectiveness	3				
	Total	7	Total	6	Total	3		

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
YEAR 2	N815: Quality and Safety	3	N812: Clinical Leadership in Complex Systems	4	N950: Residency	1-3		
	N811: Health Informatics	3	N950: Residency	1-3	N955: Scholarly Project	1		
	N803: Responsible Conduct of Research and Scholarship	1						
Total	7	Total	7	Total	2-4			

FALL 2019		CREDITS	WINTER 2020		CREDITS	SPRING-SUMMER 2020		CREDITS
YEAR 3	N950: Residency	1-3	N950: Residency	1-3				
	N955: Scholarly Project	2	N955: Scholarly Project	2				
	Total	3-5	Total	3-5	Total			

Total credits: 35-38

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's DNP Program Plan
Fall Start, 2 Year Program Plan
Effective Fall 2018

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2019		CREDITS
YEAR 1	HS802: Epidemiology for Health Professionals	3	N900: Research Synthesis	4	N910: Translation, Implementation, Effectiveness	3		
	N800: Graduate Statistics for Advanced Practice and Research	3	N812: Clinical Leadership in Complex Systems	4	N950: Residency	1-3		
	N811: Health Informatics	3	N816: Policy Analysis, Transformation	3	N955: Scholarly Project	1		
	Total	10	Total	10	Total	5-7		

FALL 2019		CREDITS	WINTER 2020		CREDITS	SPRING-SUMMER 2020		CREDITS
YEAR 2	N815: Quality and Safety	3	N955: Scholarly Project	2				
	N955: Scholarly Project	2	N950: Residency	1-3				
	N950: Residency	1-3						
	N803: Responsible Conduct of Research and Scholarship	1						
	Total	7-9	Total	3-5	Total			

Total credits: 35-38

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

Post-Master's DNP Program Plan
Fall Start, 3 Year Program Plan
Effective Fall 2018

	FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
Year 1	HS802: Epidemiology for Health Professionals	3	N900: Research Synthesis	3	N910: Translation, Implementation, Effectiveness	3
	N800: Graduate Statistics for Advanced Practice and Research	4	N816: Policy Analysis, Transformation	3		
	Total	7	Total	6	Total	3

	FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
YEAR 2	N815: Quality and Safety	3	N812: Clinical Leadership in Complex Systems	4	N950: Residency	1-3
	N811: Health Informatics	3	N950: Residency	1-3	N955: Scholarly Project	1
	N803: Responsible Conduct of Research and Scholarship	1				
	Total	7	Total	7	Total	2-4

	FALL 2020	CREDITS	WINTER 2021	CREDITS	SPRING-SUMMER 2021	CREDITS
YEAR 3	N950: Residency	1-3	N950: Residency	1-3		
	N955: Scholarly Project	2	N955: Scholarly Project	2		
	Total	3-5	Total	3-5	Total	

Total credits: 35-38

Program plan effective for students entering in Fall 2017 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

PM-DNP Residency Guidelines

The purpose of the DNP residency is to provide mentored leadership experiences. The residency placement will be individualized based on the students' learning objectives, previous clinical and leadership experiences, and career goals. The residency can be completed in a variety of provider or organizational settings in either the private or public sector, in local to international settings. The mentored experiences can include both direct and indirect (leadership) clinical experiences. It is intended that students will become actively involved in senior leadership roles and apply knowledge and skills learned in the program. In addition, the residency may be an environment where the student can propose and complete the scholarly project requirement.

Learning Objectives for the Residency

All students are expected to meet general learning objectives during their residency. Upon completion of the residency requirement, students are expected to be able to:

- Analyze challenges and issues faced in organizations and propose theory and evidence based solutions to address them.
- Demonstrate competencies of a DNP-prepared nurse using a theoretical foundation as they apply to senior leadership roles and responsibilities.
- Reflect on their leadership abilities and identify areas for continued growth and development.
- Evaluate the role of the DNP in improving population health outcomes.
- Collaborate with systems and organizations to define ways to apply DNP skills for application to real-world problems.

Students will participate in a seminar when enrolled for residency credits. Course may be repeated to accommodate part-time students or students who need additional clinical and leadership experiences to complete 6 credits. All DNP students must complete a minimum of 3 credits in a residency as a capstone experience. Students will work closely with their faculty advisor to identify goals for their residency experiences. Students will then develop specific learning objectives for the residency. The director of the DNP program, the faculty advisor, the student, and the clinical placement office will work together to identify potential placement opportunities, a potential match with a preceptor, and ensure that the appropriate contracts are in place. Once a preceptor has been identified, students will work with them to refine the specific goals and activities that will be carried out within the residency. The student registers for the residency course (N950).

Planning for the PM DNP Residency

As students meet with their academic advisor and/or program director around academic program planning, they are advised to begin to think about how the residency credits will fit into their program of study. Residency placements can take 6 months to a year to finalize so discuss the residency experience early with your faculty advisor to ensure placement deadlines are met.

The student must understand that residency hours must correspond with the academic semesters. All placements must be approved by faculty and communicated to the Clinical Placement Administrator at least 6 weeks prior to the start of the semester in which the student wishes to complete residency. There are onboarding requirements that each student will be required to complete before entering any facility.

In general, each residency credit will require 8 to 10 hours per week for residency-related activities. During a 15-week semester, this would total a minimum of 120 hours of activities for 1 credit hour. For students who complete 3 credits of residency (totaling a minimum of 360 hours), the remaining clinical hours will be credited as they complete their scholarly project. The actual contact hours in the residency

setting will vary depending on the setting and the type of activities the student is involved in. Students are required to keep a detailed log of their clinical hours during the residency experience.

While the residency is envisioned as primarily a capstone experience, it also is recognized that many students will likely complete some of their residency credits before their last term. For example, if a DNP student is in need of more than 3 credits of residency to meet the clinical hour requirement, it would most likely be challenging to complete all of those credits during one semester. Working closely with the academic advisor, the student can build the residency credits throughout their program with the understanding that the student should have completed at least 10 credits of coursework before they are ready for a residency experience.

It is intended that residency requirements will not be met in a unit of the organization where a student is employed. A student can complete residency hours within the same organization but within a different department or unit. The clinical mentor for the residency may not be a student's employment supervisor. Finally, the clinical agency must have a clinical contract in place with the School of Nursing.

If a student intends to link their DNP scholarly project with a portion of the residency, it is advised that they plan at least one credit of residency during the summer between the first and second year of coursework. This residency experience will provide the student opportunities to identify potential scholarly projects in the setting where the residency is taking place and refining the proposal for their scholarly project. During or following that experience, the student can work on obtaining administrative and academic approval for the proposed project as well as IRB approval if required. With this model, the project will ideally be ready for implementation when the student is ready to complete the residency requirement in the following year.

In general, the PM-DNP program director will work with the School of Nursing Clinical Placement Office to assist with placement of a student in the residency. Students are not expected to find their own placements although they can suggest a preceptor or organization for consideration. The School will contact the organization or proposed mentor to discuss potential residency placement and expectations for the residency experience. Students may not carry out a residency at their specific place of employment, but may pursue a residency within the same health system within which they are employed.

Evaluation Methods

When students are enrolled in residency credits, they are required to maintain a log, which records hours completed and a monthly reflective journal of their experiences. At the end of the semester, students will complete a self-evaluation of the experience and turn this in to their preceptor/mentor. The mentor will also be asked to complete an evaluation of the student's experience. The completed evaluation form and clinical hour log must be turned into the faculty of record prior to receiving a passing grade for the residency credit(s). The residency will be graded on a Satisfactory/ Unsatisfactory (S/U) basis by the faculty of record.

PM-DNP Scholarly Project Guidelines

Overview and Purpose of Scholarly Project

The DNP scholarly project is a culminating experience which demonstrates the student's ability, as an independent leader, to synthesize scholarship in an advanced practice specialty or an area of health leadership. It lays the foundation for future scholarship as well. The emphasis in the scholarly project addresses some aspect of translation of research, evidence-based practice or the implementation of a project designed to address a problem of relevance to nursing practice and healthcare delivery. The DNP scholarly project provides the student with opportunities to independently lead a project and

demonstrate competencies related to leadership in innovation and translation of evidence to improve care and nursing practice. The scholarly project can focus on a variety of areas that address practice. Whatever the nature of the project, it is expected that the solution to the problem being addressed will be based on evidence, preferably research evidence, and that implementation will be evaluated using data relevant to the problem and practices or programs implemented to mitigate the problem.

Although not required, students are encouraged to carry out their DNP scholarly project as part of their residency. When linking their project with the residency requirement, it is recommended that the student complete a portion of their residency credits during the first year of their program so that they can begin to identify opportunities for their project during the first year in the program. Students can then work on their proposal and plan for agency and IRB approvals as required before they implement their project.

The written submission for the DNP scholarly project can take the form of a product that can be disseminated, such as a manuscript suitable for publication. It is intended that the results will also be disseminated through clinical and scientific meetings. The project will be supervised by a faculty committee (see guidelines below). The final project will be defended in an oral examination and the supervising committee is responsible for certifying that it meets acceptable scholarly standards.

Five scholarly project credits are required for the degree. It is expected that students will register for the number of credits that reflect their and the faculty chair's effort and direction each semester they are working on their scholarly project. A student who completes all coursework and still has not completed the DNP scholarly project must be enrolled for 1 project credits each term until the scholarly project is completed.

It is expected that, upon completion of the scholarly project, students will be able to:

- Demonstrate the skill, knowledge, and ability to lead future quality improvement or change initiatives directed at improving patient care and population health.
- Develop a proposal which defines a problem from the clinical setting and synthesizes the evidence related to that problem.
- Apply analytic and evaluation techniques to examine the effectiveness of the quality improvement or practice change initiative.
- Present and defend a scholarly treatise that synthesizes the evidence and presents recommendations based on findings.
- Develop a plan to disseminate findings in scholarly journals and other forums to improve practice and patient care.

Selection of the PM-DNP Scholarly Project Committee Chair and Committee

The PM-DNP Scholarly Project is supervised by a faculty committee comprised of a minimum of three qualified members. Revised Guidelines (effective for students enrolled Fall 2016) for preparation and structure of the proposal can be found in [Appendix J](#). The chairperson for the student's scholarly project must be a member of the School of Nursing faculty (clinical or tenure track) with the requisite expertise and experience to provide substantive assistance and direction to the student. Additional members for the scholarly project committee are selected based on their specific strengths and perspective they will bring to the problem or topic being addressed in the scholarly project, and can be from within the School and/or practice setting.

Requirements to serve as a committee member are as follows:

- At least three committee members must hold doctoral degrees. A minimum of two of these committee members must be members of the School of Nursing faculty.
- The chair must be a School of Nursing faculty member (clinical or tenure track).
- The third member of the committee may hold either a regular or adjunct faculty appointment in the University of Michigan or be a qualified individual outside the University who is nominated

by the student. This could be someone from a clinical agency or a content expert from another university.

The student will discuss committee membership with the chair of the scholarly project committee. If the student wishes to have a 4th member who is not doctorally prepared but who has contributed in a substantive way to the implementation of the scholarly project, they may nominate this individual for consideration as a committee member. All committee nominations must be approved by the Director of Post-Master's DNP. All committee nominations for individuals outside of the School of Nursing must be accompanied by a current curriculum vitae and a justification for their nomination.

The student submits a nomination form proposing the membership for the Scholarly Project Committee to the Director of Post-Master's DNP for approval. The full committee should be nominated and approved in a timely fashion to allow all members the opportunity to contribute to the shaping and direction of the proposal for the scholarly project.

PM-DNP Scholarly Project Proposal Process

The candidate must prepare and defend a proposal for the scholarly project before the approved project committee members. The student will develop drafts of the proposal for review by the committee chair. As the student prepares to circulate drafts to the chair and committee members, turnaround times for review and comment must be negotiated between the student and the faculty. In general, two to three weeks should be allowed for faculty to review and return drafts. When the committee chair agrees that a draft is ready for committee review, the student will circulate the draft to other committee members for review and input. When all committee members agree the proposal is ready to defend, the student will arrange for a meeting for defense of the proposal.

At the proposal meeting, the student will present a synopsis of the clinical issue, scope of the problem, plan for addressing the project, and the implementation and evaluation plan for assessing the project outcomes. The committee will have an opportunity to clarify any questions as well as to offer recommendations. If revisions in the proposal are required, those will be detailed at the time of the meeting and a plan and timeline for addressing those will be developed by the committee and presented to the student at that time (with follow up in writing). The outcome of the proposal meeting is 1) approval to proceed without revisions; 2) approval to proceed with minor revisions; 3) major revisions needed with the committee deciding if a) these can be guided by your chair or b) if the committee wished to read and approve the proposal prior to proceeding; or 4) disapproval. Working closely with your committee chair is important to have a successful proposal meeting.

The candidate may not proceed with project implementation until all committee members have approved the final proposal. Once approved, the chairperson must submit the [proposal approval form](#) to the Director of Post-Master's DNP for approval and processing.

After the proposal is approved, the student will proceed to consult with the U-M Institutional Review Board (IRB) to determine whether IRB review and approval is required for the scholarly project.

Federal regulations and University policy require that all investigations using human beings or animals as subjects of research be reviewed and approved by an appropriately constituted committee *before* any such investigations commence. ***No scholarly project based on the use of human beings or animals as subjects can be accepted without this prior review and approval.*** In many instances, the faculty advisor will request the review, but graduate students should verify with their advisors that the necessary review has taken place and approval for the investigation has been granted.

IRBMED must be consulted for any projects that will be conducted at Michigan Medicine. IRB-HSBS and Behavioral Sciences must be consulted for any projects that will be conducted in any setting other than MICHIGAN MEDICINE. If IRB approval is required, this must be obtained before commencing with the project. In addition, any approvals that may be required from the clinical agency where the

project will be implemented must also be obtained. For example, all projects that are proposed for MICHIGAN MEDICINE must be submitted to the Nursing Research and Translation Committee in the Department of Nursing for review and approval. A policy entitled "Conducting Research within the Department of Nursing" (MICHIGAN MEDICINE Nursing Services, approved November 2013) presents the policy and the necessary forms. The project cannot be implemented until all necessary agency approvals have been received. The scholarly project committee chairperson will monitor these approvals with the

The Health Sciences and Behavioral Sciences (Institutional Review Boards (IRB-HSBS) oversee the human subject research conducted by the schools, colleges, and units of the University of Michigan that comprise the Ann Arbor campus but are not part of the Medical School. For additional information, contact the IRB-HSBS at 734-936-0933, irbhsbs@umich.edu, or visit their [website](#).

The Institutional Review Boards of the University of Michigan Medical School (IRBMED) oversee human subjects research conducted at the Medical School and MICHIGAN MEDICINE. This includes research conducted off-site by University faculty and staff when acting as University employees or in connection with their University appointments. For additional informational, contact the IRBMED at 734-763-4768, irbmed@umich.edu, or visit their [website](#).

Students who work with animals will be subject to the regulations maintained by the Unit for Laboratory Animal Management (ULAM) and the University Committee on the Use and Care of Animals (UCUCA). The student may be required to take addition courses on animal care prior to beginning data collection. For policies, requirements and regulations regarding animal subjects in research, contact the Office of Research and Sponsored Projects at 734-764-5500 or visit their [website](#).

PM-DNP Scholarly Project Defense and Final Paper

The chairperson, in consultation with committee members, determines when the final draft of the scholarly project is ready for defense. Revised Guidelines (effective for students enrolled Fall 2016) for preparation and structure of the final paper can be found in [Appendix I](#). The DNP scholarly project defense is a public presentation of the completed project. This defense is open to the public, including faculty, students and individuals outside of the University. The oral presentation should include statement of the problem, review and synthesis of the literature, a description of the project implementation to address the problem, the evaluation results and implications for future work in this area. The defense needs to be completed prior to the deadline for grades in the semester which the student expects to graduate. Notice of the scholarly project defense, including the candidate's name, project title, committee members, date, time, and location should be posted within the School of Nursing at least one week prior to the defense date. The student, in consultation with the committee chairperson, is responsible for reserving a room and posting the notice for the defense. The notices should be sent out by email to all faculty and students within the School of Nursing plus any additional outside members the student would like to have in attendance.

The committee chairperson will conduct the defense by introducing the purpose and examination procedures, introducing the candidate, and the committee members. The chair will coordinate the time and discussion period. After the candidate presents the scholarly project, questions are asked by the project committee members. This is followed by an opportunity to address questions from the

audience. After the questions have been completed, the chair will excuse the audience and the committee will meet in private with the candidate to continue the examination as necessary. When that is completed, the committee will excuse the candidate and meet privately to determine the results of the examination. Results of the examination will be reported to the candidate at that time.

Grading of the Final Defense and Examination

The scholarly project committee will determine when the project is acceptable for the oral examination. The committee determines the adequacy of the oral examination and written product.

The following grades are possible after the oral examination:

- Pass–no revisions
- Pass–revisions required
- Unacceptable

The [requisite forms reporting](#) the results of the examination are to be forwarded to the Director of Post-Master's DNP for processing.

Scholarly Project Final Submission

After all revisions specified by the student's scholarly project committee have been addressed satisfactorily and final approval has been given by the committee chair, the student is required to submit a final electronic copy of the scholarly project. This should be in PDF form and submitted to the Graduate Advisors (UMSN-GradAdvisors@med.umich.edu) and Director of the Post-Master's DNP program. In addition, a one-page abstract outlining the project should be submitted to the Director of the Post Master's DNP program. The abstracts will be made available for access by other students and faculty.

BSN-DNP Program Details

Program Focus

The BSN-DNP program prepares expert nurse clinicians and leaders to perform at the most advanced level of their specialties. The program's clinically focused approach helps nurses translate evidence into practice. In addition to completing curriculum requirements for the chosen APRN clinical specialty, BSN-DNP students complete additional doctoral program curriculum that is integrated throughout the three or four year program including statistics for advanced practice and research, advanced leadership, quality and safety and other courses to prepare graduates for advanced leadership in the clinical arena, health systems and the health care industry. In addition, graduates of the BSN to DNP program complete the specialty clinical requirements to qualify to take a nationally recognized clinical specialty as an FNP, AGNP, ACAGNP, ACPNP, PNP or nurse-midwifery. The courses are integrated throughout the curriculum plan in a three year or four year model. Sequence of courses are begin in a similar fashion for students pursuing an APRN specialty certification and then they vary when the clinical sequence begins depending on your chosen clinical specialty, however the final year in the program is the same for all students regardless of specialty as the DNP residency and final project are completed.

Program Objectives

Graduates of the BSN to DNP program will meet outcome competencies and upon completion of the program will be able to:

The objectives of the post-baccalaureate DNP program are to prepare graduates to:

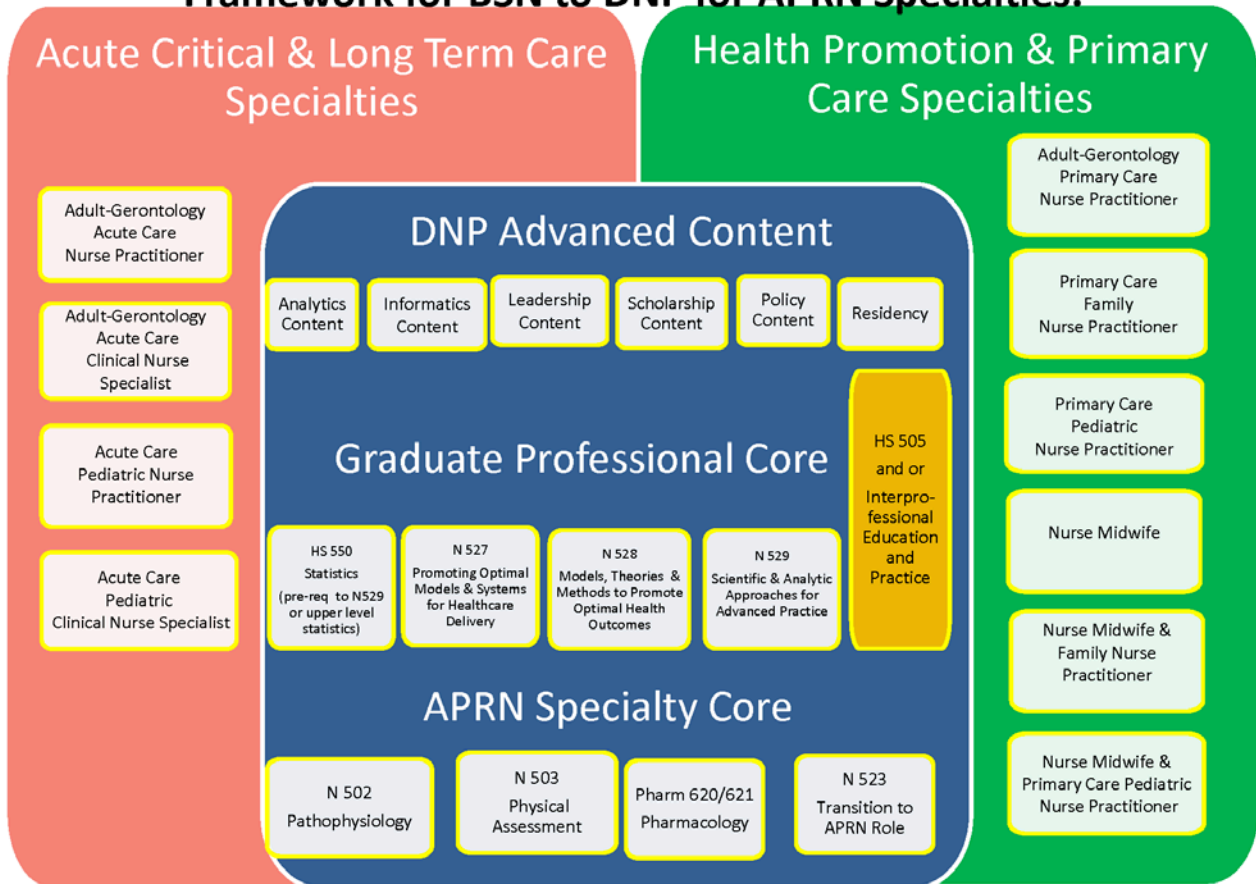
- Demonstrate specialty competencies needed for nursing practice at the highest level.
- Design and evaluate patient and system level interventions based on integration of theoretical and empirical knowledge from nursing and related disciplines.
- Evaluate and translate evidence to optimize health outcomes and care delivery.
- Apply interprofessional frameworks to create innovative solutions to complex health problems.
- Effectively use information systems and patient-centered technology to deliver and improve patient care.
- Provide leadership and advocacy to inform health policy and systems of health care that provide compassionate, ethical, and socially responsive care.

The Doctor of Nursing Practice Program is a practice focused doctoral program designed to prepare expert nurse clinicians and executive leaders for the highest level of practice to improve health and healthcare outcomes. The emphasis is on innovative and evidence-based nursing practice, applying innovation and strategic processes to decision-making and approaches to health care delivery, and translating research findings to increase the effectiveness of both direct and indirect patient care outcomes.

Curriculum

The BSN-DNP program is specifically designed to prepare expert level clinicians. The curriculum builds on four course series: the graduate program core courses, the APRN core course, the selected specialty clinical course series and then the DNP specific course series. Figure 1 depicts the course series and Figure 2 provides the listing of the courses which all students share in the program. Each specialty clinical course series is outlined in the MSN program section.

Framework for BSN to DNP for APRN Specialties.



The courses common to the MSN and BSN-DNP program include:

- [N502 Advanced Physiology and Pathophysiology \(4 credits\)](#)
- [N503 Advanced Physical Assessment \(4 credits\)](#)
- [HS505 Interprofessional Clinical Decision Making \(2 credits\)](#)
- [N523 Transition to the Advanced Practice Role \(3 credits\)](#)
- [N527 Promoting optimal models and systems for health care \(3 credits\)](#)
- [N528 Models, Theories and Methods to Promote Optimal Health Outcomes \(3 credits\)](#)
- [N529 Scientific and analytic Methods for Advanced Practice \(3 credits\)](#)
- Advanced Pharmacotherapeutics Pharm 620 3 credits Pharm 621 3 credits*

* Note midwifery does not complete the second pharmacology course. Instead, they have integrated pharmacology content in their clinical coursework.

Then there is the series of clinically focused courses for each APRN specialty that are listed in the program plans by specialty. The clinical courses are common to both the MSN and the BSN to DNP Program. During the specialty clinical courses students will complete a minimum of 500 hours of clinical experience. This clinical experience is to meet the students selected clinical specialty certification requirements. These hours do not count towards the residency hours described below.

The DNP specific courses for the BSN-DNP program include:

- [N800 Analytics for DNP Scholarship \(3 credits\) which is shared with PM-DNP students](#)
- [N803 Responsible Conduct of Research and Scholarship \(1 credit\) which is shared with PM-DNP students](#)
- [N815 Quality and Safety \(3 credits\) which is shared with PM-DNP students](#)

- [N825 Critical Appraisal for DNP Scholarly Inquiry \(3 credits\) which meets with the PM-DNP students in N900 \(4 credits\)](#)
- [N832 Clinical Leadership for Effective Resource Management \(3 credits\) which meets with PM-DNP students in N812 \(4 credits\)](#)
- [N910 Translation, Implementation, Effectiveness \(3 credits\) which is shared with PM-DNP students](#)
- [N960 Capstone Residency and Seminar II \(6 credits\)](#)
- [N965 Capstone Residency and Seminar II \(6 credits\)](#)

BSN-DNP Residency Hours

All students enrolled in the BSN-DNP Program complete mentored clinical/leadership experiences through the DNP residency. Residency placements are individualized based on students' learning objectives, clinical or population foci, desired leadership experiences or health care delivery model exposure, and career goals. All BSN-DNP students complete a minimum of 500 residency hours beyond their initial clinical hours for their specialty certification. Placements for student residency experiences are managed by the Clinical Placement Coordinator and are assigned by the BSN to DNP program director in conjunction with the clinical specialty program lead.

BSN-DNP Scholarly Project Requirement

All candidates will prepare a DNP scholarly project that demonstrates a synthesis of the student's abilities, lays the groundwork for future practice scholarship and that demonstrates mastery of leadership in an advanced practice specialization. The scholarly project is completed as part of the 6 credit courses N960, N965 in the final year for all BSN to DNP students. This is also the time when you will be completing your residency hours as described above. The goal is to have your residency in a location or setting that will also facilitate your scholarly project work as well. Students also complete, N803 Responsible Conduct of Research and Scholarship (1 credit).

The criteria for the BSN to DNP Project are as follows:

All BSN-DNP scholarly projects should:

- Focus on a change that impacts healthcare outcomes either through direct or indirect care.
- Have a systems (micro-, meso-, or macro- level) or population/aggregate focus.
- Demonstrate implementation in the appropriate arena or area of practice.
- Include a plan for sustainability (e.g. financial, systems or political realities, not only theoretical abstractions).
- Include an evaluation of processes and/or outcomes (formative or summative). DNP Projects should be designed so that processes and/or outcomes will be evaluated to guide practice and policy. Clinical significance is as important in guiding practice as statistical significance is in evaluating research.
- Provide a foundation for future practice scholarship. (AACN, 2015, pg. 4)

Exemplars of DNP final projects:

- Process or Practice Environment Improvement
- Quality/Safety Initiative or Improvement
- Implement and Evaluate Evidence Based Guidelines
- Design and Evaluate New Models of Care
- Policy Evaluation – Federal/State/Local, Employer

What is not considered appropriate for a DNP final project:

- Research assistantship for faculty's research projects (even when an outside organization may be involved).
- Planning or evaluation for a School of Nursing project.
- Planning, implementing or evaluating an educational project aimed at teaching or student education.
- Stand-alone intellectual exercise that does not involve any organization/community collaboration (e.g., comprehensive review of best practices on websites; stand-alone review of the literature).
- Knowledge generation that is expected of a PhD dissertation.

The Guidelines for the BSN to DNP Scholarly Project are as follows:

BSN-DNP Project

The scholarly project requirement will demonstrate the skill sets that enable leadership and expertise to improve clinical practice, evaluate the impact of practice change, and inform practice standards and policies as well as health policy. Projects will focus on clinical practice problems and/or organizational systems, and the promotion of effective, efficient and accessible care for individuals, groups, or populations. In conducting the scholarly project, students will articulate the state of the science in an identified area of inquiry, apply methods of scholarly inquiry consistent with identified area of interest, and synthesize and disseminate results of inquiry in an oral presentation and final written report or manuscript.

DNP scholarly projects should:

- Focus on a change that impacts healthcare outcomes either through direct or indirect care.
- Have a systems (micro-, meso-, or macro- level) or population/aggregate focus.
- Demonstrate implementation in the appropriate arena or area of practice.
- Include a plan for sustainability (e.g. financial, systems or political realities, not only theoretical abstractions).
- Include an evaluation of processes and/or outcomes (formative or summative). DNP Projects should be designed so that processes and/or outcomes will be evaluated to guide practice and policy. Clinical significance is as important in guiding practice as statistical significance is in evaluating research.
- Provide a foundation for future practice scholarship. (AACN, 2015, pg. 4)

Exemplars of DNP projects:

- Process or Practice Environment Improvement
- Quality/Safety Initiative or Improvement
- Implement and Evaluate Evidence Based Guidelines
- Design and Evaluate New Models of Care
- Policy Evaluation – Federal/State/Local, Employer

BSN-DNP projects will be accomplished during DNP coursework (N825, N910, N960, N965). Faculty mentors will work with students and a mentor from the organization to develop, implement, evaluate and write up the project.

Project idea/literature review

During N825, students will begin to look at project ideas, do a review and synthesis of the literature and identify a potential theoretical framework or model for their project.

Project Proposal

Project development will continue in N910 as they are learning about translation, implementation science and application to a specific patient population or system of healthcare delivery. In N960, students will present their proposal for approval and evaluation of the necessity for IRB. Feedback will be given by course faculty and peer students.

The proposal will include:

- i. Introduction
- ii. Problem/issue identified
- iii. Literature review & synthesis
- iv. Theoretical framework/model identified
- v. Project
 - a. Population/system
 - b. Timeline
 - c. Measurable objectives
 - d. Implementation plan
 - e. Evaluation plan

Project Implementation/Evaluation

Students will implement and evaluate their DNP project during N960 & N965 under the guidance of their faculty and organizational mentors. The final written product will be submitted by the end of N965 with an oral presentation occurring during class. The final written project and oral presentation will be evaluated by course faculty and peer review by N965 classmates. Students are encouraged to invite the organizational mentor, colleagues, faculty and family as desired.

Final Project Report

The final project report will be a written document consisting of the following sections:

- i. Introduction & background of the problem/issue
- ii. Theoretical framework
- iii. Project
 - a. Objectives
 - b. Implementation
 - c. Evaluation Findings
- iv. Implication
- v. Conclusion

Dissemination

Dissemination of the project may include an executive summary provided to the organization; a poster for research day, or another professional organization; or a submission ready manuscript based on the type of project that was done.

Sample Program Plans for the BSN to DNP program

The curriculum has been designed to be completed over three or four years, depending on whether they pathway and clinical specialist focus a student choses. See sample programs plans for Fall 2018 admitted students.

