


**Proposal for Certificate of Advanced Study
Pediatric Clinical Nurse Specialist / Nurse Educator**

**Department of Nursing
College of Health and Human Services
California State University, Fresno**

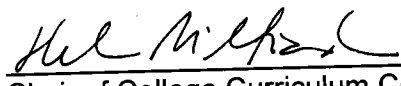
Consultative Approval Page

Signatures:

I have read and approve the following proposal for an Pediatric Clinical Nurse Specialist/Nurse Educator certificate of advanced study program.

 8-24-12
Nursing Graduate Committee Chair Date

 8/24/12
Department Chair Date

 9/27/12
Chair of College Curriculum Committee Date

 10-10-12
Dean, Health & Human Services Date

 _____
Associate Vice President, Continuing & Global Education Date

Contact Person: Cricket Barakzai
278-2430
maryb@csufresno.edu

Proposed Title of Certificate of Advanced Study

- Pediatric Clinical Nurse Specialist / Nurse Educator
- Offered by the Department of Nursing in cooperation with the Division of Continuing and Global Education

Overview

The Department of Nursing at California State University, Fresno proposes to offer a Pediatric Clinical Nurse Specialist / Nurse Educator Certificate of Advanced Study (CAS). This is a formally constructed program which includes 510 hours of precepted clinical experience and meets the requirements for national certification by the American Nurse Credentialing Center as a Pediatric Clinical Nurse Specialist. This program will enhance professional competence, provide access to specialized knowledge, and address the shortage of Clinical Nurse Specialists (CNS) in the region.

The Certificate of Advanced Study for Pediatric Clinical Nurse Specialist / Nurse Educator is a two semester post-master's program designed to prepare Clinical Nurse Specialists to meet the needs of the rapidly growing population of pediatric patients, especially the underserved. Focus is on direct care emphasizing opportunities and challenges related to the unique development, the life progression, and wellness and illness from birth to adulthood.

To enhance access and provide flexibility, clinical hours will be completed with community preceptors where the students live and work and can be performed at times convenient to the students and their preceptors. This program is primarily designed for MSN graduates who completed generic CNS programs and desire certification as a pediatric CNS.

In 2009, the American Nurses Credentialing Center (ANCC) quietly retired the Core CNS Certification Examination and began to offer only population focused exams. Suddenly, many CNS graduates around the nation were unable to become certified. In addition, some earlier graduates had not sought certification, since many employers did not require it. With the advent of Magnet Status for hospitals and DNP programs, past graduates are seeking certification in record numbers. Therefore, there is a demand for classes preparing students for certification as a CNS with a population focus. This Certificate of Advanced Study will be offered as a self-support 16 unit course of study through the Division of Continuing and Global Education (DCGE) as a special session program endorsed by the Division of Graduate Studies (DGS).

Objectives/Outcomes

The following expected outcomes are a sample of the core competencies of all CNSs, and the Pediatric CNS outcomes and curriculum are organized around these competencies (See Appendix A). Although no competencies specific to pediatric practice have yet been developed by the certifying agencies, these basic competencies have been identified as necessary for safe and comprehensive practice as a CNS. These objectives provide the guideline for the development of each set of course objectives.

- I. Competency I ~ Direct Care.

Upon completion of this certificate of advanced study, the student will be able to:

1. Perform a comprehensive holistic assessment of pediatric patients with specific health conditions
2. Provide direct care to pediatric patients with specific health conditions.
3. Develop and initiate plans to promote health and quality of life for these patients.

II. Competency II ~ Consultation and Collaboration

Upon completion of this certificate of advanced study, the student will be able to:

4. Problem solve, plan, and interact with multi disciplinary professionals.
5. Initiate collaborative strategies with other CNS's.
6. Utilize collaborative dynamics to configure the needs, preference, and recognized strengths of the patient into an integrated health care plan to optimize outcomes.

III. Competency III ~ Systems Leadership:

Upon completion of this certificate of advanced study, the student will be able to:

7. Act as a change agent in influencing and empowering health care associates.
8. Integrate new technology into the system of pediatric care.
9. Monitor performance outcomes relating to acute conditions in conjunction with supervisory APRN's.

IV. Competency IV ~ Ethical decision making, moral agency and advocacy

Upon completion of this certificate of advanced study, the student will be able to:

10. Identify and discusses issues related to a CNS moral agency surrounding ethics and legal issues in pediatric health care in a holistic approach.

V. Competency V ~ Coaching:

Upon completion of this certificate of advanced study, the student shall be able to:

11. Provide skilled guidance and teaching of issues related to the health and illness continuum of pediatric patients to patient, families, groups of families and the profession of nursing.
12. Educate and advise patients' families, caregivers, and nursing on sensitive issues, such as end of life issues and complex physical and mental health treatments.

VI. Competency VI ~ Research:

Upon completion of this certificate of advanced study , the student shall be able to;

13. Analyze, monitor, and apply evidence-based research findings into the care of the pediatric population.
14. Analyze and incorporate conceptual models and theories of care of the pediatric population focus.
15. Use advanced critical thinking and clinical decision to analyze case studies within the continuum of the pediatric focus.
16. Demonstrate cultural competence in working with diverse patients and families.

Assessment Activities:

Direct Measures of Student Learning

1. Discussion Board participation
2. Student-directed clinical care topic discussions
3. Clinical Assessment Challenge/Opportunity Papers
4. Case Studies
5. Portfolio
6. National Certifying Examination
7. Final Practicum Evaluation
8. Final Preceptor Evaluation of Student

Indirect Measures of Student Learning

7. Exit Evaluation
8. Alumni Evaluation
9. Employer Survey

**Post-Master's Certificate of Advanced Study
Pediatric Clinical Nurse Specialist /Nurse Educator
California State University, Fresno**

Curriculum (16 Units) – 9 Months

Fall Semester		Units	Course Description
NURS 237	Fundamental Topics for the Pediatric Clinical Nurse Specialist	3	Prerequisites: NURS 210, NURS 211, NURS 221, NURS 225. Co-requisite: NURS 238. This course will focus on advanced and complex health concerns in the Pediatric population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population. S
NURS 238	Practicum in Advanced Clinical Nursing for the Pediatric Clinical Nurse Specialist	5	Prerequisites: NURS 210, NURS 221. Co-requisite: NURS 237. Supervised clinical practice with emphasis on NANCS competencies applied to common problems in health promotion, maintenance, and restoration of pediatric patients in a complex healthcare system. (one-hour clinical conference per week) (255 direct patient care clinical hours) S
NURS 255	Advanced Topics for the Pediatric Clinical Nurse Specialist	3	Prerequisites: NURS 237 & NURS 238. Co-requisite: NURS 256. This course will focus on advanced and complex health concerns in the Pediatric population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population. F
NURS 256	Pediatric Clinical Nurse Specialist Practicum	5	Prerequisites: NURS 237 & NURS 238. Co-requisite: NURS 255. Supervised clinical practice with emphasis on complex and multi-system disease processes in the pediatric patient population in a variety of healthcare systems. Clinical Nurse Specialist roles and competencies, as defined by professional organizations, are utilized in the planning of care. (one hour clinical conference per week.) (255 direct patient care clinical hours) F
		Total 16 Units	

Revised 8/2/12

See Appendix B for new course proposals and catalog program change forms

Admission & Exit Requirements

Admission Requirements for the Certificate. A candidate for admission must have a Master's of Science in Nursing degree as a Clinical Nurse Specialist. Applicants must have completed master's level advanced health assessment, advanced pathophysiology, advanced pharmacology, and roles courses. The candidate must have a current valid California Clinical Nurse Specialist license.

