



Graduate Student Handbook: 2025–2026



SCHOOL OF NURSING
COLLEGE OF HEALTH
& HUMAN SERVICES

Graduate Student Handbook: 2025–2026

As an Andrews University nursing student, I understand that I must follow the procedures and policies that are included in this handbook, as well as the Andrews University Bulletin.

I acknowledge that I am responsible for this material.

Student's Name *(please print)* _____

Student's Signature _____

Date: _____

This page is the property of the Andrews University School of Nursing, and shall remain in the School files online.



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Table of Contents

Welcome	4
School of Nursing Vision and Mission Statement	4
School of Nursing Philosophy	5
School of Nursing Conceptual Framework	5
Program Description	7
Program Outcomes	8
Student Learning Outcomes	8
Admission Requirements.....	8
American Disabilities Act (ADA) Accommodations	10
Policy Statements	10
Nursing Student Code of Conduct—Disciplinary Procedure	11
Professionalism in Nursing	13
Academic Information and Policies.....	14
Course Methods and Delivery	22
Course Requirements	23
Course Descriptions.....	27
Transfer Credit	33
Graduation Requirements.....	33
Mentoring and Academic Advising of Students.....	33
Practicum	34
Scholarly Project Process Guidelines	36
Appointing the DNP Project Chair Policy	37
DNP Project Completion and Degree Candidacy Process	45
Comprehensive Exam Procedure.....	47
Appendices	49

Welcome

Welcome to the Andrews University School of Nursing. This nursing program is approved by the Michigan Board of Nursing and holds accreditation at the graduate and undergraduate level from the Accreditation Commission for Education in Nursing (ACEN).

This handbook is designed to orient you to policies and procedures used throughout your matriculation in the DNP program. The School of Nursing will review the policies and procedures every year and provide you with updates based on current evidence in nursing practice, accreditation requirements, University policies and academia in general.

School of Nursing Vision and Mission Statement

Vision—To prepare professional nurses to reflect Christian spirituality, caring attitudes, clinical excellence and clinical cultural competence for service and practice in concert with the four main initiatives from the Institute of Medicine and the Robert Wood Johnson Foundation’s report on “The Future of Nursing” (2010):

- Nurses should practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners, with physicians and other healthcare professionals, in redesigning healthcare in the United States.
- Effective workforce planning and policy making require better data collection and information infrastructure.

Mission Statement—The Andrews University School of Nursing, a program based on Seventh-day Adventist precepts and Restoration to the Image of God, provides transformational nursing education which equips students to function as professional nurses in direct care, advanced practice, research and education. Through the following activities, the School of Nursing encourages students to Seek Knowledge and Affirm Faith in order to Change the World.

SEEK KNOWLEDGE	AFFIRM FAITH	CHANGE THE WORLD
<ol style="list-style-type: none">1. Prepare nurses that provide culturally competent, high quality, evidence-based, patient-centered care2. Prepare nurses for first-time licensing and certification success3. Encourage lifelong learning	<ol style="list-style-type: none">1. Prepare nurses to practice within the Christian context of Restoration to the Image of God2. Promote personal spiritual growth3. Teach theoretical underpinning of wellness, illness and disease within the context of the Great Controversy	<ol style="list-style-type: none">1. Teach with service/mission focus, medical evangelism2. Teach current whole-person nursing care across the lifespan, which addresses wellness and illness3. Prepare nurse leaders with a mindset for professional and ethical practice, which incorporates communication (all venues), teamwork and collaboration

School of Nursing Philosophy

The School of Nursing believes in the great controversy between good and evil. We believe that in the beginning, God created the heavens and the earth; the crowning act of creation was man and woman in His image. When Adam and Eve sinned, they began a process of total degeneration in spiritual, mental, physical, social and emotional health that continues today. In order to interrupt this degeneration, Jesus came to this earth to live a perfect life and die for the sins of humanity, thus providing for perfect Restoration to the Image of God and consequent eternal life. This will be actualized at the second coming of Jesus. For the individual, this is possible only through accepting Jesus Christ as Savior, and maintaining an ongoing relationship with Him.

The student who enters this nursing program accepts the educational environment in which they will be prepared to deliver nursing care that demonstrates the goodness, grace and forgiveness of God. They will also be able to express how the presence and saving power of Jesus Christ has positively affected their personal and professional life.

This philosophy will influence education and learning, curricular development and teaching strategies. In addition, it is anticipated that this philosophy will influence the personal health, character, professional performance, ethical judgments and moral integrity of faculty, staff and students.

School of Nursing Conceptual Framework

Key Concept: Restoration

Restoration to the Image of God is the ultimate goal of Christian nursing practice. Christian nurses believe that any improvement in spiritual, mental, physical, social or emotional health is a part of Restoration to the Image of God. Christian nurses acknowledge that in spite of effort, perfect restoration will not be complete on this earth, and illness and degeneration will continue to occur until the second coming of Jesus Christ.

Despite this, God has given a biblically based formula for health and a degree of restoration as allowed on earth. The goal of Christian nursing is to utilize this formula in all nursing activities to promote and maintain health, prevent disease, and treat acute and chronic illness.

This formula is based on the original eight natural remedies/laws of health (White, 1905): pure air, sunlight, abstemiousness, rest, exercise, proper diet, the use of water and trust in Divine Power. This formula has been a springboard for other representations such as NEWSTART (Weimar, 1978)

- N—Nutrition
- E—Exercise
- W—Water
- S—Sunshine
- T—Temperance
- A—Air
- R—Rest
- T—Trust in Divine Power (Weimar, 1978):

and CREATION Health (REED, 2007), which includes:

- C—Choice
- R—Rest
- E—Environment
- A—Activity
- T—Trust in Divine Power
- I—Interpersonal Relationships
- O—Outlook
- N—Nutrition

Conceptual Definitions

Restoration

- Returning to an ideal state
- Returning to a previous state of wellbeing, or achieving a state better than what is currently experienced

Image of God

- A multi-dimensional concept related to all aspects of human existence
- The ultimate goal is enhancing the divine image in persons, families, communities, institutions and systems in ways that promote health and prevent disease.
- Restoration may be related to physical, mental, social or spiritual health. While ideally nurses strive to restore clients in all dimensions, improvement in any area helps move a client toward restoration. Therefore, even an individual with a terminal illness may be “restored” toward the image of God through other dimensions of health. The same holds true with any deficit that is keeping an individual from being in complete health.

Disease

- An interruption, cessation or disorder of body functions, systems or organs. *Stedman’s Medical Dictionary for the Health Professions and Nursing* (7th ed.). (2011). Lippincott Williams and Wilkins.

Illness

- Illness is a state in which a person’s physical, emotional, intellectual, social, developmental or spiritual functioning is diminished or impaired compared with previous experience. Potter, P. A. & Perry, A. G. (2016). *Fundamental of nursing* (9th ed.). Mosby Inc.

Degeneration

- Deterioration; passing from a higher to a lower level or type;
- A worsening of mental, physical or moral qualities;
- A retrogressive pathologic change in cells or tissues, in consequence of which their functions are often impaired or destroyed; sometimes reversible; in the early stages, necrosis results. *Stedman’s Medical Dictionary for the Health Professions and Nursing* (7th ed.). (2011). Lippincott Williams and Wilkins.

Promote and Maintain Health

- Involves individuals or aggregates in a process of self-determination of practices and choices enhancing global wellness.
- Health promotion is based on knowledge and understanding of laws of health and the active choice of improvement of personal health habits.
- Resources and skills must be developed so that current health is maintained, or a higher level of health can be achieved.

Prevent Disease

- Associated with behaviors that assist at-risk individuals or aggregates in avoiding development of, or complications related to specific conditions.
- Primary prevention relates to protection against specific health problems, with the focus on increasing a person’s resistance to specific illness.
- Secondary prevention involves early identification of, and prompt intervention for health problems.

Treat Acute and Chronic Illness

- Tertiary prevention/disease management is concerned with restoration and rehabilitation within limits imposed by a health problem, once a condition is already present.

The purpose of the Doctor of Nursing Practice (DNP) Student Handbook is to provide students with the information needed to progress through the DNP program. Students should also be familiar with all policies and procedures in the Andrews University Graduate Handbook, as well as the Andrews University Bulletin. If there are questions about the information in the DNP Student Handbook, students should contact their advisor, the director of the DNP program, or the Andrews University School of Nursing chair.

Program Description

Mission: The Andrews University School of Nursing, a program based on Seventh-day Adventist precepts and Restoration to the Image of God, provides transformational nursing education, which equips nurses to function as Advanced Practice Healthcare Providers.

Goal: The goal is for students to seek knowledge within a scholarly context, transform and grow professionally while simultaneously affirming their faith; and complete the program with an aim toward changing their local, national and global world.

The DNP program is designed to prepare experts in specialized advanced practice nursing. The DNP degree encompasses advanced practice nursing that influences healthcare outcomes for individuals, families and populations, including the direct care of individual patients, application of evidence-based practice models into care of patients; management of care for individuals and populations; administration of nursing and healthcare organizations; and the development and implementation of health policy.

Graduates of DNP programs are prepared for direct care roles (i.e., nurse practitioners, clinical nurse specialists, nurse midwives) and indirect care or systems-focused roles (i.e., administrative, public health and policy) or a blend of these roles.

The DNP curriculum consists of three domains of knowledge to be acquired by the students: 1) Core knowledge, 2) APN competencies and 3) FNP or other role competencies. The curriculum was developed utilizing the following as a foundation and a guide: The American Association of Colleges of Nursing's "The Essentials of Doctoral Education for Advance Practice" (2006); The National Council of State Boards of Nursing and APRN Consensus Work Group's "Consensus Model for APRN Regulation, Licensure, Accreditation, Certification and Education" (2008); QSEN (2014); NONPF NP Competencies (2014), and NLN Competencies for Nurse Educators (2012), as well as published articles on DNP curriculum.

Uniqueness/Distinctiveness: The uniqueness and distinctiveness of this DNP program is its online access, which provides greater access to nurses in the world church who want their doctoral education to be from a Christian Seventh-day Adventist perspective.

Program Outcomes

The DNP program prepares advanced practice nurse leaders to function on many levels in complex health-care systems. Upon completion of the DNP program, graduates will be able to:

1. Meet the standard to practice as a doctorally-prepared, certified Advanced Practice Family Nurse Practitioner or other identified advanced nursing practice role in the current healthcare environment and achieve employment in the role of doctorally prepared advanced practice nurses.
2. Students will complete the DNP program within 150 percent of allotted time.
3. At least 80 percent of graduates will secure employment in the role-specific discipline within 12 months of graduation.

Student Learning Outcomes

1. Integrate knowledge from nursing, biophysical, social, analytical and organizational sciences into practicing, developing and transforming advanced practice nursing within a spiritual context.
2. Integrate organizational and system thinking as well as leadership knowledge in designing, implementing and/or evaluating approaches to quality in care delivery.
3. Use clinical scholarship and analytical methods to critically appraise the literature, and develop, implement and evaluate strategies and best practices in providing healthcare.
4. Develop leadership in critical analysis, information management, advocacy and education, in shaping healthcare policy at the local, state and national levels.
5. Employ consultative, collaborative and leadership skills with intra-professional and inter-professional teams to foster effective communication, enhance health outcomes, and create positive change in complex healthcare delivery systems, and across diverse populations in order to address health disparities.
6. Implement principles of learning theory, curriculum development, and teaching strategies in advanced practice for impacting individuals, families, communities, institutions and/or systems, in order to achieve the goals of improved healthcare
7. Transition from entry level of nursing practice to advanced level of nursing practice, while developing higher level clinical, leadership, advocacy, and scholarship, knowledge and skills.

Admission Requirements

DNP Application Deadline and Process:

The application deadline for each cohort is July 15. Cohort starts in the fall session.

With each new cohort an orientation is provided online before courses begin.

Admission Requirements:

1. Must meet standard admission requirements for graduate admission at Andrews University.
2. Other requirements below:

REQUIREMENTS	STANDARD
Minimum overall GPA	3.25 on a 4.0 scale in the highest nursing degree
Letters of recommendation	Two <ul style="list-style-type: none"> Professional colleague with at least a master's degree Current supervisor
Resume	CV also acceptable
Goal Statement (500 words)	Use these points to develop your goal statement: <ul style="list-style-type: none"> Identify your specialty role (Family Nurse Practitioner concentration or other non-NP nurse leader role). Describe how this specialty role will help you achieve your future goals. Identify an area of interest for scholarly project, if known.
Degrees	BSN or MSN from an accredited school (ACEN or CCNE and other accrediting bodies for foreign degrees)
Undergraduate/Graduate courses required with a grade of B or better	<ul style="list-style-type: none"> Statistics
License	<ul style="list-style-type: none"> Current unencumbered RN license. MSN students may submit proof of clinical hours completed in their MSN programs for up to 500 hours of clinical time to be applied to their DNP program.

- Faculty reserve the right to require an interview of applicants based on reasons they identify.

Provisional Admission

Students placed on provisional admission by the School of Nursing have two semesters/five courses to clear provisional status and achieve regular admission status. If the student does not satisfy regular admission requirements after two semesters/five courses of provisional admission, the student may be dismissed. Graduate enrollment may have additional provisional requirements with differing timelines.

Online Program Authorization for U.S. and Canadian Students

Before applying, out-of-state students, or those who may relocate during the program, should contact their State Board of Nursing to confirm that Andrews University is authorized to offer distance education and/or nursing clinical education in the student's state of residence. The Andrew's University Compliance Officer will determine the University's status in that state. Go to andrews.edu/chhs/nursing/programs/graduate.html and click "DNP general licensure disclosure" under the ACEN logo for a list of approved states.

Andrews University is approved for online education in all 50 states. Nursing clinical, however, is approved in each state separately by the state board of nursing. If Andrews University does not currently have approval from your state board of nursing, it does not impact your education or your degree, but it could have licensing implications after graduation. If you have questions about this, please contact your state board of nursing for more information. Regulation of distance education for graduate nursing is always in flux and it is the student's responsibility to always check with their state board of nursing for any updated guidelines or alternate interpretation of the guidelines prior to applying to Andrews University.

International Students

Students who have a permanent address outside the U.S. and Canada are not eligible to apply for the Family Nurse Practitioner concentration. International students may take the DNP Leadership track if this can be done in the home country and resources for clinical practice and preceptors for their specialty role are available. Discuss this with the DNP program director or an advisor prior to admission.

On-campus Required Time

Students will be required to spend approximately one week on campus to complete the intensive in Health Assessment. The rest of the degree is done through online methods. Students do have weekly assignments and intermittent scheduled Zoom meetings scheduled as a part of class.

Work Expectations

FNP students with less than one year clinical work experience as an RN in the U.S. or Canadian healthcare systems must work while in school to gain clinical experience prior to their clinical courses. Students outside the U.S. must have at least one year work experience in their own country by the time of clinical courses.

American Disabilities Act (ADA) Accommodations

Andrews University accepts and appreciates diversity in its students, including students with learning and other disabilities.

If you feel that you have a learning, psychological and/or emotional disability, it is mandatory that it be formally documented by an appropriate and credentialed counseling and testing center in the area that the student lives in. Without this documentation, no accommodation will be granted.

If you qualify for accommodations under the American Disabilities Act, please see your instructor and advisor as soon as possible for referral and assistance in arranging such accommodations.