**Adult Gerontology Acute Care Nurse Practitioner or
Adult Gerontology Acute Care Clinical Nurse Specialist
BSN-DNP Program Plan
Fall Start, 3 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N503: ADVANCED HEALTH ASSESSMENT	4	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3	N575: ADULT-GERONTOLOGY ACUTE CARE NURSE PRACTITIONER AND CLINICAL NURSE SPECIALIST NURSING THEORY II (CDM II)	4
N502: ADVANCED PATHOPHYSIOLOGY	4	N573: ADULT-GERONTOLOGY ACUTE CARE NURSE PRACTITIONER AND CLINICAL NURSE SPECIALIST NURSING THEORY I (CDM I)	4	N553: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS	2
P620: PHARMACOTHERAPEUTICS I	4	HS505: TEAM-BASED CLINICAL DECISION MAKING	2	N523: ROLE TRANSITION TO APRN	3
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	P621: PHARMACOTHERAPEUTICS II	4		
Total	15	Total	13	Total	10

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N577: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM I (125 hours)	3	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3	N611: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM III (250 hours)	4
N815: QUALITY AND SAFETY	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3		
		N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3		
Total	9	Total	12	Total	7

YEAR 3

FALL 2020	CREDITS	WINTER 2021	CREDITS		
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)			
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1		6		
Total	7	Total	6	Total	

Total credits: 79

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Adult Gerontology Acute Care Nurse Practitioner or
Adult Gerontology Acute Care Clinical Nurse Specialist
BSN-DNP Program Plan
Fall Start, 4 Year Program Plan
Effective Fall 2018**

Year 1	FALL 2018	CREDITS	WINTER 2018	CREDITS	SPRING-SUMMER 2018	CREDITS
	N502: ADVANCED PATHOPHYSIOLOGY	4	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3		
	N800: ANALYTICS FOR DNP SCHOLARSHIP	3				
	P620: PHARMACOTHERAPEUTICS I	4	P621: PHARMACOTHERAPEUTICS II	4		
	Total	11	Total	7		

YEAR2	FALL 2019	CREDITS	WINTER 2020	CREDITS	Spring 2020	Credits
	N503: ADVANCED HEALTH ASSESSMENT	4	N573: ADULT-GERONTOLOGY ACUTE CARE NURSE PRACTITIONER AND CLINICAL NURSE SPECIALIST NURSING THEORY I (CDM I)	4	N575: ADULT-GERONTOLOGY ACUTE CARE NURSE PRACTITIONER AND CLINICAL NURSE SPECIALIST NURSING THEORY II (CDM II)	4
	N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3	N553: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILL	3
			HS505: TEAM-BASED CLINICAL DECISION MAKING	2	N523: ROLE TRANSITION TO APRN	3
	Total	7	Total	6	Total	10

YEAR 3	FALL 2020	CREDITS	WINTER 2021	CREDITS	SPRING-SUMMER 2021	CREDITS
	N815: QUALITY AND SAFETY	3	N579: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM II (125 hours)	3	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
	N577: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM I (125 hours)	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3	N611: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM III (250 hours)	4
			N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3	N523: ROLE TRANSITION TO APRN	3
	Total	6	Total	9	Total	10

YEAR 4

FALL 2021	CREDITS	WINTER 2022	CREDITS		
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)	6		
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1				
Total	7	Total	6	Total	

Total credits: 79

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Acute Care Pediatric Nurse Practitioner
BSN-DNP Program Plan
Fall Start, 3 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N503: ADVANCED HEALTH ASSESSMENT	4	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3	N551: ACUTE CARE PEDIATRIC MANAGEMENT PART I (CDM III)	2
N502: ADVANCED PATHOPHYSIOLOGY	4	HS505: TEAM-BASED CLINICAL DECISION MAKING	2	N544: WELLNESS FOR ACPNP (clinical only) (56 hours)	1
P620: PHARMACOTHERAPEUTICS I	4	P621: PHARMACOTHERAPEUTICS II	4	N553: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS	3
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	N541: WELLNESS AND ILLNESS FOR THE ACUTE CARE PNP (CDM I)	3	N523: ROLE TRANSITION TO APRN	3
		N550: FOUNDATIONS FOR PRACTICE: COMMON ACUTE ILLNESS FOR THE ACUTE CARE PNP (CDM II)	2		3
Total	15	Total	14	Total	9

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N552: ACUTE CARE PEDIATRIC MANAGEMENT PART 2 (CDM IV)	4	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3	N639: ACUTE CARE PEDIATRIC ADVANCED PRACTICE NURSING CLINICAL PRACTICUM III (224 hours)	5
N637: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM II (168 hours)	4	N638: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM III (168 hours)	4	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3		
N815: QUALITY AND SAFETY	3	N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3		
Total	14	Total	13	Total	8

YEAR 3

FALL 2020	CREDITS	WINTER 2021	CREDITS		
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)			
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1		6		
Total	7	Total	6	Total	

Total credits: 86

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Acute Care Pediatric Nurse Practitioner
BSN-DNP Program Plan
Fall Start, 4 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N502: ADVANCED PATHOPHYSIOLOGY	4	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3	N523: ROLE TRANSITION TO APRN	3
P620: PHARMACOTHERAPEUTICS I	4	HS505: TEAM-BASED CLINICAL DECISION MAKING	2		
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	P621: PHARMACOTHERAPEUTICS II	4		
Total	11	Total	9	Total	3

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N503: ADVANCED HEALTH ASSESSMENT	4	N550: FOUNDATIONS FOR PRACTICE: COMMON ACUTE ILLNESS FOR THE ACUTE CARE PNP (CDM II)	2	N639: ACUTE CARE PEDIATRIC ADVANCED PRACTICE NURSING CLINICAL PRACTICUM III (224 hours)	5
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
		N541: WELLNESS AND ILLNESS FOR THE ACUTE CARE PNP (CDM I)	3		
Total	7	Total	8	Total	6

YEAR 3

FALL 2020	CREDITS	WINTER 2021	CREDITS	SPRING-SUMMER 2021	CREDITS
N552: ACUTE CARE PEDIATRIC MANAGEMENT PART 2 (CDM IV)	4	N638: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM III (168 hours)	4	N639: ACUTE CARE PEDIATRIC ADVANCED PRACTICE NURSING CLINICAL PRACTICUM III (224 hours)	5
N637: ADVANCED PRACTICE NURSING CLINICAL PRACTICUM II (168 hours)	4	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	4	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N815: QUALITY AND SAFETY	3	N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3		
Total	11	Total	10	Total	8

YEAR 4

FALL 2021	CREDITS	WINTER 2022	CREDITS	SPRING-SUMMER	
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)			
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1		6		
Total	7	Total	6	Total	

Total credits: 86

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Adult Gerontology Primary Care Nurse Practitioner
BSN-DNP Program Plan
Fall Start, 3 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N503: ADVANCED HEALTH ASSESSMENT	4	N566: ADVANCED PRIMARY CARE NURSING (CDM I) 112 clinical hours	5	N666: ADVANCED PRIMARY CARE NURSING OF CHRONICALLY ILL ADULTS AND THEIR FAMILIES (CDM II) 168 clinical hours	6
N502: ADVANCED PATHOPHYSIOLOGY	4	HS505: TEAM-BASED CLINICAL DECISION MAKING	2	N554: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS FOR PRIMARY CARE	2
P620: PHARMACOTHERAPEUTICS I	4	P621: PHARMACOTHERAPEUTICS II	4	N646: PRIMARY CARE OF OLDER ADULTS	3
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	N568: CRITICAL ELEMENTS AND THE STUDY OF FAMILY AND HEALTH	3	N523: ROLE TRANSITION TO APRN	3
Total	15	Total	14	Total	11

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N674: ADVANCED PRIMARY CARE NURSING OF ADULTS AND FAMILIES WITH COMPLEX SYSTEMS (CDM III) 224 clinical hours	8	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3		
N815: QUALITY AND SAFETY	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3		
		N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3		
Total	14	Total	12	Total	3

YEAR 3

FALL 2020	CREDITS	WINTER 2021	CREDITS		
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)	6		
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1				
Total	7	Total	6	Total	

Total credits: 82

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Adult Gerontology Primary Care Nurse Practitioner
BSN-DNP Program Plan
Fall Start, 4 Year Program Plan
Effective Fall 2018**

FALL 2018		CREDITS	WINTER 2019		CREDITS	SPRING-SUMMER 2020		CREDITS
Year 1	N502: ADVANCED PATHOPHYSIOLOGY	4	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3	N554: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS FOR PRIMARY CARE	2		
	N800: ANALYTICS FOR DNP SCHOLARSHIP	3	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3	N646: PRIMARY CARE OF OLDER ADULTS	3		
			HS505: TEAM-BASED CLINICAL DECISION MAKING	2				
			N568: CRITICAL ELEMENTS AND THE STUDY OF FAMILY AND HEALTH	3	N523: ROLE TRANSITION TO APRN	3		
	Total	7	Total	11	Total	8		

FALL 2019		CREDITS	WINTER 2020		CREDITS	SPRING-SUMMER 2020		CREDITS
YEAR 2	N503: ADVANCED HEALTH ASSESSMENT	4	N566: ADVANCED PRIMARY CARE NURSING (CDM I) 112 clinical hours	5	N666: ADVANCED PRIMARY CARE NURSING OF CHRONICALLY ILL ADULTS AND THEIR FAMILIES (CDM II) 168 clinical hours	6		
	N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	P621: PHARMACOTHERAPEUTICS II	4				
	P620: PHARMACOTHERAPEUTICS I	4						
	Total	11	Total	9	Total	6		

FALL 2020		CREDITS	WINTER 2021		CREDITS	SPRING-SUMMER 2021		CREDITS
YEAR 3	N674: ADVANCED PRIMARY CARE NURSING OF ADULTS AND FAMILIES WITH COMPLEX SYSTEMS (CDM III) 224 clinical hours	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3		
	N815: QUALITY AND SAFETY	3	N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3				
	Total	11	Total	6	Total	3		

YEAR 4

FALL 2021	CREDITS	WINTER 2022	CREDITS		
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6				
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)	6		
Total	7	Total	6	Total	

Total credits: 85

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Family Nurse Practitioner
BSN-DNP Program Plan
Fall Start, 4 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2020	CREDITS
N502: ADVANCED PATHOPHYSIOLOGY	4	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3	N554: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS FOR PRIMARY CARE	2
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3	N646: PRIMARY CARE OF OLDER ADULTS	3
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	HS505: TEAM-BASED CLINICAL DECISION MAKING	2	N523: ROLE TRANSITION TO APRN	3
		N568: CRITICAL ELEMENTS AND THE STUDY OF FAMILY AND HEALTH	3		
Total	10	Total	11	Total	8

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N503: ADVANCED HEALTH ASSESSMENT	4	N593: Advanced Primary Care Practicum I- FNP. 168 hours	3	N693: Advanced Primary Care Practicum II- FNP. 224 hours	4
P620: PHARMACOTHERAPEUTICS I	4	N566: ADVANCED PRIMARY CARE NURSING (CDM I) 112 clinical hours	3	N666: ADVANCED PRIMARY CARE NURSING OF CHRONICALLY ILL ADULTS AND THEIR FAMILIES (CDM II) 168 clinical hours	3
		N557: PCPNP CDMI (Clinical Decision Making I): INFANT, CHILD, AND ADOLESCENT HEALTH: WELLNESS AND MANAGEMENT OF COMMON ILLNESS didactic only	4		
		P621: PHARMACOTHERAPEUTICS II	4		
Total	8	Total	14	Total	7

FALL 2020	CREDITS	WINTER 2021	CREDITS	SPRING-SUMMER 2021	CREDITS
N674: ADVANCED PRIMARY CARE NURSING OF ADULTS AND FAMILIES WITH COMPLEX SYSTEMS	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3

YEAR 3	(CDM III) 224 clinical hours				
	N815: QUALITY AND SAFETY	3	N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3	
	N640: NURSING CARE OF CHILDBEARING FAMILIES (ANTEPARTUM CARE)				
	Total	13	Total	6	Total 3

	FALL 2021	CREDITS	WINTER 2022	CREDITS		
YEAR 4	N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)	6		
	N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1				
	Total	7	Total	6	Total	

Total credits:93

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Primary Care Pediatric Nurse Practitioner
BSN-DNP Program Plan
Fall Start, 3 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N502: ADVANCED PATHOPHYSIOLOGY	4	N557: PCPNP CDMI (Clinical Decision Making I): INFANT, CHILD, AND ADOLESCENT HEALTH: WELLNESS AND MANAGEMENT OF COMMON ILLNESS didactic only	8	N589: ADVANCED PEDIATRIC NURSE PRACTITIONER CLINICAL PRACTICUM (224 hours only)	4
N503: ADVANCED HEALTH ASSESSMENT	4	P621: PHARMACOTHERAPEUTICS II	4	N523: ROLE TRANSITION TO APRN	3
P620: PHARMACOTHERAPEUTICS I	4	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3	N555: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS FOR PRIMARY CARE PEDIATRICS	1
N800: ANALYTICS FOR DNP SCHOLARSHIP	3				
Total	15	Total	9	Total	3

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N617: CDMII: INFANT, CHILD AND ADOLESCENT HEALTH: PRIMARY HEALTH CARE ACROSS MULTIPLE SETTINGS (224 hours)	7	HS 505: TEAM-BASED CLINICAL DECISION MAKING	2	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3		3
N815: QUALITY AND SAFETY	3	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3		
		N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3		
Total	13	Total	11	Total	6

YEAR 3

FALL 2021	CREDITS	WINTER 2022	CREDITS	SPRING-SUMMER	
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)			
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1		6		
Total	7	Total	6	Total	

Total credits: 78

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Primary Care Pediatric Nurse Practitioner
BSN-DNP Program Plan
Fall Start, 4 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N502: ADVANCED PATHOPHYSIOLOGY	4				
P620: PHARMACOTHERAPEUTICS I	4	N529: SCIENTIFIC AND ANALYTIC APPROACHES FOR ADVANCED PRACTICE*	3		
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	P621: PHARMACOTHERAPEUTICS II	4		
Total	11	Total	7	Total	

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N503: ADVANCED HEALTH ASSESSMENT	4	N557: CDM I: INFANT, CHILD AND ADOLESCENT HEALTH: WELLNESS AND MANAGEMENT OF COMMON ILLNESS (CDM I) (112 hours)	8	N589: ADVANCED PEDIATRIC NURSE PRACTITIONER CLINICAL PRACTICUM (224 hours only)	4
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3	N555: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS FOR PRIMARY CARE PEDIATRICS	1
				N523: ROLE TRANSITION TO APRN	3
Total	7	Total	11	Total	8

YEAR 3

FALL 2020	CREDITS	WINTER 2021	CREDITS	SPRING-SUMMER 2021	CREDITS
N617: CDMII: INFANT, CHILD AND ADOLESCENT HEALTH: PRIMARY HEALTH CARE ACROSS MULTIPLE SETTINGS (224 hours)	7	HS 505: TEAM-BASED CLINICAL DECISION MAKING	2	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N815: QUALITY AND SAFETY	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3		
		N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3		
Total	10	Total	8	Total	3

YEAR 4

FALL 2021	CREDITS	WINTER 2022	CREDITS	SPRING-SUMMER	
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)			
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1		6		
Total	7	Total	6	Total	

Total credits: 78

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Nurse Midwifery
BSN-DNP Program Plan
Fall Start, 3 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N502: ADVANCED PATHOPHYSIOLOGY	4	N566: ADVANCED PRIMARY CARE NURSING: HEALTH PROMOTION AND MANAGEMENT OF ACUTE HEALTH PROBLEMS OF ADULTS AND WELL WOMAN/GYN CARE	3	N546: ANTEPARTUM CARE (168 hours clinical)	6
N503: ADVANCED HEALTH ASSESSMENT	4	N561: CARE OF THE CHILDBEARING WOMAN	1	N678: PROFESSIONAL ISSUES IN NURSE MIDWIFERY	3
P620: PHARMACOTHERAPEUTICS I	4	N571: ADVANCED MIDWIFERY CLINICAL (112 hours)	3		
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3		
		N529: SCIENTIFIC AND ANALYTIC APPROACHES*	3		
Total	15	Total	12	Total	9

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N676: INTRAPARTUM POSTPARTUM NEWBORN (225 hours)	7	N677: INTEGRATION OF MIDWIFERY CARE SCOPE OF PRACTICE (225 hours)	5	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3	STUDENTS ARE BOARD ELIGIBLE	
N815: QUALITY AND SAFETY	3	N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3	N843: EXPANDED NMW SCOPE OF PRACTICE or N554: ADVANCED PRACTICE SPECIALTY PROCEDURES SKILLS FOR PRIMARY CARE	3
Total	13	Total	11	Total	6

YEAR 3

FALL 2021	CREDITS	WINTER 2022	CREDITS	SPRING-SUMMER	
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)			
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1		6		
Total	7	Total	6	Total	

Total credits: 79

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Nurse Midwifery
BSN-DNP Program Plan
Fall Start, 4 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N502: ADVANCED PATHOPHYSIOLOGY	4	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3		
P620: PHARMACOTHERAPEUTICS I	4	N529: SCIENTIFIC AND ANALYTIC APPROACHES*	33		
N800: ANALYTICS FOR DNP SCHOLARSHIP	3		3		
Total	11	Total	6	Total	

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N503: ADVANCED HEALTH ASSESSMENT	4	N566: ADVANCED PRIMARY CARE NURSING: HEALTH PROMOTION AND MANAGEMENT OF ACUTE HEALTH PROBLEMS OF ADULTS AND WELL WOMAN/GYN CARE	3	N678: PROFESSIONAL ISSUES IN NURSE MIDWIFERY	3
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N561: CARE OF THE CHILDBEARING WOMAN	1	N546: ANTEPARTUM CARE (168 HOURS CLINICAL)	6
N678: PROFESSIONAL ISSUES IN NURSE MIDWIFERY	3	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3		
		N571: ADVANCED MIDWIFERY CLINICAL (112 hours)	2		
Total	10	Total	9	Total	9

YEAR 3

FALL 2021	CREDITS	WINTER 2022	CREDITS	SPRING-SUMMER	
N676: INTRAPARTUM POSTPARTUM NEWBORN (225 hours)	7	N677: INTEGRATION OF MIDWIFERY CARE SCOPE OF PRACTICE (225 hours)	5	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N815: QUALITY AND SAFETY	3	N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3	STUDENTS ARE BOARD ELIGIBLE	
			6	N843: EXPANDED NMW SCOPE OF PRACTICE or N554: ADVANCED PRACTICE SPECIALTY PROCEDURES SKILLS FOR PRIMARY CARE	3
Total	10	Total	8	Total	6

YEAR 4

FALL 2021	CREDITS	WINTER 2022	CREDITS	SPRING-SUMMER	
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)			
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1		6		
Total	7	Total	6	Total	

Total credits: 82

Program plan effective for students entering in Fall 2018 and beyond; please contact UMSN-GradAdvisors@med.umich.edu for questions about prior program plans.

**Primary Care Pediatric Nurse Practitioner and Nurse Midwifery
BSN-DNP Program Plan
Fall Start, 4 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N502: ADVANCED PATHOPHYSIOLOGY	4	N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3	N546: ANTEPARTUM CARE (168 hours clinical)	6
N503: ADVANCED HEALTH ASSESSMENT FOR ADVANCED PRACTICE NURSES	4	N566: ADVANCED PRIMARY CARE NURSING: HEALTH PROMOTION AND MANAGEMENT OF ACUTE HEALTH PROBLEMS OF ADULTS AND WELL WOMAN/GYN CARE	3	N555: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS FOR PRIMARY CARE PEDIATRICS	1
P620: PHARMACOTHERAPEUTICS I	4	N561: CARE OF THE CHILDBEARING WOMAN	1	N800: ANALYTICS FOR DNP SCHOLARSHIP	3
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	N571: ADVANCED MIDWIFERY CLINICAL (112 hours)	2		
		P621: PHARMACOTHERAPEUTICS II	4		
Total	15	Total	13	Total	10

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	N557: CDM I: INFANT, CHILD AND ADOLESCENT HEALTH: WELLNESS AND MANAGEMENT OF COMMON ILLNESS (CDM I) (112 hours)	2	N589: ADVANCED PEDIATRIC NURSE PRACTITIONER CLINICAL PRACTICUM (224 hours only)	6
N676: INTRAPARTUM POSTPARTUM NEWBORN (225 hours)	7	N832: CLINICAL LEADERSHIP FOR EFFECTIVE RESOURCE MANAGEMENT	3		
		N677: INTEGRATION OF MIDWIFERY CARE SCOPE OF PRACTICE (225 hours)	5		
Total	10	Total	10	Total	6

YEAR 3

FALL 2020	CREDITS	WINTER 2021	CREDITS	SPRING-SUMMER 2021	CREDITS
N617: CDMII: INFANT, CHILD AND ADOLESCENT HEALTH: PRIMARY HEALTH CARE ACROSS MULTIPLE SETTINGS (224 hours)	8	N529: SCIENTIFIC AND ANALYTIC APPROACHES*	3	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N815: QUALITY AND SAFETY	3	N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3		
		HS 505: TEAM-BASED CLINICAL DECISION MAKING	2		
Total	11	Total	8	Total	3

YEAR 4

FALL 2021	CREDITS	WINTER 2022	CREDITS	SPRING-SUMMER	CREDITS
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)			
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1		6		
Total	7	Total	6	Total	

Total credits: 99

**Family Nurse Practitioner and Nurse Midwifery
BSN-DNP Program Plan
Fall Start, 4 Year Program Plan
Effective Fall 2018**

Year 1

FALL 2018	CREDITS	WINTER 2019	CREDITS	SPRING-SUMMER 2019	CREDITS
N502: ADVANCED PATHOPHYSIOLOGY	4	P621: PHARMACOTHERAPEUTICS II	4	N666: ADVANCED PRIMARY CARE NURSING OF CHRONICALLY ILL ADULTS AND THEIR FAMILIES (CDM II)	3
N503: ADVANCED HEALTH ASSESSMENT FOR ADVANCED PRACTICE NURSES	4	N566: ADVANCED PRIMARY CARE NURSING: HEALTH PROMOTION AND MANAGEMENT OF ACUTE HEALTH PROBLEMS OF ADULTS AND WELL WOMAN/GYN CARE	3	N555: ADVANCED PRACTICE SPECIALTY PROCEDURES AND SKILLS FOR PRIMARY CARE	3
P620: PHARMACOTHERAPEUTICS I	4	N561: CARE OF THE CHILDBEARING WOMAN	1	N693: ADVANCED PRIMARY CARE PRACTICUM II-FNP, 224 HOURS	4
N800: ANALYTICS FOR DNP SCHOLARSHIP	3	N571: ADVANCED MIDWIFERY CLINICAL (112 hours)	2	N678: PROFESSIONAL ISSUES IN NURSE MIDWIFERY	3
Total	15	Total	14	Total	13

YEAR 2

FALL 2019	CREDITS	WINTER 2020	CREDITS	SPRING-SUMMER 2020	CREDITS
N528: MODELS, THEORIES, AND METHODS TO PROMOTE OPTIMAL HEALTH OUTCOMES	3	HS505: TEAM-BASED CLINICAL DECISION MAKING	2	N646: PRIMARY CARE OF OLDER ADULTS	3
N674: ADVANCED PRIMARY CARE OF ADULTS AND FAMILIES (CDM III)	8	N568: CRITICAL ELEMENTS AND THE STUDY OF FAMILY & HEALTH	3	N546: ANTEPARTUM CARE (168 hours clinical)	6
		N529: SCIENTIFIC AND ANALYTIC APPROACHES*	3		
		N527: PROMOTING OPTIMAL MODELS AND SYSTEMS FOR HEALTHCARE DELIVERY	3		
Total	11	Total	11	Total	9

YEAR 3

FALL 2020	CREDITS	WINTER 2021	CREDITS	SPRING-SUMMER 2021	CREDITS
N815: QUALITY AND SAFETY	3	N677: INTEGRATION OF MIDWIFERY CARE SCOPE OF PRACTICE (225 hours)	5	N910: TRANSLATION, IMPLEMENTATION, EFFECTIVENESS	3
N676: INTRAPARTUM POSTPARTUM NEWBORN (225 hours)	7	N825: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3	N843: EXPANDED NMW SCOPE OF PRACTICE or N554: ADVANCED PRACTICE SPECIALTY PROCEDURES SKILLS FOR PRIMARY CARE	3
N803: RESPONSIBLE CONDUCT OF RESEARCH AND SCHOLARSHIPS (RCRS)	1				
Total	11	Total	8	Total	6

YEAR 4

FALL 2021	CREDITS	WINTER 2022	CREDITS	SPRING-SUMMER	CREDITS
N960: CAPSTONE RESIDENCY AND SEMINAR I (250 hours)	6	N965: CAPSTONE RESIDENCY AND SEMINAR II (250 hours)	6		
		N832: CRITICAL APPRAISAL FOR DNP SCHOLARLY INQUIRY	3		
Total	6	Total	9	Total	

Total credits: 116

DNP Residency Guidelines

The purpose of the DNP residency is to provide mentored leadership experiences. The residency placement will be individualized based on the students' learning objectives, previous clinical and leadership experiences, and career goals. The residency can be completed in a variety of provider or organizational settings in either the private or public sector, in local to international settings. The mentored experiences can include both direct and indirect (leadership) clinical experiences. It is intended that students will become actively involved in senior leadership roles and apply knowledge and skills learned in the program. In addition, the residency may be an environment where the student can propose and complete the scholarly project requirement.

Learning Objectives for the Residency

All students are expected to meet general learning objectives during their residency. Upon completion of the residency requirement, students are expected to be able to:

- Analyze challenges and issues faced in organizations and propose theory and evidence based solutions to address them.
- Demonstrate competencies of a DNP-prepared nurse using a theoretical foundation as they apply to senior leadership roles and responsibilities.
- Reflect on their leadership abilities and identify areas for continued growth and development.
- Evaluate the role of the DNP in improving population health outcomes.
- Collaborate with systems and organizations to define ways to apply DNP skills for application to real-world problems.

Students will participate in a seminar when enrolled for residency credits. Course may be repeated to accommodate part-time students or students who need additional clinical and leadership experiences to complete 6 credits. All DNP students must complete a minimum of 3 credits in a residency as a capstone experience. Students will work closely with their faculty advisor to identify goals for their residency experiences. Students will then develop specific learning objectives for the residency. The director of the DNP program, the faculty advisor, the student, and the clinical placement office will work together to identify potential placement opportunities, a potential match with a preceptor, and ensure that the appropriate contracts are in place. Once a preceptor has been identified, students will work with them to refine the specific goals and activities that will be carried out within the residency. The student registers for the residency course (N950).

Planning for the Residency

As students meet with their academic advisor and/or program director around academic program planning, they are advised to begin to think about how the residency credits will fit into their program of study. Residency placements can take 6 months to a year to finalize so discuss the residency experience early with your faculty advisor to ensure placement deadlines are met.

The student must understand that residency hours must correspond with the academic semesters. All placements must be approved by faculty and communicated to the Clinical Placement Administrator at least 6 weeks prior to the start of the semester in which the student wishes to complete residency. There are onboarding requirements that each student will be required to complete before entering any facility.

In general, each residency credit will require 8 to 10 hours per week for residency-related activities. During a 15-week semester, this would total a minimum of 120 hours of activities for 1 credit hour. For students who complete 3 credits of residency (totaling a minimum of 360 hours), the remaining clinical hours will be credited as they complete their scholarly project. The actual contact hours in the residency

setting will vary depending on the setting and the type of activities the student is involved in. Students are required to keep a detailed log of their clinical hours during the residency experience.

While the residency is envisioned as primarily a capstone experience, it also is recognized that many students will likely complete some of their residency credits before their last term. For example, if a DNP student is in need of more than 3 credits of residency to meet the clinical hour requirement, it would most likely be challenging to complete all of those credits during one semester. Working closely with the academic advisor, the student can build the residency credits throughout their program with the understanding that the student should have completed at least 10 credits of coursework before they are ready for a residency experience.

It is intended that residency requirements will not be met in a unit of the organization where a student is employed. A student can complete residency hours within the same organization but within a different department or unit. The clinical mentor for the residency may not be a student's employment supervisor. Finally, the clinical agency must have a clinical contract in place with the School of Nursing.

If a student intends to link their DNP scholarly project with a portion of the residency, it is advised that they plan at least one credit of residency during the summer between the first and second year of coursework. This residency experience will provide the student opportunities to identify potential scholarly projects in the setting where the residency is taking place and refining the proposal for their scholarly project. During or following that experience, the student can work on obtaining administrative and academic approval for the proposed project as well as IRB approval if required. With this model, the project will ideally be ready for implementation when the student is ready to complete the residency requirement in the following year.

In general, the PM-DNP program director will work with the School of Nursing Clinical Placement Office to assist with placement of a student in the residency. Students are not expected to find their own placements although they can suggest a preceptor or organization for consideration. The School will contact the organization or proposed mentor to discuss potential residency placement and expectations for the residency experience. Students may not carry out a residency at their specific place of employment, but may pursue a residency within the same health system within which they are employed.

Evaluation Methods

When students are enrolled in residency credits, they are required to maintain a log, which records hours completed and a monthly reflective journal of their experiences. At the end of the semester, students will complete a self-evaluation of the experience and turn this in to their preceptor/mentor. The mentor will also be asked to complete an evaluation of the student's experience. The completed evaluation form and clinical hour log must be turned into the faculty of record prior to receiving a passing grade for the residency credit(s). The residency will be graded on a Satisfactory/ Unsatisfactory (S/U) basis by the faculty of record.

PM-DNP Scholarly Project Guidelines

Overview and Purpose of Scholarly Project

The DNP scholarly project is a culminating experience which demonstrates the student's ability, as an independent leader, to synthesize scholarship in an advanced practice specialty or an area of health leadership. It lays the foundation for future scholarship as well. The emphasis in the scholarly project addresses some aspect of translation of research, evidence-based practice or the implementation of a project designed to address a problem of relevance to nursing practice and healthcare delivery. The DNP scholarly project provides the student with opportunities to independently lead a project and

demonstrate competencies related to leadership in innovation and translation of evidence to improve care and nursing practice. The scholarly project can focus on a variety of areas that address practice. Whatever the nature of the project, it is expected that the solution to the problem being addressed will be based on evidence, preferably research evidence, and that implementation will be evaluated using data relevant to the problem and practices or programs implemented to mitigate the problem.

Although not required, students are encouraged to carry out their DNP scholarly project as part of their residency. When linking their project with the residency requirement, it is recommended that the student complete a portion of their residency credits during the first year of their program so that they can begin to identify opportunities for their project during the first year in the program. Students can then work on their proposal and plan for agency and IRB approvals as required before they implement their project.

The written submission for the DNP scholarly project can take the form of a product that can be disseminated, such as a manuscript suitable for publication. It is intended that the results will also be disseminated through clinical and scientific meetings. The project will be supervised by a faculty committee (see guidelines below). The final project will be defended in an oral examination and the supervising committee is responsible for certifying that it meets acceptable scholarly standards.

Five scholarly project credits are required for the degree. It is expected that students will register for the number of credits that reflect their and the faculty chair's effort and direction each semester they are working on their scholarly project. A student who completes all coursework and still has not completed the DNP scholarly project must be enrolled for 1 project credits each term until the scholarly project is completed.