Admission is a two-step process: (1) admission to the university and (2) admission to the Certificate of Advanced Study program. The university application form can be obtained online at www.csumentor.edu. Program applications will be submitted to the Department of Nursing and reviewed by a faculty committee (Appendix C). An offer of admission will be sent to eligible candidates to be admitted and prepared to enroll in the program. Once admitted, a list of all participants will be sent to Division of Continuing and Global Education (DCGE) with completed enrollment forms so students can register for the first courses. Applications are due by March 1 of each year.

Certificate of Advanced Study Requirements. Completion of the set of coursework (16 units) with a GPA of 3.0 or higher within a 5-year period.

Statement of Need

The Certificate of Advanced Study for Pediatric Clinical Nurse Specialist / Nurse Educator is a two semester post-master's offering designed to prepare Clinical Nurse Specialists to meet the needs of the rapidly growing population of pediatric patients in the Central San Joaquin Valley. Focus is on direct care emphasizing opportunities and challenges related to the unique development, the life progression, and wellness and illness from birth to adulthood.

This program is primarily designed for MSN graduates who completed generic CNS programs and desire certification as a pediatric CNS. In 2009, the American Nurses Credentialing Center (ANCC) quietly retired the Core CNS Certification Examination and began to offer only population focused exams. Suddenly, many CNS graduates around the nation were unable to become certified. In addition, some earlier graduates had not sought certification, because many employers did not require it. With the advent of Magnet Status for hospitals and DNP programs, past graduates are seeking certification in record numbers. Therefore, there is a demand for classes preparing students for certification as a CNS with a population focus. In addition, ANCC requires that students obtain a Certificate of Advanced Study in a population focused option, rather than just complete required coursework. In order to be eligible to sit for the certifying exam, students must have "Certificate of Advanced Study in Pediatric Clinical Nurse Specialist / Nurse Educator" on their transcripts. This program will be offered as a self-support 16 unit course of study through the Division of Continuing and Global Education (DCGE) as a special session program endorsed by the Division of Graduate Studies (DGS).

Core Faculty

Program Coordinator ~ Keitha Mountcastle, RN, CNS, NNP
Terea Gianetta, DNP, PNP-C

See Appendix D for Curricula vitae

Budget Analysis with Narrative

1. Projected changes in enrollment (FTES)

- What is the recent enrollment history of the program and what effect will the proposed changes have on enrollment.
This is a new graduate "special session" cohort certificate program.
- If FTES is expected to increase, what proportion represents new FTES and what proportion represents shifts from existing programs?
Program will be offered through Continuing and Global Education, and therefore, will not impact FTES.
- How did you estimate your expected changes in enrollment?
Expected enrollment is a cohort of 12-15 students annually, starting in August. The program is 9 months in length. Enrollment is estimated based on the interest expressed by potential students.

2. Projected changes in existing curriculum.

- Will there be changes in the cost of delivering the curriculum? What will those costs be and what is their basis?
There will be no change in the cost of delivering curriculum. Faculty will be paid separately through their DCGE contracts, which will reflect the salary level of each individual faculty based on rank and enrollment. We would expect that initially the faculty would all be at the lecturer level and adjunct faculty would be drawn from community professionals.
- For new courses, what is the estimated class size, frequency, and level/classification of course delivery?
Projected class size for each cohort is between 12 and 15 students. Courses will be offered annually. The didactic coursework (NURS, 237 & NURS 255) are classified at C5, whereas the practicum courses (NURS 238 & NURS 256) are at level S-36.
- For courses currently being offered, will there be changes in class size, frequency, level or classification of course delivery?
NURS 237 and 238 were offered as NURS 290s last semester. The other courses have not been offered before.
- Will courses be dropped from the existing curriculum?
This certificate is designed for post-masters students. No courses will be dropped from the existing curriculum.

3. Projected changes in faculty

- Will there be a shift in faculty assignments? If so, what will be the difference between current and proposed assignments?
There will be no shift in faculty assignments. As a special session extended education program, faculty will be teaching outside of their full-time assignment and may teach up to the 25% limit.

- Will there be shifts in faculty numbers or distribution? If so, what will they be?
It is not projected that there would be a shift in faculty numbers or distribution, and no new faculty positions would be added that would be supported through state FTE funding.
- Will new positions be added/required and what resources will be used to acquire them?
Teaching positions would be paid for through Salary Code 2322 utilized by the Department of Continuing and Global Education.

4. Projected changes in budget

- What is your current operating budget?
The operating budget for the Department of Nursing for 2007-2008 was \$1,772,505, of which \$1,585,535 was allocated for salaries.
- What are your current positions?
We have 10 tenure/tenure track faculty. Currently, we have 4 full-time lecturers and approximately 40 part-time lecturers. There are 3 staff.
- Do you anticipate outside revenue to support your program?
No.
- Will budget requirements change and what will those changes be?
Courses have been developed, so there are no initial start-up costs.. The administrative roles of admission and evaluation are part of the graduate coordinator's role.
- Will there be any increase in administrative roles/responsibilities that require buy-back or release time?
It is anticipated that the graduate coordinator will play a significant role in program development and initial implementation. These functions include recruitment, program oversight, advising, and clinical placement site development. All of these responsibilities fall within the role of the position.
How will the expected changes in budget requirements be met?
No changes in budget requirements anticipated.

Has the budgetary impact of the proposal been reviewed by the College/School Budget Committee and the Office of the Dean?
The budgetary impact of this proposal has been reviewed by the Nursing Department, the College, and the Deans.

5. Effect on Support Services and programs in other Colleges/Schools

- Are support services required for program implementation and function?
No

Are programs in other Colleges/Schools directly affected by the proposal and in what way?

This is a Certificate of Advanced Study program that is specific to advanced practice nurses. No impact on other departments or colleges is anticipated.

Who are the representatives in the affected service areas and/or
Schools/Colleges that have been contacted?
Continuing and Global Education Dr.Scott Moore

Graduate Division

Dr. Sharon Brown-Welty
Marcee Varela
Louise Neal

ARE

Tina Beddall

See Appendix E for Budget

Appendix A
Clinical Nurse Specialist Competencies

**CLINICAL NURSE SPECIALIST
CORE COMPETENCIES**

**EXECUTIVE SUMMARY
2006-2008**

***THE NATIONAL CNS COMPETENCY
TASK FORCE***

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NATIONAL CNS CORE COMPETENCY PROJECT EXECUTIVE SUMMARY

Introduction

This Executive Summary describes the work of the National CNS (Clinical Nurse Specialist) Competency Task Force (herein called the Task Force), which from 2006 – 2008 identified and validated core CNS competencies and behaviors. This publication provides the listing of competencies and behaviors (see Appendix 5) as well as definitions of terms used in the competency document (see Appendix 4).