Academic Accommodations

Students who require accommodations may request an academic adjustment as follows:

1. Read the Andrews University Disability Accommodation information at andrews.edu/services/sscenter/disability/
2. Download and fill in the disability form at andrews.edu/services/sscenter/disability/accommodationsreqform.pdf
Preferably type answers. To save a digital copy, 1) print to file and save, or 2) print and scan. Email the completed form and disability documentation (if any) to success@andrews.edu or fax it to 269-471-8407.
3. Email sdestudents@andrews.edu to inform the College of Education & International Services that a disability has been reported to Student Success.

Policy Statements

Notice Regarding Policies and Procedures

All nursing majors are expected to be familiar with and observe the policies and procedures of Andrews University and the School of Nursing. These policies and procedures can be found in:

1. Andrews University Bulletin
2. Andrews University School of Nursing Graduate Student Handbook
3. Andrews University Student Handbook

The Andrews University School of Nursing Graduate Student Handbook is available online year round, with updates made at the beginning of each academic year. New policies and procedures to be implemented during the school year will be communicated via email and on the website.

Nursing Student Code of Conduct— Disciplinary Procedure

Why a Nursing Student Code of Conduct

It is important to understand that the standards of conduct to which students are called apply not only to the classroom and online environments, but to all student interactions including those with teachers, with other students in the School of Nursing (both online and on-campus), and with the community at large. In all of these interactions, nursing students represent Christ, the School of Nursing, the College of Health & Human Services (CHHS) and Andrews University. Therefore, students are expected to live according to the standards and ideals set forth in the Holy Scriptures and policies of the aforementioned entities.

The School of Nursing is being intentional about contacting other schools/departments, offices, and entities on campus so that regular channels of communication are established related to matters of nursing student conduct. We want to know from others how our students are functioning elsewhere so that they know that the nursing school is serious about the conduct of its students, and that action will be taken when problems occur.

The policies to which nursing students are held include those that apply to all students of Andrews University as identified in the [Andrews University Student Handbook](#) and the [American Nursing Association Code of Ethics](#).

When incidents of substance abuse, discrimination, harassment, bullying, sexual harassment, stalking, sexual assault, domestic/relationship violence, or other incidents of criminal behavior are reported, they will be handled first by the University's Division of Campus & Student Life. They will notify the CHHS Dean's Office who will refer the matter to the Nursing School Student Conduct Committee (NSSCC). This committee, working in conjunction with Campus & Student Life, will consider each report, and may impose penalties in addition to those imposed by the University. Disciplinary actions may include, but are not limited to the following:

- A requirement to participate in counseling sessions
- Reparation/restitution being made to the offended party
- Suspension from the nursing School's program of study for a period of time
- Dismissal from the nursing program

If referred for counseling, a student will be required to sign a release of information giving the counselor/therapist permission to disclose to the Nursing School Student Conduct Committee a clinical summary of the student's progress and of any recommendations that are made. In making the referral to the counselor/therapist, the committee will give the counselor/therapist the specifics of the committee's concerns and supporting documentation. The student will be asked to sign a release of information giving the committee permission to disclose this information. A refusal to sign these release of information forms will result in indefinite suspension or dismissal from the School of Nursing depending upon the seriousness of the offense.

Likewise, when another entity on campus (e.g., Campus & Student Life) is involved in the disciplinary process, a full report of their investigation and actions taken will be required by the Nursing School Student Conduct Committee. If they make recommendations in addition to those made by the committee, a report of the outcome of their recommendations will be required by the committee before any recommendation for student reinstatement will be made.

This policy is intended to convey to the University and larger communities that the School of Nursing does not condone nor support any type of behavior in which our students are perpetrators of violence of any type, bullying, predatory behavior, sexual misconduct, threats or harm to others, verbal harassment, libel or slander, or other unprofessional and disrespectful behaviors. The objectives of this policy are: 1) that the School of Nursing will be a safe place for its students, faculty and staff to pursue their studies and work, and 2) that nursing students will safely relate to others on the online or face-to-face learning environments of Andrews University's campus.

School of Nursing Student Conduct Committee

The Nursing School Student Conduct Committee (NSSCC) is composed of five members including the School chair, program director, student advisor, Student Life representative, and one other individual, taking diversity into consideration. This committee will be empowered by the dean's office to act on its behalf in all matters of student misconduct and discipline.

The NSSCC is tasked with reviewing complaints related to nursing student conduct, gathering data from as many sources as possible to assess the truth of the complaint, evaluating the egregiousness of the conduct violation, and making a decision about the disciplinary action that will be taken. When a disciplinary action is taken, the NSSCC will assign one or more individuals from the nursing school to maintain contact with the student for purposes of redemptive mentoring, encouragement and support. When the student is involved in counseling or other forms of remedial action, a report will be sent to the NSSCC and evaluated by the committee. Students undergoing any type of disciplinary action cannot be returned to active student status without a positive recommendation from the NSSCC. Appeals to the decisions of the NSSCC must be made to the dean of the College of Health & Human Services.

Restrictive Policies

Policies which may have a restrictive impact upon a students' progress into and through the nursing program shall be implemented according to the following schedule:

- Approved policies shall take effect at the beginning of the academic year when they are published; unless it has to do with curriculum/program changes that affect the integrity of the program
- Policies will be posted on student emails following approval by the appropriate council, with the expected date of implementation

Academic Integrity

In harmony with its mission statement in the Andrews University Bulletin, students are expected to demonstrate the ability to think clearly for themselves and exhibit personal and moral integrity in every sphere of life. Thus, students are expected to display honesty in all academic matters.

Academic dishonesty includes (but is not limited to) the following acts:

- Falsifying official documents.

- Plagiarizing, which includes copying others' published work and/or failing to give credit properly to other authors and creators.
- Misusing copyrighted material and/or violating licensing agreements (actions that may result in legal action in addition to disciplinary action taken by the University).
- Using media from any source or medium, including the Internet (i.e., print, visual images, music) with the intent to mislead, deceive or defraud.
- Presenting another's work as one's own.
- Using materials during a quiz or examination other than those specifically allowed by the teacher or program.
- Stealing, accepting or studying from stolen quizzes or examination materials.
- Copying from another student during a regular or take-home test or quiz; assisting another in acts of academic dishonesty.

Professionalism in Nursing

In nursing, professionalism reflects the act of providing quality patient care while honoring the values of respect, advocacy and responsibility. Professionalism also extends to a nurse's ability to communicate clearly and self-reflect on behaviors and actions, always striving for both professional and personal development. Professionalism looks to preserve the respect and dignity of all.

Applications of Nursing Professionalism

There are many ways in which nurses can exhibit professionalism to benefit their patients, organizations, coworkers and careers. According to the code of professional standards as outlined by the Nursing and Midwifery Council (NMC), nurse professionals in healthcare settings can do their best to customize care to patients' needs, proactively collaborate with medical staff and colleagues, and act with honesty and integrity, especially when under pressure. Other guidelines speak to additional core components of nursing professionalism, including the following.

- **Care Comes First**—Communication is key. Listen to others and provide information and advice clearly so everyone can understand. Make well-informed decisions that are best for the situation at hand.
- **Individual Treatment**—Treat patients and colleagues as individuals with their own unique values, beliefs and needs.
- **Respect Dignity and Authority**—Protect patient privacy. Never give client information to an unauthorized person, and preserve anonymity when citing patient cases in coursework, research or other public documents. Professors and instructors should always be treated and addressed respectfully as persons of authority. Written communication should always include a proper addressing such as "Dr. Smith" or "Professor Smith." Communication with all colleagues and professors should work toward common resolution and negotiation and not include blame or inflammatory language in person or in written communication, even when you may disagree with their decisions.
- **Work Together**—Cooperate with team members and respect their contributions. Always treat everyone with respect. Admitting when you are in the wrong and apologizing is always a respectful action when appropriate. Seeking appropriate resolution and best practices according to published guidelines and policy is the best course of action. Seeking to understand the opinions and statements of others from their point of view is needed.
- **High Standards of Care**—Be punctual in all your work. Acknowledge when a situation is beyond your professional scope. Don't be afraid to ask for help.

- **Honesty and Integrity**—Do not plagiarize coursework or professional assessments. Do not cheat on assignments, use unauthorized sources on exams, or assist yourself or others to improve earned grades inappropriately. Be honest about your work, use constructive feedback for improvement. Compile an accurate CV to reflect your education and work experience. Always aspire to the highest levels of personal and professional conduct.
- **Uphold Your Reputation**—Be aware that all actions—even outside of work/school—have consequences.

Andrews University takes seriously all acts of academic dishonesty and unprofessional behavior. Such acts as described above are subject to incremental discipline for multiple offenses and severe penalties for some offenses.

Academic dishonesty is tracked in the Office of the Provost. Repeated and/or flagrant offenses will be referred to the Committee on Academic Integrity for recommendations on further penalties. Consequences may include denial of admission, revocation of admission, warning from a teacher with or without formal documentation, warning from a chair or academic dean with formal documentation, receipt of a reduced or failing grade with or without notation of the reason on the transcript, suspension or dismissal from the course, suspension or dismissal from the program, expulsion from the University, or degree cancellation. Disciplinary action may be retroactive if academic dishonesty becomes apparent after the student leaves the course, program or University.

Schools and faculty members may publish additional, perhaps more stringent, penalties for academic dishonesty and unprofessional behaviors in specific programs or courses.

Academic Information and Policies

Online Course Week—Start and End Dates

See course schedule for course duration. Courses vary in length from six–16 weeks.

- Courses start on Monday of Week 1 at 12:01 a.m. EST.
- Courses end on the date set in the academic calendar. For courses that end prior to the conclusion of the semester, see the syllabus for the end date.
- Students should expect a mandatory online zoom session in the first week of the course. (See course schedule)
- Once students have activated their AU student ID after admission, they will be enrolled in a mandatory online orientation course that will assist with registration, writing, learning about online education, and other informative content.

Submission Times

- A day is comprised of the time frame between 12 a.m. to 11:59 p.m.
- Any course work due on a specific day must be submitted during these times in order to be accepted.
- No course work will be accepted after the last day of the course, unless permission is received from faculty teaching the course. Be sure to submit assignments to “Turnitin” and check the results, to make sure you have not plagiarized inadvertently.
- Acceptable similarity score from Turnitin is equal to or less than 25 percent.

Student Participation

- Courses are not to be considered independent study courses, but essential shared learning communities. Therefore, it is imperative that students participate with substantive and timely postings to the online discussion board as outlined in the course syllabus.
- Failure to post the expected frequency and quality will result in grade reduction for the discussion.
- Students are not allowed to post ahead in any week.
- Students are required to check and utilize their andrews.edu email address when communicating with faculty, administration or staff.

Faculty Participation

- Faculty members are expected to facilitate student personal, professional and spiritual growth through guided responses on the discussion board which provide critical insight, stimulate new ideas or raise awareness.
- Faculty members are required to be accessible to the student, which is demonstrated through visibility and quality feedback on discussions and assignments.
- It is reasonable for students to expect the faculty will be online at least three times per week, except as communicated by the faculty (for example, not online on Saturday or Sunday) and be reasonably accessible to students by providing contact information in their biography link.
- Faculty members are also encouraged to use andrews.edu email addresses when communicating with students.
- Faculty members are to respond to and/or grade student assignments within seven days of due date with the exception of end-of-semester major papers and scholarly projects that can be expected to be graded within two weeks of submission.
- The returned assignment should reflect appropriate comments using the course-grading rubric; and the student can expect that faculty members will provide comments that facilitate personal and professional development in the academic setting. Faculty members are expected to respond to questioning and student emails within 48 hours except on holidays and weekends.
- If the response requires additional time, the faculty should communicate this to the student.

Students may receive credit for work completed in the following ways:

- Essays
- Internet videos, assignments, etc.
- Clinical logs
- PowerPoints
- Exams/quizzes
- Discussion posts
 1. The grading for discussion activities is outlined in the course-grading rubric.
 2. Students are required to:
 - a. Support their discussions with citations.
 - b. Write in APA style and provide a reference list at the bottom of their posting.
 3. Make sure that you allow enough time for computer problems to ensure that you post on time.
- Various assignments
 1. Credits will be awarded for assignments guided by a grading rubric in each course.
 2. The course syllabi are available for accessing the grading rubric in every course.
 3. Students should use the rubric as a method of ensuring the objectives of the assignment are met.

4. If the student has significant life issues (this does not include vacations/ honeymoons/work schedules, etc.) that impede completion of assignments in a timely manner, they must contact the instructor for that course 24 hours prior to the due date to make other arrangements.

Course Policies

Incomplete Policy: An Incomplete (I) can be assigned only if the following stipulations (according to University policy) are met. (*Please note: Students will be charged an Incomplete fee for each Incomplete grade issued*):

- when the major portion of the work for the course has been completed (this is at least 80 percent of the hours in the clinical component),
- student's work is Incomplete because of illness or unavoidable circumstances
- Incompletes cannot be assigned because of negligence or inferior performance.

Faculty must submit an Incomplete contract which states:

- the remaining work to be completed
- a plan with timelines for completion of the work
- the time limit
- the grade the student will receive if the work is not completed by the agreed-upon time

An I shall be removed during the following semester. Any request for an extension of time beyond the contracted time shall be made in writing before the end of the contracted date and approved by the dean of the college in which the course is offered. The number of I's on a student's record affects the student's class and workload.

Any incomplete in a clinical course will also result in an incomplete in the corequisite theory course and should the I progress to an F, both the clinical and theory courses will need to be petitioned for repeating, if eligible, the next time the course is offered at Andrews University.

Copies of the agreement are given to the student, the instructor and the registrar at Andrews University. The grade I must be removed in the next enrolled semester or the grade will automatically be converted to an F.

DG—Deferred Grade. A DG may be given in certain courses recognized to be of such a nature that all the requirements are not likely to be completed within one semester. In the DNP program, it may be given for projects, intensives, comprehensive exams, independent study courses.

Clinical hours are expected to be completed within the semester registered. A clinical course is housed in a semester and may not be moved beyond the semester end date without an approved petition to the DNP committee for rationale and circumstance for this need. A DG may be assigned for rare circumstances. A DG in a clinical course will stop progression until the DG is cleared and the next course in the sequence is offered (typically one year). Students will register to complete the DG with NRSG 765 Program Completion. If the student has not cleared the DG by the end of the following semester when the DG was assigned the student will receive a U in clinical.

The Office of Academic Records records a DG for the above listed courses previously recommended by a school and approved by the dean of the appropriate school and/or graduate program committee. An instructor may designate a time limit for a given course or a specific situation for the DG to be changed to a letter grade. All DGs are required to be cleared before a student can graduate. An instructor may change the DG to a letter grade (A–F), S/U.

Late Assignments: Assignments submitted late without prior agreement of the instructor, outside of an emergency absence, or in violation of agreements for late submission, will receive a grade reduction for the assignment amounting to a 5 percent point loss per day. After five days, the assignment will not be graded and the student will receive a grade of 0 for the assignment.

Students should be aware that late assignments may not receive the same level of written feedback or in the same timeframe as do assignments submitted on time. Late postings impact the quality and quantity of class discussions and often forfeit the opportunity for valuable peer feedback.

