



MGH INSTITUTE

OF HEALTH PROFESSIONS

School of Nursing

POLICY MANUAL

2010 – 2011

Policy Manual Contents

This manual expands on policies on the MGH Institute of Health Professions Web site in the [2010-2011 Catalog](#).

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MGH INSTITUTE OF HEALTH PROFESSIONS

Academic Calendar 2010 - 2011



Please refer to <http://www.mghihp.edu/about-us/operations/default.aspx> for Saturday and Sunday building hours. On holidays listed as “Institute offices closed”, Building 36 will be open from 11am – 6pm. On holidays listed as “Institute closed”, the building will be closed.

<http://www.mghihp.edu/academics/registrar/calendars.aspx>

About the School of Nursing

The School of Nursing offers five interrelated programs of study based on a unified curriculum. Entry into a specific program depends on the individual student's prior preparation. All programs are designed to prepare nurses who are able to assume leadership roles in the health care system of the future. This includes engaging diverse individuals, families, groups, and communities in the mutual pursuit of healing and wholeness. We achieve this mission through excellence and innovation in education, scholarship, service and practice.

The Graduate School of Nursing offers the following:

- *Bachelor of Science Degree for non-nurse college graduates*
- *Master of Science Degree for non-nurse college graduates*
- *Master of Science Degree for Registered Nurses with a Baccalaureate Degree in Nursing or other field, Associate's degree or diploma*
- *Certificate of Advanced Study for RNs with MSN degree*
- *Doctor of Nursing Practice degree for RNs with a Master's degree in nursing or related field*

The following table summarizes the pre-requisites, credits required for graduation, and the applicable licensure, certification and degree associated with each program, and common areas of practice.

MGH Institute School of Nursing
Program Summaries

	Bachelor of Science in Nursing	Direct-Entry Master's	Master of Science in Nursing	Certificate of Advanced Study	Post-Master's Doctor of Nursing Practice
Prerequisites	<ul style="list-style-type: none"> • BS/BA in any other field • Anatomy & Physiology, Microbiology, Chemistry, Nutrition, Statistics 	<ul style="list-style-type: none"> • BS/BA in any other field • Anatomy & Physiology, Microbiology, Chemistry, Nutrition, Statistics 	<ul style="list-style-type: none"> • BS in Nursing • RN with baccalaureate in another field • AS or Diploma plus Baccalaureate equivalent of general education courses (41 – 46) • GRE or waiver 	<ul style="list-style-type: none"> • Master of Science in Nursing 	<ul style="list-style-type: none"> • Master of Science in Nursing, OR • related Master's Degree plus AP courses
Number of Credits	54 credits	89 – 99 credits	52 – 70 credits	21-48 credits	43 credits
Degree or Certificate	<ul style="list-style-type: none"> • Bachelor of Science 	<ul style="list-style-type: none"> • Master of Science 	<ul style="list-style-type: none"> • Master of Science 	<ul style="list-style-type: none"> • Certificate of Advanced Study 	<ul style="list-style-type: none"> • Doctor of Nursing Practice
Licensure/ Certification	<ul style="list-style-type: none"> • NCLEX-RN 	<ul style="list-style-type: none"> • NCLEX-RN • Specialty Certification Exam 	<ul style="list-style-type: none"> • Specialty Certification Exam 	<ul style="list-style-type: none"> • Specialty Certification Exam 	
Specialty Areas	Variety of Direct Care Practice Settings	Nurse Practitioner <ul style="list-style-type: none"> • Acute Care • Adult Primary Care • Family Health • Gerontology • Pediatrics • Psych/Mental Health • Women's Health Clinical Nurse Specialist <ul style="list-style-type: none"> • Psych/Mental Health 	Nurse Practitioner <ul style="list-style-type: none"> • Acute Care • Adult Primary Care • Family Health • Gerontology • Pediatrics • Psych/Mental Health • Women's Health Clinical Nurse Specialist <ul style="list-style-type: none"> • Psych/Mental Health • CNS options in all other clinical specialty areas 	Nurse Practitioner <ul style="list-style-type: none"> • Acute Care • Adult Primary Care • Family Health • Gerontology • Pediatrics • Psych/Mental Health • Women's Health Clinical Nurse Specialist <ul style="list-style-type: none"> • Psych/Mental Health • CNS options in all other clinical specialty areas 	Elective Concentration <ul style="list-style-type: none"> • Administration • Advanced Clinical • Clinical Investigation • Global Health • Informatics • Teaching & Learning

Mission and Philosophy

MISSION

The mission of the School of Nursing is to prepare registered nurses who are able to assume leadership in health care. We achieve this mission through excellence and innovation in education, scholarship, service and practice.

PHILOSOPHY

Nursing is both an art and science that cares for the body, mind, and spirit unity of persons-in-relation to their environment. Nursing's caring perspective views human beings as persons-in-relation at every level of human existence and connection: individuals, families, groups, and communities. The concept of human beings as persons-in-relation provides the framework from which nursing addresses the potential for promotion, maintenance, and restoration of health. This framework underscores the importance of examining the political, economic, and social forces that impact a person's agency and right to health. The infinite complexity of these forces creates a diversity of environments within which nursing seeks to maximize health at every level of human existence.

CONCEPTS

The structure for the curriculum is based upon the interrelationships among the concepts of the meta-paradigm: person-in-relation, environment, health, and nursing.

Person-in-relation

The person-in-relation is interactive and interdependent with others and with the environment. Nursing encounters the client as an individual and aggregates - as families, communities, and groups, existing in evolving relationships.

Environment

Political, economic, and social forces that are present in society shape the environment. This includes, but is not limited to, the biophysical environment in which we live, our diverse cultures, and our experiences and perceptions.

Health

Health is an evolving process that is the expression of the interaction of a person with her or his environment. The individual defines health. It embraces the states of illness, wellness, disease, and non-disease.

Nursing

Nursing is the diagnosis and treatment of human responses to actual or potential health problems.

THEMES

The philosophy is manifested in the curriculum through the continued focus of nursing's role at the critical intersection of the concepts of the metaparadigm. This focus is supported by nursing's social mandate to address the needs of our clients in their environment. Within this context are three evolving themes which sequence curriculum content from basic to complex: knowledge, critical thinking, and professional development.

Knowledge

Nursing's knowledge base is grounded in subjective and objective knowing that is esthetic and ethical, empirical and intuitive.

Critical thinking

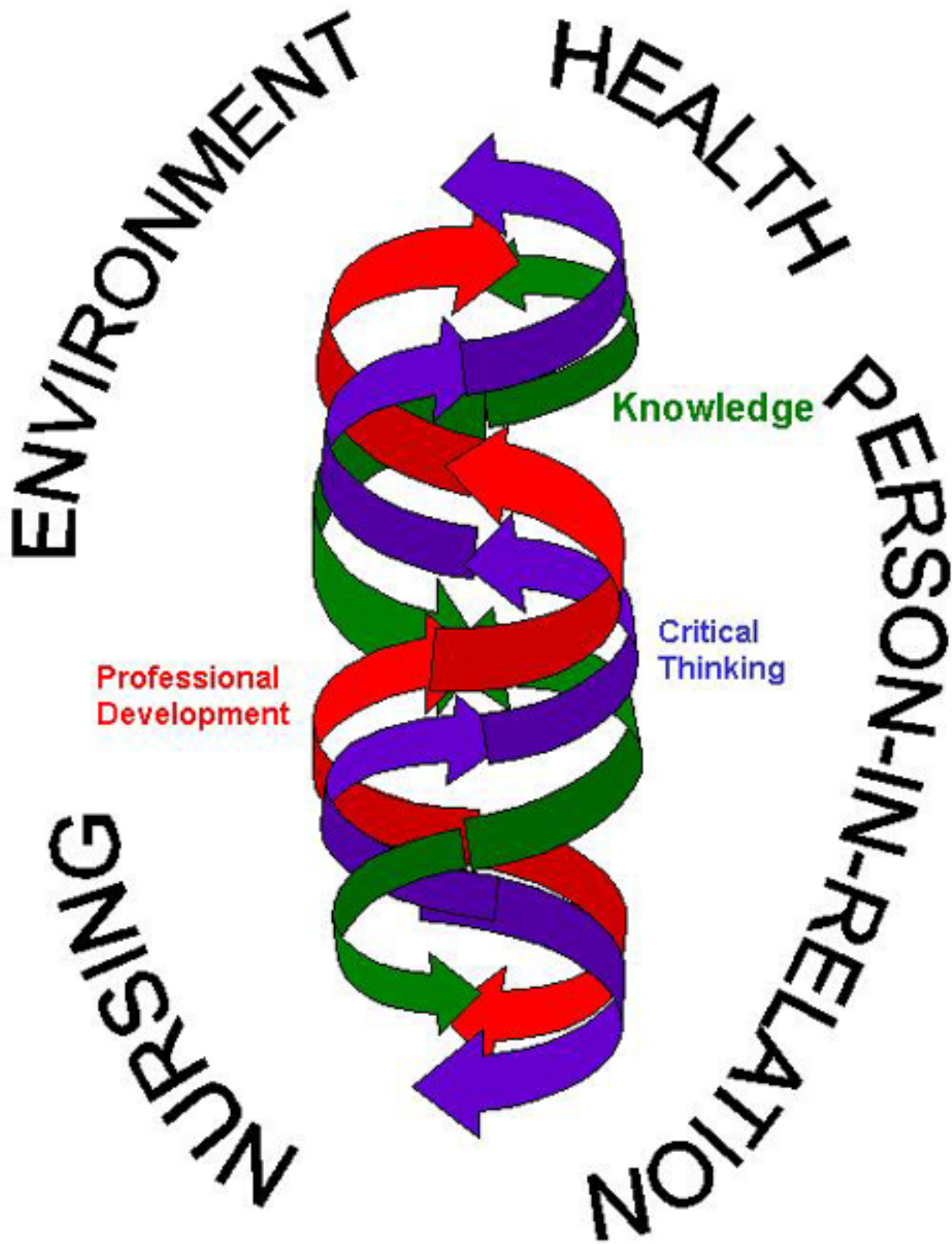
Critical thinking is the promotion of a high order of thinking - not merely the accumulation of facts - but the development of curiosity. It is a reflective process that exposes contradictions of knowing in order to understand the core concern. It is the acquisition of knowledge through inquiry that includes the process of conceptualization, interpretation, analysis, synthesis, evaluation, and the skillful application and communication of information.

Professional development

Professional development is the evolving process of the individual's growth within the nursing profession. It is a process rooted in knowledge and understanding of nursing's rich heritage and a vision of the future of nursing. It allows the individual to develop a sense of place and belonging within the trajectory of the development of the profession. Through this process the individual develops a sense of self as an advanced practice registered nurse, incorporates the profession's values, and becomes part of the shaping of nursing's future.

Through the process of professional development, the individual comes to embody the values upon which nursing is founded. These values include the belief in human caring and the embracing of diversity in the profession, as well as in the clients that nursing serves and the settings in which nurses practice. In addition to the embodiment of these values, professional development means a commitment to life-long learning and development both of the individual and the profession in order to ensure consistent and high quality nursing care to all clients.

Nursing Model for Curriculum Development



School of Nursing Administrative Structure

Dr. Laurie Lauzon Clabo serves as the Dean of the School of Nursing. She is responsible for the overall direction and management of the School. Working with the faculty, Dr. Lauzon Clabo is responsible for the content, scope, and quality of the curriculum, academic standards, and the degree requirements of the programs, including both clinical and academic components. She hires, evaluates, and supports the development of faculty in teaching, scholarship/research and service. As a member of the Institute's senior administrative team, she works closely with the Provost and Vice-President of Academic Affairs on the development and administration of the academic programs in the School of Nursing and in coordination with the other academic programs of the Institute. Additionally, she provides leadership in professional and academic areas through active involvement in external educational and professional organizations, representing the Institute in these endeavors.