The core CNS competencies are comprehensive, entry-level competencies and behaviors expected of graduates of master's and post-master's programs that prepare CNSs. Due to the wide range of specialties in which CNSs practice, these competencies reflect CNS practice across all specialties, populations, and settings. Fundamental to these competencies is that the CNS maintains clinical privileges, certification (when available) and advanced practice recognition according to state and institutional requirements.

It is anticipated that education programs preparing CNSs should not have to make extraordinary curriculum revisions to incorporate these competencies. The competencies will be reviewed and updated every five years by the NACNS (National Association of Clinical Nurse Specialists) in order to ensure that national CNS competencies reflect current and relevant practice based on evidence-based knowledge and societal needs.

Background

In 2006, as the nursing profession moved toward a consensus-based model for a cohesive and collaborative approach to licensure, accreditation, certification, and education of Advanced Practice Registered Nurses, NACNS and the APRN (Advanced Practice Registered Nurse) Consensus Workgroup (see Appendix 1 for a listing of Workgroup member organizations) requested that the ABNS (American Board of Nursing Specialties) and the ANA (American Nurses Association) convene and facilitate the work of a National CNS Competency Task Force, using the *National Consensus-Building Process to Develop Nationally Recognized Education Standards and Role/Specialty Competencies* (see Appendix 2), identified by the APRN Consensus Workgroup in its early work together.

Representatives from CNS stakeholder groups were convened in May, 2006 by facilitators Bonnie Niebuhr, MS, RN, CAE, ABNS CEO and Mary Jane Schumann, MSN, RN, MBA, CPNP, ANA's Chief Programs Officer, to participate in a national project to identify, validate and achieve consensus on *core* CNS competencies relevant to the entry-level CNS, regardless of specialty, population, or setting.

Twenty-seven individuals representing twenty-two organizations (see Appendix 3 for a listing of participants) participated on the Task Force to identify and validate core CNS competencies. These individuals represented those most familiar with CNS practice and certification and included practicing CNSs, educators, managers, staff of organizations offering CNS certification, and members of the NACNS. From 2006 – 2008, the Task Force worked to identify and validate the core CNS competencies and behaviors identified in Appendix 5 of this document.

The Process

In preparation for the first meeting of the Task Force, the participating organizations were asked to submit their documents or publications that described the CNS competencies pertinent to their specialties. At the first meeting of the Task Force, each of the CNS competencies identified in these publications were written on large sticky notes and posted for viewing. It was observed that some organizations did not have competencies specific to the CNS role, while others had competencies for a broader or blended APRN role. It was also noted that the terms “competency” and “standard” were used interchangeably. In addition, a variety of organizing frameworks were used, including the nursing process, AACN Certification Corporation’s Synergy Model, and NACNS’s Spheres of Influence.

In order to organize the hundreds of competencies, the Task Force agreed that the nursing process (Assessment, Diagnosis, Outcome Identification, Planning, Implementation, and Evaluation) would be used as a preliminary framework for organizing the competencies. In addition, the following categories were also added: Systems; Ethics; Legislative/Policy; Research/Evidence-Based Practice; Nursing/Nursing Team/Department; and Other. Each competency was then placed under the most relevant heading of the framework. Using a multi-voting strategy, each participant voted on the competencies they felt were most important to entry level CNS practice. The competency statements were subsequently honed down to a list most reflective of entry level competencies for all CNSs in practice.

The Task Force received a brief tutorial on how to write a competency statement including:

- describe only one behavior in each statement
- statements must be measurable
- CNS competencies are advanced: basic RN competencies already underpin CNS practice and should not be listed in the CNS competencies
- each element should the complexity of CNS clients, populations, and practice
- should address care of patients across the lifespan
- must be culturally and ethnically diverse and age appropriate.

Small groups were then tasked to edit or rewrite the competency statements falling under assigned headings.

Organizing Framework

Over the course of the next year, the Task Force met via a series of conference calls and completed a thorough review of the competencies clustered under each heading. During this time it was acknowledged that three different models exist for CNS practice: (1) the three spheres of influence as defined by NACNS; (2) the seven advanced practice nursing competencies as defined by Hamric and Spross; and (3) the Nurse Characteristics identified in the AACN Synergy Model. The organizing framework for this document, which is depicted in the Model found in Figure 1, reflects a synthesis of these three models.

In the Model, the three spheres of influence defined by NACNS (Patient, Nurse/Nursing Practice, and Organization/System) provide the foundation for CNS practice. The nine Advanced Practice Competencies identified by Hamric and Spross (Direct Care; Consultation; System Leadership; Collaboration; Coaching; Research; Ethical Decision-Making; Moral Agency; Advocacy) provide the context for the specific, measurable behavioral statements listed below each overarching competency and are imbedded in this foundation. The eight Nurse Characteristics identified in the AACN Synergy Model (Clinical Judgment, Facilitation of Learning, Response to Diversity, Clinical Inquiry, Systems Thinking,

Collaboration, Advocacy, Caring Practices), are also imbedded within this foundation. Patients and Families are the focus of the model, linking the framework together.

Validation of Core CNS Competencies and Specific Behaviors

Once the Task Force achieved consensus on the organizing framework, competency statements and specific behaviors were validated through a national web-based survey delivered via Survey Monkey. Each of the Task Force's participating organizations disseminated an email invitation to their CNS constituents to participate in the survey, found on the ANA's *Nursing World* website.

In addition to demographic information that included name, current practice role, specialty area of practice, and organization represented if applicable, survey respondents were asked to respond to the following for each competency and specific behavior statement:

- Is the competency necessary and relevant to entry level practice of CNS regardless of specialty, setting, or population?
- Is it specifically and clearly worded?
- Is it appropriate for entry level?
- Any competencies or behaviors missing?
- Are competencies and behaviors stated specifically enough for student or faculty preparing the student?
- Are there terms that are unclear – if so, list.
- Any comments about organizing framework – logical, easy to follow, user friendly?

Survey Findings

2,156 respondents entered the survey and approximately 50% completed all questions. Approximately 1,030 completed most questions and approximately 323 completed the open-ended questions at the end of the survey. Most importantly, 57% of the respondents were CNSs and 20.5% were educators.

For the majority of the competency statements, the range of agreement was 90-98%. For the majority of behavioral statements the range of agreement was similar - 90% and above.

Consensus Achieved

At a face to face meeting held May 29-30, 2008 at ANA headquarters, the Task Force focused only on the data and comments from CNSs specifically. Working in small groups that were assigned a specific competency and set of behaviors, the Task Force accepted any competency and behavior with a range of agreement 90% or above. For range of agreement less than 90% but more than 80%, the Task Force determined whether or not to keep the statements and provided edits, based on survey participant feedback. The Task Force maintained the behavior statement (A.13) related to prescribing even though the agreement rating was 77% because the lower level of agreement is likely to be related to current restrictions on prescribing in multiple states, rather than to disagreement about the relevance of this competency.

By the end of this meeting, the Task Force achieved consensus on the final listing of competencies and behaviors found in Appendix 5 of this document.