Exam Policy: Courses in the 3 Ps (pathophysiology, pharmacology, physical assessment) will have at least two proctored exams or standardized exams given. Student will work with sdeexams@andrews.edu, 269-471-6577, for setting up proctoring at least two weeks prior to scheduled exam. Andrews offers remote proctoring at no charge for online students. Other courses may have proctored exams at the instructor's discretion. Exam and quiz questions will not be revealed in any online or email format. However, students may contact instructor for further information related to course content.

Withdrawal Policy: The current withdrawal policy can be found online at andrews.edu/distance/students/gradplus/withdrawal. Part of withdrawing from the University includes withdrawing from all your courses as well as notifying Student Financial Services of your decision to withdraw. Students should note there could be unexpected financial consequences of withdrawing if these two items are not completed in a timely fashion. Students are expected to submit assignments by the due dates noted in the course. In extenuating circumstances, such as illness, the student must contact the instructor as soon as possible to discuss the situation. In those circumstances, faculty will determine the appropriate course of action for the student. Depending on the situation, these actions may include recommendations to drop the course (if within the University drop/withdrawal period), acceptance of some or all of the overdue assignments with or without penalties, or failure to accept assignments.

Students should note that the course schedule in the DNP program does not perfectly match the University schedule therefore course drop and withdrawal are relative to the DNP course schedule.

Changing/Dropping a Course: The first two weeks of the course are allocated for necessary changes related to the course. Courses may be dropped without entry in the final record within two weeks of the first day of classes. Courses may be dropped only after consultation with the student's adviser and the course instructor. To drop a course after the published date, students must complete a drop/add form found at andrews.edu/services/registrar/students/forms/drop-add.pdf. Complete it with exception of signatures and send it to your instructor first, then to the program director. The School of Nursing will navigate it from there. Please keep the original PDF format so all can sign.

Dropping a course may affect the sequencing of the program of study and may change the student's expected date of completion of program requirements.

Repeating Courses: DNP students are required to earn a B (3.0) or higher in all required courses. Students may repeat one course one time for course grades below a B (3.0). If they are not successful in earning a 3.0 or higher on the repeat, they may be dismissed from the program. The repeated course must be taken at Andrews University in order to exchange the first grade for the repeated grade on the Andrews transcript.

Good Academic Standing

Good academic standing is defined as a cumulative GPA of 3.25 or higher, and no more than one grade below a B- in total courses taken.

Grades below a B Policy

A student may repeat one course, one time, due to a grade below a B. Students are allowed to receive a B- in one course only, but the GPA must be at least 3.0 (B) when this occurs. Two courses below 3.0 (B) may cause termination of the degree process. The current policies for graduating with a 3.25 GPA still apply. Students should be aware that some courses may stop progression.

Completion of Program

Students admitted to the DNP program must complete all courses within the time frame required by the School of Graduate Studies. Students are recommended to stay with their cohorts so that all classes are taken sequentially. Leaves of absence are counted in this time frame. When a student steps away from their planned course schedule by not taking certain courses, this may result in additional time for program completion.

Progression

Most required DNP courses are sequential, and a student who fails to take or to pass sequential courses cannot progress in the nursing curriculum until the course has been successfully completed. A student seeking a waiver of this policy must submit a written request to the Admission, Progression, Retention & Grievance Committee for an exception to the rule.

- The sequence of courses are DNP core, APN core, role specialty courses and clinicals, and the final capstone course and comprehensive exams. If the DNP core is not completed prior to the APN core, the student must submit a plan to their advisor of when this will be completed. The DNP APRG committee approval is needed to proceed if more than a single course is involved in this plan. APN core and beyond have a regulated sequence of prerequisites and corequisites to satisfy. Any deviation from the cohort schedule may delay program completion.
- Students are expected to maintain a 3.25 grade point average.
- The academic performance of students is reviewed by the DNP Admission, Progression, Retention & Grievance Committee at the end of each school year. Students will be placed on academic probation if they are not able to maintain a GPA of 3.25.
- Academic probation will be for one academic year, after which the overall GPA should be a 3.25 or the student may be dismissed.
- A student may be placed on probation only once during the entire program of study after which the student will be dismissed.
- A student making a grade of less than a B in two courses may be dismissed.
- The DNP Admissions, Progression, Retention & Grievance (APRG) Committee is the authority in all cases of exception to policy. If an exception is needed, students will write a formal petition to the APRG that includes a detailed rationale, request, dates applicable, etc. that could allow the APRG to have the information needed to make a ruling. The petition may be emailed to the program director.

Readmission

A student who has been dismissed or has withdrawn from the program may reapply to the APRG Committee for readmission. The committee will consider such cases on presentation of substantial evidence of a responsible and successful period of work or study during the intervening period that would indicate a change whereby success is more likely at this time.

A former student having successfully completed a tour of duty in the Armed Forces will be classified as readmission. There is no guarantee, however, that a student will be readmitted. This will depend on (a) the APRG Committee's evaluation of the likelihood of the applicant's successful performance in succeeding work, (b) the competition with other applicants, and (c) class space available. Course sequencing still applies and missed courses must be completed before moving to the next sequence. This may delay program completion.

Any student who has a break in enrollment, including a deferral or leave of absence, must submit information for a new background check and drug screen if this break in enrollment is over one year. All students must maintain Exaat clearance at any time they return.

Student Complaint and Grievance Procedure

Faculty members welcome the opportunity to work closely with students to facilitate learning and assist in meeting course objectives. The student should first discuss any concerns regarding an instructor or a course with the instructor involved. If further discussion is needed, the bulletin policy related to grievances at <https://bulletin.andrews.edu/content.php?catoid=9&navoid=1720>. Online students may expect face-to-face meetings via Zoom. All concerns must also be submitted in writing (email format is acceptable) for the record.

Withdrawal from the DNP Program/Andrews University

Students planning to withdraw from the DNP program must email a formal letter to the program director informing them of this decision. The program director will initiate a formal letter of reply noting withdrawal status. Students planning to withdraw from the University should work with their advisor and contact the registrar's office to initiate proper procedures. Students with financial aid should contact their financial advisor for implications of withdrawing from the University and inform financial aid if the withdrawal occurs. Students also must also drop all course to avoid full charges for courses dropped.

Leave of Absence

Leaves of absence are granted for a minimum of one semester or a maximum of one year. For a leave of absence, students should write a formal request to the DNP Admission Progression Retention & Grievance Committee, specifying the reason for the necessary leave and the expected date of return. Students may return prior to their stated date by contacting the program director for an agreeable time to return.

Students must be in good academic standing at the time of the leave of absence. If students are not in good academic standing they may not apply for LOA but will be dismissed if they do not enroll for the following semester. Consideration for re-enrollment would be requested through the APRG Committee.

Leaves of absence must be approved by the academic advisor and the DNP program director as well as the Admission, Progression, Retention & Grievance Committee. Time spent on leave of absence is included in the total time taken to complete the degree.

Continuous enrollment is required unless leave of absence is approved or students are awaiting the next course in their sequence to be offered. Since the program runs year round, students must take a leave of absence for any semester they are not in attendance. At the end of the leave of absence, the student must notify the School of Nursing Admission, Progression, Retention & Grievance Committee of their intent to return or not to return. A student failing to register at the conclusion of the stated leave period or the next sequential course offering in their program is withdrawn from the program and the University, and must reapply for admission unless the leave is extended by the DNP Admission, Progression, Retention & Grievance Committee.

Exceptions to the leave policy will be granted for students out of course sequencing awaiting their next course offering. These students will retain active status, in consultation with the academic advisor, until their next course is offered. They must register for the next course in sequence at its first offering. Any exceptions/extensions will be petitioned through the APRG Committee for a decision or the student will be dismissed.

Attendance Policy

At the beginning of the semester the instructor will explain expectations for attendance and participation for a course and their influence on the evaluation process. It is expected that students will attend all synchronous and asynchronous DNP classes and practice experiences. Attendance is mandatory for on-campus intensives.

Students are expected to attend/participate in all courses regardless of educational format. The instructor is under no obligation to accommodate students who are absent or who miss work without prior notification and makeup arrangements.

Please remember that your timely participation is necessary and vital to your understanding of the course material and makes the course run much more smoothly.

It is the responsibility of the student to attend all scheduled online classes. In emergency circumstances, a student may be permitted to miss a class session under the following terms:

- The student must seek approval from the instructor prior to the missed class. Failure to contact the instructor prior to the missed class will result in zero points for all assignments due that week.
- The student must make arrangements with the instructor to complete all assignments and make up work if assigned by instructor.
- Failure to follow this policy may result in an F for the course.
- To be considered present in online classes, the student must log in and post at least one substantive forum post or assignment per week.

Maintaining Professional Conduct Online

The classroom is a professional environment where academic debate and learning take place. Your instructor will make every effort to make this environment safe for you to share your opinions, ideas and beliefs. In return, you are expected to respect the opinions, ideas and beliefs of other students—both in face-to-face, Zoom and online communication. Students have the right and privilege to learn in the class, free from harassment and disruption.

Netiquette

In courses you will communicate with your classmates and instructor primarily in writing through the discussion forum and email. “Online manners” are generally known as “netiquette.” As a general rule, you should adhere to the same classroom conduct that you would “off-line” in a face-to-face course. Some examples of proper netiquette are:

1. Avoid writing messages in all capital letters. THIS IS GENERALLY UNDERSTOOD AS SHOUTING.
2. Be careful what you put in writing. Even if you are writing an email message to one person, assume that anyone could read it. Though you may send an email to a single person, it is very easy to forward your message to hundreds or thousands of people.
3. Grammar and spelling matter. Online courses demand the same standard of academic communication and use of grammar as face-to-face courses.
4. Never use profanity in any area of an online course. The transcripts of online course discussion forums, email and chat sessions can be saved.
5. When responding to messages, only use “Reply to All” when you really intend to reply to all.
6. Avoid unkindly public criticism of others. Publicly criticizing others in an inappropriate way is known as “flaming.” Consider this course a practice forum for selecting your verbiage thoughtfully and professionally.
7. Use sarcasm cautiously. In the absence of nonverbal cues such as facial expressions and voice inflections, the context for your sarcasm may be lost, and your message may thus be misinterpreted.
8. In a face-to-face or Zoom setting, our tone of voice and facial expressions may convey as much of our meaning as the words we use. In a written message, the subtext of your meaning may be confused or misinterpreted. Write clearly. Use active verbs.
9. Write professionally and respectfully to everyone at all times. (See Nursing Code of Conduct Disciplinary procedure).

Commitment to Integrity

As a student in this course (and at this University) you are expected to maintain high degrees of professionalism, commitment to active learning and participation in this class and also integrity in your behavior in and out of the classroom.

Commitment to Excellence

You deserve a standing ovation based on your decision to enroll in and effectively complete this course. Along with your pledge of “Commitment to Integrity” you are expected to adhere to a “commitment to excellence.” Andrews University has established high academic standards that will truly enhance your writing and communication skills across the disciplines and in diverse milieu with many discourse communities in the workplace.

Commitment to Honesty

Using the work of another student or allowing work to be used by another student jeopardizes not only the teacher-student relationship but also the student’s academic standing. Lessons may be discussed with other students, tutors may help to guide a student’s work, and textbooks, encyclopedias and other resource materials may be used for additional assistance, but the actual response must be the student’s own work.

A student who gives information to another student to be used in a dishonest way is equally guilty of dishonesty. Any violation of this policy will be taken before the Admission, Progression, Retention & Grievance Committee for appropriate punitive action

Grading

Percentage grade ranges for all DNP courses are as follows:

Letter Grade Assignment and Grade Percentages

100–93	A	83–86	B	73–76	C	Below 60	F
90–92	A-	80–82	B-	70–72	C-	Deferred Grade	DG
87–89	B+	77–79	C+	60–69	D	Incomplete	I

All F grades are counted in the computation of grade point ratios, unless the student repeats the course and earns a passing grade.

Course Methods and Delivery

Methods of Instruction

Methods of instruction include assigned readings from the textbook and the course material, online interactions with the instructor and other students via discussion posts, Internet Zoom meetings, chat rooms, teleconferences and more. Regular participation in the course is essential to good performance.

Technical Requirements

Internet connection (DSL, LAN or cable connection desirable).

Learning Hub Access

Courses are delivered online through Learning Hub at <http://learninghub.andrews.edu>.

Your username and password that provides you with access will be your Andrews University username and password. You need to activate your username and password to access LearningHub.

Please do this online at <https://vault.andrews.edu/vault/pages/activation/information.jsp>, if you haven't done so already. Call 269-471-6016 or email helpdesk@andrews.edu if you need assistance.

If you need technical assistance at any time during the course, or to report a problem with LearningHub, please email dlit@andrews.edu or call 269-471-3960.

Intensive Sessions

All students are required to attend a one-week, on-campus intensive session for Health Assessment. Attendance is mandatory for successful completion of the DNP program.

Course Requirements

This program has 4 tracks for student entry: the BSN or MSN with a FNP concentration and the BSN or MSN with a Leadership in Advanced Nursing Practice concentration. The degree requirements for all tracks include the completion of a comprehensive exam, a scholarly project, and DNP practicum experience. Degree requirements for each DNP track follow:

Post-Baccalaureate Degree Requirements (BSN–DNP) FNP Concentration		
<ul style="list-style-type: none"> • 65 semester credits (10 semesters) • 95% online with one mandatory face-to-face experience • Approximately 4.5 years in length (including summers) for Part Time, may move faster if preferred (check with academic advisor for personalized curriculum map). 		
Course Number	Course Title	Credit Hours
NRSG 616	Biostatistics for Clinical Data Management	3
NRSG 644	Research Methods for Evaluation and Outcomes of Advanced Clinical Practice	3
NRSG 670	Scholarly Project Continuation	0
NRSG 685	DNP Advanced Practice Role	2
NRSG 700	Theoretical Foundations for Scholarship in Advanced Practice Nursing	2
NRSG 705	Christian Ethics and Advanced Practice Nursing	2
NRSG 710	Principles of Epidemiology	3
NRSG 715	Organizational Leadership in Healthcare Systems	2
NRSG 720	Information Systems and Patient Care Technology for Healthcare	2
NRSG 726	Interpersonal Dynamics and Cultural Practices in Advanced Practice Nursing	2
NRSG 727	Clinical Health Promotion and Disease Prevention of Populations	2
NRSG 730	Healthcare Policy for Advanced Practice Nursing	2
NRSG 741	Primary Care Management of Infants, Children and Adolescents	2
NRSG 742	Primary Care Management of Infants, Children and Adolescents Practicum	2
NRSG 748	Advanced Pathophysiology Across the Lifespan	3
NRSG 751	Primary Care Management of Women's Health	2
NRSG 752	Primary Care Management of Women's Health Practicum	2
NRSG 755	Advanced Health Assessment Across the Lifespan	3
NRSG 756	Advanced Health Assessment Practicum	2
NRSG 760	Advanced Pharmacology Across the Lifespan	3
NRSG 763	Primary Care Management of Adults	3
NRSG 764	Primary Care Management of Adults Practicum	2
NRSG 767	Evidence-based Family Nurse Practitioner Primary Care Management	3
NRSG 768	Evidence-based Family Nurse Practitioner Primary Care Management Practicum	3
NRSG 770	Teaching Strategies	3
NRSG 775	Learning Theories and Health Teaching	2
NRSG 795	DNP Comprehensive Examinations	0
NRSG 801	Scholarly Project I	2
NRSG 802	Scholarly Project II	3
TOTAL POST-BACCALAUREATE DNP DEGREE CREDIT HOURS—65		

Post-Master's Degree Requirements (MSN–DNP) FNP Concentration

- 56 semester credits (9 semesters)
- 95% online with one mandatory face-to-face experience
- Approximately 4 years in length (including summers)—length may be altered for personal preference (see academic advisor if you wish to take additional credits or move slower).