It is expected that, upon completion of the scholarly project, students will be able to:

- Demonstrate the skill, knowledge, and ability to lead future quality improvement or change initiatives directed at improving patient care and population health.
- Develop a proposal which defines a problem from the clinical setting and synthesizes the evidence related to that problem.
- Apply analytic and evaluation techniques to examine the effectiveness of the quality improvement or practice change initiative.
- Present and defend a scholarly treatise that synthesizes the evidence and presents recommendations based on findings.
- Develop a plan to disseminate findings in scholarly journals and other forums to improve practice and patient care.

Selection of the PM-DNP Scholarly Project Committee Chair and Committee

The PM-DNP Scholarly Project is supervised by a faculty committee comprised of a minimum of three qualified members. Revised Guidelines (effective for students enrolled Fall 2016) for preparation and structure of the proposal can be found in [Appendix I](#). The chairperson for the student's scholarly project must be a member of the School of Nursing faculty (clinical or tenure track) with the requisite expertise and experience to provide substantive assistance and direction to the student. Additional members for the scholarly project committee are selected based on their specific strengths and perspective they will bring to the problem or topic being addressed in the scholarly project, and can be from within the School and/or practice setting.

Requirements to serve as a committee member are as follows:

- At least three committee members must hold doctoral degrees. A minimum of two of these committee members must be members of the School of Nursing faculty.
- The chair must be a School of Nursing faculty member (clinical or tenure track).
- The third member of the committee may hold either a regular or adjunct faculty appointment in the University of Michigan or be a qualified individual outside the University who is nominated

by the student. This could be someone from a clinical agency or a content expert from another university.

The student will discuss committee membership with the chair of the scholarly project committee.

If the student wishes to have a 4th member who is not doctorally prepared but who has contributed in a substantive way to the implementation of the scholarly project, they may nominate this individual for consideration as a committee member. All committee nominations must be approved by the Director of Post-Master's DNP. All committee nominations for individuals outside of the School of Nursing must be accompanied by a current curriculum vitae and a justification for their nomination.

The student submits a nomination form proposing the membership for the Scholarly Project Committee to the Director of Post-Master's DNP for approval. The full committee should be nominated and approved in a timely fashion to allow all members the opportunity to contribute to the shaping and direction of the proposal for the scholarly project.

PM-DNP Scholarly Project Proposal Process

The candidate must prepare and defend a proposal for the scholarly project before the approved project committee members. The student will develop drafts of the proposal for review by the committee chair. As the student prepares to circulate drafts to the chair and committee members, turnaround times for review and comment must be negotiated between the student and the faculty. In general, two to three weeks should be allowed for faculty to review and return drafts. When the committee chair agrees that a draft is ready for committee review, the student will circulate the draft to other committee members for review and input. When all committee members agree the proposal is ready to defend, the student will arrange for a meeting for defense of the proposal.

At the proposal meeting, the student will present a synopsis of the clinical issue, scope of the problem, plan for addressing the project, and the implementation and evaluation plan for assessing the project outcomes. The committee will have an opportunity to clarify any questions as well as to offer recommendations. If revisions in the proposal are required, those will be detailed at the time of the meeting and a plan and timeline for addressing those will be developed by the committee and presented to the student at that time (with follow up in writing). The outcome of the proposal meeting is 1) approval to proceed without revisions; 2) approval to proceed with minor revisions; 3) major revisions needed with the committee deciding if a) these can be guided by your chair or b) if the committee wished to read and approve the proposal prior to proceeding; or 4) disapproval. Working closely with your committee chair is important to have a successful proposal meeting.

The candidate may not proceed with project implementation until all committee members have approved the final proposal. Once approved, the chairperson must submit the [proposal approval form](#) to the Director of Post-Master's DNP for approval and processing.

After the proposal is approved, the student will proceed to consult with the U-M Institutional Review Board (IRB) to determine whether IRB review and approval is required for the scholarly project.

Federal regulations and University policy require that all investigations using human beings or animals as subjects of research be reviewed and approved by an appropriately constituted committee *before* any such investigations commence. ***No scholarly project based on the use of human beings or animals as subjects can be accepted without this prior review and approval.*** In many instances, the faculty advisor will request the review, but graduate students should verify with their advisors that the necessary review has taken place and approval for the investigation has been granted.

IRBMED must be consulted for any projects that will be conducted at Michigan Medicine. IRB-HSBS and Behavioral Sciences must be consulted for any projects that will be conducted in any setting other

than MICHIGAN MEDICINE. If IRB approval is required, this must be obtained before commencing with the project. In addition, any approvals that may be required from the clinical agency where the project will be implemented must also be obtained. For example, all projects that are proposed for MICHIGAN MEDICINE must be submitted to the Nursing Research and Translation Committee in the Department of Nursing for review and approval. A policy entitled “Conducting Research within the Department of Nursing” (MICHIGAN MEDICINE Nursing Services, approved November 2013) presents the policy and the necessary forms. The project cannot be implemented until all necessary agency approvals have been received. The scholarly project committee chairperson will monitor these approvals with the

The Health Sciences and Behavioral Sciences (Institutional Review Boards (IRB-HSBS) oversee the human subject research conducted by the schools, colleges, and units of the University of Michigan that comprise the Ann Arbor campus but are not part of the Medical School. For additional information, contact the IRB-HSBS at 734-936-0933, irbhsbs@umich.edu, or visit their [website](#).

The Institutional Review Boards of the University of Michigan Medical School (IRBMED) oversee human subjects research conducted at the Medical School and MICHIGAN MEDICINE. This includes research conducted off-site by University faculty and staff when acting as University employees or in connection with their University appointments. For additional informational, contact the IRBMED at 734-763-4768, irbmed@umich.edu, or visit their [website](#).

Students who work with animals will be subject to the regulations maintained by the Unit for Laboratory Animal Management (ULAM) and the University Committee on the Use and Care of Animals (UCUCA). The student may be required to take additional courses on animal care prior to beginning data collection. For policies, requirements and regulations regarding animal subjects in research, contact the Office of Research and Sponsored Projects at 734-764-5500 or visit their [website](#).

PM-DNP Scholarly Project Defense and Final Paper

The chairperson, in consultation with committee members, determines when the final draft of the scholarly project is ready for defense. Revised Guidelines (effective for students enrolled Fall 2016) for preparation and structure of the final paper can be found in [Appendix I](#). The DNP scholarly project defense is a public presentation of the completed project. This defense is open to the public, including faculty, students and individuals outside of the University. The oral presentation should include statement of the problem, review and synthesis of the literature, a description of the project implementation to address the problem, the evaluation results and implications for future work in this area. The defense needs to be completed prior to the deadline for grades in the semester which the student expects to graduate. Notice of the scholarly project defense, including the candidate's name, project title, committee members, date, time, and location should be posted within the School of Nursing at least one week prior to the defense date. The student, in consultation with the committee chairperson, is responsible for reserving a room and posting the notice for the defense. The notices should be sent out by email to all faculty and students within the School of Nursing plus any additional outside members the student would like to have in attendance.

The committee chairperson will conduct the defense by introducing the purpose and examination procedures, introducing the candidate, and the committee members. The chair will coordinate the time and discussion period. After the candidate presents the scholarly project, questions are asked by the project committee members. This is followed by an opportunity to address questions from the

audience. After the questions have been completed, the chair will excuse the audience and the committee will meet in private with the candidate to continue the examination as necessary. When that is completed, the committee will excuse the candidate and meet privately to determine the results of the examination. Results of the examination will be reported to the candidate at that time.

Grading of the Final Defense and Examination

The scholarly project committee will determine when the project is acceptable for the oral examination. The committee determines the adequacy of the oral examination and written product.

The following grades are possible after the oral examination:

- Pass—no revisions
- Pass—revisions required
- Unacceptable

The [requisite forms reporting](#) the results of the examination are to be forwarded to the Director of Post-Master's DNP for processing.

Scholarly Project Final Submission

After all revisions specified by the student's scholarly project committee have been addressed satisfactorily and final approval has been given by the committee chair, the student is required to submit a final electronic copy of the scholarly project. This should be in PDF form and submitted to the Graduate Advisors (UMSN-GradAdvisors@med.umich.edu) and Director of the Post-Master's DNP program. In addition, a one-page abstract outlining the project should be submitted to the Director of the Post Master's DNP program. The abstracts will be made available for access by other students and faculty.

Enrollment Requirements

Continuous Enrollment

The School of Nursing requires that all DNP students enroll continuously each fall and winter terms until completion of all coursework and successful defense of the scholarly project. Registration in the spring/summer term is optional. Continuous enrollment is necessary to maintain active student status. Active students must be registered for a minimum of one credit during the fall and winter terms. The number of credits should reflect the amount of work the student intends to complete that semester and should be negotiated with the supervising faculty to reflect their effort. If a student does not register for a term as expected, the student will be considered to have withdrawn from the Program and their academic record will be discontinued. If they wish to return to the DNP Program, they will need to reapply to the School of Nursing and the DNP Program.

Leave of Absence

Events may occur that make it necessary for a student pursuing a DNP to interrupt his or her progress toward a degree. Students can request a Leave of Absence from the program for illness or injury, to provide care or assistance for family and dependents, to meet military service obligations, or for other personal reasons.

A student on a Nursing-approved leave of absence suspends progress toward the DNP degree for a minimum of one fall or winter term. No tuition or fees are charged for the period during which a student is on a leave of absence. A leave of absence may have implications for a student's federal financial

aid or loans. Students should consult with the Office of Financial Aid to determine how a leave status might affect their aid and eligibility to defer loan repayment.

A student on leave has access to limited services that allow them to remain current in their field of study and connect to their program. Students on leave do not have the benefits of registered status however, and many may not use University facilities or services normally available to registered students, including the use of laboratories, equipment and other research facilities. Students on leave may not use the service of faculty or administrative staff except for planning the transition back to registration status.

Emergency situations may require a student to begin a leave of absence in the middle of a term. In these circumstances, students would withdraw their registration for that term and immediately begin the approved leave of absence. Adjustments to tuition and fee charges are made according to the schedule set by the Registrar's Office. Emergency leaves do not reverse the charges set by this schedule.

US Immigration regulations may restrict the eligibility of an international student for a leave of absence. International Students considering a leave of absence must consult with the International Center, so that the Center can either inform the student that the proposed leave of absence is permissible under immigration regulations and can update the student's SEVIS record if needed, or, if the proposed leave is not permitted by immigration regulations, advise the student on other possible courses of action.

The following general policies apply to all leaves of absence:

1. The Office Practice and Professional Graduate Programs advisors review and forward all requests for leaves with recommendations to the DNP Program Director for review and approval.
2. A leave of absence is not required for the spring/summer, since students maintain active status during these terms whether or not they are enrolled in courses.
3. A student can request a leave for up to 2 consecutive fall or winter terms, or 12 consecutive months, and may request an extension for up to an additional 12 months, or a maximum leave of 24 months.
4. A student may submit a request to return early from an approved leave of absence, which is subject to the recommendation from the graduate advisor and approval of the DNP Program Director.
5. Leaves of absence will not be approved for prior terms.
6. A newly admitted student who has registered may seek a leave of absence, if the request and approval occur before the end of the third week of classes in the initial term of registration.
7. Students returning from an approved leave must enroll for the next fall or winter term that follows the leave. Students who are at the end of a term of an approved leave and do not either request a new leave to register for the next fall or winter term will be considered to have withdrawn and be discontinued from the program at the end of the term that follows the leave.
8. Students on leave may finish work from previous terms, such as completing unfinished work for prior course in which grades of incomplete have been assigned, but may not complete other requirements for their degree.
9. The time limit for completing the DNP degree will be extended by that number of terms the student is on leave.
10. A student who has been suspended for academic or non-academic reasons is not eligible to apply for a leave of absence. A student on an approved leave of absence who subsequently is suspended will have the leave rescinded.

When a student is preparing to return to the DNP Program after an approved leave of absence, they must meet with their academic advisor to review their previous plan of study. If appropriate, the plan of study will need to be updated to reflect correct dates and to incorporate any new requirements or program revisions that may have been approved while the student was on leave.

Leave of Absence for Military Service

A student will be granted a leave of absence for the duration of a military service obligation to their country of citizenship. Documentation confirming induction or authorization for active duty is required.

Leave of Absence for Medical Reasons

A student will be granted a leave of absence for medical reasons for a serious physical or mental health condition that prevents continued participation in the Program. A request for a leave requires a written recommendation from a health care provider. The advisor may initiate a request for a leave for medical reasons in the event that the student is incapacitated. For some medical circumstances, students should consider whether a within-semester medical accommodation is more appropriate.

Leave of Absence for Family Necessity or Dependent Care

A student may be required to step away from study for a term or more to take care of an urgent family necessity or to provide dependent care. A student will be granted a leave of absence:

- to take care of a serious circumstance that directly affects a family member, such as a death, serious health condition, financial difficulty, or other critical life situation; or
- to provide care for a dependent incapable of self-care because of age or disability.

For family necessity, “family” is defined according to the University’s Standard Practice Guide (SPG 201.11) to include the student’s spouse or domestic partner with whom the student shares living accommodations and expenses, and, without regard to their place of residence, the child, sibling, parent, grandparent or other related individual whose primary care is the responsibility of the student. For dependent care, a dependent is defined as: a biological, adopted or foster child, stepchild, or legal ward who is either under 18 years old; a family member (as defined above) older than 18 years and unable to provide self-care; or a spouse or domestic partner.

Leave of Absence for Personal Reasons

After completing at least one full term in the DNP program, a student may request a one-term non-renewable leave of absence for personal reasons. A student should request this leave before the beginning of the term for which this leave is requested. A leave of absence for personal reasons may be taken only once during the graduate career, even if the student begins a leave mid-term. A student considering a personal leave is encouraged to discuss other possible arrangements with an OFFICE OF PRACTICE AND PROFESSIONAL GRADUATE PROGRAMS advisor and the Director of Post-Master’s DNP.

Program Time Limits

All DNP degree requirements must be met within 5 years of the term of admission. A student who anticipates exceeding the maximum time limit to degree must submit a petition to the DNP Director. The request must provide clear evidence to support the feasibility of completing all degree requirements within the time extension requested. The DNP Director will review the request with the student’s academic advisor. Generally, time extensions will be for a maximum of 12 months. If the Director supports a time extension, the approval letter will stipulate the terms of the extension regarding the time period and for completing degree requirements. If the request for time extension is denied, the student may appeal the decision with CAASS.

Readmission

The DNP Program is committed to providing an educational experience that prepares graduates for state of the art knowledge and research methods. Individuals who were previously admitted to the Program but have withdrawn voluntarily from active pursuit of their DNP degree requirements are eligible to apply for re-admission consideration. The School of Nursing requires students to be continuously enrolled each fall or winter term. Students, who do not meet this requirement and have not been on an approved leave of absence, must reapply for re-admission consideration.

Individuals who wish to be considered for readmission will need to submit the following to the DNP Program in the School of Nursing:

- A letter of re-application which addresses why re-application is sought, a description of the kinds of activities the applicant has been engaged in since leaving the doctoral program, and a detailed plan and timeline for completing the DNP degree requirements;
- A current CV;
- A goal statement which addresses the student's professional goals and scholarly interests;
- Two letters from faculty, one of which will be from a proposed advisor or chair, supportive of the applicant's re-admission;
- An official copy of the University of Michigan transcript.

After the materials are received, the School of Nursing DNP Advisory Committee will review the reapplication materials. This review will be coordinated by the Director of Post-Master's DNP (who will be non-voting in the re-admission decision). The review process will consider various factors including the applicant's academic standing at the time he/she left the program, the length of time since the applicant has been engaged in coursework, the relevancy of that coursework to the student's current goals, the professional activities the applicant has been engaged in since leaving the DNP program, a fit between the applicant's scholarly interests and a potential mentor on the faculty, and an assessment of what has changed in the applicant's circumstances that will now permit successful re-engagement in DNP studies. A meeting will also be held with the applicant and the review committee to provide any additional information needed for the readmission assessment.

After the DNP Advisory Committee has reviewed all information, a recommendation will be made to support or deny the readmission. The application materials and recommendation will be forwarded to CAASS for review if one or more DNP Admissions criteria are not met. The degree requirements in place at the time of reapplication will apply if the student is offered readmission, including the following as appropriate:

- Readmission to the full standing with a list of the remaining requirements to be met in the student's program plan;
- Identification of any additional coursework that the student will be required to meet;
- Identification of coursework that the student had completed previously but will need to be repeated due to performance issues or lack of currency of content.

Applications for readmission must be completed no later than 6 weeks prior to the term when the student wishes to re-enroll.

Mentorship Meetings

In-person mentorship meetings will be led by the Director of Post-Master's DNP one time per year. Meeting dates and locations will be posted to the CNE CTools site and UMSN website and advertised by other electronic means. These meetings provide an opportunity for all students involved in the CNE and those who are interested in learning more about the CNE to receive guidance regarding the certificate requirements listed above. Auditing of students' requirement completions will also take

place during these meetings. Students should bring materials including transcripts and other paperwork documenting the completion of the requirements to be collected and tracked by the Office of Practice and Professional Graduate Programs.

Chapter

5

Academic Rules, Policies and Procedures

The following academic policies as well as any additional School of Nursing policies and operating procedures relative to student records, publications, grievances, and discipline, are consistent with the federal Family Educational Rights and Privacy Act of 1974 ("FERPA" or the "Buckley Amendment") and the Michigan Freedom of Information Act. Additional information can be found on the [University of Michigan Student Rights and Student Records](#) page of the Office of the Registrar's website and on the [Frequently Asked Questions](#) page of Office of the Vice President & General Counsel website.

School of Nursing Student Code of Academic and Professional Conduct

The University of Michigan, School of Nursing has a Code of Academic and Professional Conduct that all students are expected to follow. Any questions regarding this code should be addressed immediately to relevant faculty, academic advisors, or the Director of Student Enrichment. The complete Code of Academic and Professional Conduct may be found in [Appendix A](#). The student must electronically certify that he or she has received a copy of the code and that he or she will abide by it. The certification process occurs when the student first begins classes and is coordinated by the Office of Practice and Professional Graduate Programs (Grad Office). Proof of certification will be placed in the student's file.

Please Note: The University of Michigan Statement of Student Rights and Responsibilities applies to all students in the realm of non-academic conduct. For the most current version of the statement, see the [Statement of Student Rights and Responsibilities](#) page of the Office of Student Conflict Resolution (OSCR) website.

Plagiarism

The School of Nursing follows the American Psychological Association (APA) citation guidelines. Proper citation of referenced material is required. Not following proper citation guidelines may constitute plagiarism and be subject to academic discipline (see [Appendix C](#) for additional information on plagiarism).

A required resource for APA formatting and citation is the *Publication Manual of the American Psychological Association*, 6th Edition, Washington, DC, by the American Psychological Association. This reference guide is available at the University libraries, local bookstores, and may be purchased online at [APA Style](#). The Shapiro Library [citation guide](#) also contains helpful information about APA style, as well as information about RefWorks.

School of Nursing Technical Standards

A candidate for a nursing degree must possess abilities and skills which include those that are observational, communicational, motor, auditory, tactile, physical, intellectual-conceptual (integrative and quantitative), behavioral, and social. The use of a trained intermediary is not acceptable in many clinical situations in that it implies that a candidate's judgment must be mediated by someone else's power of observation, selection, and assessment. These technical standards are key components of the Nursing academic program.

I. Observation

The candidate must be able to acquire a defined level of required information as presented through demonstrations and experiences in the basic and behavioral sciences. Observation involves visual, auditory, and tactile abilities.

A. Visual

- Observe a patient accurately, at a distance and close at hand within a variety of clinical settings
- Acquire information from oral presentations, demonstrations, observations
- Observe written documents and visualize information as presented in images from paper, films, slides, video, or other media
- Interpret visual and graphic images and digital and analog representations of physiologic phenomena with or without the use of assistive devices

B. Auditory

- Listen to verbal communication to identify and respond to a patient's health status
- Identify and differentiate sounds such as those related to heart, lung, or other bodily functions with or without the use of assistive devices
- Listen to verbal communication to provide care in collaboration with other providers

C. Tactile

- Assess patients, collect data, and provide patient care through touch such as with palpation
- Identify changes in body texture and temperature

2. Motor

The candidate must be able to possess motor skills, including both gross and fine muscular movements, necessary to directly perform diagnostic and interventional maneuvers such as palpation, percussion, auscultation.

- Execute motor movements reasonably required to provide general and emergency patient care such as airway management, cardiopulmonary resuscitation, application of pressure to control bleeding, administer medication, perform health assessments, and other interventions required for care of the patient
- Manipulate a variety of objects using both fine and gross dexterity

3. Communication

The candidate must be able to communicate verbally and in writing.

- Ability to communicate verbally and in writing with maximum accuracy, clarity, efficiently and effectively with patients and their families, other members of the health care team, and faculty within rapidly changing and stressful health settings
- Ability to demonstrate proficiency in keyboarding for documentation

- Ability to perceive and interpret nonverbal communication

4. Intellectual-Conceptual (Integrative and Quantitative) Abilities

The candidate must be able to demonstrate intellectual, cognitive, conceptual abilities in order to provide safe patient care.

- Ability to measure, calculate, reason, plan, analyze, integrate, synthesize, and evaluate complex information for problem-solving
- Comprehend three dimensional relationships and understand spatial relationships of structures.
- Exercise appropriate judgment with analysis of situations and anticipation of consequences

5. Physical abilities

The candidate must demonstrate the physical ability to provide safety for the patient and self.

- Move and transport objects that reflect a range of weights
- Perform physical activities and exhibit mobility required to provide care to patients and families, at times in urgent situations
- Tolerate physically demanding workloads

6. Behavioral and social attributes

The candidate must possess the emotional health required for full utilization of his/her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the care of patients and the development of mature, sensitive, and effective relationships with patients.

- Function effectively and with good judgment under stressful and demanding clinical situations
- Adapt to changing environments
- Display flexibility and function in environments inherent with uncertainties in the clinical problems and situations of patients and others
- Care for individuals in a respectful, sensitive, and effective manner regardless of gender, age, race, sexual orientation, religion, disability, or any other status identified in the University's Non-Discrimination Policy.
- Engage consistently in providing care to patients in rapidly changing, stressful, and demanding environments without current evidence of behaviors of addiction or abuse of, or dependence on alcohol or other drugs that can impair behavior or judgment.
- Exhibit emotional stability that enables full utilization of abilities to engage in safe care to patients and participate effectively with peers, faculty, and other health care professionals
- Demonstrate compassion, integrity, concern for others, and effective interpersonal skills
- Demonstrate interest and motivation in providing health care and interacting with the health care team and faculty

Personal qualities reflected in behaviors that affect the care of patients and the ability to function as part of a team, thus jeopardizing safety, will be assessed during the educational process and considered as required components for progression in the program.

Definitions of Professionalism and Safety

Professionalism

Nursing professionalism is comprised of behaviors, practices, and communication styles that demonstrate core values of nurses working to achieve optimal health outcomes in patients, families, and communities. This includes conduct that applies the principles of altruism, excellence, caring, ethics, respect, communication, and accountability. Students learn these principles through self-assessment, self-reflection, responsible learning, accountability, effective communication and continuous professional engagement.

Safety

Safety is inherent in professionalism. The term *patient safety* means “the prevention of harm to patients.” It includes human factors, teamwork, communication, patient management and clinical performance.

Travel

Students who independently engage in travel and/or volunteer opportunities abroad should not identify themselves as students or representatives of the University of Michigan when doing so.

Expected Student Competencies

Communication is the exchange of ideas, thoughts or feelings by verbal and non-verbal actions. Verbal and written communication includes clear, coherent, timely, honest, concise, and patient-centered communication. They are encouraged to develop pronunciation, pitch and intonation appropriate for the environment. Non-verbal skills include gestures that are appropriate and employ the skill of listening to assimilate information. Cultural awareness builds upon identifying issues to alleviate communication obstacles resulting from health literacy, disparities, authority gradients, cultural differences and language barriers.

Self-awareness is the ability to recognize and look at inner thoughts, feelings and beliefs. Emotional intelligence is the ability to recognize one's own and other people's emotions, to discriminate between different feelings, label them appropriately and then use emotional information to guide behavior. Through self-evaluation and validation of feedback students will reflect upon experiences summarizing accurately strengths and learning needs to build confidence with realistic perspectives about capabilities. Students are held accountable to defend their perspective, including unpopular or unsafe practices.

Self-Care is promoting and maintaining personal well-being. Students enter the nursing program knowing they must take responsibility for their own physical and emotional health. This includes demonstrating sensory capabilities or appropriate compensation and the ability to perform the physical requirements of clinical practice. It is the students' responsibility to acquire adequate rest, nutrition and hydration, and manage personal stress.

Responsible Learning is demonstrated by taking control and ownership for learning. This is displayed by being engaged in academic tasks, persistent in self-learning, seeking feedback and notifying faculty if not achieving course or program objectives. Efforts are made to follow the agency's clinical policies, procedures and principles by adhering to submission of clinical requirements. Students must practice within their scope of knowledge, skills and recognizes personal limitations while working only under the appropriate supervision.

Professional Image is the appearance of an individual or profession outside the discipline. Students are guided to uphold a positive professional image by portraying a compassionate demeanor and demonstrating a respect of others with behaviors that are focused on patient

care and learning. Students entering the program will be cordial to peers and demonstrate flexibility, professional etiquette and civility. They will adhere to the Clinical Uniforms and Dress Code policy or agency's policies along with the Student Code of Academic and Professional Conduct.

Students are accountable to explain and justify their intentions, actions and omissions. Students are guided in their development of professional behaviors yet, are responsible to demonstrate the competencies listed above. Demonstrating professional behavior is required for passing in all course/clinical practice regardless of performance in other areas.

School of Nursing Student Grievance Process

The purpose of the Grievance Process is to provide a mechanism for objective internal review of faculty and staff actions or School committee decisions.

This Grievance Process may be utilized by students enrolled in courses in the School of Nursing who believe these decisions resulted from inequitable and/or discriminatory decision-making procedures or processes. The wisdom of a decision is not a grievable matter. Only the process that is believed to be inequitably applied, within the referent group, is grievable. Implicit in this process is the need for the cooperation, openness, and good faith of all parties involved. Please refer to [Appendix D](#).

Students enrolled in courses in other schools and colleges should utilize the Grievance process within those respective units if there is a grievance regarding courses in those schools.

Committee on Academic Admissions and Scholastic Standing

The Committee on Academic Admissions and Scholastic Standing (CAASS) has the authority to administer academic discipline and grant or deny requests for waivers and modifications of standard academic policies, including progression policies and degree requirements. Committee members are charged with the interpretation and supervision of the school's academic policies. If a student presents extenuating circumstances, CAASS will consider exceptions to standard policy on an individual basis (see section [Extenuating Circumstances](#) for more information).

The purpose of a petition to CAASS is to request an exception to an academic policy or a modification of academic program plan/progression. As a first step, the student must meet with an academic advisor to discuss the matter. If a decision is reached with the academic advisor that a petition to CAASS is warranted, the student will prepare a draft of the petition form and review it with the academic advisor before submission. CAASS meets once per month (unless otherwise noted), during the fall and winter terms, and follows an "ad hoc" schedule during the spring/summer term. Petitions must be completed by all parties concerned and returned with pertinent supportive documentation to the academic advisor no later than one week prior to the scheduled committee meeting.

The Chair of CAASS initiates and mails a letter informing the student of the committee's decision and any stipulations and/or conditions for progression, and a copy is placed in his/her academic file. The letter is mailed (certified mail, return receipt required) to the address on file in Wolverine Access within five business days of the meeting.

The purposes of the Committee on Academic Admissions and Scholastic Standing (CAASS) are to:

1. review and recommend for faculty approval all admission, progression, and graduation policies for the School of Nursing; and
2. act on petitions for exceptions to School of Nursing admissions, progression, and graduation policies.

Students who elect to petition CAASS for a policy exception will need to demonstrate exceptional circumstances as to why there should be a change in their admission, progression, or graduation. The purview of CAASS does not include the changing of course grades.

Disputes about course grades or course performance are addressed with the faculty in that course. The School of Nursing Grievance Policy provides a mechanism for objective internal review of faculty and staff actions or school committee decisions (see [Appendix D](#)).

The appropriate academic administrator, and/or course faculty cannot override a CAASS decision. However, if the student believes she/he possesses additional noteworthy information not presented in the original petition, he or she may provide further explanation in writing to the Chair of CAASS. The Chair of CAASS, the Director of Student Enrichment (who will interface with the Appropriate academic administrator), and an academic advisor in the Graduate Programs Office will discuss the information with the student. If it is deemed that the information presented is not new, the student will be advised that submission of a revised petition is not warranted. If a student is not satisfied with the process used by CAASS regarding his or her revised petition, the student may initiate the grievance procedure (see [Appendix D](#)).

Academic Disciplinary Action by CAASS

Academic disciplinary actions are consistent with established policies and guidelines. Conditions or requirements to be fulfilled are determined on an individual student basis. Any student on academic discipline is urged to contact an academic advisor in the Graduate Programs Office to discuss a plan for academic success. The following are possible disciplinary actions:

1. **Action Pending:** A student will be placed on “Action Pending” if the student’s academic record for a term just concluded is incomplete. The transcript is reviewed again when final grades have been reported or after incomplete grades have lapsed.
2. **Academic Warning:** A student will be sent a letter of Academic Warning if the student has a 3.0 (B) cumulative grade point average, but has achieved less than a 3.0 grade point average in a given semester.
3. **Continued Academic Warning:** If any of the above circumstances occur in the next semester of enrollment of a student on Academic Warning, the student is given the status of “Continued Academic Warning.”
4. **Probation:** A student will be placed on academic probation if a grade of less than “B-” is earned in a course required in the nursing program, or if the student’s cumulative grade point average and/or professional grade point average is/are less than 3.0. For a student to be removed from academic probation, he or she must earn a grade no less than “B-” and repeat the deficient course.

A student on academic probation is required to make a substantial reduction in the honor point deficit, if not remove the deficit completely by the end of the probationary semester of enrollment in the School. The CAASS may also require that a specific number of honor points be earned, or that a cumulative 3.0 grade point average be earned, depending upon the circumstances in the individual case.

5. **Ineligible to Register in the School of Nursing:** The CAASS requires a student to withdraw from the School of Nursing when a student has failed three (3) required courses and/or is unable to achieve a cumulative 3.0 grade point average in the following terms after they are placed on academic probation. If it is determined, after grades are available to the School of Nursing, that a student is not eligible to be in classes for which they are registered, he or she will be disenrolled from said classes.

Notification of Academic Disciplinary Action

The department chair mails a letter to the student's local address on file in Wolverine Access informing him or her of the decision and any stipulations and/or conditions for progression, and a copy is placed in his or her academic file.

Extenuating Circumstances

Extenuating circumstances are unforeseen events in which have a) prevented a student from attending a substantial number of classes, b) affected his or her ability to study or attend clinical, c) resulted in assessment deadlines being missed, or d) adversely affected performance.

Extenuating Circumstances are those that are:

- Severe and exceptional; and
- Unforeseen or unavoidable; and
- Close in time to the request for exception, or where the student can demonstrate that the circumstances continued to have an impact on their academic performance

Exceptional circumstances include serious illness, hospitalization, accidents, injuries, serious personal problems, or emotional difficulties beyond the student's control.

Requests for exceptions must be verified by documents that may include, but not limited to: letter(s) from health care provider(s), accident reports, and/or hospital records.

An exceptional circumstances exception does not guarantee that the student will be able to progress as planned.