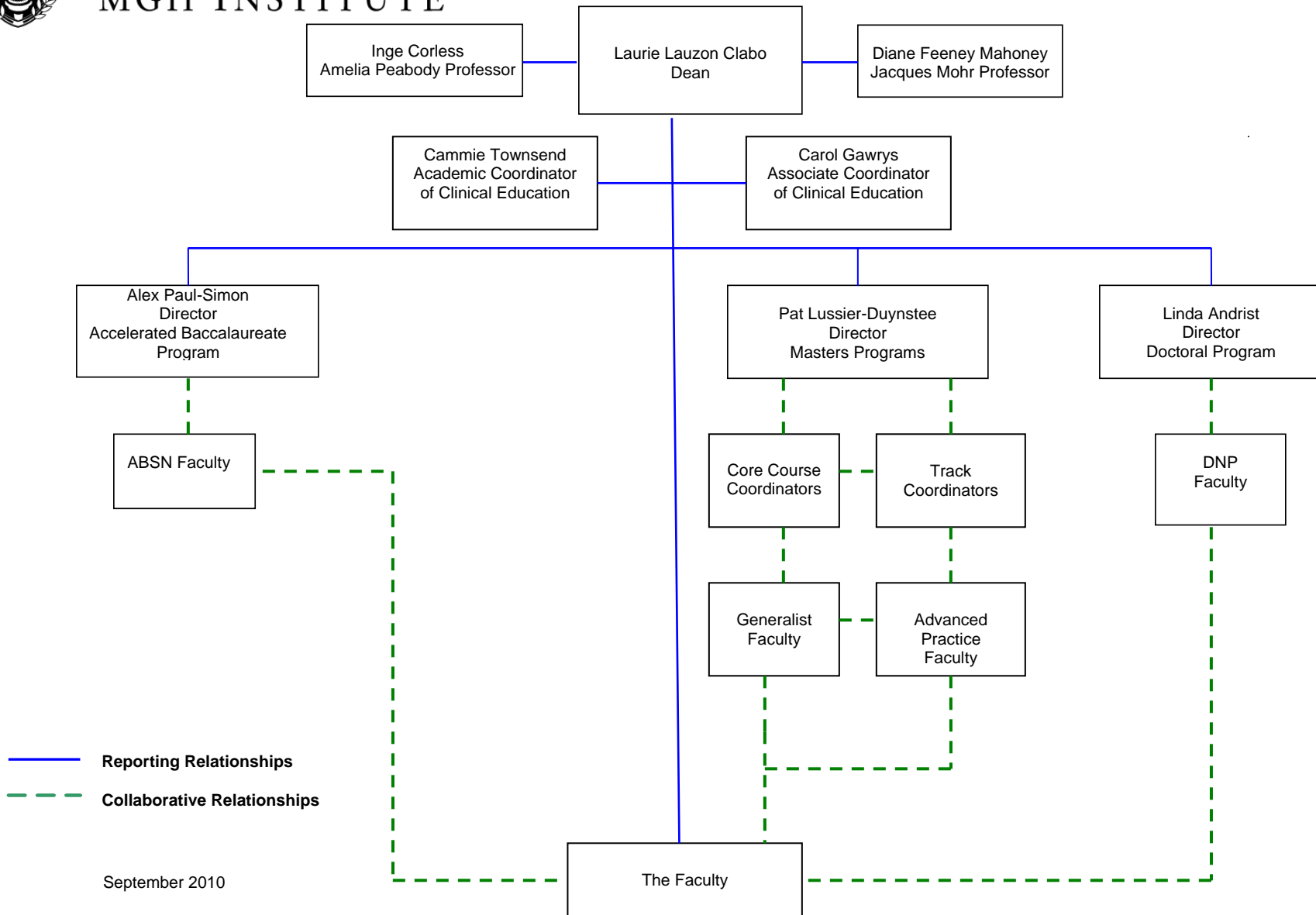
Dr. Linda Andrist serves as Director for Doctoral Studies. Dr. Patricia Lussier-Duynstee serves as Director of the Master's studies. Dr. Alexandra Paul-Simon serves as Director of Baccalaureate Studies. Each of the directors is responsible to the Dean for faculty team development, oversight for curriculum at their level of study, student and faculty liaison, faculty orientation and development, development and revision of nursing program policies and implementation of curricula, and resource projection and management for their respective programs.

The Clinical Placement Coordinators (Ms Carmela Townsend and Ms. Carol Gawrys) develop contacts with a wide variety of clinical venues that serve as sites for student learning at both generalist and advanced practice levels to appropriately match students and clinical sites. Ms. Lorrie Walker, Associate Program Manager provides support.

Specialization Coordinators are faculty with expertise and certification in a specific advanced practice specialty. These faculty monitor certification requirements for the specialization, provide guidance on curriculum and content issues appropriate to the specialization, and deal with certain student issues for those enrolled in the specialization. The Specialization Coordinators are: Dr. Deborah Rosenbloom-Brunton (Acute Care); Dr. Elissa Ladd (Adult); Dr. Patricia Reidy (Family); Ms. M.J. Henderson (Gerontology); Dr. Veronica Kane (Pediatrics); Dr. Jeanne Cartier (Psychiatric/Mental Health); Ms. Katherine Simmonds (Women's Health), and Dr. Linda Tyler-Viola (CNS).



SCHOOL of NURSING MGH INSTITUTE



Faculty teaching at the baccalaureate level includes:

Full Time

Cheryl Cahill Lawrence
Jeanne Cartier
Susan Carpenter
Amy Fuller
Patricia Lussier-Duynstee
Margaret Mahoney
Janice Bell Meisenhelder
Deborah Navedo
Alexandra Paul-Simon
Antonia Makosky

Patrice Nicholas
Mertie Potter
Eleonor Pusey-Reid
Deborah Rosenbloom-Brunton
Susan Stevens
Nancy Terres
Lynda Tyer-Viola

Part Time

Kerry Decker
Theresa Evans
Karen Laliberte
Maureen J. Marre
Angela Minchella-MacDonald
Kathryn Sabo
Emily Sheff
Sharon Sullivan

Faculty teaching at the master's and doctoral levels include:

Full Time

Linda Andrist
Margaret Beal
Jeanne Cartier
Margery Chisholm
Inge Corless
Cathy Franklin
Amy Fuller
Gail Gall
Anthony Guarino
Janice Goodman
Susan Hamilton
Mary Jane (MJ) Henderson
Alex Hoyt
Susan Jussaume
Veronica Kane
Elissa Ladd
Ellen Long-Middleton

Ruth Palan Lopez
Patricia Lussier-Duynstee
Margaret Mahoney
Antonia Makosky
Deborah Navedo
Michael Nickerson
Patricia Reidy
Deborah Rosenbloom-Brunton
Katherine Simmonds
Lena Sorenson
Susan Stevens
Nancy Terres
John Twomey
Lynda Tyer-Viola
Judith Webb

Part Time

Jean Bernhardt
Stephen Coffey
Charae D'Ambra
Sheila Davis

The overall organizational structure of the School of Nursing is summarized in the chart on the next page

Faculty – Full-time

Linda C. Andrist, PhD, RNC, WHNP
Professor & Director, Doctoral Studies

Margaret Beal, PhD, CNM
Clinical Professor

Cheryl A. Cahill Lawrence, PhD, RN
Professor

Susan Carpenter, MSN, RN
Clinical Instructor

Jeanne Cartier, PhD, APRN-BC
Assistant Professor

Margery Chisholm, EdD, RN, CS, ABPP
Professor

Laurie Lauzon Clabo, PhD, RN
Dean & Professor

Inge Corless, PhD, RN, FAAN
Professor, Amelia Peabody Professor in Nursing
Research

Catherine M. Franklin, MS, RN, ANP
Clinical Assistant Professor

Amy Fuller, MSN, RN
Clinical Instructor

Gail B. Gall, PhD(c), RN, BC
Clinical Assistant Professor

Carol Gawrys, MSN, RN
Clinical Instructor

Janice Goodman, PhD, APRN-BC,
Assistant Professor

Susan Hamilton, , PhD(c), RN, CHNCS
Assistant Professor

Mary Jane (MJ) Henderson, APRN, BC, GNP
Assistant Professor

J. Alexander Hoyt, PhD(c), FNP
Assistant Professor

Susan Jussaume, MS, APRN, BC, FNP
Instructor

Daniel Kane, MS, RN
Clinical Assistant Professor

Veronica Kane, PhD, MSN, RN
Assistant Professor

Patricia Lussier-Duynstee, PhD, RN
Assistant Professor & Director, Master's Program

Diane Mahoney, PhD, APRN, BC
Jacques Mohr Professor in Geriatric Nursing and
Gerontology Director

Margaret Ann Mahoney, PhD, RN, ANP
Assistant Professor

Antonia Makosky, MSN, MPH, ANP-BC
Clinical Assistant Professor

Janice Bell Meisenhelder, DNSc, RN
Professor

Deborah Navedo, PhD, PNP, RNC
Assistant Professor

Patrice Kenneally Nicholas, DNSc, MPH, APRN-BC
Clinical Professor

Michael Nickerson, MS, RN, FNP-BC
Instructor

Alexandra Paul-Simon, PhD, RN
Clinical Associate Professor & Director, Baccalaureate
Studies

Mertie Potter, DNP, RN
Clinical Professor

Eleonor Pusey-Reid, MS, M.Ed, CCRN
Associate Professor

Patricia Reidy, DNP, FNP-BC
Clinical Associate Professor

Deborah Rosenbloom-Brunton, PhD, APRN-BC
Assistant Professor

Katherine Simmonds, MS, RNC, WHNP, MPH
Assistant Clinical Professor

Lena Sorensen, PhD, RN
Associate Professor

Susan P. Stevens, DNP, APRN, BC
Clinical Assistant Professor

Nancy Terres, PhD, APRN-BC
Assistant Professor

Carmela Townsend, MS/MBA, RN
Clinical Instructor

John Twomey, PhD, PNP
Professor

Elissa Ladd, PhD, APRN-BC
Associate Professor

Lynda Tyer-Viola, PhD, RNC
Assistant Professor

Ellen Long-Middleton, PhD, RN, CS-FNP
Clinical Professor

Judith Webb, DNP, ANP-BC, PCMNP-BC
Clinical Assistant Professor

Ruth Palan Lopez, PhD, APRN-BC
Associate Professor

Faculty – Part-time

Jean Bernhardt, PhD, RN, NHA, NEA-BC, FNP-BC
Clinical Assistant Professor

Karen Laliberte, MS, RN
Clinical Instructor

Stephen Coffey, MSN, ANP-BC
Clinical Assistant Professor

Maureen J. Marre, MSN, RN, FNP
Clinical Instructor

Charae J. D'Ambra, MSN, APRN, BC
Instructor

Angela Minchella-MacDonald, BS, RN
Clinical Instructor

Sheila Davis, DNP, RNCS, ANP
Assistant Professor

Kathryn Sabo, MS, RN, APRN-BC
Instructor

Kerry Decker, MSN, ANP-BC, WHNP-BC, CHES
Clinical Instructor

Emily Karwacki Sheff, MS, RN, APRN,BC
Clinical Instructor

Theresa Evans, MS, RN
Clinical Instructor

Sharon Sullivan, MS, RN
Clinical Instructor

Anthony Guarino, PhD
Assistant Professor

Associated Faculty

Guardia Banister, PhD, RN
Executive Director
The Institute for Patient Care
Massachusetts General Hospital

Denise M. Celli, MSN, RN
Sr. Vice President Patient Services/CNO
Newton Wellesley Hospital
Clinical Instructor

M. Patricia Gibbons, PhD, RN, CS, IBCLC
Massachusetts General Medical Group
Assistant Professor

Jeanette Ives Erickson, MS, RN, CAN, FAAN
Senior Vice President for Patient Care and Chief Nurse
Massachusetts General Hospital
Clinical Assistant Professor

Elaine L. Bridge, MBA, RN
Sr. Vice President Patient Services/CNO
Newton Wellesley Hospital
Clinical Instructor

Judith R. Flynn, BSN, MBA, RN
Chief Clinical and Compliance Officer
Partners Home Care / Waltham
Clinical Instructor

Sally Iles, MBA, BSN, RN
Associate Vice President
Medicine and Primary Care Services
Massachusetts General Hospital

Deborah Washington, PhD, RN,
Director of Diversity
Massachusetts General Hospital

Adjunct Faculty

Arnstein, Paul
Breakey, Suellen
Capasso, Virginia
Castiel, Matilde
Chisari, Roger
Clancy, Grace
Coakley, Edward
Dahlin, Constance
Dolan Looby, Sara

Finch, Maturin
Fiorini, Albert
Gallagher, Joan
Gundersen, Jasen
Hampton, Jordan
Jo, Tamara
Kawadler, Ellen
Leahy, Noreen
Naparstek, Robert

Parker, Patricia
Perea, Rolando
Potts, R. Bradley
Robinson, Ellen
Rosenbloom, Carl
Savage, Kathleen
Silvestri, Sandra
White, Wayne

Term Lecturers

Barbara Aggouras	Marta Frank	Danielle Micciantuono
Joyce Allen	Kathya Gavazzi	Mary Mullany
Barbara Badio	Barbara D. Giles	Brant Oliver
Mary Barnes	Katherine Gimbel	Miguel Olmedo
Ruth Boland	Barbara Glick	Jennifer Marie Palermo
Julie Boussy	Elyse Goodman	Bridget Paluzzi
Patricia Bowe	Mary Grady	Lauren Parker
Beth Anne Bowen	Reena Gupta	Tara Pellerin
Lindsay Brennan	Kathryn Hall	Garline Raymond
Gail P. Campbell	Andrea Haye-Lewis	Lois Richards
Lisa Caparrotta	W. Rehn Hitschler	Janet Rickles
Michelle Capello	Deborah J. Hylander	Marcia Romano
Courtney Catalano	Tricia Jette Gonthier	Martha Root
Catherine Coakley	April Kaufman	Meaghan Morrison Rudolph
Clare Cole	Karen Kimpavong Gonsiewski	Sara Smoller
Kathleen Conley	Omanand Koul	Jean Stewart
Colleen Daniels	Anne Z. Lamontagne	Sharon Sughrue
Josh Dion	Martin Lewis	Malinda Teague
Thomas Dolan	Cheryl Long	Hannelore Tripp
Ann Eldridge Malone	Jason Lucey	Jane Wandel
Veronica Erasquin	Karen Manning	Donna White
Mary Farrahar	Susan Marston	Kerry Wynne
Patricia Fitzgerald	Mary McCormick-Gendzel	Trisha Zeytoonjian
Jennifer Fong	Jennifer McSweeney	Gennine Zinner

Note: Additional term faculty may join the program for Spring 2011 semester.