Course Number	Course Title	Credit Hours
NRSG 616	Biostatistics for Clinical Data Management	3
NRSG 644	Research Methods for Evaluation and Outcomes of Advanced Clinical Practice	3
NRSG 670	Scholarly Project Continuation	0
NRSG 685	DNP Advanced Practice Role	2
NRSG 700	Theoretical Foundations for Scholarship in Advanced Practice Nursing	2
NRSG 705	Christian Ethics and Advanced Practice Nursing	2
NRSG 710	Principles of Epidemiology	3
NRSG 715	Organizational Leadership in Healthcare Systems	2
NRSG 720	Information Systems and Patient Care Technology for Healthcare	2
NRSG 730	Healthcare Policy for Advanced Practice Nursing	2
NRSG 741	Primary Care Management of Infants, Children and Adolescents	2
NRSG 742	Primary Care Management of Infants, Children and Adolescents Practicum	2
NRSG 748	Advanced Pathophysiology Across the Lifespan	3
NRSG 751	Primary Care Management of Women's Health	2
NRSG 752	Primary Care Management of Women's Health Practicum	2
NRSG 755	Advanced Health Assessment Across the Lifespan	3
NRSG 756	Advanced Health Assessment Practicum	2
NRSG 760	Advanced Pharmacology Across the Lifespan	3
NRSG 763	Primary Care Management of Adults	3
NRSG 764	Primary Care Management of Adults Practicum	2
NRSG 767	Evidence-based Family Nurse Practitioner Primary Care Management	3
NRSG 768	Evidence-based Family Nurse Practitioner Primary Care Management Practicum	3
NRSG 795	DNP Comprehensive Examinations	0
NRSG 801	Scholarly Project I	2
NRSG 802	Scholarly Project II	3
TOTAL POST-MASTER'S DNP DEGREE CREDIT HOURS—56		

Post-Baccalaureate Degree Requirements (BSN–DNP) Leadership in Advanced Nursing Practice Concentration		
<ul style="list-style-type: none"> • 67 semester credits (11 semesters) • 95% online with one mandatory face-to-face experience • Approximately 3.5 years in length (including summers)—length may be altered for individual needs, check with your academic advisor. 		
Course Number	Course Title	Credit Hours
NRS 616	Biostatistics for Clinical Data Management	3
NRS 644	Research Methods for Evaluation and Outcomes of Advanced Clinical Practice	3
NRS 685	DNP Advanced Practice Role	2
NRS 700	Theoretical Foundations for Scholarship in Advanced Practice Nursing	2
NRS 704	Creative Critical Thinking and Problem Solving	3
NRS 705	Christian Ethics and Advanced Practice Nursing	2
NRS 710	Principles of Epidemiology	3
NRS 713	Org. Behavior & Leadership	3
NRS 716	Issues in Leadership Foundations	2
NRS 719	Nursing Leadership Practicum	11
NRS 720	Information Systems and Patient Care Technology for Healthcare	2
NRS 726	Interpersonal Dynamics and Cultural Issues in Advanced Practice Nursing	2
NRS 727	Clinical Health Promotion and Disease Prevention of Populations	2
NRS 730	Healthcare Policy for Advanced Practice Nursing	2
NRS 748	Advanced Pathophysiology Across the Lifespan	3
NRS 755	Advanced Health Assessment Across the Lifespan	3
NRS 756	Advanced Health Assessment Across the Lifespan Practicum	2
NRS 760	Advanced Pharmacology Across the Lifespan	3
NRS 770	Teaching Strategies	3
NRS 775	Learning Theories and Health Teaching	2
NRS 795	DNP Comprehensive Examinations	0
NRS 801	Scholarly Project I	2
NRS 802	Scholarly Project II	3
NRS xxx	Leadership Elective	2
NRS xxx	Leadership Elective	2
TOTAL POST-BACCALAUREATE DNP DEGREE CREDIT HOURS—67		

Leadership in Advanced Nursing Practice Concentration Electives (Must choose two of the following)		
Course Number	Course Title	Credit Hours
NRS 714	Ethical Leadership & Organizational Integrity	1–3
NRS 717	Issues in Leadership Theory	2–3
NRS 718	Leadership and Organizational Dynamics	3
NRS 729	Healthcare Economics & Policy	3
NRS 761	Survey of Operations Management	2
NRS 762	Organization and Management of Healthcare Systems	3
NRS 769	Strategic Marketing Management	3
NRS 776	Assessment of Learning	3
NRS 777	Grant Writing	2
NRS 784	Curriculum Design	2

Post-Masters' Degree Requirements (MSN–DNP) Leadership in Advanced Nursing Practice Concentration

- 42 semester credits (8 semesters)
- 95% online with one mandatory face-to-face experience
- Approximately 3.5 years in length (including summers)—length may be altered for individual needs, check with your academic advisor
- Students must have Advanced Pathophysiology, Advanced Pharmacology, and Advanced Health Assessment or will be required to add those courses to these requirements.

Course Number	Course Title	Credit Hours
NRSG 616	Biostatistics for Clinical Data Management	3
NRSG 644	Research Methods for Evaluation and Outcomes of Advanced Clinical Practice	3
NRSG 685	DNP Advanced Practice Role	2
NRSG 700	Theoretical Foundations for Scholarship in Advanced Practice Nursing	2
NRSG 704	Creative Critical Thinking and Problem Solving	2
NRSG 705	Christian Ethics and Advanced Practice Nursing	2
NRSG 710	Principles of Epidemiology	3
NRSG 713	Organizational Behavior and Leadership	3
NRSG 715	Organizational Leadership in Healthcare Systems	2
NRSG 716	Issues in Leadership Foundations	3
NRSG 719	Nursing Leadership Practicum	4
NRSG 720	Information Systems and Patient Care Technology for Healthcare	2
NRSG 730	Healthcare Policy for Advanced Practice Nursing	2
NRSG 795	DNP Comprehensive Examinations	0
NRSG 801	Scholarly Project I	2
NRSG 802	Scholarly Project II	3
NRSG XXX	Nursing Leadership Elective	2–3
NRSG XXX	Nursing Leadership Elective	2–3
TOTAL POST-MASTER'S DNP DEGREE CREDIT HOURS—42		

Course Descriptions

NRS 616 Biostatistics for Clinical Data Management

Introduces statistical concepts and analytical methods as applied to data encountered in biomedical sciences. It emphasizes the basic concepts of experimental design, quantitative analysis of data and statistical references.

NRS 644 Research Methods for Evaluation and Outcomes of Advanced Clinical Practice

The focus of this course is to provide the knowledge and skills to generate evidence-based knowledge using scientific inquiry to improve outcomes in patient care. The components of research and evaluation processes are explored, culminating in the dissemination of research, evaluation and other evidence-based materials to healthcare professionals.

NRS 670 Project Continuation

Students may register for this continuation course while completing their scholarly project once all required credits of the project have been completed and there is still work to be done. This course qualifies for half-time status, requiring a minimum of 16 hours per week of documented work per semester of registration which includes library privileges and access to an advisor. Requires advisor approval.

NRS 675 Program Continuation

Students may register for this non-credit continuation course to maintain active status and while clearing deferred grade (DG) and/or incomplete (I) course. Registration for this course indicates active status, please see active status for additional information. Registration does not indicate full-time status. Requires program approval.

NRS 685 DNP Advanced Practice Role

This course explores the various roles of the Doctor of Nursing Practice Family Nurse Practitioner. Areas discussed include patient care, health professional education, health policy, research, leadership and more. Special focus is on advanced practice.

NRS 700 Theoretical Foundations for Scholarship in Advanced Practice Nursing

Students examine theories from fields of nursing, philosophy, biology, theology, humanities, psychology, sociology, behavior and health beliefs, along with the Conceptual Framework of the School of Nursing to build the underpinnings and foundational basis for their advanced practice. In addition, conceptualizations of person, environment and health are explored as theories are examined.

NRS 704 Creative Critical Thinking and Problem Solving

Helps leaders learn to make better decisions through creative thinking and problem-solving, focusing on the nature and techniques of critical thought and using multiple perspectives to develop creative strategies for confronting ambiguous and complex issues with practical, well-considered solutions.

NRS 705 Christian Ethics and Advanced Practice Nursing

A study and exploration of ethical problems and dilemmas faced by Advanced Practice nurses in diagnosing, treating, billing and communicating about care to clients, families, healthcare systems, community and society as a whole. In addition, it provides strategies for addressing ethical dilemmas based within a Christian context.

NRS 710 Principles of Epidemiology

Introduces the basic principles and applications of epidemiology. It describes the distribution and determinants of disease in human population; and introduces students to the theory, methods and body of knowledge of epidemiology.

- NRS 713 Organizational Behavior & Leadership**
Application of behavioral sciences to management. The examination of contemporary theories and principles of human behavior. Topics include perception, personality, attitudes, emotions, motivation, leadership, decision-making, communication, group processes, diversity, organizational change, self-awareness, and stress management. A research paper and case analyses are required.
- NRS 714 Ethical Leadership & Organizational Integrity**
Explores the dynamics of moral leadership, ethical decision-making and the administrative role in institutional integrity in organizations and schools.
- NRS 715 Organizational Leadership in Healthcare Systems**
This course introduces the student to the science of complex organizational structures and designs, with an emphasis on leadership within complex healthcare systems. It focuses on healthcare environments in various venues, such as professional, organizational, political, governmental and more.
- NRS 716 Issues in Leadership Foundations**
This course explores the philosophical and spiritual foundations of learning leadership, assisting participants in understanding their own worldview and the perspective of others in the context of their practice.
- NRS 717 Issues in Leadership Theory**
A seminar in the study of leadership theory. This course is intended to provide a wide coverage of leadership theory based on sound research principles, with implications for informed practice. The seminar includes concept formation in such areas as organizational development, historical and contemporary views of leadership, power and influence, "followership," ethical leadership and diversity, and applications to problem solving in leadership and administrative settings.
- NRS 718 Leadership and Organizational Dynamics**
This course reviews organizational design & behavior within the context of contemporary issues in leadership, administration, international business and higher education. Topics include creativity, innovation, organizational development, organizational change and strategic alignment. The course integrates pertinent research literature with pragmatic challenges and priorities.
- NRS 719 Nursing Leadership Practicum**
This course requires 75-225 hours of practicum, allowing students to apply theoretical knowledge in real-world settings. Students will develop essential leadership qualities by engaging in activities under the guidance of experienced nurse leaders and collaborating with multidisciplinary teams to improve patient care and organizational outcomes through devising strategies to manage change, conflict, and challenges within healthcare organizations.
- NRS 720 Information Systems and Patient Care Technology for Healthcare**
This course focuses on information technology and its application in healthcare settings. Content covered includes theoretical models of nursing informatics and database management, in the context of healthcare systems.
- NRS 726 Interpersonal Dynamics and Cultural Issues in Advanced Nursing Practice**
Provides advanced knowledge related to underlying interpersonal concepts, skills and practical approaches, specifically for relationship building across various cultures as an advanced practice nurse. It is also important for effective communication in regards to all areas of healthcare cross culturally.

- NRS 727 Clinical Health Promotion and Disease Prevention of Populations**
Explores theories of health promotion and disease prevention at the advanced practice level, with emphasis on patient education, epidemiology, health beliefs and the eight natural laws of health. The healthcare provider is provided with tools for directing and managing preventive care of various populations across the lifespan.
- NRS 729 Healthcare Economics & Policy**
This course is designed to provide students with economic tools and theories that will help them to understand and analyze various issues related to the provision and consumption of healthcare services, as well as the interaction between the three types of agents (consumers, private and public healthcare insurers and providers) in the market of healthcare and how it affects the price setting, costs, demand and supply of healthcare services. It also provides an understanding of the US healthcare system, in its functioning, efficiency and limits and how it differs from some other healthcare systems. Healthcare policies overtime will be analyzed and discussed in the context of their economic impact with a particular attention to the Affordable Care Act, as well as the years ahead. Some other specific issues involving physician's shortage and its economic impact, nurses, competition, the pharmaceutical industry will be discussed and analyzed.
- NRS 730 Healthcare Policy for Advanced Practice Nursing**
This course examines concepts of healthcare policy and political behavior, and generates strategies for exercising professional leadership in effecting change in health disciplines. The role of the DNP FNP in health politics for the workplace, organization, government and community will be presented.
- NRS 741 Primary Care Management of Infants, Children and Adolescents**
This course provides the future DNP with theory in primary healthcare settings necessary for the management of primary child healthcare, including wellness promotion, illness prevention, and treatment of common health problems in children, from newborn through young adulthood. Emphasis is on critical thinking and evidence-based practice to promote wellness lifestyles and reduce illness risks for children and families.
- NRS 742 Primary Care Management of Infants, Children and Adolescents Practicum**
This course requires 150 literal hours of practicum. They are to be completed in a primary care pediatric clinic. The focus is for students to integrate assessment data, and apply strategies for diagnosing and managing the well child as well as episodic visits. Students are expected to apply theoretical knowledge gained from the primary care management of adolescents and children class. Students will be expected to pay attention to role development issues, collaborative and independent practice issues, as well as problem-solving.
- NRS 748 Advanced Pathophysiology Across the Lifespan**
The focus of this course is the application of advanced pathophysiologic concepts for frequently encountered conditions in clinical practice. It provides an in-depth analysis of epidemiology, risk factors, etiology, pathophysiology, clinical manifestations and laboratory tests for selected acute and chronic illnesses across the lifespan. This is not an introductory course. It is expected that students already have a basic understanding of anatomy, physiology, pathophysiology, physical assessment, laboratory testing and pharmacology.
- NRS 751 Primary Care Management of Women's Health**
The focus of this course is the primary care assessment, diagnosis and management of women's health issues, exploration of major health issues concerning women today, with an emphasis on social, cultural and medical influences at the advanced practice level.