An exception may prevent the student from fulfilling course and progression requirements to the extent that they are unable to achieve required learning objectives. This type of situation will be evaluated by faculty, the Director of Student Enrollment, and the appropriate academic administrator.

Transfer of Credit

Students in the DNP Program can transfer a maximum of nine credits to meet program requirements. Courses are considered transfer credit if they are taken outside of the School of Nursing at any institution outside of the University of Michigan (U-M). Any course outside of the DNP Program requirements that a student wishes to take to meet requirements for the DNP must receive approval from the Director of Post-Master's DNP. All transfer courses must have been completed at a grade of a "B" or better for transfer and documented with an official transcript. When seeking approval of a course for equivalency, a syllabus must be submitted with the request. School of Nursing faculty teaching this course will be asked to review the syllabus for equivalency and to provide that assessment to the Director of Post-Master's DNP. It is required that a request to enroll in a course not offered by the DNP Program at U-M be received and approved prior to registration for that course.

If a required DNP course was taken outside of U-M, and the student has transferred in the maximum of 9 credits, the student may petition the DNP Program for equivalency. If the course is approved as equivalent, and the maximum of 6 credits has been met through transfer, the student will not be required to repeat the required DNP course but will need to take an elective course to meet total degree credit requirements.

Once a transfer course has been approved, the student needs to submit an official transcript (with final grade posted) to the Graduate Programs Office: School of Nursing, 400 N. Ingalls, Room 1160, Ann Arbor, MI 48109. This way any issues in delivery and processing can be avoided.

Coursework and Grading Policies

Compliance Policy

Before beginning any School of Nursing course, including all didactic, clinical and lab components, all students in all programs are required to satisfy all health and safety requirements. In order for a student to be considered in full compliance, all of these requirements (with the exception of the flu shot) must be valid the entire academic year. This includes fall and winter terms and may include spring term, summer term and/or spring/summer term if students are enrolled in School of Nursing courses. None of these requirements may expire at any time during the academic year.

If these requirements are not fulfilled by the deadline each year, students will be disenrolled from all nursing courses for the term and they will have to wait until the following term to reenroll. In order to be eligible to receive overrides for the following term, students must be 100% in compliance. In addition, students in clinical may be required by a clinical agency to meet additional compliance requirements.

For more detailed information about the UMSN Compliance Policy, including a list of the Graduate Compliance Requirements, see [Chapter 5](#) and the [Compliance Requirements](#) section of the UMSN website.

School of Nursing Course Grading Scale

A+	= 97-100%	B+	= 87-89.9%	C+	= 77-79%	D+	= 67-69%
A	= 93-96.9%	B	= 83-86.9%	C	= 73-76.9%	D	= 63-66%
A-	= 90-92.9%	B-	= 80-82.9%	C-	= 70-72.9%	D-	= 60-62%
						E	= <60%

Transcript Notations and Grade Point Average

Letter Honor
Grade Points

A+	4.3
A	4.0
A-	3.7
B+	3.3
B	3.0
B-	2.7
C+	2.3
C	2.0
C-	1.7
D+	1.3
D	1.0
D-	0.7

Pass/Fail

P (passed)	credit, no honor points
F (failed)	no credit, no honor points

Satisfactory/Unsatisfactory

S (satisfactory)	credit, no honor points
U (unsatisfactory)	no credit no honor points

Credit /No Credit

CR (credit)	credit, no honor points
NC (no credit)	no credit no honor points

Incomplete/Work in Progress

I (incomplete)	no credit, no honor points
Y (work in progress, approved courses only)	no credit no honor points

Official Audit (VI)

VI (visitor)	no credit, no honor points
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Miscellaneous Notations (NR)

NR (no report)	no credit, no honor points
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Withdrawal/Drop

W (official withdrawal)	no credit, no honor points	(A notation of ED and NR for a graded election has the same effect on the grade point average, as does an E.)
ED (dropped unofficially)	no credit, no honor points	

A notation of P, F, CR, NC, S, or U does not affect a student's term or cumulative grade point average. A notation of I or Y, if not replaced by a passing grade, eventually lapses to E and, for graded elections, is computed into the term and cumulative grade point averages. The highest term and cumulative Grade Point Average that a student can earn is a 4.0.

Course Assignment Policies

All assignments are expected on the designated due dates. Extensions must be negotiated with the faculty prior to the scheduled date of submission. Late submission of assignments may result in grade reduction or loss of credit. All assignments are to be completed by the end of the academic term.

Course Examination Policies

All examinations are to be taken at the scheduled times. Students unable to attend an examination due to illness or emergency are responsible for notifying the course instructor prior to the examination period. Documentation substantiating the illness or emergency may be required. Make-up options for examinations, including denial for exam make-up, are provided at the discretion of the faculty. Final examination periods are determined by the University Calendar Committee and approved by the Regents. The School of Nursing follows the university's final exam schedule and related policy for determining final examination timing. All exams will be held in the regularly assigned room unless otherwise indicated by the instructor.

Incomplete ("I") Grade Policy

A faculty member gives an incomplete grade only when a student is in good academic standing (at least a "B" grade) in the course and there is unfinished work. Progression requirements apply regardless of the Incomplete Contract.

A student who needs an incomplete must contact the faculty member. The student and the faculty member should discuss a plan, including a schedule, for completing the remaining work prior to the conferral of an "I". This discussion should be converted to a written Incomplete Contract and signed before the last class meeting.

An Incomplete grade must be made up before the last day of classes of the second full term beyond the term in which the "I" mark was recorded (excluding spring/summer).

An Incomplete appears on the transcript as an "I" and will not be calculated into the student's grade point average until the deadline has lapsed. Once the work is completed, the final course grade is posted alongside the "I" (which remains on the transcript) and the earned grade is computed into the grade point average. An "I" grade not finished by the incomplete deadline lapses to an "E" grade. In such cases, no degree credit is earned and the course is then computed as an "E" in the term and cumulative grade point averages. An unfinished Incomplete, for courses elected on a non-graded basis ("Pass/Fail," "Credit/No Credit," etc.), lapses to "Fail" or "No Credit" but does not affect the term or cumulative grade point averages.

Minimum Grade Requirement

All required courses, as well as cognate courses, must be completed with a grade of “B-” or higher. Courses must be repeated when the minimum grade of “B-” is not earned.

School of Nursing Masters and DNP students are required to meet a minimum grade of “B-” in this and all School of Nursing Courses. To maintain satisfactory academic standing, Masters and DNP students must make satisfactory progress toward their degrees and have a minimum cumulative grade point average (GPA) of B (3.0 on a 4-point scale). Students will be required to repeat all required courses receiving a grade lower than a “B-”. Programs and departments may have separate requirements for grades necessary to maintain satisfactory academic standing. Students who fall below this average are placed on academic probation. In some cases, students will have to petition the Committee on Academic Admissions and Scholastic Standing (CAASS) to determine progression in the program. Courses in which grades of “D” or “E” are earned cannot be used to fulfill degree requirements (see [Section 4](#) of *Graduate School Academic Policies*).

Academic/Clinical Course Warnings

Students are given written warning by their faculty instructors if they are failing a required course, if there is concern about the student’s progression, or if there is concern about the student’s professional behavior. The warning will list specific areas in which the student is failing to meet course objectives, clinical competence, or professional behavior, and will list specific steps the student must take to obtain a passing grade. The warning is discussed with the student who may add comments and then signs the warning and receives a copy. A copy of the warning is sent to the academic advisor who places it in the student’s academic record. A copy of the warning is also sent to the Associate Dean of Professional Graduate Programs and relevant course faculty. Academic/clinical course warnings may be given at any time during the course as determined by the course faculty.

Academic Standing/Discipline

The Committee on Academic Admissions and Scholastic Standing (CAASS) and the governing faculty of the School of Nursing approved the following Scholastic Standing Policy.

Students whose cumulative grade-point average for overall course work and/or School of Nursing courses falls below a "B" (3.0) in a given term or half term will be placed on probation for the following term or half term, or may be denied permission to reregister. A student whose cumulative grade-point average for overall course work and/or School of Nursing courses falls below a "B" for two successive terms or half terms may, upon the recommendation of his or her Department Chair and the consent of the Graduate School, be granted a final opportunity to correct the scholastic and/or academic deficiency. A student who is not making satisfactory progress in his or her program, or who has failed to demonstrate the ability to succeed in his or her plan of studies, may be required to withdraw from the University.

A student whose cumulative grade-point average for overall course work and/or School of Nursing courses falls below a "B" for three successive terms or half terms will not be permitted to enroll again, and will be required to withdraw from the University.

A student whose cumulative grade-point average is below a "B" or who has not satisfactorily met all program requirements cannot be recommended for a degree. When a student is not meeting program requirements, the Department Chair will determine whether the student will be permitted to continue in the program and, if so, what further requirements must be met. A maximum of three credits of independent study such as N697 will be counted in computing the School of Nursing grade-point average.

The Office of Practice and Professional Graduate Programs administers computation of grade-point average for School of Nursing courses and formal notification of probationary status. The Graduate Academic Advisors tracks and formally notifies students of deficiency in the overall grade-point average, and notifies students within three weeks of a new semester starting of any changes in Academic Standing.

Academic Assistance

Students who are having academic difficulty should contact the faculty teaching the course early on. This allows the opportunity to make a plan for improvement, and determine strategies that may be helpful. Students should also contact the Graduate Programs Office Advisors and their faculty lead for additional resources and assistance. A delay in contacting faculty or Graduate Programs Office for assistance may make it difficult to ultimately do well in the course.

Disability Statement

The University of Michigan promotes the full inclusion of individuals with disabilities as part of our commitment to creating a diverse, multicultural community. It is the policy of the University of Michigan to comply with the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, and other applicable federal and state laws that prohibit discrimination on the basis of disability. The University will provide reasonable accommodations to qualified individuals with disabilities upon request.

Consistent with the American Disabilities Act of 1990, the University of Michigan complies with federal and state laws that affect qualified persons with disabilities. The School of Nursing does not discriminate on the basis of physical handicaps. However, any applicant with a significant physical or emotional problem is advised to make this fact known to the School so that appropriate faculty and/or administrator can determined whether or not the student will need assistance in meeting the requirements of the clinical nursing courses.

The School of Nursing's policy and practice is to provide equitable educational opportunities for students with documented disabilities in all programs and activities, including internships or field placements. Students with documented disabilities who require accommodations must register with the Office of Services for Students with Disabilities (SSD). Students will receive a letter detailing their specific needs from SSD. The student must present this letter to each of their faculty and provide sufficient lead-time to allow the requested accommodation(s) to be provided. Original documentation of disability will be kept in the Office of Student, Academic, & Multicultural Services, Room 1160. If students do not follow aforementioned procedure, they may not be eligible for an accommodation in that course.

The School of Nursing is committed to providing equal and integrated access for students with disabilities. If you need help with assessing your need for special accommodations, please contact your faculty advisor for guidance and assistance.

Chapter

6

Compliance

Compliance Policy

Before beginning any School of Nursing course, including all didactic, clinical, and lab components, all students in all programs are required to satisfy all health and safety requirements. These health and safety requirements are listed on the [School of Nursing website](#). If you need assistance with meeting these requirements, health care services are available for students at [University Health Service](#).

In order for a student to be considered in full compliance, all of the School of Nursing compliance requirements (with the exception of the flu shot) must be valid for the entire academic year. Compliance requirements may not expire at any time during the academic year.

All compliance requirements, except for the flu shot, must be uploaded to Castle Branch and approved by Castle Branch before the end of the day on July 1. Flu shots for the 2017-2018 academic year must be uploaded to Castle Branch and approved by Castle Branch by October 25, 2017. Failure to fulfill the compliance requirements by the deadlines will be charged the following fees:

July 1: \$200 fee

August 1: Additional \$100 fee

Students in clinical may be required by a clinical agency to meet additional compliance requirements. Additional requirements may include (but are not limited to) additional student fees for fingerprinting, an ACE account, or a valid driver's license/state ID. Students will not be allowed to begin clinical experiences if the additional compliance requirements are not met by the agencies' deadlines, which may be different than the UMSN deadline. Students who do not meet agency deadlines for additional compliance requirements may lose their clinical placements.

Students must notify Graduate Compliance of any changes to their criminal record after submitting the criminal background check*, including arrests. Graduate Compliance should be notified within three business days of any arrests, plea bargains, sentencing, convictions, or other criminal activity. In addition, issues with a student's criminal background check may also prevent that student from being able to sit for certification(s)/licensure. The inability to become certified/licensed may prevent a student from working in his/her desired area. The School of Nursing is not able to guarantee that any student will qualify for certification(s)/licensure.

*Please note that it is possible that some activity reported in a student's criminal background check may prevent that student from being placed in the appropriate clinical settings required to complete the program and, therefore, may result in the student being withdrawn from that course. In these cases, the student should promptly consult with Graduate Clinical Placement to explore alternative placements or degree programs. Under certain circumstances, students may not be eligible to graduate from the School of Nursing.

Graduate Student Compliance Requirements List

The University of Michigan School of Nursing Compliance Policy requires all School of Nursing students taking any course to be in full compliance, regardless of the course. This includes courses without a clinical component.

Compliance documents are managed by a third party vendor - www.castlebranch.com. All students must create an online account and upload all compliance documents into the online account. **New** graduate students should use package code UB59 to order a background check and a new account.

All compliance documents are due on **July 1** each year (except the flu vaccine). This means that no compliance documents may expire before the last day of classes in April, which is April 23 for the 2018-2019 academic year.

DUE BY JULY 1 EVERY YEAR	
Physical Examination Form	A licensed health care professional must complete and sign the school form. The school form must be used.
	In order for the document to be valid for the entire 2018-2019 academic year, the examination cannot be completed before April 23, 2018.
Technical Standards Form	Both pages of the signed form must be uploaded to Castle Branch.
	In order for the document to be valid for the entire 2018-2019 academic year, the document cannot be completed before April 23, 2018.
Cardiopulmonary Resuscitation Certification (CPR)	ONLY the American Heart Association BLS for Healthcare Providers Course will be accepted. This certification is valid for two years.
	The front and back of a signed certification card OR an official digital certificate of completion must be uploaded to Castle Branch.
	The certification must be valid for the entire 2018-2019 academic year.
Tuberculin Skin Test (also called TB or PPD) or blood test	Complete documentation must be uploaded to Castle Branch and includes the date that a TB skin test was administered, the date that it was read, and negative results OR a lab report showing a negative QuantiFERON TB Gold or T-SPOT blood test and test date. Blood tests are valid for three years.
	A positive result requires a clear chest x-ray. A lab report is required. Chest x-rays are valid for three years.
	In order for the test to be valid for the entire 2018-2019 academic year, the test cannot be completed before April 23, 2018.

Nursing License	<p>A current, valid RN license obtained from any state within the USA must be uploaded to Castle Branch.</p> <p>International students must hold a nursing license from a recognized jurisdiction. If admitted to the University of Michigan School of Nursing, students must obtain a U.S. nursing license by the time their program starts in September. To begin this process, the most important thing to do is obtain CGFNS Certification for the State of Michigan.</p>
DUE ONCE BY JULY 1 PRIOR TO YOUR FIRST FALL TERM OF ENROLLMENT	
Hepatitis B	<p>The Hepatitis B vaccine is a series of three doses.</p> <p>Complete documentation must be uploaded to Castle Branch and includes the dates of the first, second, and third doses of the vaccine OR a lab report for a positive Hepatitis B titer.</p>
MMR (Measles, Mumps, and Rubella)	<p>The MMR vaccine is two doses.</p> <p>Complete documentation must be uploaded to Castle Branch and includes the dates of the first and second doses of the vaccine after 12 months of age OR a lab report for a positive antibody titer for each of the three components (Measles, Mumps, and Rubella).</p>
Varicella Zoster (Chicken Pox)	<p>The chicken pox vaccine is two doses.</p> <p>Complete documentation must be uploaded to Castle Branch and includes the date of the first and second doses of the vaccine OR a lab report for a positive Varicella titer.</p>
Tdap (Tetanus, Diphtheria, and Pertussis)	<p>Documentation of a Tdap vaccine at age 11 or after is required.</p> <p>Tdap vaccines are only valid for ten years, Td booster may be required prior to first term or at some point during enrollment.</p>
Criminal Background Check	<p>A criminal background check must be completed through Castle Branch at www.castlebranch.com. This background check is included as part of the UB59 package. Additional background checks may be required by clinical placement sites.</p>
Handbook Certification	<p>The signed form must be uploaded to Castle Branch.</p>
Authorization to Disclose Information Statement	<p>Both pages of the signed form must be uploaded to Castle Branch.</p>
Flu Shot	
Drug Screen	<p>Drug screens (10-panel) are available in Castle Branch. Instructions on how to obtain drug screens will be sent directly via email.</p>

School of Nursing Technical Standards

The School of Nursing faculty are responsible for determining, at any point in the student's academic program, whether they have demonstrated appropriate levels of skills and abilities. The faculty has the right to request expert consultation as deemed appropriate. Students who fail to demonstrate appropriate levels of skills and abilities may have their progression interrupted until they are able to demonstrate skills at the appropriate levels. If the faculty determines that a student cannot meet the appropriate levels even when reasonable accommodations are made, students may be dismissed from their program.

School of Nursing Drug Policy

[The Graduate Nursing Student Drug Testing Policy and Procedure](#). The use of "alcohol and other substances potentially places patients, the public, and nurses themselves at risk for serious injury or death" (International Nurses Society on Addictions, 2017). The University of Michigan School of Nursing (UMSN) is committed to the safety of patients, students, faculty, and staff. The UMSN is also dedicated to the promotion of health of its community members including those with physical, psychiatric, and substance use concerns and establishes consistent policies and procedures that foster safety and health. The UMSN supports wellness, restoration and rehabilitation of students to promote optimal personal and professional functioning. The UMSN supports students in caring for themselves in order to safely care for others. In an effort to promote patient safety and to facilitate early identification and intervention for students with substance use and related disorders, as well as compliance with mandates of affiliated clinical agencies, it is the policy of the UMSN to test for substance use among all of its students annually. For more information regarding School of Nursing Drug Policy and Procedure, please see [Appendix B](#).

Chapter

7

Clinical Placements

Clinical Locations

Clinical and observational experiences for nursing students take place in a wide range of health agencies both in and outside of Ann Arbor. Examples of clinical placements may include hospitals, physician's offices, federal agencies, professional organizations, city and county health departments, and schools.

As a result of the various clinical course locations, nursing students may be required to travel up to 150 miles for clinical and observational experiences. ***Please note: Students are responsible for their own transportation to clinical sites.*** Students also are required to provide their own automobile insurance. Although students will need to drive to clinical locations, they should be aware that parking in Ann Arbor and around the School of Nursing is extremely limited.

Onboarding

Onboarding is composed of various institutional requirements. For a successful placement, students must complete all onboarding items by communicated deadlines. If onboarding items are not completed by the communicated deadlines, students will be removed from clinical placement for the term and have to wait until the following term. **Student onboarding requirements must be valid during dates of clinical placement/term.**

There may be additional agency-specific mandatory requirements the student must satisfy that are identified by placement sites to assure adequate baseline, training and information for students before entering their facilities.

All graduate students must complete agency-specific mandates **before** the first clinical day. ***Nursing students are not allowed to provide patient care if mandates are not complete.***

Attendance

All missed placements including excused and unexcused absences must be made up.

An **unexcused** clinical absence is absence from the scheduled clinical activity. Examples of this include:

- Not calling in advance
- Not showing up for clinical
- Taking personal vacations when scheduled
- Taking a day off to study when scheduled

- Missing clinical because compliance and/or mandatories are not completed

It is the responsibility of a student to promptly inform his/her preceptor in the event of an absence or illness. If students in a clinical course cannot reach their preceptor, the student should notify graduate clinical placements office and request assistance.

When calling to report an illness or absence, give the location the name of student, name of preceptor to whom the message should be given, and anticipated duration of illness.

Should a student miss multiple clinical days or a significant component of their required clinical or seminar experiences for any reason, the Associate Dean of Practice and Professional Graduate Program may be notified by the course faculty. The course faculty may decide if the student is allowed to complete the course or should withdraw from the course. This decision will be made on a case-by-case basis considering factors such as nature and centrality of the missed experiences, opportunity to make up the experience/time, current standing in the course and projected length of time absent. An Incomplete ("I") grade will only be assigned at the discretion of the course faculty. If there is doubt about the student's ability to meet the course requirements, a failing grade may be assigned at any point in the term.

The student is responsible for informing the course faculty regarding anticipated prolonged illness or situations resulting in an interruption of the program and/or involving convalescence at home. For extended absences, the course faculty will consult with the Associate Dean of Practice and Professional Graduate Program regarding the student's academic standing.

Occasionally, students will have special health concerns that could affect their ability to safely provide patient care or that would jeopardize the student's health and safety. Students are required to report any type of health concern affecting patient care or student performance. Examples include: Unstable diabetes, seizures, being immune compromised, contagious infections, clinical depression.

The ability of the student to have a safe experience is determined by the School of Nursing, their health care provider, and agency requirements and policies.

Arrangement of Clinical Placements

Clinical placements are a combined effort that involves several offices, including the Graduate Clinical Placement Office, your Program Leads, as well as system level legal contracts. Therefore, students must use clear communication related to placements to ensure that contracts are in place and all parties are aware of changes or irregularities. However, in general, if you have any questions, Please contact Anne Marie Garbinski, Clinical Placement Administrator, at 734-764-0659 or email her at amgarb@umich.edu.

Do make sure to begin onboarding training as soon as soon as you have been notified of a placement rather than waiting into the semester.

Don't wait to get started on your pre-placement activities. You cannot receive your placement until you have completed them. Please note that many of these activities will take effort to complete. Failure to complete them in a timely manner will jeopardize your placement. It is best to start them as soon as possible. Pre-clinical or onboarding obligations may include the following:

- 6-12 hours of webinar training on such topics as charting and HIPAA
- A separate background check and/or fingerprinting
- The payment of additional processing fees

Do contact your preceptor immediately once you have been assigned a placement to arrange placement dates and times, even if the placement begins mid-semester.	Don't contact a placement site until you are cleared to do so.
Do alert the Clinical Placements office immediately of any change in your placement.	Don't alter an established placement without specific approval from faculty and Clinical Placements.
Do check your umich.edu e-mail. Information will be sent only to your umich.edu e-mail account, not to personal accounts. Review your umich.edu e-mail frequently for communications regarding placements and compliance. (<i>Note:</i> If you have a placement at MICHIGAN MEDICINE, you will also have a med.umich.edu account for the duration of your placement. You must check both accounts regularly.	Don't voice complaints to your preceptors. Instead, discuss any issues with your faculty or with the clinical placement administrator.
Do provide your phone contact information so that Clinical Placements can contact you with last-minute communications regarding alterations in placement.	Don't speak, text, or e-mail poorly about your preceptor or placement. You never know who is listening or who might read a text or e-mail. You could endanger future placements for other students.
Do keep in mind that your preceptor is doing you a favor—you should not cancel on them or request frequent schedule changes.	Don't vent frustrations and concerns on social media sites such as Facebook.
Do remember that you represent the School of Nursing. We want preceptors and agencies to form positive impressions of our students and programs.	

Repetition of a Clinical Course

There may be restrictions on which clinical placements are most suited to a student repeating a clinical course. These restrictions will be communicated to the student by the Associate Dean of Practice and Professional Graduate Program after consultation with the involved course faculty. When repeating a clinical course, registration is offered only on a space available basis.

Clinical Uniforms and Dress Codes

A clinical placement dress code has been established in recognition of the fact that the mode of dress does affect the establishment of a rapport and working relationship with patients, families, and other care providers. Please reference Nurse-Patient Relationships & Professional Conduct sections of the Student Code of Academic and Professional Conduct, located in [Appendix A](#).

Dress code for any specific agency and in any specific program will be communicated to you by your clinical faculty and the agency during clinical on-boarding. However, in general, nursing students are expected to wear professional attire when giving nursing care, unless a different policy is specifically defined by the clinical unit. Lab coats may be worn over business casual attire. A student must abide by any uniform or dress codes set by the agency in which the student is having a clinical experience.

School of Nursing Clinical Uniforms and Dress Code

Acceptable Clothing

- Scrubs (matching tops or bottoms), properly fitted.
- White lab coat
- Dress of appropriate length for bending and stretching activities worn with white or neutral hose
- Religious, cultural or medical head coverings for men and women (e.g. yarmulke, hijab)

Shoes

- Soft-soled shoes with closed toe and closed low heel, without mesh all white, black or brown athletic shoes are acceptable. Socks or stockings are required.

Hair

- Hair must be up off the collar and pulled up and back, so as not to fall onto the patient, or clean/sterile fields when bending over to provide care. Beards and mustaches must be neatly trimmed. At the discretion, of course instructors or agency employees, students with facial hair may be asked to wear a beard/mustache cover and comply with agency policies. Hair accessories cannot be used if long enough to touch the patient or if they could potentially harbor bacteria.

Appearance

- Artificial or gel nails, no visible offensive or neck or face tattoos or any visible body piercings (except for one piercing per ear) are not allowed. Nail polish, if used, should be clear or pale pink/white coated. Nails are to be clean and of a length that could not scratch patient during care. No excessive jewelry around necks, wrists or hands, which could harbor bacteria or pose a safety hazard to the student or patients, may be worn.

Identification

- Students must wear University of Michigan identification at all times and any name pin or other identification given by the clinical agency.

Inappropriate Attire

Inappropriate attire, including t-shirts, tank tops, denim, shorts, skirts more than 2" above the knee, tight fitting or suggestive clothing, flip flops, sneakers, sandals, athletic wear including hoodies, leggings, bare midriffs or low-cut garments (low-cut necklines or low-rise pants), should not be worn to any clinical placement. With clinical uniforms, professional, or casual business attire, make-up should be moderate and fragrance should be minimal. All clothing should be clean and in good repair. Students must follow the dress code of the agency when the agency has more restrictions. Students will be asked to leave the clinical site if faculty or agency personnel have determined the attire is not appropriate.

Confidentiality and Use of Medical Records

The Health Insurance Portability and Accountability Act (HIPAA) govern the use and release of a patient's personal health information (PHI) also known as "protected health information". It is imperative that all students and faculty with any access to a clinical setting comply with HIPAA rules and regulations. This includes understanding HIPAA and training in HIPAA that meets the clinical agency's requirements. Students also must follow agencies policies regarding use of and access to electronic medical records.

Use of Technology and Social Media in a Clinical Setting

Any technology, tool, or on-line space in clinical agencies cannot be used for personal business. This applies to social media platforms. Students must follow clinical agency policies regarding use of technology or social media. At times, a clinical setting may allow use of technology or on-line space or use of social media for work purposes. They are only to be used as they relate directly to patient care or specified agency activities.

- Agency computers cannot be used for personal business such as checking e-mail or Facebook.
- Any personal communication such as cell phone use or texting must be done outside of agency clinical areas on the student's personal time.
- Posting or discussing any information about faculty, staff, other students or external clients (i.e. patients and families) on social media or on-line space is not permitted. Non-compliance with policies regarding the use of technology and social media may affect course grades and result in the violation of the student Code of Academic and Professional Conduct, up to and including disenrollment from the School of Nursing.

Accidents During Clinical Experiences

When a nursing student is injured (including a needle stick) during a clinical experience, she/he must immediately contact the clinical instructor and/or the nurse/manager in charge of the unit. The clinical instructor and the student should together fill out and submit an injury report.

In most settings, the students may be sent to Student Health Services or Employee Health Services; or, if the injury is serious, the student may be sent to an Emergency Room. The student may also be asked to fill out paperwork specific to the agency at which the injury occurred.

Additionally, the instructor should provide a copy of all paperwork to Graduate Clinical Placements. A copy will be placed in the student's file.

Malpractice Insurance

The University provides all students enrolled in the University of Michigan, School of Nursing with malpractice insurance. The University of Michigan is self-insured. Blanket coverage is in effect for enrolled students in academic activities. Students who also hold professional licensure may wish to obtain additional malpractice insurance from either the American Nurses' Association or the National Student Nurses' Association.

If students have questions about the University's insurance program, they may contact:

[U-M Risk Management Office](#)

Phone: 734-764-2200

Pregnancy

A student who is pregnant may continue in clinical practice as long as her health status is satisfactory and she is able to complete her clinical assignment. A note from her health care provider indicating safety of participation in clinical activities may be required. For the safety of the student who is pregnant, she must not enter where radioisotopes or x-ray therapy is being administered. Students who are pregnant should consult with their faculty member well in advance of their clinical assignment. Clinical agencies may have policies that determine the placement of students during pregnancy; assignments will be made accordingly.

Chapter

8

Registration Information

Wolverine Access

This is a web based information system used to access and update your student information online by using [Wolverine Access](#). You can change your address and phone number, register for class; and view your class schedule, grades and financial information.

Schedule of Classes

The [Schedule of Classes](#) on the Office of the Registrar's website lists the courses offered by academic year and term. For general information on enrollment/registration (e.g., term withdrawal, add/drop procedures, registration appointments), tuition and fees, and ordering transcripts, please visit the main webpage for the [Office of Registrar](#).

How to Register

To register, a student in the School of Nursing must:

1. Check the RO's [Schedule of Classes](#) for a list of the courses offerings in a semester as well as specific course details (e.g., days, time, location, instructor). Course descriptions for School of Nursing Master's courses are available in [Appendix F](#) and on the UMSN website's [Nursing Courses](#) section.
2. Register via Wolverine Access during your University designated date and time.
3. Academic advisors will provide overrides for students to register for the Nursing courses based on the set program plan.

Students who do not complete the above procedures for registration are not assured places in nursing courses. Failure to register prior to the first day of the particular term results in a "late registration fee." Students should register as soon as possible after their registration appointment to ensure space in a class.

Drop/Add Deadline

After the drop/add deadline, students must obtain approval from the School of Nursing to make any schedule changes. Contact the Graduate Programs Office Advisors UMSN-GradAdvisors@med.umich.edu to request the paperwork. For deadline information, please see the [Academic Calendar](#).

Verification of Enrollment

If a student needs a letter verifying his/her enrollment in the School of Nursing, or certificate of “good standing” or “full-time student”, he/she should contact the academic advisors in Graduate Programs Office UMSN-GradAdvisors@med.umich.edu and include their name, student ID number, and any details about the request.

Chapter

9

Graduation and Licensure Information

Applying for Graduation

All students must apply for graduation on [Wolverine Access](#). The School of Nursing Office of Practice and Professional Graduate Programs (Grad Office) will notify students via e-mail of the deadline to apply for graduation. Students must have completed the online graduation application and have met all degree requirements by the end of the term of expected graduation to be eligible to graduate.

University of Michigan Commencement

The University of Michigan holds two graduation ceremonies each calendar year, one in April or May and one in December. April/May graduates participate in April/May graduation. August or December graduates participate in one ceremony of their choice. For more detailed information, see the University of Michigan's [Commencement](#) page

School of Nursing Commencement Ceremony

The School of Nursing holds one commencement ceremony in late April or early May of each year. If a student chooses to participate in the UMSN commencement ceremony prior to completion of her/his degree, the commencement program will indicate when the degree will be awarded.

Information will be provided to graduating students and posted on the UMSN's [Graduation](#) page. Specific School of Nursing commencement ceremony dates will be posted closer to the time of date of the event.

Graduate Licensure and Certification

Graduates of master's-degree programs may be eligible to take examinations in their specialties and gain certification in those fields.