Endorsement

In October, 2008 a letter and call for endorsement of the validated competencies and behaviors was disseminated by NACNS to a wide variety of stakeholders, including the organizations represented by Task Force members, APRN Consensus Work Group and National Council of State Boards of Nursing APRN Advisory Committee members. The call for endorsement noted that definitions of terms would be added at a later date. Twenty organizations as listed in Appendix 6 have endorsed the document to date.

If your organization has not endorsed the document, it is not too late! In order to indicate your organization's endorsement, please email, mail, or fax a letter of endorsement to:

Christine Filipovich, MSN, RN
Chief Executive Officer
NACNS
Email: Christine@pronursingresources.com
Phone: 717-234-6799
Fax: 717-234 6798
Mailing address:
2090 Linglestown Road, Suite 107
Harrisburg, PA 17110

A running list of endorsing organizations can be found on the NACNS website.

Summary

In summary, the process to identify and validate CNS core competencies and behaviors was a very inclusive, collegial and consensus-driven process, attesting to the professionalism of those involved and their commitment to providing the public with competent APRNs practicing in Clinical Nurse Specialist roles.

NACNS has graciously agreed to be the "keeper" of this work and to engage a Task Force of the collective to update the core competencies and behaviors every five years using the process identified in the *Addendum: National Consensus-Building Process to Develop Nationally Recognized Education Standards and Role/Specialty Competencies* found in the *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education, July 7, 2008; Addendum*.

Bonnie Niebuhr and Mary Jean Schumann thank the Task Force for their hard work on this national endeavor designed to identify core CNS competencies relevant to the entry-level CNS, regardless of specialty, population, or setting. In addition, the Task Force thanks both ABNS and ANA for their support of this project.

Endorsing organizations as well as other key stakeholder organizations are encouraged to post this Executive Summary on their websites to ensure the broad dissemination of the CNS core competencies and behaviors.

Questions about this document may be directed to:

Christine Filipovich, MSN, RN

Chief Executive Officer

NACNS

Email: Christine@pronursingresources.com

Phone: 717-234-6799

Fax: 717-234 6798

Mailing address:

2090 Linglestown Road, Suite 107

Harrisburg, PA 17110

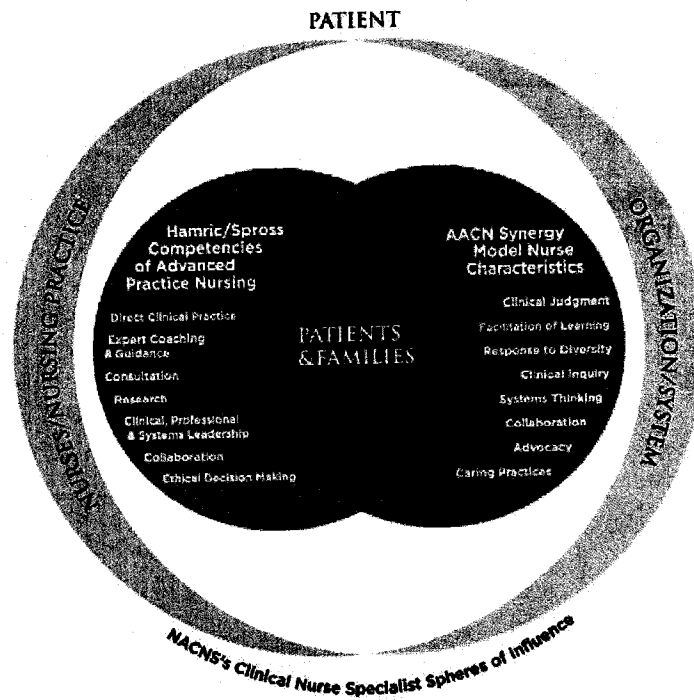


Figure 1. Model depicting organizational framework for CNS core competencies

**APPENDIX 1 - APRN CONSENSUS PROCESS WORK GROUP
ORGANIZATIONS THAT WERE REPRESENTED AT THE WORK GROUP MEETINGS**

Organization	Member Representative
American Academy of Nurse Practitioners Certification Program	Jan Towers
American Association of Colleges of Nursing	Joan Stanley
American Association of Critical Care Nurses Certification Corporation	Carol Hartigan
American Association of Nurse Anesthetists	Leo LeBel
American Board of Nursing Specialties	Bonnie Niebuhr
American College of Nurse-Midwives	Peter Johnson & Elaine Germano
American Nurses Association	Mary Jean Schumann
American Nurses Credentialing Center	Mary Smolenski
American Organization of Nurse Executives	M.T. Meadows
American Psychiatric Nurses Association	Edna Hamera & Sandra Talley
Association of Faculties of Pediatric Nurse Practitioners	Elizabeth Hawkins-Walsh
Commission on Collegiate Nursing Education	Jennifer Butlin
APRN Compact Administrators	Laura Poe
Council on Accreditation of Nurse Anesthesia Educational Programs	Betty Horton
National Association of Clinical Nurse Specialists	Kelly Goudreau
National Association of Nurse Practitioners in Women's Health, Council on Accreditation	Fran Way
National Certification Corporation for the Obstetric, Gynecologic, and Neonatal Nursing Specialties	Mimi Bennett
National Council of State Boards of Nursing	Kathy Apple
National League for Nursing Accrediting Commission	Grace Newsome & Sharon Tanner
National Organization of Nurse Practitioner Faculties	Kitty Werner & Ann O'Sullivan
Oncology Nursing Certification Corporation	Cyndi Miller-Murphy
Pediatric Nursing Certification Board	Janet Wyatt
Wound, Ostomy and Continence Nursing Certification Board	Carol Calianno
DHHS, HRSA, Division of Nursing (<i>observer</i>)	Irene Sandvold

(From the July, 2008 *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education.*)

APPENDIX 2 – ADDENDUM: EXAMPLE OF A NATIONAL CONSENSUS-BUILDING PROCESS TO DEVELOP NATIONALLY RECOGNIZED EDUCATION STANDARDS AND ROLE/SPECIALTY COMPETENCIES

The national consensus-based process described here was originally designed, with funding by the Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions, Division of Nursing, to develop and validate national consensus-based primary care nurse practitioner competencies in five specialty areas. The process was developed with consultation from a nationally recognized expert in higher education assessment. The process subsequently has been used and validated for the development of similar sets of competencies for other areas of nursing practice, including competencies for mass casualty education for all nurses and competencies for acute care nurse practitioners and psych/mental health nurse practitioners.

This process for developing nationally recognized educational standards, nationally recognized role competencies and nationally recognized specialty competencies is an iterative, step-wise process. The steps are:

Step 1: At the request of the organization(s) representing the role or specialty, a neutral group or groups convenes and facilitates a national panel of all stakeholder organizations as defined in step 2.

Step 2: To ensure broad representation, invitations to participate should be extended to one representative of each of the recognized nursing accrediting organizations, certifiers within the role and specialty, groups whose primary mission is graduate education and who have established educational criteria for the identified role and specialty, and groups with competencies and standards for education programs that prepare individuals in the role and specialty.

Step 3: Organizational representatives serving on the national consensus panel bring and share role delineation studies, competencies for practice and education, scopes and standards of practice, and standards for education programs.

Step 4: Agreement is reached among the panel members

Step 5: Panel members take the draft to their individual boards for feedback.