- NRS 752 Primary Care Management of Women's Health Practicum**
This course requires 150 literal hours of practicum. They are to be completed at a women's health clinic. The focus is for students to integrate assessment data, and apply strategies for diagnosing and managing women's health. Students are expected to apply theoretical knowledge gained from the primary care management of women. Students will be expected to pay attention to role development issues, collaborative and independent practice issues, as well as problem-solving.
- NRS 755 Advanced Health Assessment Across the Lifespan**
The focus of this course is the development of advanced health history and physical examination skills across the lifespan. Emphasis is on interview, communication and psychomotor skill development, with an end goal of facilitating diagnoses of illness and disease. It also includes concepts related to health assessment, which supports the basic tenets of health promotion and disease prevention.
- NRS 756 Advanced Health Assessment Practicum**
The course requires 150 literal hours of practicum in a primary care setting in which the student solidifies and strengthens their assessment skills and abilities on well and ill patients across the lifespan.
- NRS 760 Advanced Pharmacology Across the Lifespan**
This course is designed to provide students with the knowledge and skills to select drug therapy for patients throughout the lifespan based on efficacy, safety and cost for the management of select illnesses. The course also provides information about state and federal legal requirements for advanced practice nurse prescriptive authority.
- NRS 761 Survey of Operations Management**
Analysis of problems and issues faced by production/operations managers in manufacturing and service industries. Concepts and techniques include quality management with SPSS statistical analysis, supply chain design, procurement, LINDO linear programming, logistics operation, product development, operations scheduling, queues, process analysis, inventory control, forecasting, and project management.
- NRS 762 Organization and Management of Healthcare Systems**
Provides an overview of the various levels of healthcare delivery, complex system relationships, and explores the issues pertaining to the triple-bottom line of cost, quality and access within the provision of medical services. Students evaluate the challenges of managing a healthcare organization through the use of best practices, evidence-based management techniques, and organizational analysis.
- NRS 763 Primary Care Management of Adults**
The focus of this course is the clinical primary care assessment, diagnosis and management of acute illness of adults at the advanced practice level.
- NRS 764 Primary Care Management of Adults Practicum**
This course requires 150 literal hours of practicum in a primary care setting specific to adults. The focus is for students to integrate assessment data, and apply strategies for diagnosing and managing acute and chronic illnesses of adult patients. Students are expected to apply theoretical knowledge gained from the primary care management of adults' course. Students will be expected to pay attention to role development issues, collaborative and independent practice issues, as well as problem-solving.

- NRS 767 Evidence-based Family Nurse Practitioner Primary Care Management**
This course provides a theoretical approach to advanced practice nursing as an FNP. Students are given knowledge, skills and abilities related to primary care assessment, diagnosis and management of acute and chronic illness and disease, as well as health promotion and disease prevention strategies of patient care across the lifespan. Students will examine the limits and boundaries of primary care in this role, juggling all roles and areas. Further, it includes issues related to scope of practice, billing and more, specific to Family Nurse Practitioners.
- NRS 768 Evidence-based Family Nurse Practitioner Primary Care Management Practicum**
This course requires 450 literal hours of practicum, all as a family nurse practitioner under the preceptorship of a family nurse practitioner. In this practicum, students are to provide comprehensive care to patients across the lifespan that includes: assessment, diagnosis, prevention and management of care for acute and chronic illness and disease.
- NRS 769 Strategic Marketing Management**
Designed to help students think like a marketing strategist to recognize marketing problems, analytically evaluate possible alternatives, and creatively institute strategic solutions. Analysis of contemporary marketing problems, currently corporate marketing strategies and case analysis are used to achieve course objectives.
- NRS 770 Teaching Strategies**
This course explores the knowledge and competencies needed to develop and apply evidence-based innovative teaching strategies in the classroom and clinical settings. Strategies for distance and web-based learning are also included.
- NRS 775 Learning Theories and Health Teaching**
Provides advanced practice nurses with evidence-based knowledge regarding educational theories and their application in academic and clinical settings for successful instruction and teaching of clients, families and populations.
- NRS 776 Assessment of Learning**
Exploration and application of effective assessment practices and technology tools for measuring and documenting student learning and development. Indicate area of concentration when registering(e.g. Higher Education, K-12, Teacher Education, TESOL, etc)
- NRS 777 Grant Writing**
Overview of the basic principles and practice of effective health education and health promotion grant writing. Provides guidance for identifying potential funding sources and writing a grant proposal that is ready for submission.
- NRS 780 Nursing Education Outcomes**
Students are provided information on methods for assessing overall educational outcomes, such as the individual patient education, classroom instruction, and in providing continuing education units for professional nurses.

NRS 784 Curriculum Design

The study of specific curriculum design models to aid educators with the analysis, development, and improvement of curriculum at specific educational levels. Includes development of a curriculum project. Indicate area of concentration when registering (e.g. Higher Education, K-12, Teacher Education, TESOL, etc.).

NRS 785 Curricular Development

Provides students with knowledge-related analysis, development or design, and redesign or improvement, and evaluation of client, student or professional nursing curricula. Instruction on principles and procedures for curricular development will be addressed.

NRS 795 DNP Comprehensive Examinations

NRS 801 Scholarly Project I

The purpose of this project is to synthesize knowledge and skills attained in the doctorate program of nursing, in an activity that directly moves research into clinical practice and positively influences patient care. The project culminates with a written scholarly proposal paper related to the development, implementation, and evaluation of a protocol for specific healthcare. This course has variable credits, and it is repeatable until the course outcome is achieved.

NRS 802 Scholarly Project II

The completion of work begun in Capstone Scholarly Project I. The project culminates with a written scholarly paper related to the development, implementation, and evaluation of a protocol for specific healthcare; and successful project defense. This course has variable credits, and it is repeatable until the course outcomes are achieved.

Transfer Credit

Transfer credit is considered for courses taken elsewhere within five calendar years of admission. Work presented for transfer credit must be from an accredited college and is subject to evaluation in light of the degree requirements of the University.

To have a course considered for transfer credit, applicants must make the request at least six (6) weeks before the course begins, and submit a letter of request to the Andrews University School of Graduate Studies and the School of Nursing Admission Progression Retention & Grievance Committee for approval of the transfer courses. Along with this letter, the student must submit the course syllabus for the class and an official transcript showing the final grade for the course. The grade earned in each course accepted for transfer is at least a B (3.00). A maximum of 20 percent of program credits may be transferred with approval (BSN–DNP = 13 credits, MSN–DNP = 11 credits, APRN–DNP = 8 credits). If transfer credit is approved, a grade of P will appear on the student's official transcript and the hours earned will count toward the DNP. Generally, 3 Ps (pharmacology 3 cr., pathophysiology 3 cr., and health assessment 3 cr. plus 2 cr. practicum) will transfer if the syllabus from the course being transferred shows evidence of similar objectives and content as AU DNP courses, as determined by the course instructor or DNP director. No partial credit is given. Other courses taken in MSN programs may not transfer to doctoral programs, but may be evaluated on an individual basis. The school reserves the prerogative to request the student to successfully complete a challenge exam with a B grade to effect the 3 Ps' course transfer. Students wishing to transfer health assessment theory for the equivalent three-credit course required at Andrews may do so and take the associated two-credit clinical at Andrews as needed.

Christian Ethics in Advanced Practice Nursing carries weight as an Adventist religion course. The religion content must be satisfied by an alternate religion course at Andrews if a student requests a transfer of the ethics course from another institution.

Graduation Requirements

- Complete required number of credits and grades recorded in all courses (I and DG grades removed)
- Grade Point Average of 3.25 (B)
- Satisfactory completion of comprehensive exam and scholarly project

Mentoring and Academic Advising of Students

Faculty in the School of Nursing will advise students enrolled in the DNP program. The DNP is not a research degree, however there is a scholarly project that students are required to complete under the direction of an Andrews University School of Nursing faculty member of their choice. Times for meeting between students and faculty will be arranged at suitable dates and hours for both parties.

Role of the Faculty Advisor

The faculty advisor provides an important link between the student and the DNP program. The advisor plays a necessary role in making sure the student is oriented to the program, providing appropriate guidance regarding course selection and sequence, providing mentorship in completing the program curriculum, and planning career trajectory.

The faculty advisor will:

- Interpret the DNP program requirements and policies.
- Assist the student in developing goals for DNP program study and future career planning.
- Make sure the student follows correct course selection and sequencing.
- Be aware of course content and prerequisites.
- Review student program plans to make sure everything is on track and no modifications are needed.
- Assist students with registration procedures if needed.
- Monitor the student's academic progress through discussions with the student, other DNP faculty members, and review of grades.

Student Advisement Responsibilities

The student bears responsibility to assure that advisement occurs in a timely and appropriate manner. The student is responsible for:

- Communicating on a regular basis with his/her faculty advisor regarding progress, plans, goals and any problems that are current or anticipated.
- Initiating and maintaining contact with advisor.
- Maintaining awareness of School of Nursing policies and requirements.
- Following the plan agreed upon with the advisor.
- Reporting any problems that might delay the completion of coursework, DNP scholarly project or practicum experiences.
- Requesting and completing all appropriate approval documents pursuant to the completion of the doctoral degree.
- Choosing a DNP scholarly project chair and participating in selecting team members for the DNP scholarly project.

Changing Advisors

If a change in advisor is necessary, the student and faculty advisor should first discuss this matter. A change in advisor may be warranted if the relationship with the student is not satisfactory for the student being successful and meeting their program goals. A "Change of Advisor" request is given to the Student Success Center once a decision is made so that appropriate documents are changed.

Practicum

Practicum Hour Requirements for the DNP Degree

To qualify for the DNP degree, all students must document a minimum of 1,000 hours of practicum work completed as part of an education program between the BSN and the DNP. All Post-master's and Post-APRN DNP students must submit verification of the number of supervised clinical practicum hours in their advanced practice educational programs. Students are responsible for obtaining this documentation from the school in which the program was completed, and submitting it during the first semester of the DNP program.

Faculty advisors and program directors use this documentation to determine how many hours of practicum the student will need in the plan of study for the Post-master's and Post-APRN DNP students. A maximum of up to 500 hours of verified post-baccalaureate clinical practicum hours may be approved from prior programs on a case by case basis. DNP practicum hours are arranged between the clinical faculty member and the DNP student. In addition, they are individualized so that students can meet their DNP

competencies. The practicum experiences of a student earning a practice doctorate may include learning activities beyond the clinical hours required for direct patient care.

It is important for students to realize the nurses with a practice doctorate must be able to provide leadership to foster intra-professional and inter-professional collaboration, demonstrate skills in promoting a culture of evidence, apply clinical investigative skills to evaluate health outcomes, and be able to influence health policy.

Students are responsible for identifying and securing their own clinical preceptor(s) in accordance with program requirements. All preceptors must be approved by the School of Nursing prior to the start of clinical hours. Students should initiate contact with potential preceptors early to allow sufficient time for approval and onboarding processes. The School of Nursing will provide guidance and resources, but the responsibility for arranging clinical placements ultimately rests with the student.

As a result, students are to look for and expect experiences with a broad range of learning activities in order to meet the DNP competencies. Examples of these learning activities include, but are not limited to, participation in:

- A healthcare agency's committee work to evaluate a practice protocol.
- A health initiative in the state's health department
- Components of program evaluation within a clinical unit.

Practicum documentation and evaluation forms are in the DNP Preceptor Handbook.

Ratio of Credit Hours to Clock Hours

Didactic—Courses offered in a blended format with one or more required face-to-face Zoom class sessions, and everything else online. These activities are documented through the class schedule or syllabus assuring that DNP students are meeting the minimum semester hour credit hour requirement for the credit awarded.

Independent Study—Independent learning or experience involving self-directed learning under indirect supervision by course or clinical faculty (credit varies according to type of activity).

Practicum—Practica are designed to demonstrate synthesis of expanded knowledge acquired within the DNP curriculum. Practicum hours are not substantiated by the students' expertise in the healthcare system demonstrated prior to the DNP program nor by time spent working on classroom assignments. Practicum hours to be completed are 75 literal hours for every one credit hour of practicum.

The practicum hours signify the capability of the student to meet the AACN Essentials for DNP education. A minimum of 1,000 hours post-BSN is required. The hours can be demonstrated through a variety of methods, but FNPs must have a minimum of 750 direct patient contact hours for certification. Simulation activities may be counted for a portion of the hours over the 750 direct care hours.

Students may complete their practice/project hours with their institution of employment but not in the unit of work. Practicum course instructors will review all practice sites for appropriateness.

All requirements for practica should be completed and on file at the time of practicum course registration. DNP students will be asked to complete the immunization/certification requirements and appropriate Exaat clearance is required prior to beginning every clinical course or student will be blocked from registering for the clinical course. Clinical mentors and/or agencies may require a drug screening,

fingerprinting or additional criminal background check. Costs associated with these processes will be the responsibility of the student.

Students may only be in a practicum site when they are currently registered for a practicum course. Should their course need extension due to unusual circumstances, students must petition the DNP APRG committee to register for NRS 675 during this time. Students may not be in a practicum site if they are not currently registered students or they fall outside of Andrews University's published semester dates.

Scholarly Project Process Guidelines

Overview:

A hallmark of the practice doctorate is the successful completion of a scholarly project demonstrating the synthesis of the student's experiences. The scholarly project embraces the synthesis of both coursework and practice application. For time spent in practice application, students will document credit for 225 clock hours in NRS 802 towards their practicum hours. The final outcome is a scholarly project that is evaluated by an oral defense and approved by a faculty team chair in conjunction with additional DNP faculty and the scholarly project team.

Dissemination modes include the final scholarly paper and a scholarly poster or publication manuscript. The nature of the scholarly projects will vary. Projects are related to advanced practice roles and the project must demonstrate potential benefit for a group, population or community rather than an individual patient.

Projects most often evolve from practice and may be done in partnership with another entity, such as a clinical agency, health department, government agency or community group. Examples of overall types of scholarly projects include:

1. Quality improvement initiatives.
2. Implementation and evaluation of evidence-based practice guidelines.
3. Policy analysis.
4. Design and use of databases to retrieve information for decision-making, planning, evaluation.
5. Design and evaluation of new models of care.
6. Design and evaluation of healthcare programs.

To meet DNP scholarly project guidelines, the project must contain an intervention that is measured for change that relates to improvement in patient or healthcare outcomes.

Scholarly Project Process

DNP students identify an inquiry within their practice area or their area of interest at the time of their application or admission to the DNP program or during their first year in the program. During the first NRS 801 Scholarly Project course, the student works with faculty to begin exploring concepts related to their inquiries while evaluating sources of evidence related to the problem/need. The inquiry is further defined, a site to work with is chosen, and team members along with the chair are selected. A design appropriate to the purpose of the inquiry will be developed based on the evaluation of the evidence, needs assessment and overall project goals. During subsequent credits of 801 Scholarly Project course, students will create a prospectus they will submit to the DNP Committee for approval to move forward with the planned project (see appendix B). Next, a project proposal document will be written and approved by the project team

and an oral defense of the proposal will be completed. After a successful proposal defense and edits, the proposal will seek IRB approval, as needed, prior to data collection and analysis. During the final Scholarly Project course, NRSG 802, the project is to be implemented, then evaluated by the site after implementation, with results being documented in the final project document and an oral defense of the final project is completed. After a successful defense and final edits and approval by the project chair, the final project is completed within the nursing School and moves on to the Office of Graduate Studies for necessary approval processes prior to a final approval for graduation that is granted by the Office of Academic Records.

Students work closely with their scholarly project team chair and members to complete this project. The team chair is engaged in all aspects of the process. Students should expect the scholarly project to take 3–5 semesters to complete.

Students are required to present their final defense of their scholarly project in a public oral defense forum.

Scholarly Project Team

The DNP project team shall consist of at least two members including the chair. One of the two members, the chair, shall be selected within the guidelines of the Appointing the DNP Chair Policy found below. This member must have a PhD or DNP.

The second member is a person outside the University and is the practice mentor. The practice mentor must have a DNP, NP, APRN, MS, MD or PhD (if the chair has a DNP). If additional expertise in a specific area to complete the team is missing, another team member may be added. The chair of the project team and other members of the team are chosen by the student in consultation with the student's project course professor, and the School chair/program director. Immediate family members shall not serve on a project team.

Documentation of the practice mentor's credentials will be submitted to the program director/administrative assistant and placed in the student's scholarly project file along with the Scholarly Project Committee form (see appendix A). Depending on the nature of the project within an agency, a Clinical Education Agreement may also be required to conduct a study (discuss with the Chair of your scholarly project).