Credentialing Information for Graduate Students

Certification and credentialing requirements will vary based on the program completed.

American Nurses Credentialing Center (ANCC)

Website: www.nursecredentialing.org

Certifications Offered	Credential
Adult-Gero Acute Care NP	AGACNP-BC
Adult-Gero Primary Care NP	AGPCNP-BC
Family NP	FNP-BC
Pediatric Primary Care NP	PNP-BC
Adult-Gero CNS	AGCNS-BC

Applicants must be completing a graduate degree – Master’s, post-graduate or doctoral. Application requirements include: Final, degree-posted transcripts, Validation of Education form. Students may be authorized to sit for exam after all coursework is complete, prior to degree conferral. Results will be retained until ANCC receives the final transcript.

American Association of Nurse Practitioners & American Academy of Nurse Practitioners (AANP)

Website: www.aanp.org & www.aanpcert.org

Certifications Offered	Credential
Family NP	FNP-C
Adult-Gero Primary Care NP	AGNP-C
Adult Nurse Practitioner (retiring Dec 2016)	AGNP-C
Dual-Certified ANP and GNP	A-GNP-C

Applicants must be completing a graduate degree – Master’s, post-graduate or doctoral. Application requirements include: Final degree-posted transcript or interim transcript showing to-date completed academic coursework. Applicants may begin process as early as six months prior to program completion, but candidates cannot sit for exam until all coursework is completed with grades.

For DNP Students: Applicants may sit for the National Certification Examination in the area of their specialty AFTER all of the advanced practice clinical requirements of their DNP program are completed. To be eligible to test, DNP candidates must have completed all of their NP program’s didactic courses and all of the faculty-supervised clinical practice hours required for that program. Under these circumstances, an applicant’s certification is not released until an official transcript showing DNP degree conferral date is received by AANPCP.

Pediatric Nurse Certification Board (PNCB)

Website: www.pncb.org

Certifications Offered	Credential
Primary Care Pediatric NP	CPNP-PC
Acute Care Pediatric NP	CPNP-AC

Applicants must be completing a graduate degree – Master’s, post-graduate or doctoral with a pediatric specialty. Application requirements include: Final degree-posted transcript. Applicants may be authorized to sit for exam after all coursework is completed and graded, prior to conferral of degree.

American Midwifery Certification Board (AMCB)

Website: www.amcbmidwife.org

Student Application / Verification Forms:

Certifications Offered	Credential
Certified Nurse Midwife	CNM

Application requirements include: Transcript showing satisfactory completion of graduate degree (Final transcript with degree conferral posted) Attestation by director of nurse-midwifery program that candidate is performing at the level of a safe, beginning practitioner

Appendix A

Student Code of Academic and Professional Conduct

I. Introduction

The education of the students at the University of Michigan School of Nursing (UMSN) is based on the concept that integrity, sense of responsibility, and self-discipline are inherent to the profession of nursing. The responsibility of the individual student to sustain high ethical standards is parallel to the concept that the professional nurse must be accountable for professional standards in the practice of nursing (published in the [American Nurses Association Code for Nurses with Interpretive Statements](#), 2015). The continuation and enhancement of ethical standards within the academic community and nursing profession are the individual responsibility of each student and faculty member. Mutual respect and trustworthiness between the faculty and students promotes optimal learning.

The students at UMSN are expected to exhibit behavior appropriate to the profession of nursing. They must assume personal responsibility for being in physical and mental condition to provide safe nursing care and for the knowledge and skills necessary to give this care.

I. Applicability

The Student Code of Academic and Professional Conduct (“Conduct Policy”) applies to all students enrolled in the School of Nursing and includes programs, events and activities affiliated with, sponsored by or sanctioned by the School of Nursing. In addition, the Conduct Policy covers all student nonacademic and extracurricular activities regardless of whether the activity takes place on or off campus that have an adverse impact on the university, the School of Nursing, faculty, staff, students, patients, clinical staff, or impacts fitness for the profession and eligibility for licensure.

Nursing students are also required to comply with the [Statement of Student Rights and Responsibilities](#).

Any questions regarding the conduct policy should be addressed immediately to the Resolution Officer, who will interface with the Associate Dean for Practice and Professional Graduate Programs. Any questions regarding the meaning of any provision of this Conduct Policy will be decided by the Dean of the School of Nursing. The Dean’s decision as to any questions of interpretation is final.

A. Definitions of Unacceptable Behavior

The following behaviors are examples of violations of the Conduct Policy. This list is not intended to be all-inclusive of behaviors that violate basic ethical standards expected of Nursing Students. In addition, attempts at misconduct as well as completed acts are violations of the Conduct Policy.

1. Plagiarism

Taking credit for someone else’s work or ideas regardless of the media, stealing others’ results or methods, copying the writing of others without proper citations, quotation marks, or other forms of proper acknowledgment, or otherwise taking credit falsely.

2. Cheating

Using or attempts to use unauthorized notes, study aids, technology, and/or information from another person on an examination, report, paper, or other evaluative document; unauthorized altering of a graded work after it has been returned, then submitting the work for re-grading; and allowing another person to do all or part of one's work and to submit the work under one's own name.

3. Falsification of data

Dishonesty in reporting results, ranging from sheer fabrication of data, improper adjustment of results, and gross negligence in collecting and analyzing data, to selective reporting or omission of conflicting data for deceptive purposes.

4. Falsification of data or information to university officials, faculty members, staff, or clinical areas

Dishonesty in reporting verbally or in written material, false data or information.

5. Aiding and abetting dishonesty

Providing material, information, or assistance to another person with the knowledge or reasonable expectation that the material, information, or assistance will be used to commit an act that would be prohibited by this Code or that is prohibited by law or another applicable code of conduct.

6. Violating instructions regarding completion of assignments

Although independent study is recognized as a primary method of effective learning, at times students benefit from studying together and discussing home assignments and laboratory experiments. When any material is to be turned in for inspection, grading or evaluation, it is the responsibility of the student to ascertain what cooperation, if any, between them, is permitted by the instructor.

7. Falsification of academic records and official documents

Without proper authorization, altering documents affecting academic records, forging signatures of authorization, or falsifying information on an official academic document, election form, grade report, letter of permission, petition, clinical record or any other official University document.

8. Violating computer, technology or social media use policies

Violating the University's [Proper Use of Information Resources, Information Technology, and Networks at the University of Michigan](#) policy (Standard Practice Guide, 601.07) and/or the Information and Technology Services [Guidelines for Implementing the Proper Use](#) policy that define proper and ethical use of computers at the University of Michigan.

9. Misuse of Technology

Misuse of technology including cell phones, iPads, laptops, etc. for cheating.

10. Providing nursing care in an unsafe or harmful manner

This includes carrying out a procedure without competence or without the guidance of a qualified person; willfully or intentionally doing physical and/or mental harm to a client; exhibiting careless or negligent behavior in connection with the care of a client; refusing to assume the assigned and necessary care of a client and failing to inform the instructor and nursing staff with immediacy so that an alternative measure for that care can be found.

11. Disrespecting the privacy of a client

This includes using sufficient information about a patient, (e.g. full name, last name, or position) in written assignments and/or patient data of any sort (e.g. computer generated

forms that will be removed from the clinical area) such that the patient could be identified; discussing confidential information in inappropriate areas, such as elevators; discussing confidential information about a patient with third parties who do not have a clear and legitimate need to know; violation of the Health Insurance Portability and Accountability Act of 1996 (HIPAA); and referencing patients on social networking sites and devices.

12. Falsifying patient records or fabricating nursing care or patient experiences

This includes fabrication in written materials and verbal reports for the clinical area as well as written material and verbal reports for the School of Nursing.

13. Failing to report omission of or error in treatment or medications

Failure to report the omission or error to the appropriate people including clinical staff, clinical administration, and School of Nursing faculty.

14. Using drugs and alcohol

Using, possessing, selling or distributing illicit drugs (including prescription drugs) or alcohol; illegally using, selling, possessing, or distributing illicit drugs or alcohol; or using prescribed, over the counter, or illicit substances in such a manner as to impair one's judgment or performance as a nursing student, including being in a class or clinical setting under the influence of alcohol, illegal drugs, or prescribed drugs inconsistent with the prescribed use.

15. Commission of a crime

Engaging in illegal or criminal activity that would impact the student's ability to obtain maintain a professional license or employment in the nursing program. The results of criminal proceedings will not be determinative of proceedings under this Conduct Policy.

16. Other professional misconduct

Violation of the ANA Code of Ethics for Nurses is unacceptable. Nursing students are expected to "maintain professional, respectful, and caring relationships with colleagues and others, with a commitment to the fair treatment of individuals, to integrity-preserving compromise, and to resolving conflict... This standard of conduct includes an affirmative duty to act to prevent harm. Disregard for the effects of one's actions on others, bullying, harassment, intimidation, manipulation, threats, or violence are always morally unacceptable behaviors." ([ANA Code of Ethics for Nurses with Interpretive Statements](#), 2015, pg. 9)

17. Disrespectful verbal and written communication

Students are expected to be respectful and considerate in verbal and written communication with faculty, staff, clinical staff, patients, and other students.

18. Disruptive behavior

Obstructing or disrupting classes, team projects, talks or other presentations, or other activities or programs of the school or other parts of the University obstructing access to school community assets or to similar resources in other parts of the University. Excluded is any behavior protected by the University's policy on "[Freedom of Speech and Artistic Expression](#)" (Standard Practice Guide, 601.01).

19. Sexual and other unlawful harassment

This includes not only sexual harassment, but also hazing, stalking, repeatedly sending e-mails, making phone calls or transmitting documents that are uninvited and unwanted, making threats, and any other wrongful conduct that seriously interferes with the work or study of any member of the school community, guest or any person with whom the offender is interacting in connection with any school program or activity. The University's definition of

sexual harassment can be found in the [University of Michigan Policy and Procedures on Student Sexual and Gender-Based Misconduct and Other Forms of Interpersonal Violence](#).

20. Obstructing the investigation of a possible violation of this code

Including making dishonest or misleading statements, either orally or in written form, including e-mails; other falsification of information; altering, destroying, or deleting relevant documents, files or e-mails; and any other act that hinders an investigation.

B. Reporting Procedures for an Alleged Infraction

All members of the Nursing community – faculty, administrators, staff and students – have a responsibility to report any reasonable suspicion that a student has violated this Conduct Policy. A report must be immediately made to the Resolution Officer who will interface with the appropriate academic administrator. Anyone not sure of whether or not to report a suspicion should consult with the Resolution Officer before making a decision not to formally report the suspicious behavior.

All faculty members are required to report all incidents of academic misconduct (e.g., plagiarism, cheating, falsification of data, violation of nursing standards) that occur in their course to the Resolution Officer. The faculty member may impose a sanction within the course only after consulting with the Resolution Officer. In such cases where the sanction is limited to penalties within the course, and there is agreement among the faculty, student, and Resolution Officer, the matter can be considered resolved. It is important that all faculty report all misconduct so that there can be fairness in the application of the Conduct Policy across the entire student body.

C. Preliminary Inquiry

1. If there is an alleged violation, the faculty member, student, or staff reporting the possible violation will submit a written description of the potential violation and the circumstances to the Resolution Officer within ten (10) business days.
2. The Resolution Officer will provide the accused student written notice of the allegation of misconduct within ten (10) business days of receipt of the written report alleging misconduct.
3. The Resolution Officer will meet with the accused student as soon as possible after the notice of alleged misconduct has been received by the student, but no later than ten (10) business days. In this meeting, the Resolution Officer will (a) inform the student of the nature of the allegations; (b) explain the hearing process; and (c) explain the student's options.
4. After the preliminary meeting with the student, the Resolution Officer will meet with the faculty member and the student within ten (10) business days. A letter containing the findings of this meeting and sanctions for the student to complete (if applicable) will be sent to the student within ten (10) business days of the meeting. The possible outcomes are listed below:
 - a. the relevant parties determine that no violation occurred and the matter is resolved,
 - b. the accused accepts responsibility for the alleged violation and sanctions and either the student or the Resolution Officer can refer the matter to CAASS,
 - c. the accused accepts responsibility for the alleged violation and the sanctions, as determined by the Resolution Officer and reporting faculty, and signs a statement indicating his or her agreement, or

- d. the accused signs a statement indicating he or she does not accept the responsibility for the alleged violation nor the sanctions as determined by the Resolution Officer and faculty, and the matter is referred to CAASS for a hearing by Resolution Officer.
5. If the matter is referred to CAASS for a hearing, the Resolution Officer, in conjunction with the appropriate academic administrator, will determine whether the student can proceed in the program until CAASS has issued their findings. This will be considered and determined on a case-by-case basis.

D. Hearing

If the matter is referred to CAASS, the Chair of CAASS will be notified by the Resolution Officer and a hearing will be held. The hearing is conducted by a three-person panel (“hearing panel”), established by the Resolution Officer and comprised of two (2) faculty members (at least one being a member of CAASS) and one student representative. The Resolution Officer will select one of the two faculty members to serve as chair of the hearing panel.

If a student has concerns about potential bias of a member of the hearing panel, the student can submit a written request to the Resolution Officer, with rationale, for substitution of another member. Resolution Officer will approve or disapprove the request and that decision is final.

Hearing Participant Roles

The below table is to serve as a guideline for a basic CAASS hearing. Actual participants and roles may vary.

Participant	Role Description During the Hearing
Director of Student Enrichment	Observer
Student	Active Participant
Reporting faculty member(s)	Active participant
Hearing panel	
Faculty panel member (chair)	Principle facilitator
Faculty panel member	Active participant
Student panel member	Active participant
Academic advisor (Grad Office)	Observer
Witness(es)	Participant (one called at a time and present only during witness portion of hearing)
Personal advisor (to the student)	Observer (provides support and advises the student; not an active participant)

Hearing Procedures

1. No later than ten (10) business days before the hearing, the accused student and the reporting faculty must submit, in writing, to the Resolution Officer:
 - a) all documents that each party would like the hearing panel to consider, and
 - b) a list of all relevant witnesses whom they would like to have submit testimony before the hearing panel.
 - c) written testimony of witnesses, if they are not available

The accused student may invite one personal advisor to the hearing. However, the role of the personal advisor is to support and advise the student, not to

participate in the proceedings. If the accused student intends to have a personal advisor accompany him or her, the accused student must submit the name of the personal advisor to the Resolution Officer and the student must state whether the advisor is an attorney.

- a) No later than five (5) business days before the hearing, the Chair of CAASS and/or the Resolution Officer will provide each party with a hearing packet that includes: all documentation that has been submitted for review by the student and reporting faculty,
 - b) the list of expected attendees, including hearing panelists, witnesses, and personal advisor, and
 - c) any relevant information about the hearing.
2. All expected attendees (i.e., any additional witnesses and/or personal advisor) must be identified and communicated, in writing, to the Resolution Officer no less than three (3) business days prior to the hearing. If additional attendees are identified, an updated list of attendees will be distributed to hearing participants.
 3. In addition to hearing testimony from the witnesses identified by the student and the reporting faculty and/or Resolution Officer, the hearing panel may, at its discretion, hear testimony from any other party whose testimony it deems relevant to the proceeding, including other witnesses and course faculty. The hearing panel may also review any other documents or evidence that it deems relevant to the proceeding.
 4. The accused student will have an opportunity to appear before the hearing panel to present his or her case and remain present while all testimony and information is presented to the hearing panel. The accused student may review all documents considered by the hearing panel and may question witnesses who appear before the hearing panel. The accused student may also present his or her own evidence and witnesses.
 5. Persons reporting the violation have the right to be present, provide relevant information, and make recommendations regarding the sanctions.
 6. The hearing panel may conduct the hearing even if the accused student is absent and there have been reasonable attempts to contact the student, and will make its findings and recommendations based on the information presented to the hearing panel.
 7. If the accused student fails or declines to appear before the panel, the panel will proceed to hear the case and make findings and recommendations without the student's participation.
 8. The hearing panel may limit any testimony based on redundancy or lack of relevance.
 9. The hearing will be closed to the public and will be recorded. A party to the proceeding Participants in the hearing may request a copy of the recording. The hearing panel will deliberate in private.
 10. All recordings of proceedings will be controlled by the School of Nursing. No court reporters, stenographers, videographers, or similar professionals are

permitted without the prior consent of the School of Nursing. Records and documents that will be available, in advance, to all parties may be redacted to protect the privacy rights of individuals who are not directly involved in the hearing process.

11. After hearing the case, the hearing panel will deliberate in private. The vote of the majority of the hearing panel members, including the panel chair, will determine whether the student is found responsible for the alleged violation, and sanctions will be determined by the hearing panel with input from the reporting faculty and the Resolution Officer. The hearing panel's decision that the accused student is responsible for an alleged violation will be the sole discretion of the hearing panel if, based on the totality of the evidence presented, it is more likely than not that the violation occurred. The chair of the hearing panel will prepare a written report containing factual findings and stating any sanctions to be imposed.
12. The hearing panel's determination will be communicated in writing by the chair of the hearing panel to the Resolution Officer, who will send a letter of findings and sanctions to the student by email and certified letter, delivered by the postal service to the local address on file in Wolverine Access. Copies will be distributed to the appropriate faculty member, the Chair of CAASS, the Resolution Officer, the Associate Dean for Practice and Professional Graduate Programs, and the student's record. This will complete the process unless the student appeals the decision (see Appeals below).
13. The decision of the hearing panel is effective immediately. If the student plans to make an appeal, the student has the option of asking the Resolution Officer for a delay in implementation of the sanction until the appeal process is completed. The Resolution Officer's decision as to whether or not to delay the implementation of the sanction is final.
14. In situations in which there was a serious alleged violation or serious violation of professional standards affecting the safety or well-being of other students, faculty, clinical staff, or patients, the Resolution Officer and the Associate Dean for Practice and Professional Graduate Programs may take appropriate emergency action. Such actions may include but are not limited to not allowing the student back into a clinical agency until the matter has been addressed through the process, suspension, or disenrollment.

E. Appeals

Within five (5) business days of receiving the written notification of the hearing panel's decision from the Resolution Officer, the student may submit a written appeal of the decision or sanction (or both) to the full Committee on Academic Admissions and Scholastic Standing (CAASS) and the Resolution Officer. Appeals must be based on at least one of the following arguments:

1. There were violations of procedure that seriously compromised the investigation and/or conclusions.
2. The evidence clearly does not support the findings.
3. The sanctions are excessive relative to the violation.
4. There is significant new evidence not reasonably available at the time of the investigation.

The Chair of CAASS will determine if the appeal meets the above conditions. If not, the Chair of CAASS notifies the student within ten (10) business days and the matter is ended. If there is evidence that the appeal should be reviewed, the full CAASS will review the written appeal. However, the members of the hearing panel in Section D of the policy will not participate in the review of the appeal. The Chair of CAASS will issue a written report regarding the full CAASS decision within twenty-one (21) business days of receiving the appeal. The decision of the CAASS is final and no further appeals are allowed.

F. Sanctions

Each incident and each individual involved is unique, and all mitigating circumstances will be considered with each violation. The following list is an example of the type of sanctions that may be imposed and is not intended to be all-inclusive. A combination of sanctions may be imposed. Documentation of violations and sanctions will become a permanent part of the student record. Possible sanctions include:

1. **Educational project:** Completion of a class, workshop, or project to help the student understand why his or her behavior was inappropriate and/or how to avoid a future violation (e.g., a workshop on ethical behavior).
2. **Service:** Performance of one or more tasks designed to benefit the school or the nearby community and to help the student understand why her or his behavior was inappropriate.
3. **Warning:** A formal reprimand informing the student in writing that he or she has violated the code and that future violations will be dealt with more severely.
4. **Grade change:** A lowering of the student's grade, up to and including failure (E, F, No credit, or U).
5. **Additional course work:** The completion of additional course work or clinical experience.
6. **Disciplinary probation:** Designation of a period of time during which the student will not be in good standing with the school. The terms of the probation may involve restrictions of student privileges and/or may delineate expectations of behavior. Consequences may also be spelled out if the student fails to meet the terms. A record of the probationary period will be included in the student's academic file.
7. **Transcript notation:** A notation on the student's official transcript will indicate that the student is "Not in Good Academic Standing" as a result of an academic honor code violation.
8. **Withholding a degree:** Withholding of the student's degree until stated sanction requirements have been met. There may be a deadline set for meeting the requirements which, if not met, will result in the student's loss of eligibility to receive the degree at any time in the future.*
9. **Suspension:** Temporary removal of a student from the program for a specified or unspecified period, which will be permanently noted on the transcript. There can be stipulated conditions for re-admission to the student's program as well as a time limit for meeting those stipulations to be eligible to receive a degree in the future.*
10. **Expulsion:** Permanent dismissal from the program, which will be permanently noted on the student's transcript, including the reason for expulsion.*

11. Rescinding a degree: Annulment of a degree previously awarded by the School of Nursing.**

In addition, the School of Nursing may withhold a School of Nursing degree until the hearing process or sanctions are satisfactorily completed.

G. Confidentiality and File Retention Policy

Records created under this Conduct Policy are governed by the same confidentiality and file retention policies applicable to other student records.

H. Waiver of Deadlines

All deadlines, as provided for in this policy, may be waived at the discretion of the Director of Student Enrichment, appropriate academic administrator, or Chair of CAASS. Requests for extensions or waiver of deadlines should be submitted in writing to the appropriate person, depending on the stage in the process. The Director of Student Enrichment, appropriate academic administrator, or Chair of CAASS may, on his or her own initiative or in response to a request of a party, alter deadlines when it is in the best interest of all parties to do so.

Revised and approved by faculty April 21, 1999.

Revised and approved by faculty May 14, 2003.

Updated and approved by Faculty May 19, 2010, for implementation spring/summer term 2010, and to continue in effect thereafter unless and until altered or revoked by faculty.

Updated August 2015.

Appendix B

School of Nursing Undergraduate and Graduate Drug Testing Policy and Procedure

The University The use of “alcohol and other substances potentially places patients, the public, and nurses themselves at risk for serious injury or death” (International Nurses Society on Addictions, 2017). The University of Michigan School of Nursing (UMSN) is committed to the safety of patients, students, faculty, and staff. The UMSN is also dedicated to the promotion of health of its community members including those with physical, psychiatric, and substance use concerns and establishes consistent policies and procedures that foster safety and health. The UMSN supports wellness, restoration and rehabilitation of students to promote optimal personal and professional functioning. The UMSN supports students in caring for themselves in order to safely care for others.

In an effort to promote patient safety and to facilitate early identification and intervention for students with substance use and related disorders, as well as compliance with mandates of affiliated clinical agencies, it is the policy of the UMSN to test for substance use among all of its students annually.

All Students

All students enrolled at UMSN who participate in clinical and or research activities must complete an annual drug screening test.

- Students must provide a viable urine specimen to be tested for substances, consistent with industry standards in the health care field on dates specified by the UMSN.
- Some clinical site guidelines may be more stringent than industry standards and require 12 panel drug screening tests.
- Refusal to provide a specimen for drug testing will be considered a positive drug test and subject to the established procedures for positive tests.
- In special circumstances, the UMSN may request the collection of an alternative specimen such as blood or hair.
- Testing must occur at a facility specified by the UMSN.
- Testing will be at the expense of the student.
- The following may be screened for including but not limited to: amphetamines, barbiturates, benzodiazepines, cocaine, fentanyl, hydrocodone, marijuana, methadone, methaqualone, opiates, oxycodone, phencyclidine (PCP), propoxyphene and tramadol
- Drug tests are reviewed by the Medical Review Officer (MRO) retained by the compliance vendor. MROs may access the Michigan Automated Prescription (MAPS) or alternatives as indicated, to corroborate the existence of a legitimate prescription for the students. For claims related to purported prescription medications, e.g. benzodiazepines, opioids, the students will sign any and all releases of information (ROI) as requested by the MRO to allow for communication with the identified prescriber and to facilitate fact-finding by the MRO. The MRO will make a determination regarding the legitimacy of any prescriptions or evidence of illicit substance use. Students who do not provide ROI will be treated as if the screens are positive.
- Clinical agencies must also approve placements for students with positive drug screens or the placement will be cancelled. If the MRO cleared the positive test, then that documentation along with the health provider’s note documenting the prescription use must also be sent to the Clinical agency for review and clearance for placement. If the placement is not approved, another placement option will be considered for that individual. Agencies that are members of the ACEMAPP placement system require that they be informed of positive drug screens.

- To ensure confidentiality, one undergraduate and one graduate liaison within the UMSN will be identified as the contact people to receive positive drug screen reports and will convey that information to the appropriate program Associate Dean.
- Any clinical or research related activity will immediately be suspended pending the outcomes of an inquiry.
- The drug screen results and details of these or related findings remain the sole responsibility and privilege of the UMSN and for sake of confidentiality. The results are maintained within the compliance documentation system maintained by the vendor and are not placed in the student academic files. Results of the screen are not specifically reported but all external and internal communication would indicate that the student is “not in compliance” with requirements for clinical placement or research activity. However, as stated earlier, the positive results would be shared with the clinical or research agency per agency guidelines if the MRO clears the student for placements.
- The student will be interviewed by the Associate Dean and any other UMSN officials relevant to the situation and referred for a substance use evaluation to a facility and/or health provider professional specializing in substance abuse treatment, as specified by the UMSN.
- The student will be responsible for any expenses related to the substance use evaluation and treatment.
- The student must be evaluated for substance use by the health professional and must sign a ROI allowing the evaluator to report findings and recommendations for treatment related to the substance use to the Associate Dean of the student’s respective program at UMSN.
- If the student refuses to obtain a substance use evaluation or sign a RIO allowing the UMSN access to recommendations from the evaluation, this will result in the inability to continue in the clinical or research areas in any affiliated agency until these are completed.
- The Associate Dean or designee will review the recommendations and make a determination regarding the student’s ability to continue their clinical or research activities at that point in time. Consideration will be given to the nature of the substance use, impairment, treatment recommendations, and affiliated agency requirements.
- Students for whom no treatment recommendations are made will be referred to an education program related to substance use such as those on alcohol or marijuana use.
- In the event that the results of the substance use evaluation indicate need for treatment, the UMSN will require that the student sign a ROI from the health professional conducting the treatment. The UMSN will request recommendations from the health provider as well as a negative drug screen in order for the student to return to any clinical or research activity in an agency.
- A return to any clinical placement or research activity in an affiliated agency will require a negative drug screen and satisfactory recommendations by the health care provider. The student must also meet with Technical Standards (LINK) as stated in the UMSN Undergraduate and Graduate Student Handbooks of Academic Policies and Procedures.
- Students who have had a positive drug screen, which was not cleared by the MRO, and those with a positive drug screen and subsequent intervention must submit to random drug screening for one year at times designated by the UMSN. Another positive drug screen will initiate the steps of the drug policy procedure again. Subsequent positive tests and subsequent delays in completing program requirements may result in an inability to complete the program and can be considered a violation of the Student Code of Conduct.

Students with RN Licensure

- A student who is a licensed Registered Nurse and who has a positive drug screen test that is not cleared by the MRO will be offered an opportunity to self-report to the Michigan Health Professional Recovery Program (HPRP)* for subsequent evaluation and treatment recommendations and may be allowed to resume his or her nursing education under the following circumstances:

- Provision of any and all appropriate ROIs between the HPRP, the MRO, and UMSN
 - Adherence to all restrictions, e.g. access to opioid medications for a specified period of time, as determined by the HPRP and conveyed to a designated UMSN liaison
 - Full participation in random drug screens, the results of which will be reported to the MRO and UMSN liaison
- If an RN licensed student refuses a drug screen or provides a positive test that is not cleared by the MRO and declines to self-report to the HPRP and follow treatment recommendations fully, then UMSN may suspend indefinitely the enrollment and participation of the student in any or all courses, clinical placements, or research settings, pending positive resolution at the discretion of the UMSN
 - In the event that an RN licensed student has enrolled and successfully participated in a structured monitoring programs and suffers a lapse or relapse, then communication will ensue between the UMSN and HPRP and a determination will be made on a case-by-case basis regarding an appropriate response.
 - If an RN licensed student participates in the HPRP, the UMSN will follow the treatment recommendations from the health provider that may include activities such as monitoring the student while in the practice setting and observing for impairment**.
 - The RN licensed students' ability to practice or conduct research activities safely must be established by a specialist in addictions.

*The Health Professional Recovery Program (HPRP) is a State of Michigan program administered through a contract with the Michigan Department of Licensing and Regulatory Affairs, Bureau of Health Care Services, which supports the recovery of its participants so that they may safely return to practice and protect the safety of the general public.

** Impairment- the reduced ability of an individual to perform duties while acting in the scope of educational or research responsibilities for the UMSN, while on-call or while treating or offering treatment advice for patients or research participants. Examples of behaviors that suggest possible impairment include but are not limited to: loss of balance, stumbling, staggering, leaning on objects for support, red or glassy eyes, pupillary changes, unkempt appearance, and odor of alcohol, observed to be in possession of or using substances.

Appendix C

School of Nursing Student E-Mail Group Guidelines

The University of Michigan School Academic Requests Department creates and maintains student e-mail groups. Important information is disseminated to students via these groups. New students are added to the appropriate group when they enter the School of Nursing (UMSN). Only students' uniquename@umich.edu address is used in these groups. If students choose to forward their mail to another account, they are responsible for ensuring that their e-mails are being received in this other account. Academic Request Department will not be responsible for any information not received from e-mails sent to the UMSN student body e-mail groups that may be of importance to students, including scholarship, employment, event and class information.

A listing of [UMSN Student Email Groups](#) is available on the UMSN website's Current Students page.

To verify the e-mail groups that your Uniqname is listed in, follow these steps:

1. Go to the MCommunity directory at <https://mcommunity.umich.edu/>
2. Click on "Log in"
3. Log in with your Uniqname and password
4. Type your Uniqname in the "Search" box and select your name from the search results
5. Click on the "Groups" tab

This will display a listing of all e-mail groups in the MCommunity directory that include your Uniqname as a member and that you will be receiving e-mail from.

Students should not share USMSN student e-mail distribution lists with external parties who wish to contact students. Instead students should refer all external parties to School of Nursing Front Desk at UMSN-FrontDesk@med.umich.edu so that information can be distributed if appropriate. Student also should contact Graduate Programs Office about problems with School of Nursing user groups.

Students **are required** to observe the following guidelines on the use of e-mail groups:

School of Nursing e-mail groups **may NOT** be used to:

- Promote activities/events that do not directly involve or benefit the students of the University of Michigan's School of Nursing or that promote consumption of alcohol or other potentially harmful activities.
- Promote outside business activities or charitable organizations supported by individual students.
- Advertise items/services (sporting tickets, apartments, etc.) for sale/wanted. Students are advised to utilize the appropriate venue for these items.

Tips for successful group e-mails:

1. Target your address list carefully. Too broad a distribution is a form of spamming and will simply annoy most people who receive it. For example, if your message is for Undergraduate students, do not use the sn-allstudents group which sends to nursing graduate students as well.
2. Write a meaningful subject line.
3. Keep the message focused and readable – the use of bullets and numbering helps!
4. Avoid attachments – use links / URLs to websites when possible.
5. Avoid using "Reply All" when responding to an e-mail sent to a group.