Faculty Emeriti

Arlene Lowenstein, PhD, RN
Professor Emerita

Yvonne L. Munn, MS, RN
Professor Emerita

Sylvia Drake Paige, DNSc, RN
Professor Emerita

Jean E. Steel, PhD, RN, FAAN
Professor Emerita

Barbara K. Wilson, PhD, RN, CS
Assistant Professor Emerita

STUDENT ACADEMIC POLICIES

I. Admissions

The Admissions Requirements and Process sections described under Direct-Entry Master's Students are applicable to all students. Exceptions to this standard are listed in specific subsections below.

DIRECT ENTRY MASTER'S STUDENTS

A. Admission Requirements

1. Baccalaureate degree
2. Graduate Record Examination (GRE) scores within the last five years
3. Undergraduate grade point average of 3.0 on the basis of a four-point scale
4. Completed application form from the MGH Institute of Health Professions
5. Non-refundable application fee
6. Statement of philosophy, qualifications, and career objectives
7. Current resume
8. Official transcripts from all colleges and universities attended
9. Three completed reference forms preferably from individuals who have known the candidate as a supervisor or in an academic capacity
10. Satisfactory completion of all pre-requisites
11. Applicants to the DEN, Post-professional, Master's and DNP who have completed graduate work (Master's degree or higher) at another school may submit a GRE waiver request form. The waiver request will be considered on a case-by-case basis.

B. Admission Process

1. Application is made for full-time day study and a specific area of specialization.
2. Completed applications and supporting materials are submitted to the Office of Student Affairs (OSA) by deadline set annually

<http://www.mghihp.edu/Admissions/deadlines.html>

3. Admissions Committee reviews all applications and makes its decision based on submitted materials. The OSA is notified of admission decisions and informs candidates accordingly.
4. Applicants receive written notification of their admission by deadline set by Admissions Committee.
5. Applicants indicate acceptance of admission and deposit fees to confirm their place prior to deadline set by the OSA.
6. Applicants complete any pre-requisite requirements in human anatomy, human physiology, microbiology, chemistry (including organic), human nutrition, and undergraduate statistics or indicate plan to enroll in course prior to matriculation. Prerequisites may be completed the summer prior to admission.

*For ABSN to MSN see “**Policy for ABSN Students to Articulate into the DNP or MS Programs.**”

REGISTERED NURSE STUDENTS

A. Admission Requirements and Process for Registered Nurse Students with a Baccalaureate Degree

1. Current Massachusetts RN License or eligibility
2. Baccalaureate degree and completion of prerequisite course requirements
3. RN and post-professional applicants who have successfully completed with a grade of B or better ONE of the following required courses: NS-739 Advanced Pharmacology or NS-738 Advanced Pediatric Pharmacology (as appropriate to specialty) or NP-715 Advanced Pathophysiology, PLUS a second graduate level course may submit a GRE waiver request form. Additional application requirements are the same as for entry-level students.
4. Application may be made for full or part time study, day or evening option. Students may begin any term.
5. Applications are processed prior to each term as they are received.
6. Acceptance letters specify specialization selection and acceptance for a specific term.
7. Upon acceptance, RN students may apply to waive up to six (6) credits based on life experience.

B. Admission Requirements and Process for Registered Nurse Students without a Baccalaureate Degree.

1. Prerequisite General Education Course Requirements for Registered Nurse Students with a Non-Baccalaureate RN Associate Degree or Diploma

Humanities Including: two English writing courses	15 – 18 credits
Social Sciences Including: psychology, sociology	15 – 18 credits
Biophysical Sciences Including: anatomy and physiology, chemistry, nutrition	15 credits
Mathematics Including: statistics	6 credits
Total: 54 general education credits	

Since most students already will have taken 30 – 33 credits of these courses as part of their previous RN program requirements, they will typically only need to take 24 credits of additional general education courses prior to matriculation. Since general education coursework in diploma and associate degree programs is primarily at the introductory level, a minimum of 12 credits of general education requirements must be beyond introductory level. Students may meet the general education prerequisites through College-Level Examination Program (CLEP), or the Excelsior College Examinations (ECE), formerly known as the ACT Proficiency Examination Program.

2. Please see IA for additional administrative requirements.

CERTIFICATE OF ADVANCED STUDIES (CAS)

A. Admission Requirements and Process for CAS Course of Study

1. Master's degree in Nursing and current Massachusetts RN license or eligibility.
2. Additional application requirements are the same as for Direct Entry Masters students I.A 2 – 11.

BACCALAUREATE STUDENTS

A. Admission Requirements and Process for Baccalaureate Students

1. Application is made for full-time study. Students begin in the summer term.
2. GREs are not required.
3. Additional application requirements are the same as for Direct Entry Master's students I.A 2 – 11.

DOCTOR OF NURSING PRACTICE STUDENTS

A. Admission Requirements and Process for Doctoral Course of Study

Post-Master's Applicants

1. Master's degree in nursing or a related field. Applicants with a degree in a related field may be required to complete additional courses
2. Current Massachusetts RN licensure or eligibility
3. Advanced practice status as a Nurse Practitioner, Certified Nurse Midwife, Certified Nurse Anesthetist, Clinical Nurse Specialist, or Nurse Administrator. RNs with education and/or experience in health policy or informatics should contact the Program Director.
4. GREs are not required
5. A personal interview is required
6. Applicants may be asked to complete a portfolio that outlines their previous education and experience relative to the competencies expected in the program
7. Application is made for full or part-time study. Students begin in the fall or spring term.
8. Additional application requirements are the same as for Direct Entry Masters students I.A 2 – 11.

Post-Master's Executive Doctor of Nursing Practice cohort

1. Same as above, but also must be a CNO or other nurse administrator

RN-DNP

See Registered Nurse application requirements

Policy for ABSN Students to Articulate into the DNP or MS Programs

MGH IHP SON ABSN students follow many of the same policies as RNs applying to either program:

<http://www.mghihp.edu/admission-financial-aid/apply/default.aspx?program=Nursing°ree=nuMSN> .

See the website for explanation of *official transcripts, statement of intent, reference letters, and resume*. Exceptions to these requirements include no application fee and waiver of the GRE requirement.

MGHIHP SON ABSN students applying to the DEN or DNP programs are admitted pending successful completion of NCLEX and conferral of the BSN degree.

II. Registration Requirements

The following requirements pertain to all nursing students prior to course registration. These include requirements of skills and abilities, compliance with immunization requirements and proof of CPR certification.

A. Essential Requirements

Nursing education requires the completion of a professional program that is both intellectually and physically challenging. Students must be able to take part fully in the academic and clinical life of the

program to benefit from the educational activities, and to succeed in fulfilling requirements for a degree or certificate.

In accordance with the provisions and philosophy of the Americans with Disabilities Act (ADA), faculty are committed to providing appropriate learning experiences that maximize every student's potential, and working with students with disabilities to determine if there are ways to assist them in performing essential requirements and skills to meet educational standards. All students will be held to the same standards and must be able to meet the essential requirements and perform essential skills of their positions with or without reasonable accommodations.

As part of the ongoing professional education process, students must engage in physical activity that requires

- Mobility/gross motor skills: Stand and maintain balance, bend, twist, stoop/squat reach above shoulders, reach to floor, move within confined spaces, move with coordination and safe speed
- Fine motor skills: Pinch/pick objects with both hands, grasp small objects with hands/fingers, twist with hands, and write with pen or pencil
- Physical strength: Push or pull 25 lbs., support 25 lbs. Weight, move 10-lb. Objects, carry equipment and supplies
- Physical endurance: Standing for 4-5 hours/day, sitting for long periods
- Sensory:
 - Tactile: Feel vibrations, detect temperature, feel differences in surface characteristics
 - Hearing: Hear normal speaking level sounds, hear faint body sounds, hear auditory alarms
 - Visual: Distinguish letters at 12 point font, clearly distinguish objects both close and distant, use depth perception, use peripheral vision, and distinguish color and intensity of color
 - Olfactory: Detect smoke; detect odors.

The following requirements are considered necessary for full participation:

- Students must be able to read, write, speak and understand English at a level consistent with successful course completion and development of positive patient-nurse relationships
- Students may attend classes 30 hours or more each week, including combinations of lecture, discussion, laboratory and clinical activities
- Preparation for class typically requires an additional 20-30 hours per week. The curriculum may also require occasional scheduled classes or laboratory experiences at local facilities in the early morning, evening or weekends
- Students may participate in intellectual activities requiring critical thinking, judgment, analysis, arithmetic competency, and conceptualization of spatial relationships, problem solving and planning within reasonable time frames within a complex environment
- Students may be required to participate in clinical and laboratory experiences that involve exposure to and palpation of patients' and simulated patients' body parts by faculty and students
- Students must have verbal and non-verbal interpersonal and communication skills that are consistent with productive classroom participation, respectful interactions with faculty, students, staff, patients, and development of appropriate therapeutic relationships

Students must possess the emotional health required for full use of their intellectual abilities, adaptation to unexpected change, exercise of good judgment, and safe completion of all responsibilities.

Students Unable to Meet the Requirements / Skills

Upon request of persons unable to meet the above requirements, the MGH Institute of Health Professions will provide reasonable accommodations that allow the individual to fulfill the essential requirements and skills within the program. However, the Nursing Program is unable to make accommodations that impose an undue burden, present a threat to the health or safety of the individual or others, or fundamentally alters the nature of the curriculum including didactic component, laboratory sessions and clinical experiences.

B. CPR Certification

Participation in any clinical practicum is dependent upon a student showing proof of current certification in basic life support (CPR) prior to his/her first clinical day as a student. After providing initial proof of CPR certification, each student is responsible for knowing when his/her CPR certification expires and for presenting proof of its renewal prior to participation in any/all subsequent clinical practica. Failure to comply with either providing initial proof of CPR certification and/or its subsequent renewal will result in suspension from any/all clinical practica until proof of certification and/or its renewal is produced.

The Program Manager (or delegate) of the School of Nursing will be designated to examine proof and maintain a record documenting CPR certification and its expiration date for each student. The person so designated will be identified to students at the beginning of each academic year. Expiration dates will be reviewed each semester prior to the start of any clinical practica. Note that in some instances a student may be required to provide proof of current CPR certification to designated representatives of agencies at which they are assigned for clinical practica.

C. Immunizations and Health Clearances

The Commonwealth of Massachusetts requires all students to provide proof of immunity against Tetanus, Varicella, Hepatitis B, Measles, Mumps, and Rubella. The Institute requires that students be tested annually for Tuberculosis. All immunization requirements must be met prior to matriculation with the qualification that students must have received at least the first shot in the Hepatitis B series, and provide proof of series completion. Additionally proof of immunity must be kept current during enrollment.

The Institute, and more specifically the OSA, is legally and ethically responsible for insuring that students comply with the Immunization requirements. Patient safety and the well being of the Institute community are of paramount concern to all Institute constituents. To implement the most efficient and reliable record keeping for this documentation, the following procedures have been developed, effective January 1, 2003.

- All immunization records for new and currently enrolled students must be submitted on the Institute's *Immunization History Form*, which is available in the OSA as well as on the Institute's website. Multiple Institute forms are acceptable if the student must get documentation from more than one provider/place. **Students are responsible for insuring that the form is accurately and completely filled out by their health care provider prior to submission.** The OSA will send students an *Immunization History Transcript* confirming receipt of the requisite immunization documentation.
- New Students: The *Immunization History Form* will be sent with the offer of admission. Direct Entry students must submit all requisite immunization documentation by August 15. Students who do not submit this documentation will not be permitted to matriculate.

Other students have until the first day of class to submit their completed immunization record. Failure to do so will preclude their matriculating.

- Enrolled students: The student is always responsible for insuring that he/she is in compliance with all immunization requirements. Students who need to update their immunization histories (e.g. annual TB test) will be sent a notice from the OSA approximately one month prior to the expiration date. Students who fail to update their records by the date specified will not be permitted to continue in clinical practica; furthermore, they will not be enrolled in the following semester without the requisite documentation. All such documentation **must be submitted only on the Institute Immunization History Form.**

The following requirements apply to all matriculated Institute students:

1. Date of last MMR vaccinations (2) or Dates of *positive antibody titers* to Measles and Rubella.
2. Date of last Td (Tetanus) vaccination (within 10 years)
3. Dates of Varicella vaccines or date of positive antibody titer to Varicella or Physician verification of a history of Varicella
4. Dates of Hepatitis B vaccination or Date of positive antibody titer to Hepatitis B.
5. Last TB skin test (PPD/Mantoux): Must be within the last three months prior to the student's first participation in a clinical experience. If there is a history of a positive PPD skin test, a chest x-ray within the past year must be documented. **TB testing must be repeated each year.**

Additional Information can be found in the 2010-2011 Catalog under Conditions of Enrollment:
<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

Note that in some instances a student may be required to comply with agency immunization and need clearances

D. OSHA Bloodborne Standard

Students must attend an information session on Universal Precaution Techniques and Infection Control Practices, the "OSHA Bloodborne Standard," annually. Each academic year, students will be notified of the dates when this presentation will be offered. After attending the presentation, each student must present proof of attendance and mastery of the content to the person so designated in the OSA. Failure to comply with attendance at the annual OSHA review will result in suspension from any/all clinical practica until proof of attendance and content mastery is provided. Note that in some instances a student may be required to provide proof of attendance and content mastery to designated representatives of agencies at which they are assigned for clinical practica and/or participate in additional OSHA-related programs at an individual clinical site.

E. HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) is legislation that mandates the standards and requirements for the electronic transmission of certain health information. This act seeks to insure all patients, clients and research subjects' health information is protected. Students must annually document that they have reviewed and understood this act by reviewing the requisite HIPAA section on the Institute's Web site in the 2010-2011 Catalog under the Conditions of Enrollment:
<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

F. Licensure as a Registered Nurse

Students who enter a program as a licensed registered nurse must present their nursing licenses to the Program Manager of the School of Nursing, or their designee, prior to their first clinical practica. When relevant, it is the student's responsibility to provide evidence of license renewal at the time of its expiration. Direct Entry students must present their licenses as soon as they are issued by the Board of Registration in Nursing. All RN licenses must be unrestricted. Students may be required to apply

for reciprocity in states to satisfy others clinical agency requirements.

G. Criminal Offense Record Investigation (CORI) Checks

All students who accept the Institute's offer of admission and matriculate will be subject to a background check prior to enrolling. Should a Criminal Offender Record Information (CORI) background check yield information that shows a student has engaged in conduct that could subject the student to being disqualified from engaging in certain activities, the Institute reserves the right to initiate disciplinary action against the student, up to and including dismissal.

Students may find that they are unable to begin a precepted clinical placement until an additional background and/or CORI check is completed by the facility to which the student is assigned. A CORI check *may* be performed each time an individual has an affiliation with a different facility. Students are individually responsible for the cost of a CORI check if a second CORI is required by the clinical placement site.

III. Advanced Placement for Students Entering the MS Program as Registered Nurses

A. Advanced Placement

1. Students are eligible for alternative methods of completing degree requirements (transfer credit, credit by examination, course exemption or independent study) as described in General Policies and Procedures in the Catalog: <http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>
2. Requests for course credit, transfer credit, credit by examination or advanced placement must be processed prior to enrollment in the last semester of the student's program.
3. A record of advanced placement and credit will be kept in the student's academic advisor file and will be recorded on the transcript.

B. Registered Nurses with a Baccalaureate Degree in Nursing

1. Upon admission into the program, students present validation of previous course work (e.g., transcript, course syllabi) in ethics, community health nursing, and statistics. With successful validation, students are exempted from these courses and receive no credit. A record is kept in the student's permanent file. See also [Topic III – A: Advanced Placement](#); above.

C. Registered Nurses with an Associate's Degree or Diploma in Nursing

1. In addition to [Topic III – A: Advanced Placement](#); above, please see [Topic I: Admissions, Registered Nurse Students, Section B](#).

D. Post-Master's DNP Students

1. Up to 18 credits may be waived through post-admission portfolio review.

IV. Advisement

At matriculation each student meets with an assigned faculty advisor and reviews their course of study, which is kept on file with the student's academic advisor, the School of Nursing office and the Registrar. It serves as a guide to academic progress.

A. Role of Academic Advisor

Students are expected to initiate an appointment with their advisor for the following:

1. Upon matriculation to establish a course of study
2. To approve course pre-registration each semester
3. To complete course add/drop form
4. If an academic warning has been issued
5. To plan for graduation
6. To initiate a change in student status (e.g., a request for a leave of absence)
7. Annual review of course of study
8. To withdraw from program
9. At other times as requested by either party

Academic advisors are expected to review advisees' progress each semester and at other times as requested by either party. Advisors are expected to review advisee's program of studies for completion of all credits/requirements for graduation.

B. Change of Advisor

A change of academic advisor may be made upon request of either the faculty or student. Granting the request may be dependent upon faculty availability. Complete the Change of Advisor Form, available from the School of Nursing Office (Appendix A). The student informs the former advisor of the request for a change of advisor. The signature of the new advisor is required. Submit the completed form to the School of Nursing office. Program personnel will provide a copy of the completed form to the student, the former advisor, the new advisor and the Office of Student Affairs.

C. Faculty Schedules

All faculty will have schedules on file in the School of Nursing office each semester and are expected to offer office hours for a minimum of two (2) hours a week each semester.

V. Progression

A. Pre-Registration

All current students are expected to pre-register within the period specified by the OSA. Students intending to enroll in a *clinical* course requiring a precepted clinical placement **must pre-register**. A clinical placement cannot be guaranteed if the student fails to pre-register by the deadline set by the OSA.

B. Continuous Enrollment

1. Direct Entry Master's students: Continuous enrollment in two academic terms per year is expected.
2. RN to MSN students and post-master's DNP students: Continuous enrollment is not required. However, a leave of absence form must be approved by the student's advisor and the OSA if a student does not plan to register for any courses in a particular semester. No special permission is required.
3. Baccalaureate students: continuous enrollment in three and a half academic terms is expected.

C. Leave of Absence

In the event that a student cannot maintain continuous enrollment, the student may submit a written request for a leave of absence (LOA). Forms may be obtained in the OSA or at URL:

<http://www.mghihp.edu/academics/registrar/important-forms.aspx>

1. LOA request form

After consulting with the Academic Advisor, the student submits a completed leave of absence form to the Program Director. Leaves of absence are granted for reasons of health, academic, or extenuating circumstances.

- a. Health: A leave of absence for health reasons requires validation of the health problem by a health practitioner. To return to the Program, evidence must be furnished that the health problem is sufficiently resolved for the student to resume study.
- b. Academic: A leave of absence for academic reasons requires that a committee of at least three faculty members (including the student's academic advisor) formulate conditions for the leave.
- c. Extenuating Circumstances: A leave of absence for other reasons will be individually evaluated.

2. Approval Procedure

- a. The completed Request for a Leave of Absence form is signed by the advisor and submitted to the Program Director by the student.
- b. An agreement granting the leave and outlining any conditions to be met will be signed by the Program Director and the Student.
- c. A copy of the agreement will be given to the student and another copy will be retained in his/her permanent record.
- d. Once the request has been granted, the Program Director will sign the leave of absence form and the form will be submitted to the OSA for final approval.

3. Length of LOA

Refer to the 2010-2011 Catalog, page 143 Institute for policy governing length of LOA.

<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

4. Return to Program

In order to return to the Program, all conditions outlined in the leave of absence agreement must be met and approved by faculty involved in the process. A leave of absence does not extend the time to complete the Program.

D. Course Progression

Students must successfully complete all courses as prescribed in their course of study program curriculum. Course prerequisites must be completed and/or co-requisites must be registered for before students may enroll in the respective course.

E. Part-time Status For Direct Entry Masters and Baccalaureate Students

Because of the lock-step nature of these curricula, part-time status is not encouraged; therefore, a special written request is required. The request must include a course of study plan depicting the proposed part-time curriculum plan for the student. Students must obtain permission from their advisor and Program Director. No more than 10% of students in any class will be permitted to register on a part-time basis.

Part time progression in the Program requires that all course pre- or co-requisites be met according to the prescribed curriculum plan. If part-time status is granted, the OSA will be notified, and the course of study plan will be maintained in the Program and advisor's files.

F. NCLEX-RN

Proof of unrestricted RN licensure is required for progression to the second semester in the Advanced Practice level Direct Entry Master's program. Students who have not provided proof of RN licensure following completion of the first semester courses at the Advanced Practice level must take a Leave of Absence until proof of successful completion of the NCLEX-RN.

G. Grading

1. Grading Scale for the School of Nursing

Refer to the Institute's 2010-2011 Catalog on the Web site for the Institute's grading system. (Listed under "Grading Policy")

<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

2. Pass/Fail Option

Students may take a maximum of 20% of the total credits required to graduate or complete the program on a Pass/Fail basis, subject to the following:

- a. The Pass/Fail option is not available for clinical nursing courses, Pathophysiology (HP 621), Pharmacology (HP 622), and any course for which the instructor has elected not to offer the Pass/Fail option.
- b. Scholarly Project or Thesis will be graded Pass/Fail and is exempt from the 20% limit.

Refer to the Institute 2010-2011 Catalog on the Web site for information on the Institute's policy on the Pass/Fail Option (Listed under "Grading Policy / Pass/Fail Option").

<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

3. Incomplete Work

Refer to the Institute **2010-2011 Catalog** on the Web site for the Institute's policy on a grade of Incomplete in a course (Listed under "Grading Policy / Incompletes").

<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

The policy of the nursing program is that:

- a. An "I" (incomplete grade) in a non-clinical course must be completed within the first two weeks of the succeeding term unless negotiated otherwise with the faculty of record for the course.
- b. An "I" for a clinical course must be completed within the first week of the succeeding term

unless negotiated otherwise in writing by the faculty of record for the course.

- c. If the course in which the student has an Incomplete is a pre-requisite for a subsequent course, the student may not progress to the next course until the earlier course is satisfactorily completed.
 - d. The student must submit a Request for Temporary Grade of Incomplete Form (Appendix F) to the Nursing Program Office. The student and the faculty agree on a completion date, taking into account 3. (c) above. The form must be approved and signed by the faculty of record and submitted prior to the last day of exams for that term.
 - e. Faculty submit a grade of Incomplete for the student on I-online, noting the completion date agreed to by the student and the faculty. If the grade has not been changed by faculty prior to the agreed upon date, the grade automatically converts to an F.
4. Resolution of Student-Faculty Conflicts Regarding Grading
Refer to the Institute 2010-2011 Catalog on the Web site for the Institute's policy on Resolution of Conflicts. (Listed under "Grading Policy / Process For Challenging a Final Course Grade")
<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>
5. Grading of Nursing Courses

The minimum grade for all clinical nursing courses is a C+ (C plus); the minimum grade for all non-clinical nursing courses is C- (C minus), subject to section H below.

Refer to the Institute website for the Institute's Grading Scale.

6. Formative and Summative Feedback in Clinical Courses

Both formative and summative evaluations will be conducted in clinical courses. The syllabus for each clinical course will specify the times for formative and summative evaluation. Both student and faculty will sign the evaluation forms. Major strengths and areas in need of continued development will be provided to students as formative evaluation midway through each clinical rotation. Summative evaluation will occur at the completion of each clinical course. These evaluation forms will be kept on file in the Program Office. Major strengths and areas in need of continued development will be provided to students as a formative evaluation, in oral or written forms, midway through each clinical rotation. Summative evaluations will occur at the completion of each clinical course. Both student and faculty will sign the evaluation. This evaluation form will be kept on file in the Program Office. For preceptor-based courses, the final written summative evaluation will include the preceptor's student evaluation, and a written summary by the clinical faculty member assigned to the course

H. Academic Standing

1. Minimum required GPA

Notwithstanding any other policies contained in this policy manual, students enrolled in the Direct Entry Master's, Baccalaureate, and Doctor of Nursing Practice programs are required to maintain a minimum cumulative grade point average of 3.0 each semester. Failure to do so will result in an academic probation. The student must regain a 3.0 GPA by the end of the following semester.

Failure to attain this GPA by the end of the following semester constitutes dismissal from the program. Prior to dismissal, the decision will first be reviewed in an Automatic Review Process within the SON.(see section H, 6).

The automatic review process will be initiated by the Program Director immediately upon

receiving grades, who will convene a committee of involved faculty to include at a minimum: the Program Director, faculty of record and faculty advisor. In the case of the decision to NOT dismiss, the student is granted ONLY ONE more semester to regain a 3.0 GPA.

In the case of the decision to dismiss, a student may appeal the decision to dismiss to the Appeal Committee for the SON (see Program Governance- IB4 & Appendix H).

In order to graduate, students must complete the specified course of study approved by the program in which they are enrolled with a cumulative GPA of 3.0 or higher.

2. Clinical Probation:

Students who have partially met the clinical objectives for a clinical course may be put on clinical probation. Clinical probation is determined by the course faculty based on the objectives in the syllabus. Students who have been placed on clinical probation must repeat that course and fully meet all clinical objectives prior to progressing to the next clinical course. Such students may repeat that clinical course only once.

3. Clinical Suspension

Students suspended from clinical or failing the clinical portion of a course will be automatically dismissed pending review by the Automatic Review Process (see section 6). Suspension or failure of the clinical portion of a course is determined by, but not limited to, a student's unsafe clinical practice. "Unsafe clinical practice is behavior that places the client or staff in either physical or emotional jeopardy. Physical jeopardy is the risk of causing physical harm. Emotional jeopardy means that the student creates an environment of anxiety or distress which puts the client or family at risk for emotional or psychological harm. Unsafe clinical practice is an occurrence or pattern of behavior involving unacceptable risk." Students who demonstrate unsafe behavior will be suspended from clinical practice at that point in the term.