The DNP project examining team for the project presentation shall consist of a minimum of three members; consisting of the project team chair and the additional member(s) on project team, as well as a third member from the School or practice setting to make at least three examiners.

Appointing the DNP Project Chair Policy

Appointing committee chairs for scholarly projects for DNP program

Qualifications: PhD or DNP degree in nursing

1. Regular nursing faculty in DNP Program or
2. Familiarity/background with Andrews DNP program (former instructors, alumni, etc.). A pool of potential chairs will be created by the DNP committee to choose from.
 - If this is not available from the DNP program, a person with a DNP from another university with experience in DNP Projects may be considered—approval needed by the DNP committee will need a CV/resume, credentials, rationale for the need to look beyond the pool of chairs already approved.

Scholarly project committee chair responsibilities are outlined in the DNP Graduate Student Handbook.

Students may suggest a committee chair for approval—giving preference to #1 and #2 above or request an exception if no one has availability per the DNP program personnel.

A potential scholarly project chair will submit their credentials (transcript indicating their degree, any national certifications for practice, a CV/resume and a statement about their understanding of DNP projects) to the DNP committee for review and approval. The committee reserves the right to interview the potential chair prior to an approval decision if they are a new project chair to the DNP program.

Once a chair is appointed, the student and their chair will submit a project prospectus to the DNP committee for approval of the scholarly project that is planned. This will also list the remainder of the project committee (see prospectus form). Any deviations from the prospectus will need approval from the entire project team as well as the DNP committee.

All DNP Projects should:

- a. Focus on **a change (intervention) that impacts healthcare outcomes** either through direct or indirect care and that change is measured and reported.
- b. Have a systems (micro-, meso-, or macro-level) or **population/aggregate focus**.
- c. Demonstrate **implementation** in the appropriate arena or area of practice.
- d. Include a **plan for sustainability** (e.g. financial, systems, practice or political realities, not only theoretical abstractions).
- e. 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.
- f. Provide a **foundation for future practice scholarship** (<http://www.aacn.nche.edu/aacn-publications/white-papers/DNP-Implementation-TF-Report-8-15.pdf>)

Additional details and suggestions for what DNP projects might be are found in the NRS 801 syllabus. See the policy on Timelines and Instructions for DNP Project Scheduling and Completion that includes the prospectus form that is first needed by the student to begin a project.

Scholarly Project Team Chair

The chair is selected to match the scholarly interest and/or method of inquiry identified by the student. Students will identify their team chair and members by the end of their first credit of 801, complete the DNP Project Team Member Request Form (appendix A) and obtain appropriate signatures. The completed form is scanned into the Dropbox located in NRS 801 and a copy sent to the project chair. Once a team is selected and signed on, changes in the team must be submitted in writing to the DNP program director and a new form completed.

The chair is first and foremost the Doctor of Nursing Practice (DNP) student's advocate. The chair of the project team carries the primary responsibility for directing the project and overseeing the writing of the project. The chair works hand-in-hand with the student and assists them in navigating through the intellectual process of writing and with the institutional requirements for successful completion of their DNP program.

It is the chair's responsibility to determine whether or not and how much of the changes recommended by team members the student should actually make.

DNP Project Chair Responsibilities

These responsibilities include, but are not limited to:

1. Communicate and discuss with the student the parameters of their working style and relationship. Create a project contract (timeline for completion)—to be signed by the student and project team.
2. Assist the student in selecting a practice mentor to serve on their project team.
3. Guide the student in carrying out the approved project and oversee the writing of the project.
4. Read the student's work thoroughly and provide meaningful feedback. The project chair is to be specific and exact, giving details on how the project can be improved and highlighting, discussing and providing suggestions on how to strengthen areas of weakness in the student's project.
5. Respond to the student's work in a timely manner—no more than two weeks or ten business days should lapse before feedback is provided. In the unlikely event that the chair needs more time, the chair is expected to respond to the student within this timeframe and provide the student a reasonable time on when to expect the feedback.
6. Help ensure that student's work is properly documented and not plagiarized.
7. Work in conjunction with the student to schedule and plan team meetings.
8. Maintain their Human Subjects' Research Certification, where applicable.
9. Be aware of various resources available for students and provide this information to the student, in the event of their need. Such resources could include, but are not limited to: writing assistance, compliance with writing guidance, personal matters, etc.
10. Be prepared to intervene on behalf of the student in the event that a member is not responding to student communication or failing to review their work.
11. The project chair is also responsible for dealing with any conflicts that could stall a student's progress through their DNP project process.

The Scholarly Project Team Responsibilities:

- Guiding the student in the development of the scholarly project proposal document and final project document.
- Critiquing the readiness of the project proposal for oral defense and final defense.
- Mentoring the student during the implementation and evaluation phases of the project.
- Evaluating the student's performance on the proposal document, oral defense of proposal, final project document, and final project defense.

Team Meetings

The progression of the DNP student throughout the project process is monitored by the team during scheduled meetings at least once each semester, during the on-campus intensives, via Zoom or other distance formats as agreed upon by the chair and the student. The student is responsible for scheduling these meetings with advice from the project chair. The student will document the agenda, actions and target dates and share the information with project team members.

Students and team chairs agree upon a project timeline to reflect agreed-upon expectations and due dates. The timeline takes into consideration individual student objectives for the integrative application courses.

The Scholarly Project Practice Mentor Responsibilities

The scholarly project practice mentor responsibilities are to guide and support the student in planning, implementing and evaluating the project. To this end, the responsibilities include, but are not limited to:

1. Consult with student's project chair about the student's progress with the project.
2. Read the student's work thoroughly and provide meaningful feedback, being specific and exact, giving details on how the project can be improved and highlighting, discussing and providing suggestions for improvement of the student's project.
3. Respond to the student's work in a timely manner—no more than two weeks or ten business days should lapse before feedback is provided.
4. Maintain communication with the student and the student's project chair so as to prevent misunderstandings and to develop a respectful relationship with the team.
5. Examine the student in the oral presentation of the proposal defense, as well as the final project defense.
6. Orient the student to the facility where project will be implemented if it is applicable.
7. Aid in procuring approval from the facility where the project will be implemented.
8. Assist with planning a project that impacts healthcare outcomes either through direct or indirect care.
9. Help in identifying appropriate population/sample and with the inclusion and exclusion criteria for the project.
10. Guide, advise and supervise the student through the project process at the clinical site.
11. Assist with project planning, implementation of evidence-based interventions, data collection and evaluating the project outcomes.
12. Guide the student in developing practice guidelines or protocols to guide practice and/or policy.

DNP Prospectus Form (appendix B)

This will be submitted by students to the DNP committee prior to writing your proposal document. It may be emailed to the Program director who chairs this committee.

Final Scholarly Project Grade

The grade for the project paper and presentation will be based on the evaluation tools available in the NRS 802 course syllabus. The evaluation tools will be completed by the course professor, after consultation with team members. The course professor will electronically calculate and record the grade and sign the evaluation tool.

Students will follow the University deadlines for Advancement to Candidacy status and graduation application.

Timeline for Defense Process at Andrews University

EVENT	TIMELINE
RECOMMENDED FOR SUCCESS	
Pre-defense Editing Period This may require weeks or months of candidate and committee workflow	
Committee Reading & Clearance for Defense	Editing work and clearance from 18–10 weeks prior to graduation depending on degree level and program requirements and processes
REQUIRED FOR COMPLETION	
Defense Date	8 weeks before graduation for doctoral level
Completely edited draft to Chair/Committee	6 weeks before graduation for doctoral level
Dissertation Office receives e-copy and all sign-offs for final processing(see dissertation office checklist at dissertation office website. Includes James White Library permissions and upload to Pro-Quest and any required bound copies ordered).	4 weeks before graduation

Records receives Final Dissertation or Thesis Approval Form	2 weeks before graduation
Graduation	

Format for Written Project Proposal and Final Project Documents

These documents should be written in APA format (most current edition) using size 12 font.

Proposal Document

The length of the proposal will vary, but usually is 20–30 pages, excluding reference pages. The title page must include the name of the scholarly project, the student’s name and Andrews University School of Nursing.

An electronic copy of the approved proposal must be submitted to the team at least two weeks before the scheduled oral defense. The organization and content of the proposal will vary according to the project and recommendations of the project chair and team members. The DNP Proposal Completion form (Appendix C) must be signed by project chair after approval of the DNP proposal.

The following components of the proposal are required:

Title Page—per latest APA Guidelines

Abstract—A succinct summary of the proposal including the problem statement, purpose, method, analysis, and significance.

Chapter 1: Introduction—Includes the background to the project, problem identification, significance, and context; and a literature review by key elements.

- **Problem Statement**—Describe the specific clinical problem, clearly articulating the breadth and depth of the problem that this scholarly project addresses.
- **Purpose Statement**—The project will contain a purpose statement, including what the project will involve and what it will accomplish. (The purpose of the proposed scholarly project is to describe, implement, measure, identify)
- **Clinical/Project Questions**—State the appropriate clinical question that describe the phenomenon of interest.

Chapter 2: The Literature Review—Provides the evidence to defend a logical argument supporting the need for and value of the proposed scholarly project.

- **Theoretical (Conceptual) and Operational Definitions**—Describe the theoretical (conceptual) and operational definitions of the important independent and dependent variables you will address.
- **Theoretical or Conceptual Framework**—Used to connect all the important aspects of the project, to guide and inform the project. Match the concepts included in your project question statements to specific propositions of the conceptual or theoretical framework.

Chapter 3: The Methodology—Describes how the project will be done, connecting it to the purpose. Also includes a description of the subjects, tools/instruments, data collection or process improvement/intervention, and evaluation:

- **Project Design**—Determined based on the type of project being implemented.
- **Independent and Dependent Variables**
- **Population and Sample**—Describe target population and sample selection. Include Power analysis to determine sample size based upon statistics used and previous effect size.

- **Tool/Instrumentation**—Describe any instrument or tool (questionnaire) you will use to evaluate the phenomenon of interest. Include reliability and validity evidence. Put a copy of instruments and permissions for use, if needed, in the Appendix.
- **Intervention and Data collection or process improvement, and evaluation process**—If an intervention is used, describe the process step by step, from start to finish, including rationale for the intervention, a broad overview of the description of the intervention. The intervention should be guided by the theoretical framework of the project. Include how data is collected (and the response rate) if questionnaire is used.
- **Analysis/Evaluation**—For each project objective and/or question, include specific details concerning proposed project evaluation. Describe the plan and rationale for evaluating the results of the project and/or analyzing data collected. Describe what evidence-based measures will be used for each objective and the evaluation plan.
- Include a plan for statistical evaluation of demographic, independent, and dependent variables and project question.
- **Implementation**
 - **Timeline of Project Phases** for implementation of intervention etc. (Include a formal timeline chart in the appendices)
 - **Project Requirements**—Include proposed sources and types of information that will be collected and analyzed (include rationale), resource (i.e., personnel, technologies), approval of IRB (university and healthcare facility, and evidence of any facility or site support required (with appropriate letter in appendices).

Chapter 4: Significance and/or Implication—Describe how the project will provide new insight into existing knowledge where there is currently a gap regarding the phenomenon of interest.

- **End Products (Deliverable)**—Describe what the agency will receive when the project is complete, how your project will be evaluated within the site it was held, any plans for sustainability,

References and Appendices—Appendices will include the timeline of project phases, tools to be used, demographic data collection forms, informed consent forms, IRB approvals, statistical analysis plans, and other relevant materials, such as planned educational activities, etc. Appendices should be consistent with latest APA style guidelines.

The DNP student must successfully complete the oral defense of the proposal prior to IRB submission and data collection. All presentations must be scheduled two weeks ahead of time in coordination with the chair and team members.

The presentation will be facilitated by the team chair. The student will present his/her project lasting approximately 30 minutes, after which the chair will open the floor for questions/discussion from the team and audience. Following questions and discussion, the audience will be excused. The designated team grading the project will complete the rubric for grading (appendix D) and show a final score as well as the status of approval and send this to the committee chair within 48 hours.

If a student fails to pass the proposal defense, a plan for remediation will be developed by the team, DNP program director, and student.

Student is expected to include edits suggested by oral proposal defense team and have proposal approved

by project chair prior to IRB submission. Once IRB approval is granted, project implementation can begin, data collected and analyzed, and begin writing of the final project document.

Final Scholarly Project

Required Timeline for Scholarly Project Presentation and Paper

- The student, team chair and members will collaborate to determine date and time for the final presentation. All team members must agree and be available on the presentation date.
- The student should submit the first draft of the project to the team chair no later than six weeks before the presentation date. Multiple revisions of the paper may be necessary.
- The student will then submit a final revised draft of the project to team members following the team chair's approval at least two weeks before scheduled final presentation and at least 10 weeks prior to graduation.

Format for Written Scholarly Project Paper

The final paper should be written in APA format (most current edition) and in accordance with the format described under the guidelines for the written proposal. As noted in the proposal discussion, the organization and content of the final paper will vary according to the project and recommendations of the chair and team members.

The final paper is expected to be approximately 55–75 pages not including appendices, references and table of contents, etc. The deadline will follow the University guidelines as per the Andrews University DMin guidelines for issues not specifically addressed here. The paper will be submitted to the School of Graduate Studies for final approval. Students will be responsible for any editor-associated fees. Once the paper has received final approval it will be forwarded to ProQuest for publication. Find specific information and checklist for scholarly project completion at the Andrews dissertation office [webpage](#).

Time Limits

DNP students must complete the course work and successfully defend the project within the University's stated program timelines found in the Bulletin.

The following components of the Final Scholarly Project Paper are required:

Title Page—per latest APA Guidelines

Abstract—A succinct summary of the proposal including the problem statement, purpose, method, analysis, and significance.

Chapter 1: Introduction—Includes the background to the project, problem identification, significance, and context; and a literature review by key elements.

- **Problem Statement**—Describe the specific clinical problem, clearly articulating the breadth and depth of the problem that this scholarly project addresses.
- **Purpose Statement**—The project will contain a purpose statement, including what the project will involve and what it will accomplish. (The purpose of the proposed scholarly project is to describe, implement, measure, identify)
- **Clinical/Project Questions**—State the appropriate clinical question that describe the phenomenon of interest.

Chapter 2: The Literature Review—Provides the evidence to defend a logical argument supporting the need for and value of the proposed scholarly project.

- **Theoretical (Conceptual) and Operational Definitions**—Describe the theoretical (conceptual) and operational definitions of the important independent and dependent variables you will address.
- **Theoretical or Conceptual Framework**—Used to connect all the important aspects of the project, to guide and inform the project. Match the concepts included in your project question statements to specific propositions of the conceptual or theoretical framework.

Chapter 3: Methodology—Describes how the project WAS done, connecting it to the purpose. Also includes a description of the subjects, tools/instruments, data collection or process improvement/intervention, and evaluation:

- **Project Design**
- **Independent and Dependent Variables**
- **Population and Sample**—Describe target population and sample selection. Include Power analysis used to determine sample size based upon statistics used and previous effect size.
- **Tool/Instrumentation**—Describe instruments or tools (questionnaire) used to evaluate the phenomenon of interest. Include reliability and validity evidence. Put a copy of instruments and permissions for use, if needed, in the Appendix.
- **Intervention and Data collection or process improvement, and evaluation process**—Include proposed sources and types of information that WERE collected and analyzed (include rationale), resource (i.e., personnel, technologies), approval of IRB (university and healthcare facility, and evidence of any facility or site support required (with appropriate letter in appendices).
- If an intervention was used, describe the process step by step, from start to finish, including rationale for the intervention, a broad overview of the description of the intervention. Describe how the intervention was guided by the theoretical framework of the project. Include how data was collected and the response rate if questionnaires were used.