6. Identify yourself clearly.
7. Proofread...then proofread again to ensure your message is clear / concise and that there are no spelling or grammar mistakes within the text.
8. Do not use all capital letters (IT LOOKS LIKE YOU ARE SHOUTING)
9. For event related e-mails, send just one reminder e-mail 1-2 days before the event.
10. Use good judgment and common sense. It is up to each member to ensure that these groups are used in a respectful and beneficial manner. Students are expected to display maturity, integrity and mutual respect in all UMSN interactions. Inappropriate, disrespectful, aggressive, or threatening emails may be considered in violation of the Student Code of Academic and Professional Conduct.

E-mail error messages ('over quota', 'user unknown', etc.) for members of the Graduate Programs Office-managed groups are received by the Graduate Programs Office in the event of a problem with the student's e-mail address. The Graduate Programs Office will contact the student if there is a problem with his/her e-mail and request the student to take the necessary steps to prevent e-mail error messages. Correcting e-mail address errors is the responsibility of the individual student and questions/requests for help regarding errors should be directed to Information Technology Central Services (ITCS) at the University of Michigan at online.consulting@umich.edu or by calling 734-764-4357 (4-HELP).

Appendix D

Plagiarism

“Plagiarism is the act of using another person’s ideas or expressions in your writing without acknowledging the source...to plagiarize is to give the impression that you have written or thought something that you have in fact borrowed from someone else.”

This and other quotations used below are all taken from section 1.6 (pages 21-25) of the MLA Handbook for Writers of Research papers by Joseph Gibaldi and Walter S. Achert, 3rd edition. New York: The Modern Language Association, 1988. At Reference Desk. PE 1478.G43 1988.

What Is The Penalty for Plagiarism?

“Plagiarism often carries severe penalties, ranging from failure in a course to expulsion from school.”

Do I Have To Footnote Every Fact?

“If you have any doubt about whether or not you are committing plagiarism, cite your source or sources.”

What If I Put Someone Else’s Ideas in My Own Words?

“Other forms of plagiarism include repeating someone else’s particularly apt phrase without appropriate acknowledgment, paraphrasing another person’s argument as your own, and presenting another’s line of thinking as though it were your own.”

Why Does Plagiarism Matter?

Careers and reputations have been damaged by findings of plagiarism. Journalists have been fired from the Sun-Times (M. Fitzgerald, 1990), the Wall Street Journal (D. Lazare, 1991) and the Nashville Tennessean (M. Fitzgerald, 1989). A Harvard psychiatrist resigned after a finding of plagiarism against him (McDonald, 1988) and Art Buchwald sued Paramount Pictures (and won) over the idea for the plot of Coming to America (McDowell, 1990).

Fitzgerald, M. (1989, September 16). Rash of plagiarism: Nashville Tennessean fires an editor, reprimands another. *Editor & Publisher*, 15.

Fitzgerald, M. (1990, June 23). Sun-Times drops columnist over plagiarism. *Editor & Publisher*, 17.

Goldman, P. (1982). Malcolm X. *Dictionary of American Negro Biography*. New York: W.W. Norton & Co., p. 422.

Lazare, D. (1991, January-February). The Kandell case: Plagiarism at The Wall Street Journal? *Columbia Journalism Review*, 6.

McDonald, K.A. (1988, December 7). Noted Harvard psychiatrist resigns post after faculty group finds he plagiarized. *The Chronicle of Higher Education*, A1.

McDowell, J. (1990, January 22). He’s got their number, almost, a writer scores against a studio but where’s the money? *Time*, 50.

Is This Plagiarism?

Read this passage from the article on Malcolm X by Peter Goldman (1982) in *Dictionary of American Negro Biography*.

“In prison Malcolm was introduced by his younger brother Reginald to the teachings of the Lost-Found Nation of Islam, the sect led until 1975 by Elijah Muhammad and known popularly as the

Black Muslims. Malcolm quickly became a convert, took the Muslim “X” in place of the “slave name” Little, shed his past and entered upon his own reeducation, beginning by copying words out of a dictionary from A to Z. He was ordained a minister after his release, and over the next twelve years he became the best known and most effective evangelist of the Nation of Islam, heading its Harlem mosque, organizing dozens more temples from Connecticut to California, building its following from 400 to perhaps 10,000 registered members and countless additional sympathizers.”

Are the following paragraphs correctly done or has some plagiarism taken place?

1. Malcolm was introduced by his younger brother to the teachings of the Nation of Islam while he was in prison; he became a convert, exchanged the Muslim “X” for the “slave name” Little and eventually became an ordained minister.

Loose paraphrasing of the author’s words with no credit given for the ideas is plagiarism.

2. As the Nation of Islam’s most famous evangelist, Malcolm built its membership from 400 to as many as 10,000.

The statistics given are not common knowledge and are not credited. Plagiarism!

3. Malcolm quickly became a convert, took the Muslim “X” in place of the “slave name” Little, shed his past and entered upon his own reeducation, beginning by copying “words out of a dictionary A to Z.”

Still plagiarized! While the writer used a footnote to indicate the source, she does not use quotation marks to indicate that the sentence was lifted in its entirety. Chances are that an abrupt change in writing style will be noticeable to a critical reader.

4. The “best known and most effective evangelist of the Nation of Islam”, Malcolm had been introduced to the Lost-Found Nation of Islam, known as the Black Muslims, by his younger brother while he was in prison; ordained a minister after his release, he was instrumental in the growth of the Nation of Islam over the next 12 years (Goldman, 1982, p. 422)².

The direct quote is in quotation marks but the reference does not appear until the end of the sentence, indicating that both those specific words and other facts are Goldman’s.

Permission to reprint from: Lynn Westbrook, University of Michigan Undergraduate Library, 764-7490, July 5, 1994. Modified to reflect APA style, July 2000.

Appendix E

School of Nursing Student Grievance Process

I. Introduction

The purpose of the Grievance Process is to provide a mechanism for objective internal review of faculty and staff actions or School committee decisions. Students should use this Policy to address the following concerns/issues:

1. Discriminatory¹, unfair, arbitrary or capricious treatment by faculty, staff, or committee.
2. Research misconduct or plagiarism of student intellectual property by faculty or staff.
3. Failure to accommodate verified disabilities.
4. Violation of the School of Nursing or University Policy (e.g. student records policy)

A student's disappointment or disagreement about a **grade or course placement** is not a grievable matter unless the student brings forth specific information in support of the grounds for grievance listed above. A decision made by a **school committee, including the Committee on Academic Admissions and Scholastic Standing, CAASS**, is not grievable unless the student brings forth specific new information that supports the basis for a grievance as listed above.

Students enrolled in courses in other schools and colleges should utilize the Grievance Process within those respective units if there is a grievance regarding courses in those schools.

In cases where a student's complaint or grievance may be heard or reviewed in more than one university forum, the student may have the matter heard or reviewed in one forum of his or her choice.

Student resources include their academic advisors, the University Ombudsperson, and the Resolution Officer. Faculty may consult with their unit representative.

II. Grievance Process

A. Initial Steps

1. The student should meet with the faculty, staff member, or committee chair within ten (10) business days after the incident in question to try to resolve the matter. In regards to a grievance related to a faculty or staff member, if the student does not find that the matter is resolved, the student should seek an appointment with the faculty member responsible for leading or directing the course (where applicable) or staff supervisor within ten (10) business days after meeting with the faculty or staff member to discuss

¹ Students may also choose to pursue claims of unlawful discrimination or harassment in compliance with the University's [Nondiscrimination Policy Statement](#).

The University of Michigan, as an equal opportunity/affirmative action employer, complies with all applicable federal and state laws regarding nondiscrimination and affirmative action. The University of Michigan is committed to a policy of equal opportunity for all persons and does not discriminate on the basis of race, color, national origin, age, marital status, sex, sexual orientation, gender identity, gender activities, and admissions. Inquiries or complaints may be addressed to the Senior Director for Institutional Equity, and Title IX/Section504/ADA Coordinator, Office of Institutional Equity, 2072 Administrative Services Building, Ann Arbor, MI 48109-1432, 734-763-0235, TTY 734-647-1388. For other University of Michigan information call 734-764-1817.

the matter.

If the grievance is in regard to a school committee, the student should make an appointment within ten (10) business days with the chair of the committee involved in the matter.

2. If the student does not find that the matter is resolved, the student should meet with the Resolution Officer within ten (10) business days of meeting with the faculty member responsible for leading/directing the course or the committee chair. The Resolution Officer will interface with the Associate Dean for Practice and Professional Graduate Programs. The Resolution Officer may request a separate meeting with the faculty member or committee chair involved prior to a meeting with both student and faculty.
3. If, at this point, there is no resolution, the student may elect to begin the formal grievance process.

B. Formal Grievance Process

Step 1: Written Grievance: The Written Grievance initiates the Formal Grievance Process. The student must submit a written grievance to the Resolution Officer, requesting a grievance hearing. In order to move forward, the written grievance must include:

- a) the specific reason for the grievance as it relates to one of the four issues noted in Section I,
- b) circumstances surrounding the situation,
- c) any mitigating factors, and
- d) specific requested outcomes of the grievance

The Written Grievance shall be submitted within ten (10) business days following the date of the meeting with the Resolution Officer.

Step 2: Respondent's Statement: The Respondent (faculty member, staff member, or committee chair) must submit a written response to the Resolution Officer within ten (10) business days after receipt of the Written Grievance.

Step 3: Grievance Hearing: The grievance hearing will be scheduled by the Resolution Officer within thirty (30) business days after receiving the respondent's written statement. The grievance hearing is conducted by a three-person panel ("grievance panel"), established by the Resolution Officer and comprised of two (2) faculty members and one (1) student. The Resolution Officer will select one of the two faculty members to serve as chair of the grievance panel. CAASS members are excluded from grievance panels.

If the Resolution Officer is involved in the substance of the grievance, the Associate Dean for Practice and Professional Graduate Programs will make arrangements for the grievance hearing. If a student has concerns about potential bias of a member of the grievance panel, the student can submit a written request to the Resolution Officer, with rationale, for substitution of another member. The Resolution Officer will approve or disapprove the request and that decision is final.

The grievant student may call relevant witnesses during the hearing to provide testimony about the matter. The involved faculty, staff member, or committee chair may also provide testimony and relevant witnesses during the hearing.

No later than ten (10) business days prior to the hearing, all parties (including the student and respondent) will submit, in writing, all relevant documentation to the Resolution Officer:

- a) all relevant documentation that each party would like the grievance panel to consider, and
- b) a list of all relevant witnesses whom they would like to have submit testimony before the hearing panel.

Each party may invite one (1) personal advisor to the hearing, however, the grievant student will be informed that the role of the personal advisor is to support and advise the grievant student, not participate in the proceedings. Parties must provide the name of the personal advisor to the chair of the hearing panel and Resolution Officer, including whether the personal advisor is an attorney.

No later than five (5) business days before the hearing, the Resolution Officer will provide grievance hearing participants with a hearing packet that includes:

- a) the student’s formal written grievance and relevant documentation,
- b) the respondent’s written response and relevant documentation,
- c) the list of expected attendees, including hearing panelists, witnesses, and personal advisor, and
- d) any additional relevant information about the hearing.

All expected attendees (i.e., any additional witnesses and/or personal advisor) must be identified and communicated, in writing, to the Resolution Officer no less than three (3) business days prior to the hearing. If additional attendees are identified, an updated list of attendees will be distributed to hearing participants.

Grievance Hearing Participant Roles

The below table is to serve as a guideline for a basic grievance hearing. Actual participants and roles may vary.

Participant	Role description during the hearing
Resolution Officer	Observer
Student	Active participant
Respondent (faculty member, staff member, or committee chair)	Active participant
Grievance panel	
Faculty panel member (chair)	Principle facilitator
Faculty panel member	Active participant
Student panel member	Active participant
Academic advisor (USP Office)	Observer
Witness(es)	Participant (one called at a time and present only during witness portion of hearing)
Personal advisor(s)	Observer (provides support and advises the student; not an active participant)

Step 4: The Findings: After hearing the case, the grievance panel will deliberate in private. Within ten (10) business days, the grievance panel’s findings and recommendations for resolution will be communicated, in writing, by the grievance panel chair to the Resolution Officer. The Resolution Officer will inform the student of the grievance panel’s decision, in writing, by email and certified letter, delivered by the postal service to the local address on file in the Wolverine Access, within ten (10) business days of receiving the grievance panel’s reported recommendations. Copies will be distributed to the respondent, the Resolution Officer, and the Associate Dean for Practice and Professional Graduate Programs. This will complete the process; unless the student appeals the decision (see below).

Students or respondents may appeal the findings to the Dean in writing who will determine final resolution of the matter.

Some circumstances such as holidays or scheduling difficulties may impact the time frames for the grievance. Both parties, however, should make reasonable efforts to complete the grievance process within the designated time.

Approved by Faculty with amendments, May 16, 1979
Amendments incorporated and final typing, September 27, 1979
Updated August 1994
Updated October 1998
Updated September 2000
Updated June 2001
Updated September 2002
Updated and Approved by Faculty May 2010
Updated August 2014
Updated August 2015
Updated October 2016

Appendix F

Skills and Abilities for Degree Completion

A unique combination of essential cognitive, emotional, psychomotor, physical, and professional skills is required for degree completion within the School of Nursing. All students are expected to be able to demonstrate the essential skills and abilities on a regular basis, with or without reasonable accommodations in order to demonstrate the ability to provide quality nursing care in both the clinical and classroom setting.

The following is a list of the essential skills and abilities:

Judgment skills:

- Identify, assess, and comprehend health-related conditions for diverse populations of patients within a variety of health care situations for the purpose of identifying and addressing patient conditions and/or course of appropriate health-related actions

Cognitive skills:

- Measure, calculate, reason, plan, organize, analyze, integrate, synthesize and evaluate information within the context of the Undergraduate program of study

Visual, auditory and tactile abilities:

- Ability to gather data from written documents, oral presentation, demonstrations, and observation of clients within a variety of settings (classroom, skill laboratory, clinical, and community agencies).
- Ability to observe diagnostic specimens, perform health assessments and interventions with clients within a variety of settings (classroom, skill laboratory, clinical, and community agencies)
- Ability to obtain information from a variety of sources (digital, analog, and waveform) of physiological phenomena in order to determine a client's health status
- Ability to prepare or draw up the correct quantity of medication for use in a variety of syringe sizes or to detect any changes (color of lips, nails, or sclera) in a patient's skin or health status
- Ability to identify and differentiate sounds related to heart, lung, or other bodily functions
- Ability to identify and respond to life saving alarms used to monitor a patient's changing health status
- Ability to identify unsafe changes in heat producing devices used with patients
- Ability to observe behavior, listen to verbal communication to identify and respond to a patient's behavioral health status

Communication Skills:

- Communicate with maximum accuracy, clarity, and efficiency with patients and their families, other members of the health care team, and faculty within rapidly changing and often stressful health-related settings.
- Effectively give and/ or receive verbal directions about or to a patient, their family, members of the health team or faculty within rapidly changing and often stressful settings

- Assess situation conditions, identify potential course of action and make decisions that lead to appropriate actions on behalf of patients and families, other health care professionals, faculty, and peers

Physical abilities:

- Provide safe nursing care by physically performing activities that meet the patient's and family's needs
- Lift objects that reflect a range of weight
- Grasp small or large objects
- Manipulate a variety of objects
- Respond to patient needs in a timely way

Emotional stability:

- Demonstrate the emotional health required for the full utilization of his or her intellectual abilities to safely engage in providing care to patients and their families, interacting with other health professionals, faculty, and peers within rapidly changing and often stressful environments.
- Engage consistently in providing safe and quality nursing care to patients in rapidly changing and often stressful health-related settings without any current evidence of behaviors of addiction to abuse of, or dependence on alcohol or other drugs that have the potential to impair behavior or judgment.

I certify that I am capable of demonstrating the essential skills and abilities on a regular basis, with or without a reasonable accommodation. If I experience difficulties in performing the essential skills and abilities listed above, I agree to notify the appropriate School of Nursing faculty member, administrator or staff person. Failure to do so may result in disciplinary action.

Student Signature: _____ Date: _____

Print Student Name: _____ U-M ID: _____

Approved by University Council, April 2005
 Approved by Services for Students with Disabilities, May 2005
 Approved by Undergraduate Faculty, April 2005

VI:p

Appendix G

Master's Course Descriptions

The following was extracted from the School of Nursing's website [Nursing Courses](#) page.

Master's Core Courses:

Nursing 527

Promoting Optimal Models and Systems for Healthcare Delivery

3 Total Credits (3 Lecture, Web-blended)
Prerequisites: Graduate Standing or Permission of Instructor

This course addresses critical issues of advanced nursing practice across settings, locations and populations from leadership, systems, and policy perspectives. The contexts of micro, meso, macro and networked system dynamics are explored as they affect health care and health care service delivery across systems of health care (e.g home, community, hospital). Students will examine a broad array of methods to analyze the influence of system factors on contemporary issues including improvements in quality and safety.

Nursing 528

Models, Theories and Methods to Promote Optimal Health Outcomes

3 Total Credits (3 Lecture, Web-blended)
Prerequisites: Graduate Standing or Permission of Instructor

This course examines the contributions of advanced nursing practice roles to health outcomes throughout the lifespan for diverse individuals, families, communities, and populations. The contexts of local, regional, and global dynamics (e.g., social, political, ethical and economic perspectives) are explored as they affect health outcomes and health disparities/inequities. Students will apply a broad array of models, theories and methods to analyze health and disease in individuals, families, communities and populations.

Nursing 529

Scientific and Analytic Approaches for Advanced Practice

3 Total Credits (3 Lecture, Web-blended)
Prerequisites: Approved upper-level stats class or HS 550

This course examines the theoretical and scientific foundations of advanced nursing practice, emphasizing the use of multiple sources of evidence and knowledge for decision-making. Students will be introduced to a range of data sources, and statistical and analytic techniques to support evaluation from individual, community, population, and system perspectives.

Master's Courses:

HS 505

Team-Based Clinical Decision Making

Graduate Nursing Elective
2 Total Credits (2 Recitation)
Prerequisites: Graduate Student Status

This inter-professional course is designed for students in: dentistry, medicine, nursing, pharmacy, and social work. The course allows health professional students to gain an understanding of how each discipline contributes to the healthcare team and the importance of effective communication and team collaboration to clinical decision making.

HS 510

Foundations of Informatics in Practice

4 Total Credits (4 Lecture, Web-blended)
--

Prerequisites: None

This course emphasizes the practical application of informatics and the impact of health IT on people, populations and health care delivery. The course is based on an interprofessional perspective of informatics theories, principles and practices and the conceptual building blocks of how data is collected, structured, exchanged, organized, indexed, manipulated, analyzed, and communicated in health and healthcare.

HS 520

Assessment for Population Health

4 Total Credits (4 Lecture, Web-blended)
--

Prerequisites: None

Population health assessment informs how decisions are made in regards to the allocation of resources to improve the health of a group. This course will introduce students to the emerging field of population health and the methods of assessing the health of a group. Broadly, topics that will be covered include the characterization of the multiple determinants that influence the health of populations, and the design, collection, and analysis of population health-level data to determine the health status of a population.

HS 550

Scientific Methods for Health Sciences: Fundamentals

4 Total Credits (3 Lecture + 1 Lab)

Prerequisites: Graduate standing or Permission of Instructor
--

This course provides students with an introduction to probability reasoning and statistical inference. Students will learn theoretical concepts and apply analytic skills for collecting, managing, modeling, processing, interpreting and visualizing (mostly univariate) data. Students will learn the basic probability modeling and statistical analysis methods and acquire knowledge to read recently published health research publication.

HS 601

Health Economics for Health Professionals

4 Total Credits (4 Lecture, Web-blended)
--

Prerequisites: Permission of Instructor

This course explores components of sociotechnical frameworks that underlie for the development, deployment, and maintenance of health information technologies. Strategies and techniques used to analyze and model health information systems requirements are emphasized. New and emerging technologies are assessed for their impact and potential strategic value to an organization.

HS 610

Sociotechnical Components of HIT Systems

3 Total Credits (3 Lecture, Web-blended)
--

Prerequisites: HS 510 or Permission of Instructor

This course explores components of sociotechnical frameworks that underlie for the development, deployment, and maintenance of health information technologies. Strategies and techniques used to analyze and model health information systems requirements are emphasized. New and emerging technologies are assessed for their impact and potential strategic value to an organization.

HS 612

Evaluation Methods for Health Informatics

3 Total Credits (3 Lecture, Web-blended)
--

Prerequisites: HS 510 and HS 610, or Permission of Instructor

This course examines health informatics as an empirical science with a focus on studies of information technology as it is applied in health and healthcare. Methods and challenges unique to the evaluation of IT will be examined. Questions about IT functions, processes and the evaluation of IT on organizational and health outcomes.

HS 620

Health Program Planning

4 Total Credits (4 Lecture, Web-blended)
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Prerequisites: HS 520 and HS 802 Course or Instructor Permission
--

This course prepares students to plan, implement, and evaluate health promotion programs that aim to improve population health at the organizational, community, and policy level.

HS 650

Data Science and Predictive Analytics

4 Total Credits (4 Lecture, Web-blended)
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Prerequisites: None

This course aims to build computational abilities, inferential thinking, and practical skills for tackling core data scientific challenges. It explores foundational concepts in data management, processing, statistical computing, and dynamic visualization using modern programming tools and agile web-services. Concept, ideas, and protocols are illustrated through examples of real observational, simulated and research-derived datasets. Some prior quantitative experience in programming, calculus, statistics, mathematical models, or linear algebra will be necessary.

HS 710

Informatics Practicum

3 Total Credits (3 Lecture, Web-blended)
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Prerequisites: Final Semester (Capstone)
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The practicum provides the student with opportunities to develop the diverse skills of informatics-empowered practitioners via an apprenticeship model. Students are expected to apply the knowledge and skills learned throughout the informatics curriculum in order to support the interconnected needs of individuals, institutions, and populations across the care continuum. The practicum is designed to focus on post-graduate career goals and builds on the student's interests, experiences, and personal attributes. This is an experiential course with students spending approximately 12 hours per week in a physical practicum site accessible to the student.

HS 802

Epidemiology for Health

3 Total Credits (3 Lecture, Web-blended)
--

Prerequisites: None

Epidemiology is the discipline devoted to investigating patterns, causes, and effects of disease in populations. This course will provide a general overview of the principles, concepts, and methods of epidemiologic research for students who have no prior experience in epidemiology.

HS 841

Qualitative Research Methods for the Health Sciences

3 Total Credits (3 Lecture, Web-blended)
--

Prerequisites: Doctoral Standing

This course provides an overview of selected qualitative research methods and an opportunity to comparatively analyze them. The discussion and analysis of each method includes theoretical paradigm and perspective, research method and technique, language use, and methodological

issues. Exposure to the selected interpretive paradigms, methods, and techniques heightens students' awareness of the repertoire of strategies available for using knowledge. Simultaneously, the exposure to context-specific interpretive practices facilitates students' understanding of the influence of culture on the creation of knowledge.

HS 851

Scientific Methods for Health Sciences: Applied Inference

4 Total Credits (4 Lecture, Web-blended)
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Prerequisites: HS 550 or Permission of Instructor

This course introduces students to applied inference methods in studies involving multiple variables. Specific methods that will be discussed include data presentation and summary, probability, variable distributions, hypothesis testing, analysis of variance, correlation models, and linear regression models. This course will emphasize the scientific formulation, analytical modeling, computational tools and applied statistical inference in diverse health-sciences problems. Data interrogation, modeling approaches, rigorous interpretation and inference will be emphasized throughout.

HS 852

Scientific Methods for Health Sciences: Linear Models

4 Total Credits (3 lectures + 1 lab/discussion)

Prerequisites: HS 851 or Permission of Instructor

This course introduces commonly used linear, generalized linear, and linear mixed models to graduate students who need to understand research reports/scientific papers, analyze empirical data, or interpret their results. The topics covered by this course include SAS tutorial, SAS Graphics, simple linear regression, multiple linear regression, analysis of variance (ANOVA), analysis of covariance (ANCOVA), nonparametric regression, logistic regression, multinomial logistic regression, Poisson regression, generalized linear model, generalized estimating equations (GEE), and linear mixed models. The emphasis of the curriculum is on the practical aspect of the statistical methods with the mathematical models and computation introduced at a minimal technical level. Students will learn to be users of these statistical methods through real data examples, hands on experiences, and critique of scientific papers published in their subject fields.

HS 853

Scientific Methods for Health Sciences: Special Topics

4 Total Credits (4 Lecture, Web-blended)
--

Prerequisites: HS 520 and Introductory Epidemiology Course; or Permission of Instructor

This course will cover a number of modern analytical methods for advanced healthcare research. Specific focus will be on reviewing and using innovative modeling, computational, analytic and visualization techniques to address specific driving biomedical and healthcare applications. The course will cover the 5 dimensions of Big-Data (volume, complexity, time/scale, source and management).

Evidence-based interventions will be highlighted throughout the course. Cancer care is inherently interdisciplinary; faculty and guest lectures will include several disciplines. There will be opportunities for students to engage with different teaching modalities, including experiential learning, case studies, and didactic presentations.

Nursing 502

Advanced Physiology and Pathophysiology Across the Lifespan

4 Total Credits (4 Lecture, 100% Online)
--

Prerequisites: Graduate Student Status or Permission of Instructor
--

This course provides students with the advanced physiological and pathophysiological knowledge needed to assess acute and chronic health problems across the lifespan, to understand the aims of clinical and pharmacological interventions, and to support decision-making for restoring and maintaining health. The key concepts of the course include how the body maintains homeostasis in health, how homeostasis is disrupted in disease and how the body's responses to disruption can be

either adaptive or maladaptive. Disruptions will be presented at the genetic, cellular, organ and multi-organ system levels as appropriate. There is emphasis on phenomena such as genetic changes and chronic inflammation that are underlying to variety of disorders.

Nursing 503

Advanced Health Assessment for Advanced Practice Nurses

3 Total Credits (1 Lecture + 2 Lab)
Prerequisite: Undergraduate Physical Assessment Course or Permission of Instructor

This course focuses on the advanced comprehensive assessment of individuals within a developmental life span perspective. The interactions of developmental, biopsychosocial, and socio-cultural contexts resulting in health effects for individuals provide the structure of the course. The course builds on the students' knowledge and skills of basic physical assessment and provides a foundation for the advanced practice nurse to evaluate the health of individuals across the life span. Students are grounded in the theoretical perspectives, empirical documentation, and practice skills necessary for advanced communication (i.e., clinical interviewing, focused history taking), biopsychosocial and physical assessment, critical diagnostic reasoning, and clinical decision-making. Students acquire the requisite advanced knowledge and skills within a case-based, problem focused learning framework that integrates theoretical, empirical, and experience-based practical knowledge.

Nursing 521

Introduction to Global Health: Issues and Challenges

Graduate elective
3 Total Credits (3 Lecture)
Prerequisites: Graduate Student Status or Permission of Instructor

This course introduces the student to global health concepts and the network of organizations working to advance health care internationally. Emphasis for this course is on the global burden of disease, determinants of health and the importance of an interdisciplinary approach to health care delivery. It will provide the student with a broad introduction to programs, systems, and policies affecting global health. Students will explore facets of the global health care delivery system, health care economics, and the political process and its impact on the health of individuals and populations.

Nursing 523

Role Transition to APRN

Graduate elective
3 Total Credits (3 Lecture)
Prerequisites: Graduate Student Status

The role of the APRN as an advanced practice health care provider at the DNP level in contemporary society is explored. The history of the APRN and the DNP will be explored. Students will be introduced to the specialty that APRN roles have in leadership, policy, practice, and advocacy. The importance of the DNP in the health care system will be emphasized, as well as conceptualizations of DNP competencies and DNP scholarship.

Nursing 533

Effective Resource and Operations Management

3 Total Credits (3 Lecture, Web-blended)
Prerequisites: None

This course will equip healthcare leaders with the means to improve operational efficiency, quality, and productivity of their organizations so that population health is optimized. Theory and tools from economic, financial, management, and decision sciences will be applied to be able to use resources effectively while maximizing operational efficiency and quality. The influence of policy on resources and operations will also be considered.

Nursing 539

Foundations of Quality Science and Analytics

4 Total Credits (4 Lecture, Web-blended)
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Prerequisites: N529 (Concurrent) or Permission of Instructor
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This course reviews principles of quality science and approaches to analyze current and historical data to predict future events and trends in health care systems. The course focuses on applications for effective decision making and deployment of scarce resources.

Nursing 541

CDM I: Wellness and Illness for the ACPNP

3 Total Credits (3 Lecture)

Prerequisites: NUR 502, NUR 503 and Pharmacy 620
--

This course focuses on the normal growth and development of pediatric patients. Concepts of wellness, health promotion and disease prevention will be taught from a developmental perspective. Theories of acute and chronic disease will be introduced with a focus on their impact on the growth and development of the child and the impact to the family. Current research will serve as the basis for developing strategies and interventions to promote maximum functioning and resiliency for pediatric patients with risks for an identified alterations in normal growth and development.

Nursing 544

Wellness for the Acute Care Pediatric Nurse Practitioner

1 Total Credits (1 Lecture)

Prerequisites: NUR 541, Graduate Student Standing and/Permission of Instructor
--

Clinical experiences in pediatric primary care settings give students opportunities to apply knowledge and skills related to pediatric wellness. During clinical experiences, students apply concepts learned in N541: Wellness and Illness for the Acute Care Pediatric Nurse Practitioner to provide health supervision, counseling, and anticipatory guidance related to growth and development, health promotion, and prevention of illness and injury to infants, children, and adolescents.

Nursing 546

Antepartum Care of Essentially Normal Women

5 Total Credits (3 Lecture + 2 Clinical)
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Prerequisites: N566, Pharm 620 or Permission of Instructor
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This course prepares the nurse-midwifery student to begin to function in the nurse-midwife role. Students manage the antepartum course of essentially healthy women while beginning to assess for deviation from normal, which may result in collaboration or referral. Psychosocial and cultural aspects of pregnancy within the family structure are applied to each topic. Issues of health enhancement, nutrition, exercise and sexuality are stressed.

Nursing 550

CDM II: Foundations for Practice: Common Acute Illness for the ACPNP

2 Total Credits (2 Lecture)

Prerequisites: NUR 541 and NUR 544

The course focuses on the clinical decision making skills that are foundational to practice as an acute care pediatric nurse practitioner. Theories and principles of clinical decision making will provide a framework to approach clinical scenarios in subsequent courses and in the clinical setting. Common acute illnesses and their management will be discussed.

Nursing 551

Pediatric Acute Care Advanced Management I

4 Total Credits (3 Didactic and Case Studies + 1 Simulation Lab)
--

Prerequisites: Nursing 502, Nursing 545 or Permission of Instructor

Pediatric Acute Care Advanced Management I is the first in a series of two courses. Competencies for both CNS and NP advanced nursing practice are addressed. This course prepares students to

address the physiologic and psychological needs of infants, children and adolescents with acute, critical, and chronic health conditions. This course builds on knowledge and skills from Pathophysiology, Pharmacology, and other courses and will help students prepare for their first clinical course (N637). Other key concepts include patient and family centered care, ethics, palliative care, end-of-life care and organ donation. Further, principles of diagnostic and therapeutic treatment modalities, such as invasive testing, interpretation of radiographs, ECG monitoring, and analysis of relevant laboratory data will be included. Students will practice procedures such as suturing, lumbar punctures and intubation in a simulation environment.