(Refer to Code of Professional Behavior for Students in the MGH Institute of Health Professions School of Nursing, Appendix K.)

Scanlan, J., Care, WD, & Gessler, S. (2001). Dealing with the unsafe student in clinical practice. *Nurse Educator*, 26(1), 33-38.

4. Failure to Progress

- a. Baccalaureate or Direct-Entry students receiving C or C- [C minus] in a clinical course must repeat that course prior to progressing to the next clinical course. Such students may repeat that clinical course only once. If the student receives any grade below C+ [C plus] when repeating the course, they are automatically dismissed from the program.
- b. Post-Master's DNP students: Any grade below a B- is considered a failing grade and the student must repeat the course.
- c. A student failing a **non-clinical required course** must repeat it and may do so only once. A second failure results in automatic dismissal from the program.
- d. If a student repeats a course, both grades will stand on the transcript, but only the second grade will be considered in determining GPA.

5. Automatic Dismissal

- a. Student failing two courses in the same semester will be automatically dismissed from the program. A student failing the theoretical portion of one clinical course will be automatically dismissed from the program.
 - b. In the case of an automatic dismissal, a student may appeal the decision to the Appeal Committee for the Graduate Program in Nursing. (see Program Governance – IB4)
6. Automatic Review Process
- a. The Director of the Program will initiate an Automatic Review Process in the case of:
 - I. Faculty recommend dismissal as a disciplinary action to a violation of academic integrity.
 - II. Student request for review for exception to current policy (section O)
 - III. Clinical failure or suspension from clinical with faculty recommendation of dismissal.
 - IV. GPA below 3.0 for the second consecutive semester.
 - b. The Program Director will convene a committee consisting of involved faculty to include at a minimum: the Program Director, faculty of record and faculty advisor. In the case of the decision to dismiss, a student may appeal the decision to dismiss to the Appeal Committee for the SON (see Program Governance- IB4 & Appendix H).
- I. Alternative Methods To Complete Degree Requirements
- Refer to the Institute website for Institute policies and deadlines governing alternative methods to complete degree requirements. (Listed under “Policies and Procedures / Transfer Credit Policy; Independent Study Policy; and/or Course Exemption, Credit for Life Experience, and Credit by Exam Policies”)

Alternative methods of completing Nursing degree requirements through transfer credit, credit by examination, course exemption, or independent study apply only to non-clinical classes.

1. Transfer Credits

A maximum of nine (9) credit hours may be transferred from another school for credit toward the degree. For Direct Entry and RN Master’s degree students, these must be graduate credits not utilized from a previously completed degree. No transfer credit will be allowed from institutions or programs that lack appropriate accreditation or for courses for which the student received a grade of less than a B. In order for transfer credits to be allowed, they must have been acquired within 7 years prior to matriculating at the Institute.

During study at the Institute, students may take approved courses at other colleges and universities, using the following procedure: The student provides a petition and course syllabus to his/her academic advisor for review. The academic advisor, in consultation with the Program Director or Associate Director determines if the course meets requirements for transfer credit. The advisor returns the signed petition to the OSA .

2. Credit by Examination: see 2010-2011 Catalog <http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf> . A student may obtain a maximum of six (6) credit hours by examination toward the degree. Students with life/work experience related to specific courses may wish to receive credit for courses by taking a special examination.
- a. The student must be matriculated in the Programs in the School of Nursing.
 - b. The Credit by Exam option will be offered for selected courses, a listing of which is available

- from the Program Office.
- c. The student obtains a petition form for credit by Examination from the OSA and submits a completed petition to the course faculty no later than two weeks after the course begins.
- d. A non-refundable examination fee of 10% of the course tuition is charged.
- e. The student arranges exam administration with course faculty.
- f. The course faculty returns the signed petition to the OSA. Written notification of the grade is sent to student and advisor within one week of exam administration.
- g. If the exam is not passed, the student must register for the course.
- h. An exam may be taken only once.

3. Course Exemptions

Students who have extensive previous study or experience may request course exemption from **non-clinical courses** for a maximum of six (6) credit hours.

- a. The student must be matriculated in the School of Nursing.
- b. The student meets with the academic advisor to discuss intent to exempt a course and with the course faculty to receive direction regarding the materials required to support the course exemption.
- c. The course faculty, in consultation with the Program Director, determines if the course exemption will be awarded.
- d. If an exemption is granted, course faculty completes the Course Exemption form and returns it to the OSA, who notifies the academic advisor.
- e. If the student enrolls in a course and then decides to request exemption, a written request to do so must be made to the academic advisor and the course faculty no later than two (2) weeks into the term.
- f. Requests for exemption from clinical courses will not be considered.
- g. If an exemption is granted, no course credit is given, and code of "X" is recorded on the transcript. The student is not required to take another course to earn equivalent credit counted toward graduation.

4. Course Exemption by Portfolio Review

5. Independent Study

Refer to the *Institute 2010-2011 Catalog* on the Web site for policies regarding Independent Study <http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

Go to the Registrar's section on the Web site for forms:

<http://www.mghihp.edu/academics/registrar/important-forms.aspx>

See also: [Appendix D: Graduate School of Nursing Independent Study Guidelines](#)

J. Adding and Dropping Courses

Refer to the Institute website for policies regarding Drop/Add Policies

<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

K. Withdrawal Policy

Refer to the Institute website for policies regarding Withdrawal

<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

L. Attendance Requirements

Refer to the Institute website for policies regarding Attendance.

<http://www.mghihp.edu/academics/registrar/important-forms.aspx>

1. Absence from Clinical Experience

Students are expected to be present for all clinical experiences. Students who miss clinical experience will be expected to make up that clinical experience to the satisfaction of the faculty. The faculty and student will arrange appropriate times for meeting the clinical experience

requirements. The student must complete the clinical experience within the first week of the succeeding term, and may be liable for additional payment to cover the cost of any extra faculty time required.

M. Auditing Courses

Refer to the Institute website for policies regarding Auditing

<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

N. Changing Specialization

- a. A student who wishes to change his/her specialization after admission to the program must be in good academic standing. Requests to change specialization will not be accepted until completion of the first year of study for Direct Entry Master's students, and must be received by the School of Nursing office by the deadline established each year. Decisions are made by faculty in a timely manner to allow students to register correctly.
- b. The student discusses the proposed change with his/her advisor and with the former and new track coordinators, whose signatures are required. The student completes a Change of Specialization Form <http://www.mghihp.edu/academics/registrar/important-forms.aspx> and a Nursing Program Change of Specialization Form (Appendix G). The student describes the reasons for the requested change in specialization.
- c. The student forwards the signed request to the Director of Master's Studies in Nursing. Requests will be granted on a "space available" basis. Program staff forward copies of the signed request to the student, the advisor, the track coordinators, and the Registrar.
- d. Students who change specialty tracks in such a way as to affect the timing of their entry into the newly chosen specialty will enter the new specialty at the revised time, on a space-available basis only.

O. Requests for Review

Students have the right to request a review of a program policy on an individual basis due to extenuating circumstances. The relevant program policy must effect the student's current or future semester. This request must be in writing and submitted to the Program Director. The Program Director will convene a committee of involved faculty to include at a minimum, the Program Director, faculty of record, and the faculty advisor. The committee will make every reasonable effort to deliver a timely decision.

VI. Graduation Policies

A. Time for Completing Program

1. Full time students in all programs must complete all course work within five (5) years after matriculation.
2. Part-time post-master's Doctor of Nursing Practice students must complete all course work within five (5) years and all other part-time students within eight (8) years after matriculation.
3. Students enrolled in the Certificate of Advanced Studies program must complete all course work within three (3) years.
4. Students who do not complete the Program within these time limits will be dismissed from the Program. Under extreme extenuating circumstances, students may submit a written petition to the Program Director to extend the time for completion of the Program.

B. Course Requirements

1. Students must complete all required course work as described in the respective plan of study. Students wishing to take course work beyond requirements may do so with permission of advisor and course faculty. Enrollment is dependent upon availability of resources.
2. Direct Entry students admitted without advanced standing or course exemptions must complete their program of study to graduate. Specific curricular requirements for their specialization must be met.
3. Registered nurse students enrolled in the MS program generally complete 50-70 credits to graduate (depending on advanced placement, course exemption, and specialization-specific requirements).
4. Post-master's students completing a course of study with a minimum of 29 credits will be awarded a certificate of advanced study. For the Certificate of Advanced Studies students who have already completed requirements for nurse practitioner certification in prior study, and are matriculating in the Nursing Programs in another specialty, a minimum of 21 credits must be completed.
5. MS students must complete a minimum of 24 credits at the MGH Institute of Health Professions.
6. Post-master's DNP students: students entering with an MSN complete 43 credits; students entering with a Master's in another field and a BSN complete 60 credits, and students Master's and Bachelor's in another field complete 70 credits.
7. Doctoral students who are not Advanced Practice Nurses as defined by AACN may waive taking the Clinical Core (Advanced Pathophysiology, Advanced Assessment and Diagnostic Reasoning, and Advanced Pharmacology).

C. Registered Nurse Licensure

The MS degree will not be awarded until successful completion of the registered nurse licensing examination (NCLEX-RN).

D. Participation in Graduation Ceremony

Refer to the Institute 2010-2011 Catalog on the Web site for policies/ requirements for Graduation.

<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

The Institute holds one commencement ceremony in May of each year. Eligibility for participation in the ceremony is as follows:

Students expecting to complete degree requirements at the end of the Spring or Summer semesters of any given calendar year will participate in the May ceremony in that calendar year. Students completing requirements at the end of a Fall semester will be eligible for participation in the May ceremony in the *following* calendar year.

Degrees are recorded and made official according to the following guidelines:

Fall finish (December) – your degree will be conferred at the end of January.

Spring finish (April) – your degree will be conferred at the May ceremony.

Summer finish (August) – your degree will be conferred at the end of September.

All students who plan on graduating must complete an application for graduation by the beginning of December prior to your graduation year. See also “Application for Graduation.”

CURRICULUM POLICIES

I. Course Requirements and Options

A. Curriculum Plans

Students must complete curriculum plan as outlined. Students wishing to take coursework beyond their required advanced practice credit allotment may do so with the permission of their advisor, and course faculty, dependent on the availability of resources.

B. Scholarly Project/Thesis Option for MS Programs

1. Scholarly Project. Students are encouraged to select this option. The scholarly project is usually taken for 3 credits and completed within the term of registration. Students who extend beyond one term must submit a request for a grade of incomplete, must enroll in the scholarly project continuation course, and are subject to Institute policies regarding continuation fees. A public presentation of the Scholarly Project is a requirement for graduation. Specific requirements are described in the course syllabus and scholarly project guidelines.
2. Thesis. A student, in consultation with his/her advisor, may choose to do a six-credit thesis in lieu of the scholarly project. Students must complete a graduate level statistics course. The thesis must be completed within one year after course work is completed and within the maximum number of years allotted for the program of study. Students who extend thesis completion beyond two semesters must enroll in the thesis continuation course and are subject to Institute policies regarding continuation fees. An oral presentation of the thesis is a requirement for graduation. Refer to specific thesis guidelines available from the School of Nursing office.
3. Group Thesis. A group thesis is defined as investigative work that has student co-authors, one final document or outcome and one group of readers. The final decision on whether to allow a group thesis/project, and the number of students participating in the group, rests with the primary reader.
4. Thesis Committee. A Thesis Committee should include members with methodological and content expertise. A committee may be composed of a single reader if the student and faculty agree. A student or reader experiencing conflict should discuss concerns with the Committee member(s). If concerns are not resolved, the Program Director will serve as mediator and final decision-maker of the conflict.
5. Posters at National Meetings Fulfilling Oral Presentation of Thesis. Poster or paper presentations from either national or regional conferences, or others as approved by the Director, may substitute for the required oral presentation of thesis/scholarly project.
6. Switching from Thesis to Scholarly Project. When students have the continuation designation of "R" for thesis and change to scholarly project, the "R" will convert to a permanent "I" for thesis. Students then register for NS 882 Scholarly Project.

C. Independent Study

An independent study elective is available to students with special needs and interests. Credit and hours are to be arranged with the appropriate faculty member and approved by the student's faculty advisor. Students must complete an independent study contract ([Appendix D](#)). A descriptive title, reflecting the content of the course, must be given and will be listed as such on the transcript. Independent study for clinical credit must be approved by appropriate nursing administrative channels.

D. Format for Written Work

All formal papers must be written according to the format specified in the American Psychological Association (Sixth Edition) Guidelines.

E. Advanced Practice Courses

Advanced practice courses are chosen according to specific clinical program specialty requirements. All students must complete a minimum of 6 credits of advanced practice clinical courses.

II. Course Credit/Contact Hour Ratio

A. Theory Credit Ratio

The didactic credit to contact hour ratio is 1:1. Courses taught in less than a semester block are adjusted accordingly.

B. Clinical Credit Ratio

The clinical credit to contact hour ratio in all clinical courses is 1:3. Courses taught in less than a semester block are adjusted accordingly.

C. Lab Credit Ratio

The lab credit to contact hour ratio is 1:2. Courses taught in less than a semester block are adjusted accordingly.

D. Practice Credit Ratio

The practice credit to contact hour ratio in the Doctor of Nursing Practice courses is 1:4.