Step 6: That feedback is returned to the panel. This is an iterative process until agreement is reached.

Step 7: Validation is sought from a larger group of stakeholders including organizations and individuals. This is known as the Validation Panel.

Step 8: Feedback from the Validation Panel is returned to National Panel to prepare the final document.

Step 9: Final document is sent to boards represented on the National Panel and the Validation Panel for endorsement.

The final document demonstrates national consensus through consideration of broad input from key stakeholders. The document is then widely disseminated.

(Taken from the APRN Joint Dialogue Group. (2008). *The Consensus Model for Advanced Practice Registered Nurses (APRN): Licensure, Accreditation, Certification and Education*. Accessed May 27, 2009 at URL <http://www.aacn.nche.edu/Education/pdf/APRNReport.pdf>).

APPENDIX 3 - NATIONAL CNS COMPETENCY TASK FORCE PARTICIPANTS

ORGANIZATION	MEMBER REPRESENTATIVE
American Assoc. of Critical-Care Nurses (AACN)	Ann Wojner Alexandrov, RN, PhD, CCRN, FAAN
National Association of Orthopedic Nurses (NAON)	Linda Altizer, MSN, RN, ONC, CLNC
National Association of Clinical Nurse Specialists (NACNS)	Kathleen Baldwin, PhD, RN, CNS, ANP
American Assoc. of Neuroscience Nurses (AANN)	Cathy Cartwright, RN, MSN, PCNS,
Association of periOperative Registered Nurses (AORN)	Robin Chard, PhD, RN, CNOR
Quad Council of Public Health Nursing Organizations	Sister Rosemary Donley, Ph.D., CRNP, ANP, R.N., FAAN
American Psychiatric Nurses Association (APNA)	Barbara L. Drew, PhD, PMHCNS-BC
Commission on Collegiate Nursing Education (CCNE)	Patti Eisenberg, MSN, APRN, BC
American Nephrology Nurses Association (ANNA)	Susan Fallone, RN, MS, CNN
National Association of Clinical Nurse Specialists (NACNS)	Christine Filipovich, RN, MSN
Association of Rehabilitation Nurses (ARN)	Cindy Gatens, RN, MN, CRRN-A
Oncology Nursing Society (ONS)	Ruth Gholz, RN, MS, AOCN
AACN Certification Corp.	Carol Hartigan, MA, RN
Association of Pediatric Oncology Nurses	Joy Hesselgrave, MSN, RN, CPON
American Association of Occupational Health Nurses	Eileen Lukes, PhD, RN, COHN-S, CCM, FAAOHN
Association of Women's Health, Obstetrics & Neonatal Nurses (AWHONN)	Audrey Lyndon, RNC, PhD, CNS
Commission on Collegiate Nursing Education (CCNE)	E. Jane Martin, PhD., RN, FAAN
Quad Council of Public Health Nursing Organizations	Jeanne A. Matthews, PhD, RN
Hospice and Palliative Nurses Association (HPNA)	Bridget Montana, MSN, APRN, MBA
Oncology Nursing Certification Corporation (ONCC)	Cynthia Miller Murphy, RN, MSN, CAE
National Association of Clinical Nurse Specialists (NACNS)	Theresa Murray, RN, MSN, CCRN, CCNS
Association of State & Territorial Directors of Nursing (ASTDN)	Shirley Orr, MHS, ARNP, CNAA
American Organization of Nurse Executives (AONE)	Pam Rudisill, MSN, RN, CCRN
Association of periOperative	Jacklyn Schuchardt, RN, MSN, CNOR

ORGANIZATION	MEMBER REPRESENTATIVE
Registered Nurses (AORN)	
Board of Certification for Emergency Nursing (BCEN) and Emergency Nurses Association (ENA)	Jacqueline Stewart, RN, MSN, CNS, CEN
American Association of Colleges of Nursing (AACN)	Judith Spross, PhD, RN, AOCN, FAAN
American Nurses Credentialing Center (ANCC)	Diane Thompkins, MS, RN
Board of Certification for Emergency Nursing (BCEN)	Darleen Williams, CNS, MSN, CEN, CCNS, CNS-BC, EMT-P
American Nurses Association (ANA)	Kathleen White, PhD RN, CNAA

APPENDIX 4 – DEFINITIONS AND REFERENCES

Advanced Nursing Practice - Advanced nursing practice is the application of an expanded range of practical, theoretical, and research-based competencies to phenomena experienced by patients within a specialized clinical area of the larger discipline profession of nursing.

Hamric, A.B. (2008). A definition of advanced nursing practice. In Hamric, AB, Spross, JA, & Hanson, CM., *Advanced Practice Nursing: An integrative approach* (pp. 85-108). St. Louis, MO: Saunders Elsevier, pp.85-108.

Advanced nursing therapeutics - Expert specialty skills in direct management of patients with complex acute and chronic illnesses across settings.

Hanson, C. M., & Hamric, A. B. (2003). Reflections on the continuing evolution of advanced practice nursing. *Nursing Outlook*, 51, 203-211.

Advocacy & Moral Agency - Working on another's behalf and representing the concerns of the patient/family and nursing staff; serving as a moral agent in identifying and helping to resolve ethical and clinical concerns within and outside the clinical setting.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Authentic engagement - A relationship between nurse and patient that is characterized by genuineness, honesty, trust, and being fully present.

Parse, R. R. (1988). Caring from a human science perspective. In M. M. Leininger (Ed.), *Caring: An Essential Human Need*. (pp. 129-132). Detroit, MI: Wayne State University Press.

Caring Practices - Nursing activities that create a compassionate, supportive, and therapeutic environment for patients and staff, with the aim of promoting comfort and healing and preventing unnecessary suffering. Includes, but is not limited to vigilance, engagement, and responsiveness of caregivers, including family and healthcare personnel.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Clinical Inquiry (Innovator/Evaluator) - The ongoing process of questioning and evaluating practice and providing informed practice. Creating practice changes through research utilization and experiential learning.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Clinical Judgment - Clinical reasoning which includes clinical decision-making, critical thinking, and global grasp of the situation, coupled with nursing skills acquired through a process of integrating formal and informal experiential knowledge and evidence-based guidelines.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Coaching – Skillful guidance and teaching to advance the care of patients, families, groups of patients, and the profession of nursing.

Hamric, AB, Spross, JA, & Hanson, CM. (2008). *Advanced Practice Nursing: An integrative approach*. St. Louis, MO: Elsevier.

Collaboration - Working with others in a way that promotes/encourages each person's contributions toward achieving optimal/realistic patient/family goals. Involves intra- and inter-disciplinary work with colleagues and community.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Collaboration – Working jointly with others to optimize clinical outcomes. The CNS collaborates at an advanced level by committing to authentic engagement and constructive patient, family, system, and population focused problem solving.

Hamric, AB, Spross, JA, & Hanson, CM. (2008). *Advanced Practice Nursing: An integrative approach*. St. Louis, MO: Elsevier.

Collaboration - Working with others in a way that promotes/encourages each person's contributions toward achieving optimal/realistic patient/family goals. Involves intra- and inter-disciplinary work with colleagues and community.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Consultation – Patient, staff, or system-focused interaction between professionals in which the consultant is recognized as having specialized expertise and assists consultee with problem solving.