Nursing 552

Pediatric Acute Care Advanced Management II

4 Total Credits (3 Didactic and Case Studies + 1 Simulation Lab)
--

Prerequisites: Nursing 502, Nursing 545, Nursing 551 or Permission of Instructor
--

Pediatric Acute Care Advanced Management II is the second in a series of two courses. This course prepares students to address the physiologic and psychological needs of infants, children, and adolescents with acute, critical, and chronic health conditions. This course builds on knowledge and skills from Pathophysiology, Pharmacology, Pediatric Acute Care Advanced Management I and other course. The content of this course will include complex diseases including multi-system disorders. Evidence-based, advanced practice nursing interventions consistent with the CNS and NP roles will be discussed. Other key concepts include patient and family counseling, ethical principles, interdisciplinary collaboration and resource utilization. Principles of diagnostic and therapeutic treatment modalities will be expanded upon to provide a comprehensive understanding of interventions commonly provided to pediatric patients with acute, critical and chronic illness.

Nursing 553

Advanced Practice Specialty Procedure and Skills for Acute Care

3 Total Credits (3 Lecture)

Prerequisites: None

This course introduces the Nurse Practitioner students to the principles of advanced diagnostic and treatment modalities commonly utilized in the Acute care Advanced Practice Nursing role. Students will have faculty supervised instruction and hands-on practice of selected procedures specific to the patient population and practice sites related to the area of certification.

Nursing 554

Advanced Practice Specialty Procedure and Skills for Primary Care

2 Total Credits (2 Lecture)

Prerequisites: None

This course introduces the Nurse Practitioner student to the principles of advanced diagnostic and treatment modalities commonly utilized in the Primary Care Advanced Practice Nursing role. Students will have faculty supervised instruction and hands-on practice of selected procedures specific to the patient population and practice sites related to the area of certification.

Nursing 555

Advanced Practice Specialty Procedure and Skills for Pediatric Primary Care

1 Total Credits (1 Lecture)

Prerequisites: None

This course introduces the Nurse Practitioner student to the principles of advanced diagnostic and treatment modalities commonly utilized in the Primary Care Pediatric Nurse Practitioner. It will provide an understanding of the rationale for choosing specific diagnostic and treatment practices in the patient care setting, as well as analysis and interpretation of findings based on these interventions.

Nursing 557

CDM I: Infant, Child, and Adolescent Health: Wellness and Management of Common Illness

1-8 Total Credits (1-8 Lecture)

Prerequisites: NUR 502, NUR 503, Pharmacy 620 and Pharmacy 621 (concurrent)

This course will focus on issues relevant to the advanced theory based practice of nursing in providing primary health care to infants, children, and adolescents in families, including promoting physical and psychosocial health and development and managing various common child, adolescent, and parental concerns. Class topics will be approach from a developmental perspective.

Nursing 561

Care of the Childbearing Woman

1 Total Credits (1 Lecture)

Prerequisites: NUR 503

The purpose of this course is to provide the nurse-midwifery student with an introduction to the essential concepts and skills necessary for providing prenatal care to essentially healthy women experiencing normal pregnancies. The focus of this course will be on the normal physiological changes of pregnancy and how nurse-midwives support the pregnant woman and her family as they experience these changes and anticipate the birth of their newborn.

Nursing 566

Advanced Primary Care Nursing I: Health Promotion and Management of Acute Health Problems of Adults and Well Woman/GYN Care

5 Total Credits (3 Lecture + 2 Clinical)
--

Prerequisites: N502 (Prior to or Concurrent), N503, Pharm 620 (Prior to or Concurrent) or Permission of Instructor
--

This course provides students with the knowledge and skills necessary to promote health, prevent illness, and manage the primary care needs of adults, including adolescent through older adults, from a variety of cultural, ethnic, and racial backgrounds while providing the conceptual basis for advanced nursing practice and midwifery. Health promotion/wellness models, and biopsychosocial and cultural theories are integrated throughout the course. Issues of age, gender, race, and sexuality are addressed. Use of information technology modalities in the primary care practice setting is introduced. Precepted clinical experiences provide opportunities for students to apply this material to assessment. Diagnosis, intervention, and evaluation of clients with health maintenance, well-women gynecologic needs and common acute problems. Role development of the nurse-midwife/nurse-practitioner within the community is explored. The nurse practitioner and nurse-midwifery management models of care are used in the provision of care to clients.

Nursing 568

Critical Elements in the Study of Families and Health

3 Total Credits (3 Lecture, Web-blended)
--

Prerequisites: Graduate Student Status or Permission of Instructor
--

In this course, students will analyze multiple theoretical perspectives and empirical literature as a basis for understanding diverse families and the complex nature of the interrelationships among family, health, illness and health related behaviors across the life span. These interrelationships will be examined with the context of critical social, cultural/ethnic/racial, political, economic, and technical environments. Current trends regarding family structure and function will be analyzed to build a comprehensive understanding of the changing nature of families. Implications of family theories, nursing conceptual frameworks, and the empirical literature for clinical practice with families across the lifespan will be emphasized. Particular attention will be given to developing a theoretical approach to definition of family and family assessment, interviewing skills, and identification of family interventions that promote the health of the family unit.

Nursing 571

Advanced Midwifery Clinical

2 Total Credits (2 Lecture, Web-blended)
--

Prerequisites: NURS 502, NURS 503, NURS 678, PHARMACY 620, and NURS 566 (concurrent)
--

This clinical practicum course is offered in companion with Nursing 566 and Nursing 561 for students to apply the didactic, theoretical, and evidence-based knowledge developed within those courses. Students will participate in preceptor or faculty supervised clinical experiences, clinical simulations, and case presentations to demonstrate integration of midwifery care knowledge, primary care and reproductive health care.

Nursing 572

Current and Emerging Issues in Occupational Health Practice

2 Total Credits (2 Seminar, Web-blended)
--

Prerequisite: Graduate Student Status or Permission of Instructor

This course focuses on the current and emerging issues in occupational health nursing practice. Factors affecting occupational health services to worker populations will be explored. Students will analyze the history and current and future practice of occupational health nursing.

Nursing 573

Adult-Gerontology Acute Care Nurse Practitioner and Clinical Nurse Specialist Theory I

4 Total Credits (4 Lecture)

Prerequisites: Pharm 659 (Concurrent); N502 (Concurrent)
--

This course focuses on acute health conditions in adults and older adults with an emphasis on health promotion and disease prevention. Competencies for both CNS and NP advanced nursing practice are addressed. Evidence-based, advanced practice nursing interventions (consistent with the CNS and NP roles) will be discussed to assess and manage acutely ill adults and older adults. Issues of age, culture, race, gender, sexuality, genetics, psychosocial well-being and socioeconomic status will be addressed. Health promotion, stress and coping and cultural theories are integrated throughout the course. Primary, secondary, and tertiary levels of health promotion and disease prevention will be evaluated within inpatient/hospital settings and across hospital to clinic settings. (E.g. ED, ICU, acute care units and specialty clinics.) Other key concepts include diagnostic reasoning and decision-making skills, healthy lifestyle, patient and family education/counseling, and treatment seeking decisions of acutely ill adults and older adults. Students will apply evidence-based knowledge to develop a holistic management plan of care that addresses the complex health problems of adults and older adults. Further, principals of diagnostic and therapeutic treatment modalities, such as invasive testing, interpretations of radiographs, ECG monitoring, and analysis of relevant laboratory data will be included. Students will practice procedures such as suturing, joint aspirations, lumbar punctures, and intubation in a simulation environment.

Nursing 575

Adult-Gerontology Acute Care Nurse Practitioner and Clinical Nurse Specialist Nursing Theory II

4 Total Credits (4 Lecture)

Prerequisites: N502, N573, co-requisite N503, Pharm 659, Pharm 660 (Concurrent)

This second management course focuses on complex chronic health conditions and their acute exacerbations in adults and older adults, including multiple co-morbidities and functional losses. The course builds on knowledge and skills from Advanced Practice Nursing Theory I, Clinical Practicum I, Pathophysiology, Pharmacology, and other core courses. Evidence-based, advanced practice nursing interventions consistent with the CNS and NP roles will be discussed to assess and manage complex chronic health conditions and the impact on self-care management practices, family care giving, surrogate decision-making, quality of life, and end-of-life. Issues of age, culture, race, gender, sexuality, genetics, psychosocial well-being and socioeconomic status will be addressed. Other key concepts include patient and family education/counseling, ethical principles/standards, interdisciplinary collaboration, and community resource utilization. Students will utilize conceptual and

theoretical frameworks and evidence-based knowledge to develop an advanced practice management plan of care to address the chronic complex health care needs of adults and older adults. Emphasis will be placed on maximizing quality of life and minimizing the negative sequelae associated with acute exacerbations of chronic illnesses and managed within tertiary acute care and sub-acute care settings. Principles of diagnostic and therapeutic treatment modalities will be expanded upon to provide a comprehensive understanding of interventions commonly provided to adults and older adults with acute, critical and chronic illness. Students will gain procedural experience in paracentesis, castings, thoracentesis, and central line insertion thru laboratory simulation.

Nursing 577

Adult Acute Care and Gerontological Advanced Practice Nursing Clinical Practicum I

3 Total Credits (1 Seminar + 2 Clinical)
--

Prerequisites: N573, Pharm 660

This precepted clinical practicum provides students the opportunity to obtain a comprehensive health history, apply advanced physical assessment skills, and utilize advanced physiology/pathophysiology, and Pharmacotherapeutics knowledge to promote health, prevent illness, and manage acutely ill in adults and older adults. Selected health promotion, stress and coping, cultural theories and evidence-based findings will be applied to manage acute health conditions of adults and older adults from diverse backgrounds (e.g. age, culture, ethnicity, race, sexuality, and socioeconomic status). Emphasis will be placed on primary, secondary, and tertiary levels of health promotion and disease prevention. Students will evaluate laboratory and diagnostic data to determine health status and prioritize differential and nursing diagnoses. Regular seminars provide a forum for students to receive instructions, consultation, and supervision from faculty and to share this learning process with their classmates. Seminars build upon an evidence-based practice model and emphasize diagnostic reasoning, critical thinking, problem solving, and decision-making. Case studies examples are used as the basis for discussion. Students will be placed with clinical preceptors appropriate to their role (e.g. CNS or NP).

Nursing 579

Adult Acute Care and Gerontological Advanced Practice Nursing Clinical Practicum II

3 Total Credits (1 Seminar + 2 Clinical)
--

Prerequisites: Nursing 577

This precepted clinical practicum provides students the opportunity to obtain a comprehensive health history, apply advanced physical assessment skills, and utilize advanced physiology/pathophysiology, and Pharmacotherapeutics knowledge to promote health, prevent illness, and manage acute illness in adults and older adults. Selected health promotion, stress and coping, cultural theories, and evidence-based findings will be applied to manage acute health conditions of adults and older adults from diverse backgrounds (e.g. age, culture, ethnicity, race, sexuality, and socioeconomic status). Emphasis will be placed on primary, secondary, and tertiary levels of health promotion and disease prevention. Students will evaluate laboratory and diagnostic data to determine health status and prioritize differential and nursing diagnoses. Regular seminars provide a forum for students to receive instructions, consultation, and supervision from faculty and to share this learning process with their classmates. Seminars build upon an evidence-based practice model and emphasize diagnostic reasoning, critical thinking, problem solving, and decision-making. Case studies examples are used as the basis for discussion. Students will be placed with clinical preceptors appropriate to their role (e.g. CNS or NP).

Nursing 581

Foundations for Systems and Organizational Science

2 Total Credits (2 Lecture, Web-blended)
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Prerequisites: Graduate Student Status or Permission of Instructor
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Theories and concepts from systems and organizational sciences are applied to healthcare organizations. Approaches to enhance organizational resilience in the face of uncertainty and future challenges are emphasized at micro-meso-macro levels. New and evolving organizational forms and operating models are introduced for framing and guiding the context and strategies for decision making in organizations today.

Nursing 588

Policy Analysis and Development for Healthcare Leaders

2 Total Credits (2 Lecture, Web-blended)
--

Prerequisites: Graduate Student Status or Permission of Instructor None

This course focuses on the policy process and the development of equitable healthcare public policy. Four stages of the policy process will be discussed: 1) agenda setting, 2) policy formation, 3) policy implementation, and 4) policy evaluation.

Nursing 589

Advanced Pediatric Nurse Practitioner Clinical Practicum

4 Total Credits (4 Lecture)

Prerequisites: None

This course extends the clinical application of advanced theory based practice of nursing in providing primary health care to infants, children, and adolescents in families, including promoting physical and psychosocial health and development and managing various common cold, adolescent, and parental concerns. Class topics will be approached from developmental perspective.

Nursing 591

Occupational Safety for Nurses

2 Total Credits (2 Lecture)

Prerequisites: None

A comprehensive overview of identification, evaluation, and control of common safety hazards (e.g., confined spaces, electricity, fire, mechanical energy) found in manufacturing, construction, health care, and other workplaces. Design/modification of machinery, equipment, and products to eliminate or control hazards arising out of mechanical, electrical, thermal, chemical, and motion energy sources. Application of hazard analysis, systems safety, expert systems and accident reconstruction methods.

Nursing 595

Clinical-Scholarship Praxis Experience I

3 Total Credits (3 Lecture)

Prerequisites: Permission of the Instructor

This course is the first in a sequence designed for PhD students with little nursing practice experience as a nurse-generalist, or in an advanced role (e.g., practitioner, midwife, clinical nurse specialist, or administrator). The purpose is to foster praxis, that is, to provide opportunity to develop awareness of, appreciation for, and skill in navigating within complex clinical care environments, all of which are essential to inform successful work as a clinical researcher. A combination of observational, reflective, analytic, and communication experiences will be used across a period of being embedded in practice settings. Concepts from nursing and other disciplines such as anthropology and social psychology will inform the work. The focus will be on linking practice and research, and on role development as a nurse researcher, broadly defined.

Nursing 611

Acute Care, Gerontological and Psychiatric-Mental Health Advanced Practice Nursing Clinical Practicum III

4 Total Credits (4 Clinical)

Prerequisites: N575, N577 and N579

This capstone clinical practicum course prepares the acute care, gerontological and psychiatric-mental health students to synthesize and apply concepts and knowledge critical for professional advanced practice nursing. Students will synthesize knowledge of health care delivery systems, organizational structures, finances, and resources with advanced physical and psychiatric assessments, pathophysiology, psychopathology, and Pharmacotherapeutics knowledge into the management plan of care for their patient population. Emphasis will be placed on evidence-based strategies and optimize the delivery of accessible, cost efficient, quality health care by acute care, gerontological and psychiatric-mental health advanced practice nurses. Other key issues include monitoring the quality of care and engaging in practice consistent with the authorized scope of practice. Students, in collaboration with their preceptors, will be accountable for increasingly independent management of the holistic care needs of adults, older adults and psychiatric patients across the lifespan. Students will be placed with clinical preceptors appropriate to their role (e.g. CNS or NP).

Nursing 617

CDM II: Infant, Child, and Adolescent Health: Primary Health Care Across Multiple Settings

7 Total Credits (7 lecture)

Prerequisites: None

This course will focus on providing health care to infants, children, and adolescents within the full scope of advanced practice (wellness, common minor health problems, and acute and chronic illness). Students will incorporate into advanced nursing practice the knowledge and skills of pediatric primary health care, a development focus, and theoretical and conceptual perspectives important for the care of children across multiple settings.

Nursing 637

Acute Care Pediatric Advanced Practice Nursing Clinical Practicum I

3 Total Credits (1 Seminar + 2 Clinical)
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Prerequisites: N502, N545, N503 and P567 or Permission of Instructor
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This precepted clinical practicum provides students the opportunity to obtain a comprehensive health history, apply advanced physical assessment skills, and utilize advanced physiology/pathophysiology, and Pharmacotherapeutics knowledge to promote health, prevent illness, and manage acute illness and stable chronic illness in infants, children and adolescents. Selected health promotion, stress and coping, cultural theories and evidence-based findings will be applied to manage acute health conditions of infants, children, and adolescents with acute illness and stable chronic illness with diverse backgrounds (e.g. age, culture, ethnicity, race, sexuality, and socioeconomic status). Emphasis will be placed on primary, secondary, and tertiary levels of health promotion and disease prevention. Students will be placed with clinical preceptors appropriate to their role (e.g. Clinical Nurse Specialist or Nurse Practitioner).

Nursing 638

Acute Care Pediatric Advanced Practice Nursing Clinical Practicum II

3 Total Credits (1 Seminar + 2 Clinical)
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Prerequisites: N502, N545, N503, P567 and N637 or Permission of Instructor
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The second precepted clinical practicum focuses on complex chronic health conditions of infants, children, and adolescents. This practicum builds on knowledge and skills obtained from Clinical Practicum I, prerequisite courses and other core courses. Evidenced based advanced nursing interventions will be applied to manage complex chronic health conditions and acute exacerbations of infants, children, and adolescents from diverse backgrounds (e.g. age, culture, ethnicity, race, sexuality, and socioeconomic status). Emphasis will be placed on strategies that maintain and/or

maximize function (physical and developmental), promote family and self-care management practices and optimize quality of life. Complementary and alternative therapies and family caregiver issues will be discussed. Students will be placed with clinical preceptors appropriate to their role (e.g. CNS or NP).

Nursing 639

Acute Care Pediatric Advanced Practice Nursing Clinical Practicum III

5 Total Credits (5 Clinical)

Prerequisites: N502, N545, N503, P567, N637 and N638 or Permission of Instructor
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This capstone clinical practicum course prepares the acute care pediatric nurse practitioner and clinical nurse specialist students to synthesize and apply concepts and knowledge critical for professional advanced practice nursing. Students will synthesize knowledge of health care delivery systems, organizational structures, finances, and resources with advanced physical, developmental, and psychosocial assessments, pathophysiology, and Pharmacotherapeutics knowledge into the management plan of care for infants, children, and adolescents with acute, chronic, and critical illness. Emphasis will be placed on evidence-based strategies to optimize the delivery of accessible, cost efficient, quality health care by pediatric acute care advanced practice nurses. Students will be placed with clinical preceptors appropriate to their role (e.g. CNS or NP).

Nursing 640

Nursing Care of Childbearing Families (Antepartum Care)

2 Total Credits (1 Lecture + 1 Lab)

Prerequisites: N566, Pharm 620

The purpose of this Antepartum course is to prepare the Family Nurse Practitioner (FNP) student to begin to function in the roles of Antepartum care provider. Students will manage the Antepartum course of essentially healthy women while beginning to assess for deviation from normal (which may result in collaboration or referral). Psychosocial and cultural aspects of pregnancy within the family structure will be applied to each topic. Issues of health enhancement, nutrition, exercise, and sexuality will be stressed.

Nursing 646

Primary Care of Older Adults

3 Total Credits (3 Lecture)

Prerequisites: Graduate Student Status or Permission of Instructor
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The focus of this course is on the adult-gerontology nurse practitioner role in primary care as well as the clinical management of geriatric syndromes and complex chronic illnesses commonly seen in older adults. Unique dimensions of geriatric care are explored within the context of normal aging in culturally diverse populations. The students will focus on content necessary for the comprehensive management and evaluation of the older adult in primary care, including such issues as normal changes in ageing and decision-making. The course provides a foundation in gerontological nursing and the applications of evidence-based practice to promote wellness, maximize function, and enhance self-care. Relevant genetic concepts and principles in common geriatric medical conditions will be integrated.

Nursing 666

Advanced Primary Care Nursing of Chronic Illness in Adults & Their Families

5 Total Credits (3 Seminar + 2 Clinical)
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Prerequisites: N566, Pharm 620 and Pharm 621 (Prior to or Concurrent)

This course further develops and broadens students' primary care knowledge, skills, and clinical judgment. Specific content relates to the primary health care needs of individuals and their families in screening, preventing, and managing common chronic conditions. Content addresses the impact of chronic illness on the course of the individual's health and disease states, the family constellation, and use of personal and health resources. Issues of age, gender, race, genetics, and sexuality are addressed within the context of family and community. Uses of information technology and community

resources are integrated to promote positive adaptation to the impact and sequelae of the chronic illness.

Nursing 674

CDM III: Advanced Primary Care Nursing of Adults and Families with Complex Systems

8 Total Credits (8 lecture)

Prerequisites: None

This capstone clinical course prepares the student to synthesize and apply concepts and knowledge critical for advanced practice primary care nursing with complex individuals, families, and communities. This course will prepare the student to assess and manage acute and chronic illness in addition to social, behavioral, developmental, and lifestyle issues in primary care.

Nursing 676

Intrapartum, Postpartum, and Newborn Care

7 Total Credits (3 Lecture + 4 Clinical)
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Prerequisites: N503, N566, N502, N546 and Pharm 620

This course provides the knowledge needed to manage the care of the uncomplicated mother and baby care in the intrapartum and postpartum periods. Students will also learn to screen for common complications and manage selected emergency situations. Assessment and care for the newborn is included, as well as parent-infant attachment and childbirth education for families from diverse cultural backgrounds.

Nursing 677

Nurse-Midwifery IV-Integration: The Childbearing Cycle

4 Total Credits (4 Clinical)

Prerequisite: N676 or Permission of Instructor
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This course provides the student with a clinical practicum to synthesize the management of women during the childbearing cycle, including management of newborns and women's health care into one entity, and to practice as a professional nurse-midwife. The course builds on earlier learning and presents new opportunities for decision-making, childbirth education, and management of care of families with varying cultures and beliefs. The course prepares the student to practice in a nurse-midwifery service, which subscribes to the Standards for the Practice of Nurse-Midwifery.

Nursing 678

Transition to Advanced Practice: Professional Issues

3 Total Credits (3 Seminar)

Prerequisites: One Year in Nurse Midwife Program
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The role of the nurse-midwife in contemporary society is explored. The historic, political and economic bases of nurse-midwifery practice are examined. Students become familiar with documents of the American College of Nurse-Midwives, as well as regulations and legislation, which guide, interpret and provide a legal and ethical base for future nurse-midwifery practice.

Nursing 681

Decision Science for Population Health

3 Total Credits (3 Lecture, Web-blended)
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Prerequisites: N539; N527, N528 and N529
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Decision-making in complex health systems presents unique challenges such as high levels of uncertainty and multiple competing demands, while committing to quality and patient safety. This course provides a systems approach to application of operational models, analytic methods and tools, and leadership strategies in the context of population health. The impact of these approaches to promoting quality and safety in health and healthcare will be emphasized.

Nursing 682

Systems Assessment and Leadership Effectiveness

4 Total Credits (2 Lecture + 2 Clinical, Web-blended)
Prerequisites: N527, N528, and N529; N581

This course is focused on preparing health system leaders who will be able to assess, synthesize, integrate and organize information related to an actual business unit. Utilizing a combination of didactic and experiential learning the student will evaluate current delivery practices, and design the next generation of care incorporating knowledge from research, theory, and clinical practice.

Nursing 695

Selected Topics in Nursing

Graduate Nursing Program Elective
1-4 Total Credits (Independent study/Special topics)
Prerequisite: Graduate student status or Permission of Instructor

This master's-level course consists of selected topics or clinical phenomena in nursing. The topic will be announced one semester in advance.

Nursing 697

Independent Study

Graduate Nursing Program Elective
1-4 Total Credits (Independent study)
Prerequisite: Graduate student status or Permission of Instructor; Students must complete the required Independent Study Form prior to registration.

Independent study is intended to enable master's students to engage in in-depth exploration of a specific topic of their choice. The student develops objectives and a study plan in consultation with a faculty member. The plan includes the nature of the independent study, the objectives, the expected outcome (such as a project, paper, and the like), and the grading procedures. The nature and amount of time and guidance to be provided by the faculty member are also determined. Independent study projects are intended to be pursued independently, under the overall supervision of the faculty member.

Nursing 699

Nurse Scholarly Project

1-8 Total Credits (1-8 Project)
Prerequisites: None

This scholarly project is a culminating, independent experience which demonstrates the student's synthesis of coursework and lays the foundation for future scholarship.

Nursing 781

Leadership Immersion for Impact

2 Total Credits (2 Lecture, Web-blended)
Prerequisites: Final Semester or Permission of Instructor

This course provides students with hands-on leadership immersion designed to maximize patient, population, and organizational outcomes in health care systems across the continuum of care. Students will have individualized mentored experiences and apply knowledge and skills from coursework to projects in an organizational setting in the U.S. or globally. Upon completion, students will have acquired focused leadership competence in preparation for assuming effective health care leadership roles in diverse settings and uncertain times.

Nursing 795

Special Topics in Nursing

1-3 Total Credits (1-3 Lecture, Web-blended)
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Prerequisites: Doctoral Student or Permission of Instructor

This master's-level course consists of special topics in nursing. The topic will be announced one semester in advance.

Appendix H

DNP Course Descriptions

The following was extracted from the School of Nursing's website [Nursing Courses](#) page.

DNP Core Courses:

Nursing 800

Graduate Students for Advanced Practice and Research

3 Total Credits (3 Lecture)
Prerequisites: None

Students will examine approaches to analysis and interpretation of data as well as gain in understanding of the rationale underlying the standard statistical procedures used to nursing research. Fundamental statistical concepts and techniques and addressed include: Descriptive statistics; probability; sampling; statistical distributions; confidence intervals; estimation; hypothesis testing; one-way ANOVA, correlation, chi-square tests; simple and multiple linear regression; logistic regression. Emphasis is on building competence in evaluating and integrating evidence to support advanced nursing practice.

HS 802

Epidemiology for Health Professionals

3 Total Credits
Prerequisites: None

Epidemiology is the discipline devoted to investigating patterns, causes, and effects of disease in populations. This course will provide a general overview of the principles, concepts, and methods of epidemiologic research for students who have no prior experience in epidemiology.

Nursing 803

Responsible Conduct of Research and Scholarship

1 Total Credits
Prerequisites: None

The primary goal of this 1-credit course is to review and discuss various aspects of Responsible Conduct of Research and Scholarship (RCRS), and to enable students to demonstrate the ability to conduct quality research/scholarship as the foundation for a strong professional reputation as a researcher. RCRS is defined by the NIH as "the practice of scientific investigation [and academia] with integrity. It involves the awareness and application of established professional norms and ethical principles in the performance of all activities related scientific research [and academia]."

Nursing 811

Health Informatics

3 Total Credits (3 Lecture)
Prerequisites: None

Familiarize students with the understanding of health informatics used across settings as well as in operations and evaluations of clinical outcomes. Course uses examples from current clinical informatics and challenges, such as optimizing workflow through information technology, streamlining clinical documentation practices, embedding evidence-based practice standards in the front-line, and improving patient safety through point-of-care decision support.

Nursing 812

Clinical Leadership in Complex Systems

4 Total Credits (4 Lecture)

Prerequisites: Doctoral Level Status

Examines theories/strategies from various disciplines (e.g., nursing, organizational sciences and economics) for the management and allocation of resources for patient care delivery. The goal is to prepare senior leaders who can design, implement, and evaluate models and programs of care to meet population or system needs. The context ranges from small practices to large integrated delivery systems. Key themes throughout the course include management of quality, work processes, ethical decision-making, and assessment of clinical resources from managerial and economic perspectives.

Nursing 815

Quality and Safety

3 Total Credits (3 Lecture)

Prerequisites: Doctoral Level Status

This seminar prepares leaders for development and execution of quality improvement and patient safety programs. Students will examine issues and concepts such as creating a culture of patient safety; application of quantitative (e.g. statistical process control) and qualitative methods (e.g., focus groups; case studies); and behavioral knowledge and skills in leading interdisciplinary teams. The influence of external forces on quality improvement and patient safety agendas along with health disparities and national and state trends in healthcare will be examined.

Nursing 816

Policy Analysis and Transformation in Healthcare

3 Total Credits (3 Lecture)

Prerequisites: Doctoral Level Status

This seminar examines the role of clinical leader in the development, analysis and transformation of institutional and public policy for healthcare and clinical practice. The role of leader is examined from the perspective of optimizing care delivery under existing policy and, when that is inadequate, influencing and shaping the redesign or development of new policy. The professional responsibility of the leader as advocate to address health disparities and social injustices are stressed. Key themes include quality, access, equity, culture, and ethical decision-making.

Nursing 900

Research Synthesis

4 Total Credits (4 Lecture)

Prerequisites: Scientific foundations for the practice doctorate
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Utilizing the clinical problem identified in Scientific Foundations, this course will familiarize students with scientific methods for evaluating levels of evidence and conducting systematic and integrative literature reviews. These techniques will be utilized to synthesize available evidence related to a clinical problem of choice. Course content will include an overview of the methodology for searching existing databases, documenting the search process, and select appropriate inclusion/exclusion criteria for selecting studies.

Nursing 910

Translation, Implementation Science and Comparative Effectiveness

3 Total Credits (3 Lecture)

Prerequisites: Scientific foundations for the practice doctorate
--

This interdisciplinary seminar focuses on using findings from translation science, comparative effectiveness studies, and other knowledge sources to improve quality of care and patient outcomes. Students will apply concepts to patient populations and systems of care delivery. Terms and models use in this field of inquiry will be compared, contrasted, and analyzed. Students will develop, select or modify a model of inquiry to guide their residency and scholarly projects. Factors that influence adoption of healthcare innovations will be examined through critique and synthesis of research.

Nursing 950***DNP Residency***

Total Credits

Prerequisites: Doctoral level status

The residency provides a mentored practice experience in a clinical setting. The student will have an opportunity to apply knowledge and skills learned in the program. Students will become actively involved in senior leadership roles and, where possible, carry out part of their scholarly project. Placement will be individualized based on the students' learning objectives, previous clinical and leadership experiences, and career goals. Students will participate in a seminar when enrolled for residency credits.

Nursing 955***DNP Scholarly Project***

6 Total Credits

Prerequisites: DNP Program Enrollment

This scholarly project is a culminating, independent experience which demonstrates the students synthesis of coursework and lays the foundation for future scholarship. The student will propose and lead a quality improvement or practice change initiative using evaluation data. The project will be embedded in a healthcare organization and address an organizational need. The project will be supervised by a faculty committee. The final project will be defended in an oral examination and the supervising committee will approve the final written report. It is intended that the report will be a publishable paper if feasible and results will also be disseminated through clinical and scientific meetings. Students will participate in a seminar when enrolled in project credits. Credits can be repeated to facilitate effort on the project with 6 credits required for the degree.

Appendix I

Guidelines for the Post-Master's DNP Scholarly Project

Overview

These guidelines are provided to help the post-Master's DNP student engage in preparing a proposal and a written final report for the required DNP scholarly project.

The student's DNP project is a culmination of learning from the DNP course work. Through the project, DNP students demonstrate the ability, as an independent leader, to synthesize evidence in an advanced practice specialty or an area of health leadership. All DNP scholarly projects should:

- Focus on a change that impacts healthcare outcomes either through direct or indirect care.
- Have a systems (micro-, meso-, or macro- level) or population/aggregate focus.
- Demonstrate implementation in the appropriate arena or area of practice.
- Include a plan for sustainability (e.g. financial, systems or political realities, not only theoretical abstractions).
- Include an evaluation of processes and/or outcomes (formative or summative). DNP Projects should be designed so that processes and/or outcomes will be evaluated to guide practice and policy. Clinical significance is as important in guiding practice as statistical significance is in evaluating research.
- Provide a foundation for future practice scholarship. (AACN, 2015, pg. 4)

Examples of DNP scholarly projects include (1) Improving an aspect of healthcare systems (e.g. model of care delivery, a program to decrease hospital readmission of high risk patients); (2) Improving practice for a patient population with respect to a clinical topic (e.g. fall prevention practices for older adults; symptom management for women with cancer; acute pain management for pediatric patients); or (3) Improving population health in communities (e.g. exercise to decrease obesity in school age children; decreasing bullying in young adolescents). The scholarly project involves two phases for satisfactory completion: a project proposal and a final report. Details for each are provided in the following sections.