III. Guidelines for New Course Development

New course proposals shall be presented to the Curriculum Committee for review and recommendation to the Nursing Program Committee. The faculty responsible for the course shall submit a new course proposal to the Curriculum Committee in the semester prior to the planned offering. Refer to the Institute Policy for Approval of New Courses in the Faculty Manual. New courses that involve new initiatives within the program (specialization, new cadre of students, etc.) are guided by the Institute New Initiatives Proposal Process. I:IHPCOMM/FACULTY/Faculty Manual/Table of Contents/Flowchart of Review of All Courses

A. New Course Proposal

New course proposals will include the following:

1. A course syllabus presented in the required format (See Section V).
2. A course justification stating:
 - a. Rationale for adding course/contribution to the Program
 - b. Congruence with program philosophy and program level objectives.
 - c. Potential contribution to the Institute
 - d. Review of other similar courses for areas of overlap (within Institute)
 - e. Resources needed for the course

IV. Course Revisions

A. Changes in Course Description, Course Objectives or Credit Allocation

Changes in course description and/or course objectives or credit allocation must be submitted to the Nursing Curriculum Committee for review and approval in the semester prior to implementation. Faculty should submit the following materials:

1. Original objectives and proposed new objectives,
2. Original course description and proposed new description,
3. Original course credit allocation and proposed new credit allocation,
4. Rationale for the change(s),
5. Statement of the congruence with Program philosophy and program level objectives.

In the case of course revisions, a discussion with faculty teaching concurrent or subsequent courses that might be affected by the changes should take place prior to presenting materials to the Curriculum Committee. A summary of meeting(s) with faculty whose courses may be affected by proposed revisions should be submitted with the proposed revisions.

V. Course Syllabus Format

Course Title:

Course Number:

Faculty Name:

Office Number, Office Hours, Phone Number:

Date of Offering

Placement in the Curriculum: Year ____, Semester ____, Level ____

Prerequisites:

Course Description (same as in catalog):

Clinical Units and Facilities Utilized (clinical courses only):

Credits: (i.e., 3,3)

Course Objectives

Required Texts

Method of Instruction

Evaluation Methods:

- Description of Assignments
- Grading Criteria
- Grading Scale
- Examinations
- If clinical course, include Clinical Evaluation Criteria for satisfactorily completing the course. These criteria may be determined on a course-by-course basis

Class Schedule and Content

Suggested and Required Readings

Statement on Disability

(Reference: <http://www.mghihp.edu/student-life/student-services/support.aspx#disability>)

Section on Patient Confidentiality

Student's Privacy Rights Clause

Courses that expect student participation in learning activities that could be considered invasive or possibly threatening to students' privacy should include a statement regarding voluntary participation in the course syllabi. Additionally, students or volunteers who consent to having a physical examination by another student should complete the attached consent form (See [Appendix B](#)). A consent form (See [Appendix C](#)) should also be completed by volunteers who participate in learning activities (other than physical exams) that could be considered a threat to student privacy (e.g., health, interviews, and treatments).

PROGRAM GOVERNANCE

I. Governance for School of Nursing

A. School of Nursing Committee

1. The governing body for the School of Nursing is the School of Nursing Committee (SONC)
2. Membership of the SONC
 - a. Voting membership of the SONC consists of all full- and part-time faculty appointees to the Program.
 - b. A student representative from each year of Program and RN Program may attend meetings as non-voting members.
3. Quorum
A quorum for the SONC shall consist of 1/2 of the voting members.
4. Chair
The Dean will serve as Chairperson, and a designee will serve in the Dean's absence. Robert's Rules of Order are used to guide the meetings.
5. Minutes
A staff support person will take minutes at each meeting. A copy of the minutes will be kept in the Nursing Program office.

B. Standing Committees

The standing committees of the School of Nursing include the Curriculum, Admissions, Policy and Appeals committees.

1. Rules for Standing Committees

- a. Elections:
A term of office is two years, with half of the voting membership changing each year. Nominations for open terms are submitted at the last SONC meeting in the Spring term of the academic year. Elections are held by faculty ballot, results are announced as soon as they are available.
- b. Appointments:
Appointments are made by the Dean following the annual elections from a list of preferences submitted by faculty. A term of office is two years. Appointments are made on a rotating basis.
- c. The Dean proposes a charge to the committees at the first meeting of an academic year. The charge recommends the important products to be completed by the committee.
- d. Chair: Each committee will elect a chair from its members. Committee Chairs are responsible for calling and conducting meetings, creating the agenda, ensuring minutes be taken, and creating the annual report.
- e. Minutes: Minutes are taken and placed in permanent file in the program office.
- f. Annual Reports: Annual reports of the standing committees are to SONC and maintained in the program file.

B-1 Curriculum Committee

1. Purpose and Function

- a. Oversee the implementation and evaluation of the curriculum.
- b. Identify need for curricular changes and develop proposals for same.
- c. Review required courses to insure their congruence with the stated philosophy, purpose and conceptual framework of the program.
- d. Review new course proposals and make recommendations to the SONC. Review special curriculum project grants for compatibility with the Program's goals.
- e. Propose curriculum policies as needed to the SONC.

2. Membership

There are eight voting members: six faculty members (four are elected and two are appointed), one nursing student; one representative from the MGH Department of Nursing. The Chair is selected annually at the first meeting by the committee.

3. Decision-Making

Committee decision-making is by majority vote. Curriculum decisions are guided by the following process. At the beginning of each academic year, the SONC faculty shall:

- identify curricular issues regarding implementation, evaluation and changes in the Program
- generate short-term goals for the academic year from the identified curricular issues
- establish long-range curricular goals as appropriate; set priorities for short- and long-term goals
- identify where decision-making will occur (i.e. curriculum committee or program committee)

Based on the goals, the curriculum committee shall:

- create a plan and time for goal implementation;
- distribute the time frame to the nursing faculty;
- provide opportunities for faculty input into the development of position papers;
- generate "position papers" for selected curricular issues.

To monitor this process, the following steps shall be taken:

- a. The curriculum committee will report to the faculty regularly
- b. At mid-academic year, the faculty will review the progress made toward meeting curriculum submitted goals
- c. An evaluation meeting of the faculty will be held at the end of the spring term to assess the achievement of the curriculum goals and recommend goals for the following year
- d. The curriculum committee will compile and distribute a list of curriculum decisions made over the year

B-2. Admissions Committee

1. Purpose and Function:
 - a. Implement the application and selection procedure as voted in accordance with Institute and School of Nursing policies.
 - b. Set application deadlines.
 - c. Review prospective applicants in accordance with the standardized criteria, following the established procedure.
 - d. Submit a list of final candidates for admission for the approval of the Dean.
2. Membership

There are seven voting members: Five faculty members (three are elected and two are appointed); one interdisciplinary (Institute) faculty member; one representative from the MGH Department of Nursing. The Chair is selected by the committee annually at the first meeting. The committee is staffed by the Enrollment Management Coordinator of Student Affairs.
3. Decision-Making
 - a. Decision-making is by majority vote. The committee reports to the SONC throughout the year.

B-3. Policy Committee

1. Purpose and Function:
 - a. To review Institute and School of Nursing policies for consistency with policies in the student and faculty handbooks.
 - b. To review and make recommendations to the SONC on policy issues brought to the committee.
2. Membership
 - a. There are six voting members: two faculty members elected for a 2-year term; two members appointed by the Dean; one student representative appointed by the student body of the School of Nursing. The Dean is a permanent member. The Chair is elected by the committee annually at the first meeting.
3. Decision-Making
 - a. Decision-making is by majority vote. The committee reports to the SONC throughout the year.

B-4. Appeals Committee

1. Purpose and Function:
 - a. Acting as an agent of the School of Nursing committee, the appeals committee will review each student case submitted to them and will make a final decision to support or overrule the faculty recommendation.
 - b. The appeals committee shall automatically review a student's dismissal from the program resulting from either a suspension from clinical practice or failure of a clinical portion of a

course.

- c. Any student dismissed from the program, except in accordance with (b) above, may appeal that decision first via the appeals committee, which will review and decide the case.
- d. If the appeals committee's decision is not in the student's favor, the student may follow the process for Student Grievance Procedure as outlined in the Institute Online Catalog.

2. Membership:

Eight faculty will be elected for a two-year term, four from the Baccalaureate/Generalist Level and four from the Doctor of Nursing Practice/Advanced Practice Level. The chair is selected by the committee annually at the first meeting. The chair will randomly select three committee members to serve as the appeals panel for each appeals committee review. Panel members will appoint a faculty chair for that pane.

3. Decision Making:

- a. All discussion and delineation is confidential.
- b. Decision-making is by simple majority vote. The appeal's panel will communicate its decisions in writing to the Dean. The Dean will communicate the decision in writing to the student, advisor, involved faculty, and Registrar.
- c. In the case of dismissal, the decision is final and can only be reversed by the Institute grievance procedure, as outlined in the Online IHP Catalog.
(<http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>).
- d. Students are considered dismissed from the Program upon receiving notification to that effect from the Dean, unless an exception is made. Students who are dismissed can no longer attend classes. All current faculty will be notified.
- e. Any student dismissed from the program, without prior review of the appeals committee, may appeal that dismissal first via the appeals committee, which will review and decide the case.
- f. If the appeals committee's decision is not in the student's favor, the student may follow the process for Student Grievance Procedure as outlined in the Institute Online Catalog.

B-5 EVALUATION COMMITTEE:

1. Purpose and Function:

To oversee formative and summative processes across programs in the SON; to evaluate data sources to help ensure a quality improvement process based on defined outcome measures; to make recommendations for change to appropriate faculty groups

- i. Develop a plan for evaluation of the School of Nursing.
 1. Identify appropriate evaluation measures for the three degree programs.
 2. Analyze and critique current data sources. Identify gaps in existing data sources and make recommendations or take actions to fill or bridge them.
 3. Make recommendations for changes in the evaluation plan.
- ii. Develop a process for evaluation of the School of Nursing.
 1. Identify responsible parties for data elements and reporting lines.
 2. Identify time frame for data generation and reporting.
 3. Identify reporting and communication lines within the evaluation plan.
- iii. Implement evaluation plan of the School of Nursing.
 1. Analyze performance measures
 2. Set and review benchmarks
 3. Report to the faculty of the School of Nursing

2. Membership
 - a. There are six members with staggered 2-year terms.
 - b. Four members are voted by the faculty, one appointed by the Dean of the School of Nursing (SON) and one student representative appointed by the student body of the SON.
 - c. The Chair is elected by the committee annually at the first meeting.
3. Decision-making
 - a. Decision-making is by majority vote. The Committee reports to the SON throughout the year.

II Additional Committees (non-governance)

- A. Nursing Continuing Education Provider Unit – Continuing Education Committee
 1. Purpose and Function
To guide continuing education program development and evaluation in accordance with professional standards.
 2. Membership
 - a. The Committee consists of at least three members drawn from SON faculty who express interest in continuing education activities.
 3. Decision-Making
 - a. Decision-making on program offerings is by consensus of the planning committee members.
 - b. To assure proposed programs meet professional standards as community-constituent review.

ADMINISTRATIVE POLICIES

I. Adjunct Appointments

Refer to the Institute Faculty Manual Guidelines and Procedures for Adjunct Faculty Appointments <http://iware.mghihp.edu/intranet/provostOffice/facultyHandbook.html>

II. Preceptor

A preceptor is an expert clinician with designated responsibility for clinical supervision of students in a particular clinical area.

A. Criteria for Selection

The ideal preceptor is a master's prepared advanced practice nurse, a physician, or other primary care practitioner, who meets the following criteria:

1. Supports the philosophy and objectives of the Institute and the School of Nursing
2. Demonstrates clinical competence and teaching ability, thereby serving as a student role model
3. Demonstrates the ability to assess, plan, implement, and evaluate clinical care for a specific patient population in a particular content area
4. Establishes and maintains effective working relationships with colleagues and students
5. Is willing to fulfill the responsibilities of a preceptor by
 - a. reviewing the student's learning contract
 - b. facilitating the student's meeting the level objectives and goals in the learning contract
 - c. sequencing learning experiences so that the student assumes increasing responsibility
 - d. supervising/consulting with the student in the delivery of care
 - e. functioning as a liaison to other colleagues to facilitate other experiences available at the clinical site
 - f. meeting periodically with student and faculty advisor to discuss and evaluate the student's clinical experience

B. Preceptor Tuition Vouchers

A clinical preceptor who provides a minimum of sixty (60) hours of clinical supervision during a semester is eligible for three one-credit tuition vouchers. Vouchers are awarded to the preceptor's health care institution, are valid for two years from date of issuance and may, if desired, be used by an employee of that institution other than the preceptor.

III. Additional Policies

Refer to the Institute Faculty Manual for additional Policies and Procedures.. <http://iware.mghihp.edu/intranet/provostOffice/facultyHandbook>

EVALUATION POLICIES

I. Evaluation in the School of Nursing

The School of Nursing evaluation plan is based on the commitment and belief that program evaluation is a systematic, continuous process of gathering and analyzing data about all facets of the programs. The purpose is to guide decision-making in order to enhance the quality of the programs. The process includes gathering formative and summative data regarding the program in its entirety.