Hamric, AB, Spross, JA, & Hanson, CM. (2008). *Advanced Practice Nursing: An integrative approach*. St. Louis, MO: Elsevier.

Competency - A “competency” is an expected level of performance that integrates knowledge, skills, abilities, and judgment.

ANA. (May 28, 2008). Professional Role Competence. American Association of Nurses.

Direct Clinical Practice – Direct interaction with patients, families, and groups of patients to promote health or well-being and improve quality of life. Characterized by a holistic perspective in the advanced nursing management of health, illness, and disease states.

Tracy, M.F. (2008). Direct clinical practice. In Hamric, AB, Spross, JA, & Hanson, CM. *Advanced practice Nursing: An integrative approach*. 4th ed. St. Louis: Elsevier.

Ethical Decision-Making, Moral Agency and Advocacy – Identifying, articulating, and taking action on ethical concerns at the patient, family, health care provider, system, community, and public policy levels.

Hamric, AB, Spross, JA, & Hanson, CM. (2008). *Advanced Practice Nursing: An integrative approach*. St. Louis, MO: Elsevier.

Evidence based practice - Use of current evidence in practice through the incorporation of clinical expertise and patient values and preferences with the systematic search for relevant scientific evidence to address clinical problems.

Melnyk, B.M. and Fineout-Overholt, E. (2005). *Evidence-based practice in nursing and healthcare*. Philadelphia: Lippincott Williams & Wilkins.

Facilitation of Learning - The ability to promote the education of patients/families, nursing staff, other members of the healthcare team, and community. Includes both formal and informal facilitation of learning.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Indirect Care – The provision of care through activities that influence the care of patients, but do not involve direct engagement with patients. Examples include developing evidence-based guidelines or protocols for care and staff development activities.

Tracy, M.F. (2008). Direct clinical practice. In Hamric, AB, Spross, JA, & Hanson, CM. *Advanced practice Nursing: An integrative approach*. 4th ed. St. Louis: Elsevier.

Non pharmacologic (and integrative) interventions - Nonpharmacologic and integrative interventions includes a range of conventional and less commonly used non-medication, complementary and alternative therapies for the alleviation of symptoms, stress, suffering and other human responses.

National Center for Complementary and Alternative Medicine. (2007, February). Fact Sheet – What is CAM? Retrieved April 25, 2010, from <http://nccam.nih.gov/health/whatiscam/overview.htm>.

Nurse Characteristics – As described in the AACN Synergy Model, nursing care reflects an integration of knowledge, skills, experience, and attitudes needed to meet the needs of patients and families. Thus, continuums of nurse characteristics are derived from patient needs.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Nurses/Nursing Practice – The CNS advances nursing practice and improve patient outcomes by updating and improving norms of care and by using standards of care that direct actions of nurses and nursing personnel.

NACNS (1998). *Statement on Clinical Nurse Specialist Practice and Education*. Harrisburg, PA., NACNS.

Nurse Sensitive Outcomes – Expected changes that reflect nursing care or care rendered in collaboration with other healthcare providers.

Oncology Nursing Society. (2004, July). *Nurse Sensitive patient Outcomes*. Retrieved April 25, 2010, from <http://www.ons.org/Research/NursingSensitive/>

Organization/System – The CNS articulates the value of nursing care at the organizational, decision-making level, and influences system changes that facilitate improvement of quality cost-effective patient outcomes.

NACNS (1998). *Statement on Clinical Nurse Specialist Practice and Education*. Harrisburg, PA., NACNS.

Outcomes - Refers to the expected changes in predetermined factors such as the patient's behavior, health status, or knowledge following the completion of nursing care.

S.J. Redfern, I.J. Norman, (1990). Measuring the quality of nursing care: a consideration of different approaches. *Journal of Advanced Nursing*, 15 (11), 1260-1271.

Patient Outcomes – An immensely complex construct. Spans a range of effects or presumed effects of nursing and, in a broader conceptualization, healthcare interventions. Outcomes are measured both directly and indirectly, over different periods of time and from vastly different sources of information. They vary according to perspective and have different degrees of reliability and validity.

S. Bond, L.H. Thomas. (1991). Issues in measuring outcomes of nursing. *Journal of Advanced Nursing*, 16(12), 1492-1502.

Response to Diversity - The sensitivity to recognize, appreciate, and incorporate differences into the provision of care. Differences may include but are not limited to cultural differences, spiritual beliefs, gender, race, ethnicity, lifestyle, socioeconomic status, age, and values.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Sphere of Influence – A model for CNS practice, articulated by the National Association of Clinical Nurse Specialists, based on three spheres of influence (Patient, Nurse, System) to reflect CNS practice as consistently targeted toward achieving quality, cost-effective outcomes through patient/client care, by influencing the practice of other nurses and nursing personnel, and by influencing the healthcare organization to support nursing practice.

NACNS (1998). *Statement on Clinical Nurse Specialist Practice and Education*. Harrisburg, PA., NACNS.

Specialty Competency – CNS specialty practice builds on core competencies and represents an interpretation and integration of the core competencies into the knowledge and skills of the specialty.

K.M. Baldwin, et al. (2007). Developing clinical nurse specialist practice competencies. *Clinical Nurse Specialist*, 21 (6), 297-303.

Synergy - Results when the needs and characteristics of a patient, clinical unit or system are matched with a nurse's competencies.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Systems Leadership – The ability to manage change and empower others to influence clinical practice and political processes both within the across system.

Hamric, AB, Spross, JA, & Hanson, CM. (2008). *Advanced Practice Nursing: An integrative approach*. St. Louis, MO: Elsevier.

System Outcomes - The observed effects of interventions, health care practices, procedures or programs on departments, institutions, agencies or health systems on costs (savings, avoidance, reimbursement or revenue), resource use, risk avoidance or reduction, meeting quality and accreditation benchmarks and other institutional/agency/system impacts.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

Systems Thinking - Body of knowledge and tools that allow the nurse to manage whatever environmental and systems resources exist for the patient/family and staff, within or across healthcare and non-healthcare systems.

S. Hardin, R. Kaplow. (2004). *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Aliso Viejo, CA: American Association of Critical Care Nurses.