Chapter 4: Data Analysis/Evaluation—For each project objective and/or question, include specific details concerning proposed project evaluation. Describe the results of the project and/or analyze data collected. Describe what evidence-based measures WERE used for each objective and the evaluation plan. Include the statistical evaluation of demographic, independent, and dependent variables and project question.

Chapter 5: Significance and/or Implication—Describe how the project provides new insight into existing knowledge where there is currently a gap regarding the phenomenon of interest. Describe the impact of these results on practice, education, and nursing research. Describe the strengths and limitations of the project, plans for dissemination of your findings.

- **DNP Essentials**—Write which DNP Essentials were met by this project and describe how this was done
- **End Products (Deliverable)**—Describe what the agency received when the project was completed.
- **Evaluation**—How did those you worked with in your agency evaluate your project? What plans for sustaining recommended change was developed?

References and Appendices—Appendices will include tools used, demographic data collection forms, informed consent forms, IRB approvals, statistical analysis plans, and other relevant materials, such as planned educational activities, letters of support/permissions, etc. Appendices should be consistent with latest APA style guidelines.

DNP Project Completion and Degree Candidacy Process

Advancement to Degree Candidacy

During the semester before graduation, a student must apply for advancement to degree candidacy. Forms are available at the nursing office or with the DNP program director. The forms should be completed by the student, approved by the advisor, School chair and CHHS dean, and returned to the office of the graduate dean or Office of Academic Records.

- At the time a student files an application for advancement to degree candidacy, he/she must have:
 - » Received regular admission status
 - » Applied for graduation
 - » Completed all curriculum and English-language deficiencies that may have existed
 - » Demonstrated foreign-language proficiency where required.
- A student who has not completed the Advancement to Degree Candidacy form during the semester before graduation is not allowed to register for further course work until the advancement to degree candidacy forms have been filed with the appropriate dean or graduate program coordinator.

Projects

- The student completing a clinical doctorate project reports it in conformity to the Andrews University Standards for Written Work.
- One copy of each report is submitted to the instructor under whose supervision it was prepared. It becomes the property of the School.
- Approval of the project is completed after the final project defense and at least six weeks prior to graduation.
- The committee chair will send an email to the Dissertation Office (dissertation@andrews.edu) stating this Project was defended and approved in the School of Nursing and checked for plagiarism, following directions at dissertation office webpage.
- Completed and signed approval forms for the project(s) must be filed in the Office of Academic Records no later than noon on Friday, two weeks before graduation, unless the School specifies an earlier time.
- If students need time for project preparation beyond the semester(s) when required project credits in NRS 801 and 802 are completed, they may register for project continuation. Project continuation is a non-credit enrollment status that requires a fee for each semester of registration.

Doctoral Projects. For the DNP projects, the student is required to write and successfully defend in an oral examination at an officially designated time and place.

Standards for Writing: The Dissertation Office contact information is: phone: 269-471-3276, email: dissertationoffice@andrews.edu. The doctoral projects must demonstrate the candidates are prepared to generate new knowledge through innovation of practice change, the translation of evidence, and the implementation of quality improvement processes in specific practice settings, systems, or with specific populations to improve health or health outcomes. The format also must conform to the guidelines found in the [Andrews University Standards for Written Work](#) (Chapters 2 & 3).

When, in the opinion of the student and his/her full committee, the project has been completed satisfactorily and a final draft has been submitted, the committee, by official action, declares it to be ready for the oral

defense. After it is approved, a date for the defense may be set in consultation with the chair of the School of Nursing or the program director and at least eight weeks prior to graduation.

Defense of DNP Project

- The defense date will be set by the School prior to the semester and communicated to students. All students will present chair-approved final projects on the defense date. If students cannot meet the defense date that is set, they will wait for the next semester defense date to present.
- The presentation will be facilitated by the team chair. The student will present his/her project lasting approximately 30 minutes, after which the chair will open the floor for questions/discussion from the team and audience.
- Following questions and discussion, the audience will be excused. Team members who are assigned to grade the project will then complete the grading rubric (Appendix E) and send it to the committee chair who will collate these and forward them to the student. The grade is the average team score but approval conditions must be assessed by the student and chair for further actions needed along with any changes in wording for the final document.
- If a student fails to pass the proposal defense, a plan for remediation will be developed by the team, DNP program director, and student
- A project is approved if no more than one unapproved rating is given on the rubric. An abstention is recorded as a negative vote.
- The program director is responsible for notifying the appropriate dean or graduate program coordinator of the outcome of the defense.
- The decision of a student's examining committee is recorded and signed on the appropriate form and submitted to the appropriate dean or graduate program coordinator. A copy is sent to the Office of Academic Records.
- The project may be handed in at any time during the year, but the deadlines determine the date of graduation.

After the defense

- The student makes all corrections, ensures the document conforms to Andrews University's standard of writing and editing is complete. The final version will be approved by the committee chair. The signature page should be completed at this time—signed by the committee then sent to the dean for signing accompanied by the final version of the paper (Appendix F).
- The project team chair will be send the final approved copy to the dissertation office along with the verification it is has been checked for plagiarism, and the completed signed signature page at least four weeks prior to graduation.
- The student will complete the student checklist posted on the dissertation office website for additional activities they must complete prior to the final approval of the project being sent from dissertation office to records office. This includes James White Library permission to use and Pro-Quest upload, as well as the ordering of any bound copies.
- Once the dissertation office submits the Notification of Project Completion form to the Office of Academic Records, and the project process is complete.

Ordering Bound Copies. Students wishing to purchase bound copies of their scholarly project may complete these during the Pro-Quest Upload process or through LithoTech. Students are billed for photocopying and binding.

Grades for Project. The grade for a project is S or U. A deferred grade (DG) is given while a project is still being written or corrected.

Comprehensive Exam Procedure

The DNP comprehensive examination is a written exam that offers the student an opportunity to synthesize the learning experiences of the graduate program and demonstrate mastery of the DNP Essentials as applied to their practice roles. The student must receive a grade of pass on the comprehensive examination to successfully complete the DNP degree.

Process

The following procedures are guidelines specific to the DNP comprehensive examination:

1. During the semester prior to the last semester of required course work, the DNP program coordinator ensures via transcript review that:
 - a. Student's prior DNP core coursework as outlined on the Program of Study is completed at a satisfactory level; and
 - b. No incomplete courses from prior semesters remain.
2. The DNP program coordinator then schedules the Comprehensive Exam during the last semester of required course work completion. Exams must be proctored.
3. The examination will cover the following DNP Essentials:
 - a. Informatics
 - b. Ethics
 - c. Healthcare Policy
 - d. Organization Leadership
 - e. Epidemiology
4. The DNP core courses of Biostatistics, Nursing Research, and Nursing Theory will be evaluated summarily by a successful DNP scholarly project process. DNP Role will be summarily assessed by a passing grade of 83% or greater on the NRSG 767 Major paper on DNP Role.
5. The essay exam will be scheduled in sections throughout the final role course and administered by the role course instructor or the program director.
6. Students will be given practice examination questions to review in preparation for the examination.
7. All sections of the written comprehensive examination must be passed.
8. All examinations must be completed on assigned examination date. Examination will be completed in WORD format and submitted to the appropriate Dropbox on the exam date.
9. Faculty will grade the examination papers not later than ten (10) business days after the exam is completed. They will submit their critiques and grades to DNP program coordinator within the same time frame. (Appendix G: Comp Exam Grading Rubric)
10. Comprehensive examination papers are graded via a rubric on LearningHub (LH). Students can access their scores and comments on LH about two weeks after completing the comprehensive exam.
11. Students performing poorly in all or sections of the examination will be given opportunities to improve performance using one or a combination of the following:
 - a. Oral exam
 - b. Scholarly paper
 - c. Repeat comprehensive exam
12. The performance improvement activities need to occur within one semester of failed comprehensive exam. Students have only one opportunity to improve performance after a failed attempt. Failing any part of the retake examination may result in termination from the program. After further work students may petition to retake the exam.
13. Students' final comprehensive grades will be submitted to the Office of Academic Records.

Appendices

DNP Project Team Member Request

(print legibly)

Student's Name _____

Proposed Scholarly Project Topic _____

TEAM MEMBERSHIP COMPOSITION

CHAIR: Printed Name _____ Credentials _____

Signature _____ Date _____

(Andrews University PhD/DNP Full-time or Adjunct Faculty Member)

MEMBER: Printed Name _____ Credentials _____

Signature _____ Date _____

MEMBER: Printed Name _____ Credentials _____

Signature _____ Date _____

APPROVAL

DNP PROGRAM DIRECTOR/SCHOOL CHAIR

Printed Name _____ Signature _____ Date _____

DNP Project Prospectus Rubric

This rubric guides the development and evaluation of the DNP project prospectus. The prospectus should provide a concise but thorough overview of the proposed project, supporting clear communication with faculty, potential committee members, and the DNP Committee. Recommended length: 2-3 pages.

Scoring: 1 = Needs Improvement | 2 = Developing | 3 = Proficient

Section	Evaluation Criteria	Score 1-3
1. Clinical Problem	<ul style="list-style-type: none"> • Clearly identifies a significant problem • Evidence-based and relevant to nursing practice • Justified with supporting literature 	
2. Proposed Intervention	<ul style="list-style-type: none"> • Describes the proposed intervention or change initiative • Provides a rationale for the intervention • Aligns with the identified clinical problem 	
3. Goals and Objectives	<ul style="list-style-type: none"> • Clearly articulates the project's overall goal • States specific and measurable objectives • Objectives align with clinical problem and intervention 	
4. PICOT Question	<ul style="list-style-type: none"> • States a well-constructed PICOT question (Population, Intervention, Comparison, Outcome, Timeframe) • Directly informs project direction 	
5. Methodology	<ul style="list-style-type: none"> • Describes the planned project design • Identifies setting, sample, independent/dependent variables • Outlines data collection and analysis methods 	
6. Evidence Base	<ul style="list-style-type: none"> • Includes relevant, high-quality references • Supports both the clinical problem and proposed intervention • References are current and evidence-based 	
7. Committee Planning	<ul style="list-style-type: none"> • Lists potential committee members (e.g., chair, statistician) • Demonstrates early planning for committee formation 	
8. Organization & Readiness	<ul style="list-style-type: none"> • Well-structured and logically organized • Appropriate title that reflects logic of the project • Demonstrates readiness for DNP committee submission 	
Comments		

Total Points: 24 / 24 (passing score = 19/24)

DNP Project Proposal Completion

(print legibly)

Student's Name _____

Date and Time _____

Proposed Scholarly Project Topic _____

EVALUATION: Approved Approved (*with minor recommendations*) Not approved

Remarks _____

STUDENT: Printed Name _____ Signature _____ Date _____

TEAM MEMBERSHIP COMPOSITION

CHAIR: Printed Name _____ Signature _____ Date _____

(Andrews University PhD/DNP Faculty Member)

APPENDIX D

Oral Presentation of Defense with PowerPoint—chair, additional School of Nursing faculty and committee members complete this rubric.

Number of points	5	4	3	0
Introduction	Introduction is clear and describes the project.	Introduction is not clear in its description of the project.	Introduction does not lead listeners to the project.	No introduction
Background	Background gives good support for the project and is clear why the project is needed.	Background gives some support for the project and is somewhat clear why the project is needed.	Background gives little support for the project and is somewhat unclear why the project is needed.	No background
System or Population Impact	Describes the system or population in general and gives statistics to support reasons this was chosen.	Partially describes the system or population in general and gives statistics to support reasons this was chosen.	Poor description of the system or population or no evidence to support the claim why this was chosen,	No system or population impact
Problem statement and significance	Problem statement is clear and gives rationale for its significance.	Problem statement is not totally clear and may not give complete rationale for its significance.	Problem statement is unclear OR does not give complete rationale for its significance.	No problem statement
Purpose/aims/objectives	The purpose of the project is clearly stated and understandable.	The purpose of the project is not clearly stated or is not clearly understandable.	The purpose of the project is unclearly stated or is not understandable.	No purpose/aim/or objective given
Conceptual/operational definitions	Definitions are included, comprehensive, fit the project	Definitions are included, but are not comprehensive or may not fit the project well.	Definitions are included but either don't make sense or do not fit the project	No conceptual definitions
PICO question	Stated appropriate in four parts, appropriate to project	Stated but four parts not evident or connection to the project is questionable	The PICO question is not in format or has no connection to the project obvious.	No PICO
Theoretical framework	A theoretical framework is clearly described and its concepts well-connected to the project.	A theoretical framework is described but could be clearer or is not well-connected in concepts to the project.	A theoretical framework is mentioned but not described or was not at all connected to the project.	No theoretical framework
Review of the Literature	The review of the literature is synthesized in this presentation but offers some support for the project concepts.	The review of the literature is synthesized in this presentation but support for the project concepts is not clear.	The review of the literature is synthesized in this presentation but support for the project concepts is not understandable.	No review of literature

Project Design Describe how the project will be done, include Independent/dependent variables if applicable	The project is clearly described and understandable.	The project is described but I don't exactly understand it.	The project is partially described, and I have no idea what is being done.	No project design
Population and sample	The population is well described and includes inclusion and exclusion criteria and how they are recruited.	The population is partially described and includes inclusion and exclusion criteria and how they are recruited but could be improved.	The population is not well described OR may not include inclusion and exclusion criteria and how they are recruited but could be improved.	No population and sample described
Data Collection Tools	The data collection tools are described in detail and have reliability and validity data support.	The data collection tools are described but lacking detail and may not have reliability and validity data support.	The data collection tools are not described well at all and may not have reliability and validity data addressed.	No discussion of data collection tools
Intervention and data collection process	The steps of the intervention and data collection are clearly described step by step and have a table of events that is very clear.	The steps of the intervention and data collection are described but steps are missing or not clear and have a table of events.	The steps of the intervention and data collection are described but steps are not in logical sequence in the table of events.	No intervention steps are described or no table of events
Data Analysis Project	Clear explanation of what tests will be done with what data and how the project will be measured.	Explanation of what tests will be done with what data and how the project will be measured is not clear and needs work.	Explanation of what tests will be done with what data and how the project will be measured is not understood and needs significant revision.	No report of data analysis plan
Implications and significance of this project	Clear explanations of the expected implications and significance of this project are given.	Explanations of the expected implications and significance of this project are given but need some work.	Explanations of the expected implications and significance of this project are given but need significant revision.	No implications and/or significance is given
End product and plan for sustainability, project evaluation feedback from site	There is an end product described and sustainability plans are mentioned along with how the stakeholders will evaluate this project.	There is an end product described but either sustainability plans are not mentioned or how the stakeholders will evaluate this project is missing.	There is either no end product described or sustainability plans or no stakeholders will evaluate this project and this needs significant improvement.	No product or sustainability or project evaluation by stakeholders is mentioned.