The DNP Scholarly Project Proposal

For the proposal, students prepare a written paper describing the problem and the plan for addressing this problem. This proposal needs to be approved by the student's project committee and the Human Subjects Review Committee in the University of Michigan before proceeding to the project implementation, data collection and evaluation stages (See **DNP Scholarly Project Proposal Process**). The project proposal should contain essential components of the project, including the purpose, synthesis of the evidence, implementation plan, and proposed evaluation and sustainability plan. Each component is further described in the [DNP Scholarly Project Proposal](#) section that follows.

The DNP Scholarly Project Final Report

The final report is a paper that describes the actual conduct of the project reflecting all the revisions and updates since the proposal with presentation of results, discussion, conclusions and summary. These components are further described in the DNP Scholarly Project Final Report section.

Manual of Style

All students are expected to follow the Publication Manual of the American Psychological Association (APA) unless the committee approves another format. Students are expected to submit both the project proposal and the final report using standardized margins, and double-spaced as outlined in APA.

DNP SCHOLARLY PROJECT PROPOSAL

The proposal should contain the components described below. Appendices with relevant material (e.g. questionnaire, interview guides, evidence tables) can also be included in the proposal.

Introduction

This should be a brief introduction to the paper so the reader knows the topic of the paper. This section should include a brief synthesis of the problem nationally. Note that many federal agencies and other national organizations/societies (e.g. CDC, AHRQ, NAM) have reports that will be helpful for you to synthesize the nature of the problem nationally. The introduction should be about one page or less.

Purpose

The purpose of the project should be built from your PICO statement (e.g. what is the problem and patient population being addressed, what is the EBP or innovation being implemented, and what are the projected outcomes of doing this implementation). For example, 'the purpose of this project is to implement evidence-based fall reduction practices that target patient specific risks for falls in hospitalized older adults to reduce falls and fall injuries.' State the importance of your selected topic (e.g. why is this topic of importance to the local setting/agency?). You must provide a convincing argument that this topic is of importance. A brief overview of the setting for implementation should be included in this section (e.g. 'This project will be done in one adult medical-surgical unit in a local community hospital. The selected 25 bed unit provides care for Falls in this unit have been above the national norm for the past year'). This section should be about one-half page (a couple paragraphs). N900 provides a strong foundation for this section of your project.

Evidence Synthesis and Practice Recommendations for the Clinical Topic, Program, or Innovation

This section has two subsections. The first is synthesis of the evidence to support the practice interventions or program for the selected topic (e.g. interventions or programs to prevent falls). The second is the recommendations for practice from the synthesis of the evidence. This section, in total, should be approximately 8-10 pages in length.

Evidence Synthesis

This section should be a narrative of the synthesis of the evidence to support your interventions or program for your topic or healthcare innovation. Refrain from listing a summary of studies one by one. The evidence should be synthesized across studies or other evidence sources. You may include an evidence table as an appendix to support your narrative. However, it is essential that the narrative synthesize the evidence across studies. N900 provides a foundation for this synthesis.

Practice Recommendations

You should set forth in this section the recommendations for practice from the evidence synthesis. Each practice recommendation should be supported by references and an evidence grade (e.g. overall across studies, what is the grade of evidence?). Secondly in this section you should specify the recommendations that will be the focus of your project, and the rationale for selecting these recommendations.

Implementation Plan and Strategies

This section of your paper is likely to have several parts/subheadings. The paper should overview the conceptual model that will guide your project. The conceptual model should be integrated into this section (and the evaluation section – see below), so that it is clear to the reader how the model was used to develop the implementation intervention components.

The design for your project should also be described (e.g. what design is planned such as pre/post design; repeated measures design). Select a design that is feasible. Most projects can use a pre/post design – that is having evaluation data before implementation and comparing these data to evaluative data after implementation. Others might want to use a repeated measures design in which evaluative data are collected prior to implementation, midway through the implementation process, and following implementation. Remember, this is not conduct of research.

This section of the paper should also include: 1) a description of the setting for implementation (be specific); 2) the users of the practice recommendations (e.g. nurses, physicians, teachers, consumers, home health aids etc.); and 3) a description of the implementation intervention – each component or strategy planned to promote adoption of the EBPs or program. A consistent message from syntheses of the implementation literature is the need for multidimensional implementation strategies for change in practice (Rycroft-Malone and Burton, 2011). Therefore, your implementation intervention is likely to have several components or strategies for implementation such as education, use of change champions, audit and feedback, and others. For each component/strategy (e.g. audit and feedback), the following should be addressed:

- A detailed description of the strategy/component, including content (e.g. what indicators will be used in the audit and feedback; where will data come from for audit and feedback reports) and how it relates to your conceptual model. Also include the underlying mechanisms of action and evidence for using the specified implementation strategy;
- Who and/or what is being targeted by this strategy (e.g. audit and feedback is targeted to nurses to demonstrate improvement in every four hour pain assessment, around the clock opioid administration, ...);
- Mode of delivery (e.g. how will the audit and feedback reports be disseminated – face-to-face);
- Characteristics of those doing the strategy (e.g. charts will be audited by [name/role] and the feedback reports will be developed and delivered by [name/role]);
- Intensity (contact time) (e.g. how much time will be spent reviewing audit and feedback reports);
- Duration (number of sessions and their spacing over a given time frame) (e.g. audit and feedback will be done every 6 weeks for 3 months following education of practitioners).

This section of the paper should briefly address the context where implementation will occur. The proposal should address context factors to measure as part of the project. This section of the paper should also include a timeline for implementation and within this timeline, when each of the implementation strategies will be done. The student should address how challenges to implementation will be addressed.

This section may require many pages of text (e.g. 10-12 pages) with several tables, figures, and/or appendices in order to clearly articulate the proposed intervention components, process, and timeline.

Evaluation

This section of your paper should address how the “successes of implementation” will be evaluated. What outcome and process measures will be used, when these measures will be collected, what data sources will be used, and reliability and validity of data sources, measures and/or instruments. Questionnaires, interview guides, medical record abstract forms and other evaluative tools may be appended but this section should include a narrative about each evaluative tool (e.g. what outcome or process measure(s) are they addressing). Provide a rationale for selection of the process and

outcome measures. Also address how you will evaluate the process of implementation (e.g. how you will track if all components of the planned implementation are carried out). Describe how data will be analyzed to determine if the EBPs, program or innovation was implemented. This section may require 5-7 pages of text. Again, consider using tables and figures for proposal clarity.

Summary and Conclusion

This section, approximately ½ page, should include a brief summary of your project.

Manual of Style

All students are expected to follow the Publication Manual of the American Psychological Association (APA) unless the committee chair approves another format. Students are expected to submit the project proposal using standardized margins, headings, and double-spaced as outlined in APA. The project proposal should be about 30 pages excluding references and appendices.

DNP Scholarly Project Final Report

The DNP Scholarly Project final paper describes the actual conduct of the project reflecting all the revisions and updates since the proposal with presentation of results/findings, discussion, and summary/conclusions. The final paper should contain the following components. Appendices with relevant material (e.g. questionnaire, interview guides, evidence tables) can be included.

Introduction

This should be a brief introduction to the paper so the reader knows the topic of the paper. This section should include a brief synthesis of the problem nationally. Note that many federal agencies and other national organizations/societies (e.g. CDC, AHRQ, NAM) have reports that will be helpful for you to synthesize the nature of the problem nationally. The introduction should be about one page or less.

Purpose

The purpose of the project should be built from your PICO statement (e.g. what is the problem and patient population being addressed, what is the EBP or innovation being implemented, and what are the projected outcomes of doing this implementation). For example, 'the purpose of this project was to implement evidence-based fall reduction practices that target patient specific risks for falls in hospitalized older adults to reduce falls and fall injuries.' State the importance of your selected topic (e.g. why is this topic of importance to the local setting/agency?). You must provide a convincing argument that this topic is of importance. A brief overview of the setting for implementation should be included in this section. For the final paper, be sure to use past tense in the description of the purpose (e.g. The purpose of this project was...). This section should be about one-half page (a couple paragraphs).

Evidence Synthesis and Practice Recommendations for the Clinical Topic, Program, or Innovation

This section has two subsections. The first is synthesis of the evidence to support the practice interventions or program for the selected topic (e.g. interventions or programs to prevent falls). Depending on the time between the proposal and the final paper, this section may need updating. The second is the recommendations for practice from the synthesis of the evidence. This section, in total, should be approximately 8-10 pages in length.

Evidence Synthesis

This section should be a narrative of the synthesis of the evidence to support your interventions or program for your topic or healthcare innovation. Refrain from listing a summary of studies one by one. The evidence should be synthesized across studies or other evidence sources. You may include an evidence table as an appendix to support your narrative. However, it is essential that the narrative synthesize the evidence across studies. This section may need updating since the proposal if you acquired and used more recent evidence since the proposal approval.

Practice Recommendations

You should set forth in this section the recommendations for practice from the evidence synthesis. Each practice recommendation should be supported by references and an evidence grade (e.g. overall across studies, what is the grade of evidence?). Secondly in this section you should specify the recommendations that will be the focus of your project, and the rationale for selecting these recommendations.

Implementation Plan and Strategies

This section of your paper is likely to have several parts/subheadings. The paper should overview the conceptual model that guided your project. The conceptual model should be integrated into this section (and the evaluation section – see below), so that it is clear to the reader how the model was used to develop the implementation intervention components.

The design for your project should also be described (e.g. what design is planned such as pre/post design; repeated measures design). Did you use a pre/post design – that is having evaluation data before implementation and comparing these data to evaluative data after implementation. Did you use a repeated measures design in which evaluative data were collected prior to implementation, midway through the implementation process, and following implementation.

This section of the paper should also include: 1) a description of the setting for implementation (be specific); 2) the users of the practice recommendations (e.g. nurses, physicians, teachers, consumers, community populations of people, home health aids etc.); and 3) a description of the implementation intervention – each component or strategy used to promote adoption of the EBPs or program. Your implementation intervention is likely to have several components or strategies for implementation such as education, use of change champions, audit and feedback, and others. **This should focus on the implementation strategies that were actually used, when they were done, how often they were done, and may differ from those planned and set forth in the proposal.** You will need this to reflect what was actually done for implementation.

For each component/strategy (e.g. audit and feedback) you used, the following should be addressed:

- A detailed description of the strategy/component, including content (e.g. what indicators were used in the audit and feedback; where did data come from for audit and feedback reports) and how it relates to your conceptual model. Also include the underlying mechanisms of action and evidence for using the specified implementation strategy;
- Who and/or what was targeted by this strategy (e.g. audit and feedback is targeted to nurses).
- Mode of delivery (e.g. how were the audit and feedback reports disseminated; how was education done.);
- Characteristics of those doing the strategy (e.g. charts will be audited by [name/role] and the feedback reports will be developed and delivered by [name/role]; who did the specific implementation strategy – this may be the student or include people from the site);
- Intensity (contact time) (e.g. how much time was spent reviewing audit and feedback reports – 30 minutes every three weeks);
- Duration (number of sessions and their spacing over a given time frame) (e.g. audit and feedback was done every 6 weeks for 3 months following education of practitioners).

This section of the paper should also briefly address the context where implementation occurred, and if any context factors were collected as part of the project. This section of the paper should include the timeline for implementation and within this timeline, when each of the implementation strategies were done. This section may require many pages of text (e.g. 10-12 pages) with several tables, figures, and/or appendices in order to clearly articulate the proposed intervention components, process, and timeline.

Evaluation

This section of your paper should address how the “successes of implementation” was evaluated. What outcome and process measures were used, when these measures were collected, what data sources were used, and reliability and validity of data sources, measures and/or instruments. Questionnaires, interview guides, medical record abstract forms and other evaluative tools may be appended but this section should include a narrative about each evaluative tool (e.g. what outcome or process measure(s) are they addressing) Provide a rationale for selection of the process and outcome measures. Describe how data were analyzed. This section may require 5-7 pages, with succinct tables/figures to ensure clarity.

Findings

This section includes the results of the project. It should include the data results for the outcome, and process measures described above (e.g. Did process measures improve, did outcome measures improve, etc.) The section should address each measure used for evaluation. Students may use graphs, tables, or other illustrations to display the data. N800/N802 provides a foundation for presentation of findings. Use of statistical process control charts are often helpful in displaying such data, depending upon the nature of the data and frequency of collection. This section may include 5-8 pages of text with appropriate tables/figures.

Discussion

This section should discuss the results of the project and relate these to the other published papers. It should include limitations of the project, lessons learned, and what you recommend be done (differently or similarly) in the future. This section, approximately 8-10 pages, should not be a repeat of the findings/result section.

Summary and Conclusion

This section, approximately 1 page in length, should include a brief summary of your project and an overall conclusion.

Manual of Style

All students are expected to follow the Publication Manual of the American Psychological Association (APA) unless the committee chair approves another format. Students are expected to submit the final paper using standardized margins, headings, and double-spaced as outlined in APA. The final paper should not be over 50 pages excluding appendices and references. This does not imply that the final paper needs to be 50 pages, rather that the student should be able to present a final paper of 50 pages or less.

Submission of the Final Paper

A copy of the final paper (pdf) should be sent to the Director of the Post-Master’s DNP project and Graduate Student Advisors (umsn-GradAdvisors@umich.edu). Additionally, a one page you will be asked to include a one-page abstract for your final project. In addition, a one page abstract outlining the project should be submitted to the Director of the Post Master’s DNP program. The abstracts will be made available for access by other students and faculty.

Publishing the Final Paper

Students are urged to publish their project. Publication of the final project is likely to require revisions of the final paper to meet the requirements of the targeted journal regarding headers and page limitations. The student should be first author and may invite co-authors as appropriate. Students are highly encouraged to speak with their DNP advisor early on during the final paper development to discuss authorship (e.g. committee members/practice partners inclusion). Students are advised to have clarity of authors, authorship order, and writing responsibilities prior to embarking upon publication. Inviting other to be co-authors should reflect the relative contribution to the project, and their commitment to writing a section for publication.

Appendix J

Health Sciences Institutional Review Board Review of Research Proposals Involving Human Subjects

THE UNIVERSITY OF MICHIGAN HEALTH SCIENCES AND BEHAVIORAL SCIENCES
INSTITUTIONAL REVIEW BOARDS (IRB-HSBS)

<http://www.irb.umich.edu/>

IRB-HSBS
Building 520, Suite 1169
2800 Plymouth Road
Ann Arbor, MI 48109-2800

Dr. Thad Polk, Committee Chair
Telephone: 734-936-0933, Fax: 734-936-1852
E-mail: irbhsbs@umich.edu

Goals of IRB-HSBS

The primary goal of the IRB-HSBS is to assure that, in research involving human subjects, the rights and welfare of the subjects are adequately protected.

IRB-HSBS reviews all planned research involving human subjects prior to initiation of the research, approves research that meets established criteria for protection of human subjects, and monitors approved research to ascertain that human subjects are indeed protected. Further, through educational sessions and focused discussions, the IRB-HSBS educates the research community on ethical and procedural issues related to human subject's protection.

The schools submitting proposals to the IRB-HSBS include:

School of Dentistry
School of Nursing
College of Pharmacy
School of Public Health
School of Social Work
Student Health Services
School of Kinesiology

Secondary goals of the IRB-HSBS are to inform and assist the University of Michigan and its researchers on ethical and procedural issues related to use of human subjects in research, to facilitate compliance with United States Government regulations, and to provide a framework suitable for continued support by Government agencies, private foundations, industry and the university itself for research involving human subjects at the set of schools and other units under the jurisdiction of IRB-HSBS.

Please Note: If the source of subjects for your project is the Michigan Medicine, use the Institutional Review Board for the Medical School (IRBMED). Telephone 734-763-4768, Email irbmed@umich.edu. Obtain current application material [online](#).

If principal Investigator is a student, the student's faculty advisor MUST sign as the co-investigator, since there is not a place for them to sign as advisor.

Committee Information

The IRB Health Sciences Committee meets monthly and consists of eight regular university members distributed across disciplines, a non-voting university member, and a non-scientist member from the community (not affiliated with the university).

Definition of Human Subjects of Research

Human subject of research means an individual about whom a professional or student investigator conducting research obtains data through intervention or interaction with the individual, or collects identifiable private information.

Interventions in human subjects include physical procedures by which data are gathered, and manipulations of the subject or the subject's environment that are performed for research purposes.

Interactions with human subjects include communications or interpersonal contacts conducted for research purposes.

Private information includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, a medical record). Private information must be individually identifiable (i.e. the identity of the subject is, or may readily be ascertained by the investigator or associated with the information) in order for obtaining the information to constitute research involving human subjects.

Research means a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. Activities that meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes (for example, some demonstration and service programs may include research activities).

Minimal risk means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.

The IRB-HSBS considers certain groups of human subjects particularly vulnerable in a research setting: children, prisoners, pregnant women, fetuses, mentally disabled persons, economically or educationally disadvantaged persons. In reviewing research projects, the IRB-HSBS will scrutinize those involving these vulnerable groups to ascertain that their use is adequately justified, and additional safeguards are implemented to minimize risks unique to each group.

Monitoring of Research

IRB-HSBS is authorized and organized to review any and all types of research in which human subjects are involved, including projects that are not subject to federal oversight.

Informed Consent

The IRB-HSBS will ascertain that the investigators of a research project will obtain from the human subjects, or their legally authorized representative, a legally effective informed consent document.

Basic Elements of Informed Consent are as follows: 1) a statement that the study involves research; 2) a description of possible risks or discomforts and measures to be taken to minimize them; 3) a description of any benefits to subjects or others; 4) a disclosure of appropriate alternative procedures or courses of treatment, if any; 5) a statement describing the manner of how confidentiality will be maintained; 6) for research involving more than minimal risk, explanation as to whether any medical treatments are available if injury occurs, or where further information may be obtained; 7) names and phone numbers of whom to contact for answers to pertinent questions about the research; 8) a statement that participation in voluntary , refusal to participate will involve no penalty of loss of benefits to which the subject is entitled, and the subject may discontinue participation at any time without penalty or loss of benefits to which the subject is otherwise entitled; 9) a statement on the likelihood for the subject's health carrier to encounter any financial burdens resulting from the research; and 10) a statement on any financial benefit which the subject can expect for participating in the research.

Authority of IRB-HSBS

The IRB-HSBS employs a review process in conformity with the Federal Policy for the Protection of Human Subjects (45 CFR 46) and the Federal-wide Assurance (FWA) enacted between the University of Michigan and the Office for Human Research Protections (OHRP) under the Department of Health and Human Services (DHHS).

The review process is the same for all research involving human subjects supported or otherwise subject to regulation by any federal department or agency, sponsored by any other extramural entity, or initiated and funded within the University of Michigan.

The authority conveyed to the IRB-HSBS includes decisions to approve, disapprove, require modifications, monitor, suspend and terminate research projects involving human subjects. Under no circumstance may a decision of the IRB-HSBS to disapprove a project be reversed by another agency of the University of Michigan.

Certain populations of human subjects may be particularly vulnerable in a research setting: children, prisoners, pregnant women, fetuses, mentally disabled persons, economically or educationally disadvantaged persons. In undertaking its review of these subject populations, IRB-HSBS will apply additional protective safeguards as required by federal and state law, institutional guidelines, and any other applicable agency/entity regulations.

The IRB Health Sciences Committee does not evaluate the scientific merit of the research; yet, the scientific merit is a factor in weighing the risks against benefits of the research.

An application for approval of a new project is to be submitted to the IRB-Health Sciences Committee prior to the initiation of the research. Likewise, an application for approval of a renewed project is to be submitted before the approval expiration date from the previous year. Approval cannot be given for more than one year.

At any time during the course of a project, should changes in the protocols, sponsor, investigatorship or informed consent procedures become necessary, a memo must be sent to the administrator for processing and then will be forwarded to the committee chair for authorization to continue under the revised protocol. If, during the course of the research, a human subject develops a health problem that may be attributable to the research, the investigator must suspend the experiment immediately, and report the circumstances promptly to the IRB Health Sciences Committee.

Please Note: The IRB Application can be completed only online.

**THE UNIVERSITY OF MICHIGAN
MEDICAL SCHOOL INSTITUTIONAL REVIEW BOARD (IRBMED)**

<http://www.med.umich.edu/irbmed>

IRBMED
2800 Plymouth Road
Building 520, Room 3214
Ann Arbor, MI 48109-2800

Judy Birk, Director
Telephone: 734-763-4768, Fax: 734-763-1234
E-mail: irbmed@umich.edu

Goals of IRBMED

The purpose of the IRBMED is to promote the protection of human participants in research conducted at the University of Michigan Medical School and UMHHC. The IRBMED protects the rights and welfare of participants in clinical trials and other human subject's research studies by careful review and monitoring of research in accordance with applicable laws, regulations, and University policies. The IRBMED also works with investigators to design and conduct their research projects to minimize risk to human subjects. The IRBMED reviews all planned human subject's research prior to initiation of the research, approves research that meets established criteria for protection of human subjects, and monitors approved research.

Among the members of the IRBMED are physicians and non-physician scientists from various disciplines, nurses, pharmacists, social scientists, behavioral scientists, community members, and non-scientists with special expertise in philosophy, ethics, religion, and prison populations. Hospital and Health Systems attorneys serve as consultants to the IRBMED.

The IRBMED operates under the Federal Wide Assurance given by the University of Michigan to the United States Department of Health and Human Services (DHHS).

The IRBMED is not a scientific review committee, although the scientific merit is definitely a factor in weighing the risks against benefits of the research.

The investigator must also report events and information in accordance with the guidance on the IRBMED Adverse Event and Other Reportable Information and Occurrences web pages.

Region of Supervision of IRBMED

IRBMED is mandated to review and monitor any and all types of research, in which human subjects are involved, including projects that are not subject to Federal oversight. The scope of IRBMED jurisdiction is set forth in the Decision Rules for Selection of a Particular IRB for Research Proposal Review established by OVPR. Federal regulations also allow certain types of research to be declared exempt from review by institutional review boards. Only IRBMED authorized individuals can make the determination of what is exempt, individual investigators cannot make this determination themselves.

The following categories of research involving human subjects may be initiated only after review and approval by the IRBMED:

1. Research sponsored by the Medical School or UMHHC; that is, research funded by the Medical School or UMHHC or funded by third parties but administered through the Medical School, UMHHC, or DRDA on their behalf.
2. Research that takes place on the premises of or uses the property or facilities of the Medical School or UMHHC.

3. Research that takes place elsewhere but involves a faculty or staff member of the Medical School as an investigator in connection with his or her appointment (i.e., that is performed during the time or in the course of providing services for which the individual is compensated by any component of the UMHHC).
4. Research that utilizes any non-public data collected or maintained by the Medical School or UMHHC concerning their patients, research subjects, faculty, staff, and students.

At its discretion, the IRBMED may accept for review and oversight research projects that do not fall into one of the above categories. In addition, the IRBMED may designate the authority to review, approve, and oversee research to other University institutional review boards if they accept it. Finally, IRBMED may make alternative arrangements as permitted under the Common Rule.

The IRBMED will employ a review process, which conforms to the regulatory codes including but not limited to 45 CFR 46 of the HHS (including subparts A-D, see Federal Policy for Protection of Human Subjects); 21 CFR 50, 56, 312, 412, and 812 of the FDA; privacy regulations issued under HIPAA; ethical principles set forth in the Belmont Report, the Federal Wide Assurance enacted between the University of Michigan and the HHS; applicable University policies and procedures. The review process will be the same for all research involving human subjects, supported or otherwise subject to regulation by any federal department or agency, sponsored by any other extramural entity, or initiated within the University of Michigan. The IRBMED meets weekly to act on the applications.

Application Process

An application for approval or request for exemption designation of a new project is to be submitted to the IRBMED prior to the initiation of the research.

Renewal applications (scheduled continuation review) are to be submitted to the IRBMED to receive authorization to continue a previously approved project, in advance of the expiration date. At any time during the course of a project, should changes in the protocol (the procedures for the research), investigatorship, or informed consent document or process become necessary, an application for authorization of the revisions is to be submitted, prior to implementing those changes. In the case of gene transfer protocols, progress reports must be submitted at 6-monthly intervals to the IRBMED and the NIH Office of Recombinant DNA Activities.

An application to the IRBMED is to be submitted, using forms prepared by the IRBMED. These forms are:

1. Initial Project Application for approval of a new project;
2. Application to report the emergency use of a test article;
3. Previously Approved Project Application for scheduled continuation review (renewal) or amendments (changes) of a previously approved project;
4. Written Informed Consent Document Template.

These documents are available as electronic templates (Microsoft WORD). Investigators are required to use the application templates, and encouraged to use the informed consent document template. IRBMED documents and application templates may be obtained [online](#).

Appendix K

Responsible Conduct of Research and Scholarship

School/College/Center/Institute: School of Nursing

The School of Nursing uses a variety of strategies for training all students, post-doctoral fellows, and research or training grant staff to teach and discuss various aspects of the responsible conduct of research. We see this as an integral part of education and training from undergraduate through post-doctoral training. We build on principles of ethical practice that are embedded in all aspects of nursing and our students and faculty, as either pre-licensure or licensed nurses, have ample opportunity to discuss professional norms and ethical principles in that regard. In addition, selected groups of students who are supported on NIH or other grant funds have additional requirements. The school does not have NSF trainees.

This plan outlines a variety of structured and unstructured approaches to addressing the continuum of responsible conduct of research and scholarship. All faculty are aware of the curricular resources available in the University of Michigan's [Responsible Conduct of Research](#) section.

Undergraduate Programs

Baccalaureate students

- All baccalaureate students complete a required research course, dependent on the track they are in. Traditional students complete N257, Introduction to the Research Approach in Nursing (3 credits); second degree students complete N529, Scientific and Analytic Approaches for Advanced Practice (3 credits). These courses examine the research process and various requirements that must be met when conducting research with human subjects. (documented through course syllabi, registration rosters, transcripts)
- Honors students complete seminars at various levels in the curriculum as well as a supervised honors research project. The seminars include N295, Honors Seminar (2 credits); N395, Honors Directed Research (1 – 4 credits); in addition, all students complete N495, Honors Project (1 – 4 credits). All honors students complete PEERRS training and their certificates of completion are maintained in their student files. In addition, all honors students are mentored by established researchers and attend research team meetings; they carry out an Honors research project under the supervision of their mentor. Mentoring includes appropriate citation of sources, authorship and publication practice, management and ownership of data, protection of human research participants. The appropriate IRB review is obtained for all projects. (documented through course syllabi, attendance, registration rosters, transcripts).

Graduate Programs

Master of Science students

- All students are informed about the Master's Handbook (available on the website) at new student orientation which outlines the School of Nursing's Student code of Academic and Professional Conduct, content on plagiarism, and the School and University IRB requirements. These requirements are discussed fully at orientation. (Documented: 1 hour; attendance rosters; signed receipt for handbook in academic files).
- Formal instruction in N529, Scientific and Analytic Approaches for Advanced Practice (3 credits).
- N699, Nursing Scholarly Project, is an optional requirement that few students select. If a student does select N699, it is completed as an individualized mentoring project between student and faculty advisor. Mentoring includes appropriate citation of sources, authorship and

publication practice, management and ownership of data, protection of human research participants. The appropriate IRB review is obtained for all projects.

Doctor of Nursing Practice (DNP) Students

- All students are informed about the DNP Program Handbook (online) at new student orientation which outlines the School of Nursing's Student code of Academic and Professional Conduct, content on plagiarism, and the School and University IRB requirements. These requirements are discussed fully at orientation. (documented 2 hours; attendance roster; signed receipt for handbook in academic file).
- At orientation all students receive a hard copy of Guidelines for Scientific Integrity (2nd Edition; Published by the Midwest Nursing Research Society). Students are oriented to this and then the documents are discussed in three required DNP core courses (N810, N811, N910). (documented 11 hours; registration rosters; transcript).
- All DNP students are required to complete all PEERRS modules during their first year in the program. Certificates of completion are maintained in students' academic files (certificate files in student academic file).
- DNP Scholarly Project, N955: individualized mentoring between student and faculty advisors as students carry out their scholarly project; mentoring includes appropriate citation of sources, authorship and publication practice, management and ownership of data, protection of human research participants.

PhD Students

- All students are informed about the PhD Program Handbook (online) at new student orientation which outlines the School of Nursing's Student code of Academic and Professional Conduct, content on plagiarism, and the School and University IRB requirements. These requirements are discussed fully at orientation. (Documented 2 hours; attendance roster; signed receipt for handbook in academic file).
- At orientation all students receive a hard copy of On Being a Scientist: A Guide to Responsible Conduct in Research (3rd Edition; National Academy of Sciences) and Guidelines for Scientific Integrity (2nd Edition; Published by the Midwest Nursing Research Society).
- All PhD students are required to complete all PEERRS modules during their first year in the program. Certificates of completion are maintained in students' academic files. (certificate files in student academic file).
- PhD students all complete a semester long mentored research experience with a faculty mentor, working on the mentor's research and discussing various aspects of scientific integrity as they relate that that experience. (Report filed by PhD student and mentor addressing how research experience was completed and what aspects of scientific integrity were addressed; filed in student academic record).
- All PhD students on NIH training grants participate in an hourly seminar (3 weeks per month) to discuss various aspects of research. This includes presentations by faculty and student peers on their research and related topics on scientific integrity. (Documented: signed attendance rosters).
- Dissertation research, N995: individualized mentoring between student and faculty advisors as students carry out their dissertation requirement; mentoring includes appropriate citation of sources, authorship and publication practice, management and ownership of data, protection of human research participants
- As of September 2014, all PhD students are required to complete N803: Responsible Conduct of Research and Scholarship that meets national requirements for research training.

Post-Doctoral Fellows

- All post-doctoral fellows are required to complete pertinent PEERRS modules in the conduct of their research. Certificates of completion are maintained in post-doctoral fellows' files.
- Issues germane to the protection of research participants are regularly discussed in research team meetings of which post-doctoral fellows are members.
- Currently the UMSN has a T32 focused on Health Promotion Risk Reduction Interventions with Vulnerable Populations. As part of this training grant, pre and post-doctoral fellows are required to attend a monthly two hour seminar. Topics covered as didactic presentation in addition to individual student presentations include: authorship and publication practice, management and ownership of data, protection of human research.
- participants, and other issues related to scientific integrity. A total of 3 hours is specifically dedicated to RCRS topics (Documented: signed attendance rosters).
- Each faculty sponsor and postdoctoral fellow on the T32 will develop an individual plan germane to the particular research project. This plan is reviewed and documented at individual review meetings with each postdoctoral fellow. Coverage of topics related to responsible conduct of research and scholarship will be included in regular written reports and reviews of each fellow's experience. (documented: in each post-doctoral fellow file)

Grant Employees

- All grant employees are required to complete pertinent PEERRS modules when they join the project. Certificates of completion are maintained in employees' files.
- Issues germane to the protection of research participants are regularly discussed in research team meetings.