APPENDIX 5 – CNS CORE COMPETENCIES AND BEHAVIORS WITH ASSOCIATED SPHERE OF INFLUENCE AND NURSE CHARACTERISTICS

A. <u>Direct Care Competency:</u> Direct interaction with patients, families, and groups of patients to promote health or well-being and improve quality of life. Characterized by a holistic perspective in the advanced nursing management of health, illness, and disease states.			
	Behavioral Statement	Sphere of Influence	Nurse Characteristics
A.1	Conducts comprehensive, holistic wellness and illness assessments using known or innovative evidence-based techniques, tools, and direct and indirect methods.	Patient	Clinical Judgment
A.2	Obtains data about context and etiologies (including both non-disease and disease-related factors) necessary to formulate differential diagnoses and plans of care, and to identify and evaluate of outcomes.	Patient	
A.3	Employs evidence-based clinical practice guidelines to guide screening and diagnosis.	Patient & System	
A.4	Assesses the effects of interactions among the individual, family, community, and social systems on health and illness.	Patient	
A.5	Identifies potential risks to patient safety, autonomy and quality of care based on assessments across the patient, nurse and system spheres of influence.	Patient, Nurse & System	
A.6	Assesses the impact of environmental/system factors on care.	Patient & System	
A.7	Synthesizes assessment data, advanced knowledge, and experience, using critical thinking and clinical judgment to formulate differential diagnoses for clinical problems amenable to CNS intervention.	Patient & System	
A.8	Prioritizes differential diagnoses to reflect those conditions most relevant to signs, symptoms and patterns amenable to CNS interventions.	Patient	
A.9	Selects interventions that may include, but are not limited to: A.9.a. Application of advanced nursing therapies A.9.b. Initiation of interdisciplinary team meetings, consultations and other communications to benefit patient care A.9.c. Management of patient medications, clinical procedures and other interventions A.9.d. Psychosocial support including patient counseling and spiritual interventions	Patient	
A.10	Designs strategies, including advanced nursing therapies, to meet the multifaceted needs of complex patients and groups of patients.	Patient	
A.11	Develops evidence-based clinical interventions and systems to achieve defined patient and system outcomes.	Patient, Nurse & System	
A.12	Uses advanced communication skills within therapeutic relationships to improve patient outcomes.	Patient	Caring Practice

A. Direct Care Competency: Direct interaction with patients, families, and groups of patients to promote health or well-being and improve quality of life. Characterized by a holistic perspective in the advanced nursing management of health, illness, and disease states.

	Behavioral Statement	Sphere of Influence	Nurse Characteristics
A.13	Prescribes nursing therapeutics, pharmacologic and non-pharmacologic interventions, diagnostic measures, equipment, procedures, and treatments to meet the needs of patients, families and groups, in accordance with professional preparation, institutional privileges, state and federal laws and practice acts.	Patient	Clinical Judgment
A.14	Provides direct care to selected patients based on the needs of the patient and the CNS's specialty knowledge and skills	Patient	
A.15	Assists staff in the development of innovative, cost effective programs or protocols of care	Patient, Nurse and System	
A.16	Evaluates nursing practice that considers Safety, Timeliness, Effectiveness, Efficiency, Efficacy and Patient-centered care.	Patient, Nurse & System	
A.17	Determines when evidence based guidelines, policies, procedures and plans of care need to be tailored to the individual	Patient	
A.18	Differentiates between outcomes that require care process modification at the individual patient level and those that require modification at the system level.	System	Systems Thinking
A.19	Leads development of evidence-based plans for meeting individual, family, community, and population needs.	Patient & System	Caring Practices
A.20	Provides leadership for collaborative, evidence-based revision of diagnoses and plans of care, to improve patient outcomes	Patient, Nurse & System	Clinical Judgment

B. Consultation Competency: Patient, staff, or system-focused interaction between professionals in which the consultant is recognized as having specialized expertise and assists consul tee with problem solving.

	Behavioral Statement	Sphere of Influence	Nurse Characteristics
B.1	Provides consultation to staff nurses, medical staff and interdisciplinary colleagues	Patient, Nurse & System	Clinical Judgment
B.2	Initiates consultation to obtain resources as necessary to facilitate progress toward achieving identified outcomes.		
B.3	Communicates consultation findings to appropriate parties consistent with professional and institutional standards.	Patient	Collaboration
B.4	Analyzes data from consultations to implement practice improvements.	Nurse & System	Facilitation of Learning

C. <u>Systems Leadership Competency: The ability to manage change and empower others to influence clinical practice and political processes both within and across systems.</u>		
Behavioral Statement	Sphere of Influence	Nurse Characteristics
C. 1 Facilitates the provision of clinically competent care by staff/team through education, role modeling, teambuilding, and quality monitoring.	Nurse & System	
C.2 Performs system level assessments to identify variables that influence nursing practice and outcomes, including but not limited to:	System	Systems Thinking
C.2.a. Population variables (age distribution, health status, income distribution, culture)	Patient & System	Response to Diversity
C.2.b. Environment (schools, community support services, housing availability, employment opportunities)	Patient & System	Systems Thinking
C.2.c. System of health care delivery	Patient & System	
C.2.d. Regulatory requirements	System	
C.2.e. Internal and external political influences/stability	System	
C.2.f. Health care financing	System	
C.2.g. Recurring practices that enhance or compromise patient or system outcomes.	Patient, Nurse, & System	
C.3 Determines nursing practice and system interventions that will promote patient, family and community safety.	Nurse & System	
C.4 Uses effective strategies for changing clinician and team behavior to encourage adoption of evidence-based practices and innovations in care delivery.	Nurse & System	
C.5 Provides leadership in maintaining a supportive and healthy work environment.	System	
C.6 Provides leadership in promoting interdisciplinary collaboration to implement outcome-focused patient care programs meeting the clinical needs of patients, families, populations and communities.	Patient & System	Collaboration
C.7 Develops age-specific clinical standards, policies and procedures.	System	Collaboration & Response to Diversity
C.8 Uses leadership, team building, negotiation, and conflict resolution skills to build partnerships within and across systems, including communities.	System	Collaboration
C.9 Coordinates the care of patients with use of system and community resources to assure successful health/illness/wellness transitions, enhance delivery of care, and achieve optimal patient outcomes.	Patient & System	

C. <u>Systems Leadership Competency:</u> The ability to manage change and empower others to influence clinical practice and political processes both within and across systems.		
Behavioral Statement	Sphere of Influence	Nurse Characteristics
C.10 Considers fiscal and budgetary implications in decision making regarding practice and system modifications. C.10.a. Evaluates use of products and services for appropriateness and cost/benefit in meeting care needs C.10.b. Conducts cost/benefit analysis of new clinical technologies C.10.c. Evaluates impact of introduction or withdrawal of products, services, and technologies	System	Systems thinking
C.11 Leads system change to improve health outcomes through evidence based practice: C.11.a. Specifies expected clinical and system level outcomes.	Patient, Nurse, System	Systems Thinking
C.11.b. Designs programs to improve clinical and system level processes and outcomes.	Patient, Nurse, System	
C.11.c. Facilitates the adoption of practice change	Patient, Nurse, System	
C.12 Evaluates impact of CNS and other nursing practice on systems of care using nurse-sensitive outcomes	Nurse & System	
C.13 Disseminates outcomes of system-level change internally and externally	System	

D. <u>Collaboration Competency:</u> Working jointly with others to optimize clinical outcomes. The CNS collaborates at an advanced level by committing to authentic engagement and constructive patient, family, system, and population-focused problem-solving		
Behavioral Statement	Sphere of Influence	Nurse Characteristics
D.1 Assesses the quality and effectiveness of interdisciplinary, intra-agency, and inter-agency communication and collaboration.	Nurse, System	Clinical Inquiry & Collaboration
D.2 Establishes collaborative relationships within and across departments that promote patient safety, culturally competent care, and clinical excellence	System	Collaboration & Response to Diversity
D.3 Provides leadership for establishing, improving, and sustaining collaborative relationships to meet clinical needs.	Nurse, System	
D.4 Practices collegially with medical staff and other members of the healthcare team so that all providers' unique contributions to health outcomes will be enhanced.	Nurse, System	
D.5 Facilitates intra-agency and inter-agency communication.	Nurse, System	