Slides	Slides are clear, succinct, professional in quality, interesting to the listener.	Slides are not clear, or not succinct, or unprofessional in quality, or not interesting to the listener (one of these is missing).	Slides are not clear, or not succinct, or unprofessional in quality, or not interesting to the listener (two or more of these items are missing).	Slides are inappropriate or unprofessional for a doctoral student.
Oral presentation	Presenter has professional appearance and demeanor. Presentation is interesting, engaging, and well prepared. Student confidently addresses questions.	Presenter is somewhat unprepared or unprepared. Presentation may be unengaging or too much reading from slides. Student may not be able to confidently answer questions.	Presenter is very unprepared and only reads from slides, no eye contact or professional demeanor. Presentation may be off topic or too personal rather than professional, student stumbles in answering questions.	Presenter is totally unprepared, unprofessional, gives a totally inappropriate presentation,
Writing for bulleted ppt Citations appropriately support References in APA format	Professionally written with correct grammar for PPT (bulleted format), citations for support used on slides, references for citations included in APA format.	Minor mistakes in grammar or unprofessional in appearance, too few citations, references may not be included.	Major mistakes in grammar or unprofessional use of some slides, not enough support with citations, references not in APA format	No citations or references
Time limit and punctuality	The time limit of 20–30 minutes was adhered to and the presentation started and ended at expected times without delay by the student.	Student was 5 minutes over or under the limit or student delayed the start of the process due to technical issues starting slides or getting on Zoom.	Student was more than 5 minutes over/under the limits of time given or significantly delayed the presentation that was clearly avoidable.	Student was late to start or not present or could not begin the presentation.
Total max=100				

With the rubric as a guide for quality and rationale for your thoughts, and regardless of your numerical score, please choose one of the outcomes below for this presentation.

___Approved ___Approved with minor revisions ___Approved with major revisions ___Unapproved

Further comments to justify your choice:

Signature _____ Date _____

Please return this via email to the project chair of this project or to gradnursing@andrews.edu within 48 hours.

DNP Final PowerPoint and Oral Defense Rubric

Number of points	5	4	2	0
Introduction	Introduction is clear and describes the project.	Introduction is not clear in its description of the project.	Introduction does not lead listeners to the project.	No introduction
Background	Background gives good support for the project and is clear why the project is needed.	Background gives some support for the project and is somewhat clear why the project is needed.	Background gives little support for the project and is somewhat unclear why the project is needed.	No background
System or Population Impact	Describes the system or population in general and gives statistics to support reasons this was chosen.	Partially describes the system or population in general and gives statistics to support reasons this was chosen.	Poor description of the system or population or no evidence to support the claim why this was chosen.	No system or population impact
Problem statement and significance	Problem statement is clear and gives rationale for its significance.	Problem statement is not totally clear and may not give complete rationale for its significance.	Problem statement is unclear OR does not give complete rationale for its significance.	No problem statement
Purpose/aims/objectives	The purpose of the project is clearly stated and understandable.	The purpose of the project is not clearly stated or is not clearly understandable.	The purpose of the project is unclearly stated or is not understandable.	No purpose/aim/ or objective given
Conceptual/operational definitions	Definitions are included, comprehensive, fit the project	Definitions are included, but are not comprehensive or may not fit the project well.	Definitions are included but either don't make sense or do not fit the project.	No conceptual definitions
PICO question	Stated appropriate in four parts, appropriate to project	Stated but four parts not evident or connection to the project is questionable	The PICO question is not in format or has no connection to the project obvious.	No PICO
Theoretical framework	A theoretical framework is clearly described and its concepts well-connected to the project.	A theoretical framework is described but could be clearer or is not well-connected in concepts to the project.	A theoretical framework is mentioned but not described or was not at all connected to the project.	No theoretical framework
Review of the Literature	The review of the literature is synthesized in this presentation but offers some support for the project concepts.	The review of the literature is synthesized in this presentation but support for the project concepts is not clear.	The review of the literature is synthesized in this presentation but support for the project concepts is not understandable.	No review of literature
Project Design Describe how the project will be done, include Independent /dependent variables if applicable	The project is clearly described and understandable.	The project is described but I don't exactly understand it.	The project is partially described and I have no idea what is being done.	No project design

Population and sample	The population is well described and includes inclusion and exclusion criteria and how they are recruited.	The population is partially described and includes inclusion and exclusion criteria and how they are recruited but could be improved.	The population is not well described OR may not include inclusion and exclusion criteria and how they are recruited but could be improved.	No population and sample described
Data collection tools	The data collection tools are described in detail and have reliability and validity data support.	The data collection tools are described but lacking detail and may not have reliability and validity data support.	The data collection tools are not described well at all and may not have reliability and validity data addressed.	No discussion of data collection tools.
Intervention and data collection process	The steps of the intervention and data collection are clearly described step by step and have a table of events that is very clear.	The steps of the intervention and data collection are described but steps are missing or not clear and have a table of events.	The steps of the intervention and data collection are described but steps not step by step or not in logical sequence in the table of events.	No intervention steps are described or no table of events.
Data Analysis Project	Clear reporting of what tests were done with what data and how the project was measured.	Report of what tests were done with what data and how the project was measured is not clear and needs work.	Report of what tests were done with what data and how the project was measured is not understood and needs significant revision.	No report of data analysis plan
Implications and significance of this project	Clear explanations of the expected implications and significance of this project are given.	Explanations of the expected implications and significance of this project are given but need some work.	Explanations of the expected implications and significance of this project are given but need significant revision.	No implications and/or significance is given
End product and plan for sustainability, project evaluation feedback from site	There is an end-product described and sustainability plans are mentioned along with how the stakeholders will evaluate this project.	There is an end-product described but either sustainability plans are not mentioned or how the stakeholders will evaluate this project is missing.	There is either no end-product described or sustainability plans or how stakeholders will evaluate this project and this needs significant improvement.	No product or sustainability or project evaluation by stakeholders is mentioned.
Slides	Slides are clear, succinct, professional in quality, interesting to the listener.	Slides are not clear, or not succinct, or unprofessional in quality, or not interesting to the listener (one of these is missing).	Slides are not clear, or not succinct, or unprofessional in quality, or not interesting to the listener (two or more of these items are missing.)	Slides are inappropriate or unprofessional for a doctoral student.
Oral presentation	Presenter has professional appearance and demeanour. Presentation is interesting, engaging and well prepared. Student confidently addresses questions.	Presenter is somewhat unprofessional or unprepared. Presentation may be unengaging or too much reading from slides. Student may not be able to confidently answer questions.	Presenter is very unprepared and only reads from slides, no eye contact or professional demeanor. Presentation may be off topic or too personal rather than professional, student stumbles in answering questions.	Presenter is totally unprepared, unprofessional, gives a totally inappropriate presentation,
Writing for bulleted PPT Citations appropriately supported References in APA format	Professionally written with correct grammar for PPT (bulleted format), citations for support used on slides, references for citations included in APA format.	Minor mistakes in grammar or unprofessional in appearance, too few citations, references may not be included.	Major mistakes in grammar or unprofessional use of some slides, not enough support with citations, references not in APA format	No citations or references

Time limit and punctuality	The time limit of 30 minutes was adhered to, and the presentation started and ended at expected times without delay by the student.	Student was 5 minutes over or under the limit or student delayed the start of the process due to technical issues starting slides or getting on Zoom.	Student was more than 5 minutes over/under the limits of time given or significantly delayed the presentation that was clearly avoidable.	Student was late to start or not present or could not begin the presentation.
Total max=100				

With the rubric as a guide for quality and rationale for your thoughts, and regardless of your numerical score, please choose one of the outcomes below for this presentation.

Approved
 Approved with minor revisions
 Approved with major revisions
 Unapproved

Further comments to justify your choice:

Signature _____ Date _____

Please return this via email to the project chair of this project or to gradnursing@andrews.edu within 48 hours. Thank you!

TITLE CENTERED AND IN ALL CAPITALS HERE

A Scholarly Project

Presented in Partial Fulfillment

of the Requirements for the Degree

Doctor of Nursing Practice

By

student's name here

APPROVAL BY THE COMMITTEE

Chair:

Dean, College of Health & Human Sciences
Emmanuel Rudatsikira

Member:

Date Approved

Member: (delete if not necessary)

Comprehensive Exam Rubric

	Demonstrates in-depth knowledge of subject matter. <i>20 points</i>	Demonstrates acceptable knowledge of the subject matter. <i>16 points</i>	Demonstrates minimal knowledge of the subject. <i>10 points</i>	Demonstrates unacceptable knowledge of the subject matter. <i>0 points</i>
Demonstrates understanding of incorporating DNP core and FNP role into each essay question.	20	16	10	0
Exam 1				
Exam 2				
Exam 3				
Original Thinking	10	8	5	0
Exam 1				
Exam 2				
Exam 3				
Interpretation of concepts	20	16	10	0
Analysis or synthesis of central concepts combining DNP core with FNP role.	20	16	10	0
Supporting details or examples	20	16	10	0

Writing clearly for expressing thoughts	10	8	5	0
Score =100 max Total score=				

CLINICAL EDUCATION AGREEMENT

THIS AGREEMENT, made and entered into the _____ day of _____ by and between Andrews University, a Michigan nonprofit educational corporation of Berrien Springs, Michigan, hereinafter referred to as the "University", and

_____, of
(Facility Name)

_____. Herein after
(Facility Address)
referred to as the "Agency," Witnesseth:

WHEREAS, the University is conducting the Doctor of Nursing Practice (DNP) educational program in Berrien Springs, Michigan, requiring clinical education facilities for the purpose of providing clinical experience to its students, and

WHEREAS, the Facility recognizes the need for and desires to aid in the education of health care professionals, and is willing to make its facilities available to the University's nurse educator students for such purposes.

NOW THEREFORE, in consideration of the mutual covenants continued herein, the parties hereto agree as follows:

I. THE FACILITY AND THE UNIVERSITY MUTUALLY AGREE:

1. To established in advance the number of students who will participate in the clinical education program and the length of the respective clinical experiences.
2. To appoint the appropriate representative to be responsible for the clinical education program. The University shall appoint a clinical coordinator and the Facility shall appoint a clinical supervisor. These individuals shall be called Academic Coordinator of Clinical Education ("A.C.C.E.") and Center Coordinator of Clinical Education ("C.C.C.E.") respectively. Each party will supply the other party with the name of this person along with the person's professional and academic credentials for approval by the other party. Each party shall notify the other in writing of any change of the person appointed.
3. That each student assigned as a clinical affiliate complies with the policies and procedures of the Facility, including policies on confidentiality of patient information. The Facility reserves the right to refuse access to and/or remove from its clinical areas any student who does not meet the Facility's standards and policies. No action will be taken until the grievance against the student has been discussed with the A.C.C.E., unless the student's behavior poses an immediate threat to the effective delivery of health care services to patients of the Facility.
4. To remain responsible for the acts of their respective employees and agents.
5. To notify the other party if one party becomes aware of a claim asserted by any

person which arises out of or appears to arise out of this agreement or any activity carried out under this agreement.

6. That the Facility maintains administrative and professional supervision of students of the University insofar as their presence effects the operation of Facility and the direct or indirect care of the Facility's patients.
7. That University students and faculty are not the agents, representatives or employees of the Facility and will not represent themselves as such.
8. That the parties will not discriminate on the basis of race, color, creed, ethnic background, country of origin, age, sex, height, weight, physical handicap, marital status, political or gender preference, or past military service regarding the educational or clinical experience of the student.
9. The University agrees to indemnify and save harmless the Facility and its agents and employees from any liability or damages the Facility may suffer as a result of claims, costs, or judgements, including reasonable attorney's fees, against it arising out of acts or omissions of the University in the operation of the clinical education program covered by this agreement, to the extent allowed by Michigan law. The Facility agrees to indemnify and save harmless the University and its agents and employees from any liability or damages the University may suffer as result of claims, costs, or judgments, including reasonable attorneys fees, against it arising out of acts or omissions of the Facility in the operation of the clinical education program covered by this agreement. The Facility agrees to give the University notice in writing within thirty (30) days of any claim made against it on the obligations covered hereby.
10. That the University will develop letter agreements, as necessary, with the Facility to formalize operational details of the clinical education program. These letter agreements shall be approved with the same formalities as this agreement.
11. That the Facility shall remain responsible for the patient.
12. That each party shall carry professional liability or self-insurance with minimum limits of liability of \$1 million/\$3 million for suits and claims that may be asserted for any professional liability claim arising out of any service rendered pursuant to this agreement. Each party shall, upon request, furnish the other party with evidence of such coverage.
13. That students will be responsible for all personal expenses including meals, lodging, and transportation unless provided by the Facility.
14. Modification of any term or provision of this agreement will not be effective unless in writing with the same formality as this agreement. The failure of either party to insist upon strict performance of any of the provisions of this agreement shall constitute waiver of that provision only and not the entire agreement.

II. RESPONSIBILITIES OF THE FACILITY

In addition to other provisions in this agreement, the Facility specifically agrees as follows:

1. To provide clinical education learning experiences which are planned, organized, and administered by qualified staff in accordance with mutually

agreed upon educational objectives and guidelines.

2. To prepare written objectives or guidelines for structuring the clinical education program. A copy of these objectives or guidelines will be available for review by the A.C.C.E.
3. To permit, upon reasonable request, the University or its accrediting agency to inspect the Facility and its services and records which pertain to the clinical education program.
4. To provide or otherwise arrange for emergency medical care for students at the student's expense.
5. To provide reasonable classroom, conference, storage, dressing, and locker room space for students.
6. To evaluate the student(s) according to the guidelines provided by the University and to utilize the evaluation standards and forms furnished by the University.
7. To accept the University's student clinical attire guidelines and to inform the University of the Facility's standards and policies regarding dress and appearance.

III. RESPONSIBILITIES OF THE UNIVERSITY

In addition to other provisions in this agreement, the University specifically agrees as follows:

1. To assign to the Facility only those students who have satisfactorily completed the prerequisite portions of the curriculum.
2. To direct the students to comply with the rules and regulations of the Facility.
3. To provide assurance to the Facility that each student accepted for the clinical education program will have had a physical examination within the last year. This examination will include a Tuberculum test and immunizations for MMR, tetanus , and Hepatitis B(or a signed waiver). The Facility reserves the right to restrict the clinical activity of students who evidence symptoms of communicable infections.
4. To provide evidence of professional liability insurance coverage for all of its students, employees, and agents in the facility in connection with the clinical education program of the University's students.
5. To assure and provide evidence that the student(s) possess health insurance either through the University or an individual policy.
6. To assure that students hold correct C.P.R. certification.

IV. TERM AND TERMINATION

This agreement will be effective as of the date signed by both parties and will continue in effect until terminated by either party. Either party may terminate the agreement upon ninety (90) days written notice to the other party. The notice required by this clause shall be sent by certified or registered mail.

If the termination date occurs while a student of the University has not completed his or her clinical learning experience at the Facility, the student shall be permitted to complete the scheduled clinical learning experience, and the University and the Facility shall cooperate to accomplish this goal.

IN WITNESS WHEREOF, the parties have executed this agreement and warrant that they are officially authorized to so execute for their respective parties to this agreement.

THE FACILITY

Signature
Name: _____
Title: _____
Date: _____

THE UNIVERSITY

ANDREWS UNIVERSITY

Signature
Name: _____
Title: _____
Date: _____

Signature
Name: _____
Title: _____
Date: _____



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