Refer to the Institute Web site for policies regarding Course Evaluation Course Evaluation Policy

II. Faculty Evaluation

- A. Scope: All faculty members in the School of Nursing who hold a ranked appointment.
- B. Background of the Evaluation Program: The role of faculty members is quite broad. Discrete areas of performance in these roles to be used for evaluation can be found in the Faculty Manual under Promotion Criteria.
- C. Goals of the faculty evaluation program: the following goals should be met by the evaluation process:
 1. Faculty Development - this includes helping the individual faculty member identify his or her progress within the role of graduate nurse educator/scholar as compared to his/her peers, within academic rank and track. The evaluation process should be a tool by which the faculty member can judge his/her progress toward promotion and suitability for reappointment.
 2. Faculty Fit within the School of Nursing - this indicates how well the individual faculty member has been able to successfully meld her/his goals with those of the department. Faculty members should have an interest in attaining feedback on how well their performance in venues such as classroom, committee, and professional areas has met the needs of the School of Nursing. Furthermore, representatives of the department should have an opportunity to share their beliefs about strengths and weaknesses of the faculty member's performance.
- D. Evaluation Process
 1. Timing - Evaluation shall be yearly, completed by May 1 of the academic year. Process - By May 1 of each year, faculty members who anticipate returning to an academic appointment in the School of Nursing in the following academic year should submit an updated curriculum vitae, their **Workload Description & Faculty Work Plan** for the next academic year, and their self-evaluation statement to the Program Director's office.
 2. Evaluators - Faculty members will be evaluated by the Dean and the Program Directors. Program Directors will be evaluated by the Dean.
 4. The Dean and the Program Director meet with the individual faculty member prior to the expiration of that faculty member's yearly contract. (This appointment may be conducted anytime prior to the beginning of the next fall semester.)

The Dean and/or Program Directors with the faculty member review the evaluation and come to a consensus of the faculty member's goals for the next year. This written document is then resubmitted as necessary, and signed by the faculty member and the Dean.
- E. Appeals Process - If the individual faculty member and the evaluators cannot come to a consensus about either the goals statement or the performance evaluation, the individual faculty member has a

right to include an appended statement to the document. Such an appended goal statement will be considered valid as the faculty member's goal statement when the faculty member next comes up for review.

APPENDIX A

**MGH INSTITUTE OF HEALTH PROFESSIONS
School of Nursing**

Notification of Change of Academic Advisor

Please fill out the information below and obtain the appropriate signatures.

Student: _____

Program Level: _____ Generalist/Pre-RN _____ Advanced Practice/RN

Specialty track: _____

Former Advisor: _____

New Advisor: _____

Effective Date: _____

Signature of New Advisor: _____

Date: _____

Signature of Former Advisor: _____

Date: _____

Please return completed form to Nursing Program Office

Received in Nursing School Office: Date: _____ by _____

cc to: Student
Former Advisor
New Advisor
OSA

Rev00

APPENDIX B

MGH INSTITUTE OF HEALTH PROFESSIONS School of Nursing

CONSENT FORM FOR PHYSICAL EXAMINATION

I volunteer to have a _____ examination performed on me by a graduate _____ student of the MGH Institute of Health Professions for the purpose of STUDENT LEARNING ONLY, as more fully described in Attachment A.

I understand that the MGH Institute of Health Professions is a post-baccalaureate school dedicated to preparing skilled health care professionals, and that the student performing the examination on me is a student and not a fully trained specialist. In agreeing to volunteer, I have been informed on the following:

1. The tests that will be performed during the examination will not be for diagnostic purposes.
2. I may experience some minor discomfort during the examination.
3. I may ask the student to stop the examination at any time.
4. Any side effects either during or after the examination are described in Attachment A.

I agree that I will not hold the MGH Institute of Health Professions, faculty or student responsible for any problems I may encounter after this examination.

Signed: _____

Date: _____

**MGH INSTITUTE OF HEALTH PROFESSIONS
School of Nursing**

CONSENT FORM FOR PHYSICAL EXAMINATION

ATTACHMENT A

Description of Examination:

Description of Possible Side Effects:

Additional Comments:

This form was prepared by: _____ , _____
Name of Faculty of Record Date

APPENDIX C

MGH INSTITUTE OF HEALTH PROFESSIONS School of Nursing

CONSENT FORM FOR PARTICIPATION IN LEARNING ACTIVITIES

I, _____, volunteer to participate as a subject in classroom laboratory
Subjects Name

activities for _____.
Course # Course Title

I understand that the MGH Institute of Health Professions is a graduate school dedicated to preparing skilled health care professionals, and the class activities are part of their professional preparation. The purpose of my participation is for student learning only, and will not serve diagnostic or treatment purposes.

In agreeing to volunteer, I have been informed of the following:

Who will be interacting with me and how:

Description of activities:

Potential side effects or risks and precautions:

Additional Comments:

I have read the descriptions provided above. All questions have been answered to my satisfaction. I understand that I may discontinue my participation in these activities at any time. I agree that I will not hold MGH Institute of Health Professions, faculty or students responsible for any problems I may encounter as a result of my participation.

Signed: _____ Date: _____

This form was prepared by: _____, _____
Name of Faculty of Record Date

APPENDIX D

MGH INSTITUTE OF HEALTH PROFESSIONS School of Nursing

Independent Study Guidelines

1. The decision to pursue independent study and agreement of the Faculty of Record should be recorded by preregistration week of the term preceding that of the study.
2. A draft of the Course Description should be submitted to the Faculty of Record by the end of the term preceding that proposed for the independent study.
3. Final approval by the Faculty of Record must be obtained by the end of the second week of the term in which the study is to take place (Add/Drop deadline).

Course Description

An application for independent study should include all of the following information:

1. Student name, address, telephone (including area code)
2. Academic year and term
3. Faculty, address, telephone
4. Number of credits proposed
5. Descriptive title
6. Rationale for pursuing independent study
7. Content summary (scope of study)
8. Objectives of the course
9. Plan of approach to the course
10. Anticipated resource materials (including but not limited to texts, current literature, clinical
11. experience)

Evaluation method(s)

Student signature: _____ Date: _____

Faculty of Record Signature: _____ Date: _____

Academic Advisor Signature: _____ Date: _____

Distribution of the approved course description should include the OSA , Program Director, Faculty of Record, and Academic Advisor.

See also: <http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

APPENDIX E

Upon review of the web-based policies related to OSHA and HIPAA, please complete this form and forward to the fax or email address below prior to September 10th of each year.

OSHA

Occupational Safety and Health Administration (OSHA) training is essential in health care and educational environments. This training instructs students about general infection control principles and their management. Students must annually document that they have reviewed and understood this training by visiting the Institute's OSHA Web site at <http://www.mghihp.edu/student-life/student-services/osha-requirement.aspx> .

HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) is legislation that mandates the standards and requirements for the electronic transmission of certain health information. This act seeks to insure all patients, clients and research subjects' health information is protected. Students must annually document that they have reviewed and understood this act by reviewing the requisite HIPAA section on the Institute's website at <http://www.mghihp.edu/student-life/student-services/hipaa-requirements.aspx>

Acknowledgement of Review

I have read the statements concerning HIPAA and OSHA, and I agree to adhere strictly to all these statements.

Signed _____ Date _____

Name _____
(Please print)

Specialty Track _____

Return to:

MGH Institute of Health Professions
School of Nursing Office

Fax: 617-724-6321

E-Mail: nursing@mghihp.edu

APPENDIX F

MGH INSTITUTE OF HEALTH PROFESSIONS School of Nursing

Request for Temporary Grade of Incomplete

Refer to the Institute website for the Institute's policy on a grade of Incomplete in a course.

<http://www.mghihp.edu/academics/registrar/important-forms.aspx>

The policy of the nursing program is that:

- An "I" (incomplete grade) in a non-clinical course must be completed within the first two weeks of the succeeding term unless negotiated otherwise with the faculty of record for the course.
- An "I" for a clinical course must be completed within the first week of the succeeding term unless negotiated otherwise in writing by the faculty of record for the course.
- If the course in which the student has an Incomplete is a pre-requisite for a subsequent course, the student may not progress to the next course until the earlier course is satisfactorily completed.
- The student must submit a Request for Temporary Grade of Incomplete Form (print a copy of Appendix F) to the Nursing Program Office. The student and the faculty agree on a completion date, taking into account 3. (c) above. The form must be approved and signed by the faculty of record and submitted prior to the last day of exams for that term.
- Faculty also submit a grade of Incomplete for the student on Ionline, noting the completion date agreed to by the student and the faculty. If the grade has not been changed by faculty prior to the agreed upon date, the grade automatically converts to an F.
- Return completed form to the Nursing Program Manager.

Please Print

Student Name _____ Student ID# _____

Course Number _____ Course Title _____

Semester/Term Fall Spring Summer

Faculty Name _____

Describe work to be completed: _____

I will complete the course requirements by ____/____/____, and I understand the Incomplete policy as explained above.

Student Signature _____ Date _____

To be completed by faculty member

I approve this petition and stipulate that the incomplete grade must be made up on or before ____/____/____

I do not approve this petition.

Faculty Signature _____ Date _____

PLEASE RETAIN YOUR COPY OF THIS FORM

Received in Nursing Program Office: Date: _____ By: _____

cc: Student: _____ Faculty _____ Associate Program Director _____

APPENDIX G
MGH INSTITUTE OF HEALTH PROFESSIONS
School of Nursing

Request to Change Specialization

**This Page MUST be accompanied by OSA's Program/Specialization Change Form
<http://www.mghihp.edu/students/registrar/forms.html>**

Please print

Student Name: _____ Student ID # _____

Reason for Request:

Please obtain the following signatures:

Current track coordinator: _____ Date: _____

New track coordinator: _____ Date: _____

Academic Advisor: _____ Date: _____

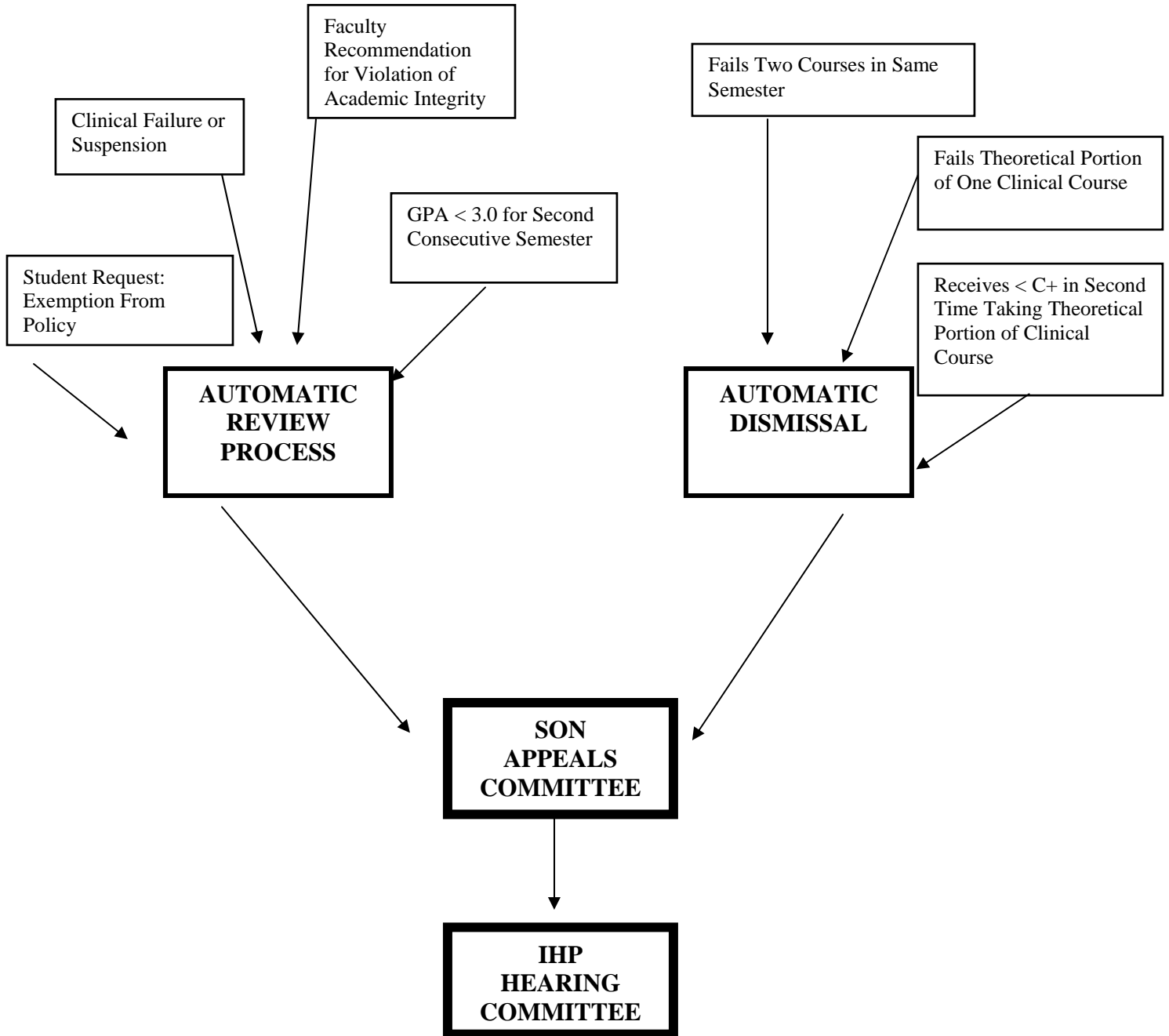
Program Director: _____ Date: _____

Received in Nursing Program Office: Date: _____ By: _____

cc: Student: _____ Advisor: _____ Coordinator: _____ Registrar: _____

APPENDIX H

ACADEMIC DECISION-MAKING ALGORITHM



APPENDIX I

MGH INSTITUTE OF HEALTH PROFESSIONS School of Nursing

Appeal Procedure

1. Students may request an appeal hearing in the event of dismissal for any reason. The Student sends a written request to the Director of the program to initiate an appeal, with a copy to the Dean.
2. The Director of the program will forward all faculty documentation of the problems and procedures to date to the Appeals Committee Chair and members of the selected Appeals Panel. (See Faculty Manual, Appeals Committee section).
3. Appeals Committee Chair:
 - a. Identifies three faculty members to comprise the Appeals Panel.
 - b. Sets a date and time for Appeal Meeting within 10 business days, during academic calendar.
 - c. Ensures all members and the student have copies of faculty documentation.
 - d. Invites the Student and Faculty to submit documentation to the Program Manager. All documentation submitted by Student is distributed by the Program Manager to the Appeals Panel, Director of the Program, the Dean, and involved Faculty. Thus, documentation is needed three days prior to Appeal meeting date. After the Panel has met, all documentation is collected from Panel members by the Panel Chair, with duplicate copies destroyed.
4. Procedure for Meeting
 - a. Panel meets privately and reviews format and charge.
 - b. Student and Faculty of record and/or Involved Faculty join the meeting.
 - c. Both Student and Involved Faculty may bring one person for support (i.e.: Advisor, Family Member, Peer, or Significant Other), but such person cannot be a legal representative or lawyer and may not speak for the Student prior to or during the proceedings.
 - d. Student has opportunity to present his/her case: maximum 20 minutes.
 - e. Involved Faculty has opportunity to present his/her case: maximum 20 minutes.
 - f. Panel has opportunity to ask questions to Faculty and/or Student.
 - g. When Panel feels fully informed, Student and Faculty, and other non-panel persons are excused.
 - h. Committee deliberations are confidential. Decisions are made by majority rule.
5. The Panel Chair must communicate the decision in writing to the Program Director and Dean within three business days.
6. The Director of the Program must communicate the decision in writing to the Student within ten business days of the Panel meeting, with copies to the involved Faculty, Course Coordinators, and the Advisor. The Student is notified of his/her right to appeal the decision via the student grievance procedure, outlined in IHP catalog. The only method to reverse the Appeals committee decision is via the IHP Hearing Committee. (see <http://www.mghihp.edu/students/catalog/rights-responsibilities.html>).
7. Involved Faculty have no further responsibility in this action.
8. All original written documents reside in the Students' folder in the Office of Student Affairs.

APPENDIX J
MGH INSTITUTE OF HEALTH PROFESSIONS
School of Nursing

Policy for Professional Attire

Purpose: To ensure that nursing students of MGH Institute of Health Professions Graduate Program in Nursing maintain a professional image through appropriate attire, grooming and personal hygiene

POLICY: Students are expected to maintain a professional image both in clinical and academic settings. This dress code includes, but is not limited to, the following:

In the Clinical Area

- Jewelry: Only 2-3 simple rings and one or two pair of small stud earrings worn in the ear are allowed. Any other body piercings should be discreet. Nose and tongue studs should be flesh colored and minimally noticeable.
- Perfume is an allergen and should not be worn.
- Excessive makeup is not allowed.
- Nails should be according to CDC recommendations: short and neatly trimmed, Only clear or light neutral nail polish may be worn. (<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm>)
- Hair must be worn away from the face and off the shoulders. Facial hair must be neat and trimmed.
- Dress code for inpatient clinical settings will be specified by each course in the syllabus. Scrubs and lab coats must be clean.
- All students must wear their identification badges visibly at all times
- In ambulatory/community settings, Professional Attire is expected, i.e. business or conservative business casual. No jeans, or exercise outfits; nothing revealing or provocative. No open-toed shoes. No T-shirts or sweatshirts. No midribs should be shown at any time. Please be sure your shirts are of an appropriate length.
- In advanced practice settings, business professional attire is expected unless the individual site informs you otherwise. Midribs should not be exposed, even when reaching above your head. Please be sure shirts are of an appropriate length. Lab coats must be clean.

In the Classroom:

- Students are expected to dress conservatively. Jeans are permitted; shorts are expected to be of a suitable length.
- Any clothing, buttons/pins or accessory items displaying graphic or written material that may be construed as harassment or offensive is not allowed.
- No provocative dress is allowed.
- All students must wear their identification badges visibly at all times

For Clinical and Simulation Lab Activities:

- Jewelry: Only 2-3 simple rings and one or two pair of small stud earrings worn in the ear are allowed. Any other body piercings should be discreet. Nose and tongue studs should be flesh colored and minimally noticeable.
- Perfume and excessive makeup are not allowed.

- Nails should be according to CDC recommendations: short and neatly trimmed, Only clear or light neutral nail polish may be worn. (<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm>)
- Any clothing, buttons/pins or accessory items displaying graphic or written material that may be construed as harassment or offensive is not allowed.
- No short shirts or provocative dress is allowed.
- Hair should be worn away from the face and off the shoulders.
- All students must wear their identification badges visibly at all times.
- Any clothing, buttons/pins or accessory items displaying graphic or written material that may be construed as harassment or offensive is not allowed.
- Footwear should be closed toe or low heel only.

For Physical Assessment Lab Activities:

In addition to the above criteria for Clinical and Simulation Lab Activities:

- Students are expected to dress appropriately in order to conduct and have a physical exam conducted upon them. Open toe footwear may be appropriate depending on the body system being examined on a given day.

Women are suggested to wear a sports bra or tank top along with gym shorts or scrubs; men should consider t-shirts and gym shorts or scrubs depending on the body system being examined on a given day.

Enforcement:

At the discretion of course faculty, violation of this policy may result in dismissal from the classroom, clinical or lab experience and count as an unexcused absence.

APPENDIX K
MGH INSTITUTE OF HEALTH PROFESSIONS
School of Nursing

Code of Professional Behavior for Students in the
MGH Institute of Health Professions School of Nursing

The MGH Institute of Health Professions (IHP) School of Nursing abides by the American Nurses Association code of ethics (<http://www.nursingworld.org/about/01action.htm>.) and expects students also to abide by the Student Nurses Association code of ethics (<http://nursingworld.org/ethics/ecode.htm>). The School of Nursing (SON) community is a microcosm of the professional arena. In addition to the conduct articulated in the HIPAA privacy rules, and the IHP 2010-2011 Catalog: Safety and Security section <http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf> the following SON *Code of Professional Behavior* is aimed at assuring an environment that is conducive to optimal student learning and professional development, thereby protecting patient, student, faculty, and staff safety, and assuring that graduates of the IHP reflect the highest standards of personal and professional integrity. Toward that goal, the SON has as much an obligation to evaluate students' professional conduct as scholarship and clinical proficiency.

Evaluation is focused on the student's obligations toward the IHP community of faculty, students and staff across learning and professional environments. Professional environments include, but are not limited to the classroom (in person or online), the laboratories, and inpatient, outpatient, and community clinical sites. The clinical environment also includes any volunteer efforts where students are representing the IHP.

It is the goal of Partners HealthCare System Inc. (PHS) and its affiliate, the MGH Institute of Health Professions, to provide a safe, comfortable, productive, professional and educational environment that is free from disrespectful, harassing, and offensive behavior in person, or via information communication technologies such as social networking sites and other electronic and digital media. It is our expectation that all students treat one another and all other members of the IHP and PHS community with dignity and respect. Furthermore, students are expected to adhere to professional boundaries. As per the National Council of State Board of Nursing (NCSBN) standards in their document on professional boundaries:

“As a health care professional, a nurse strives to inspire the confidence of clients, treat all clients and other health care providers professionally, and promote the clients' independence. Clients can expect a nurse to act in their best interests and to respect their dignity. This means that a nurse abstains from obtaining personal gain at the client's expense and refrains from inappropriate involvement in the client's personal relationships.” (2007).

HARASSMENT

No form of harassment will be tolerated, including, but not limited to, disrespectful and/or abusive conduct and associated retaliatory behavior or harassment based on an individual's status (race or ethnicity, color, religion, creed, age, national origin, gender, sexual orientation, disability, veteran status, marital status, or genetic background, health condition or physical attributes.). All allegations of such behavior are taken seriously, investigated, and where it is determined that such behavior has occurred, the SON will act promptly to ensure the conduct ceases and its effects are eliminated.

Definitions:

Harassment or physical conduct that:

- a. Has the purpose or effect of creating an intimidating, hostile, or offensive educational or professional environment;
- b. Has the purpose or effect of unreasonably interfering with an individual's work performance; or
- c. Otherwise adversely affects an individual's educational opportunities.

Harassing conduct includes but is not limited to:

- a. Epithets, slurs, negative stereotyping or threatening, intimidating or hostile acts that relate to race or ethnicity, color, religion, creed, age, national origin, gender, sexual orientation, disability, veteran status, marital status, genetic background, health condition or physical attributes.
- b. Written, electronic or graphic material that denigrates or shows hostility or aversion toward an individual or group because of race or ethnicity, color, religion, creed, age, national origin, gender, sexual orientation, disability, veteran status, marital/relational status, genetic background, health condition or physical attributes. Electronic media includes, but is not limited to social networking sites such as *Facebook* and *Twitter*.
- c. Threatening or intimidating behavior or words (electronic, written or oral) directed at another person.
- d. Taunting, jeering, mocking or humiliating another person through words/texts or actions.
- e. Insulting someone, in any form, especially in the presence of others.
- f. Screaming or yelling at or around others.
- g. Endangering the safety of an individual or individuals.
- h. Delivering non-constructive feedback to fellow students, faculty and professional colleagues.
- i. Behaviors described in the 2010-2011 Catalog on Sexual Harassment and Sexual Assault policy <http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

REASONABLE VICTIM STANDARD - In order to determine if the alleged conduct constitutes harassment, the IHP will follow the Reasonable Victim Standard. This standard asks whether a reasonable person, in the same or similar circumstances, would find the alleged conduct intimidating, hostile or abusive, e.g. would employees of the claimant's race or ethnicity, color, religion, creed, age, national origin, gender, sexual orientation, disability, veteran status, marital/relational status, genetic background, health condition or physical attributes feel harassed or offended if the alleged conduct were directed toward them?

Students at the IHP will also refrain from all acts of:

VIOLENCE AND/OR THREATS OF VIOLENCE, defined as behavior that:

- Creates an educational or professional environment that a reasonable person would find intimidating, threatening, violent or abusive; regardless of whether the behavior may affect a person's psychological or physical well being.

Examples include but are not limited to:

- Threats – Words/texts or actions that either create a perception there may be intent to harm a person or property or that result in harm or similar consequences.
- An act of physical aggression, such as an assault or attempted assault on another student, faculty member, staff, patient or visitor.

Other prohibited activity:

- Use or possession of explosives, firearms or other weapons on IHP property or property connected to IHP educational or professional experiences.
- Deliberate destruction or theft of SON or IHP property, or the property of others.
- Stalking - Willfully, maliciously and repeatedly following or harassing another student, faculty member, staff, patient or visitor, whether on or off IHP premises.

Students are to conduct themselves at all times with:

INTEGRITY, which refers to representing oneself with honesty and sound ethical principles, and includes, but is not limited to

- a. Disclosing your status as a student both verbally and in documentation in clinical settings.
- b. Documenting accurately on patient records.

- c. Following the IHP policies on integrity found under the Conditions of Enrollment in the IHP catalog <http://www.mghihp.edu/files/catalog/Catalog%202010-2011-Final.pdf>

SOCIAL AND PROFESSIONAL ETIQUETTE

Students are expected to:

- a. Come to class on time, or enter the room with minimal disruption.
- b. Treat speakers with dignity and respect.
- c. Silence cell phones and other electronic devices during class.
- d. Determine from each faculty member what are the acceptable boundaries of behavior or the class, including, but not limited to:
 - Eating in class;
 - Bringing visitors to class; and
 - Rules for group process in discussion.
- e. When in clinical sites students are always to remember they are guests of the site and are to behave with politeness and respect for the people who work at the site, and for the materials and possessions of the site and of the people who work there.
- f. Demonstrate the ability to give and receive constructive feedback.

*This Code of Professional behavior is drawn directly from the corporate policies of the Partners HealthCare System Inc. (PHS) and those of the PHS affiliate the North Shore Health Center, in concert with the stated policies for professional conduct from the American Nurses Association, and NCSBN on Professional Boundaries