E. Coaching Competency: Skillful guidance and teaching to advance the care of patients, families, groups of patients, and the profession of nursing.			
	Behavioral Statement	Sphere of Influence	Nurse Characteristics
E.1	Coaches patients and families to help them navigate the healthcare system.	Patient Sphere	Advocacy & Moral Agency
E.2	Designs health information and patient education appropriate to the patient's developmental level, health literacy level, learning needs, readiness to learn, and cultural values and beliefs.	Patient Sphere	Facilitation of Learning & Response to Diversity
E.3	Provides education to individuals, families, groups and communities to promote knowledge, understanding and optimal functioning across the wellness-illness continuum.	Patient Sphere	
E.4	Participates in pre-professional, graduate and continuing education of nurses and other health care providers: E.4.a. Completes a needs assessment as appropriate to guide interventions with staff; E.4.b. Promotes professional development of staff nurses and continuing education activities; E.4.c. Implements staff development and continuing education activities;	Nurse	
	E.4.d Mentors nurses to translate research into practice.	Nurse	Facilitator of Learning & Clinical Inquiry
E.5	Contributes to the advancement of the profession as a whole by disseminating outcomes of CNS practice through presentations and publications.	Nurse	
E.6	Mentors staff nurses, graduate students and others to acquire new knowledge and skills and develop their careers.	Nurse	Facilitator of Learning
E.7	Mentors health professionals in applying the principles of evidence-based care.	Nurse & System	
E.8	Uses coaching and advanced communication skills to facilitate the development of effective clinical teams.	Nurse & System	Advocacy & Moral Agency
E.9	Provides leadership in conflict management and negotiation to address problems in the healthcare system.	Patient, Nurse & System	Collaboration

F. <u>Research Competency: The work of thorough and systematic inquiry. Includes the search for, interpretation, and use of evidence in clinical practice and quality improvement, as well as active participation in the conduct of research.</u>		
I. Interpretation, Translation and Use of Evidence		
Behavioral Statement	Sphere of Influence	Nurse Characteristics
F.I.1 Analyzes research findings and other evidence for their potential application to clinical practice	Patient, Nurse, & System	Clinical Inquiry
F.I.2 Integrates evidence into the health, illness, and wellness management of patients, families communities and groups	Patient	Clinical Inquiry
F.I.3 Applies principles of evidence-based practice and quality improvement to all patient care.	System & Patient	Clinical Inquiry
F.I.4 Assesses system barriers and facilitators to adoption of evidence-based practices.	System	
F.I.5 Designs programs for effective implementation of research findings and other evidence in clinical practice	Patient, Nurse, & System	
F.I.6 Cultivates a climate of clinical inquiry across spheres of influence:	Patient, Nurse, System	Clinical Inquiry, Systems Thinking
F.1.6.a. Evaluates the need for improvement or redesign of care delivery processes to improve safety, efficiency, reliability, and quality.	Patient, Nurse, System	
F.1.6.b. Disseminates expert knowledge;	Patient, Nurse, System	Facilitation of Learning
II. Evaluation of Clinical Practice		
Behavioral Statement	Sphere of Influence	Nurse Characteristics
F.II.1 Fosters an interdisciplinary approach to quality improvement, evidence-based practice, research, and translation of research into practice	Nurse/Team	Collaboration
F.II.2 Participates in establishing quality improvement agenda for unit, department, program, system, or population	System	Clinical Inquiry
F.II.3 Provides leadership in planning data collection and quality monitoring.	System	
F.II.4 Uses quality monitoring data to assess the quality and effectiveness of clinical programs in meeting outcomes.	Patient, Nurse, & System	
F.II.5 Develops quality improvement initiatives based on assessments.	System	
F.II.6 Provides leadership in the design, implementation and evaluation of process improvement initiatives.	System	
F.II.7 Provides leadership in the system-wide implementation of quality improvements and innovations.	System	

F. <u>Research Competency: The work of thorough and systematic inquiry. Includes systematic inquiry. Includes the search for, interpretation, and use of evidence in clinical practice and quality improvement, as well as active participation in the conduct of research.</u>		
III. Conduct of Research		
Behavioral Statement	Sphere of Influence	Nurse Characteristics
F.III.1 Participates in conduct of or implementation of research which may include one or more of the following: F. III 1 a. Identification of questions for clinical inquiry F. III 1 b. Conduct of literature reviews F. III 1 c. Study design and implementation F. III 1 d. Data collection F. III 1 e. Data analysis F. III 1 f. Dissemination of findings	Patient, Nurse, & System	Clinical Inquiry

G. <u>Ethical Decision-Making, Moral Agency and Advocacy Competency: Identifying, articulating, and taking action on ethical concerns at the patient, family, health care provider, system, community, and public policy levels.</u>		
Behavioral Statement	Sphere of Influence	Nurse Characteristics
G.1 Engages in a formal self-evaluation process, seeking feedback regarding own practice, from patients, peers, professional colleagues and others	Nurse	Clinical Inquiry
G.2 Fosters professional accountability in self or others.	Nurse, System	Advocacy & Moral Agency
G.3 Facilitates resolution of ethical conflicts: G.3.a. Identifies ethical implications of complex care situations G.3.b. Considers the impact of scientific advances, cost, clinical effectiveness, patient and family values and preferences, and other external influences. G.3.c. Applies ethical principles to resolving concerns across the three spheres of influence	Patient, Nurse, & System	Response to Diversity
G.4 Promotes a practice climate conducive to providing ethical care.	System & Nurse	Moral Agency
G.5 Facilitates interdisciplinary teams to address ethical concerns, risks or considerations, benefits and outcomes of patient care.	System & Nurse	Advocacy & Collaboration
G.6 Facilitates patient and family understanding of the risks, benefits, and outcomes of proposed healthcare regimen to promote informed decision making.	Patient	Facilitator of Learning
G.7 Advocates for equitable patient care by: G.7.a. Participating in organizational, local, state, national, or international level of policy-making activities for issues related to their expertise G.7.b. Evaluating the impact of legislative and regulatory policies as they apply to nursing practice and patient or population outcomes	Patient & System	Advocacy & Moral Agency

G.	<u>Ethical Decision-Making, Moral Agency and Advocacy Competency: Identifying, articulating, and taking action on ethical concerns at the patient, family, health care provider, system, community, and public policy levels.</u>		
G.8	Promotes the role and scope of practice of the CNS to legislators, regulators, other health care providers, and the public:	Nurse & System	Advocacy & Facilitator of Learning
	G.8.a. Communicates information that promotes nursing, the role of the CNS and outcomes of nursing and CNS practice through the use of the media, advanced technologies, and community networks.	Nurse & System	
	G.8.b. Advocates for the CNS/APRN role and for positive legislative response to issues affecting nursing practice.	Nurse, System	

APPENDIX 6 – ENDORSING ORGANIZATIONS AS OF 12-08

1. AACN, American Association of Critical-Care Nurses & the AACN Certification Corporation
2. AANN, American Association of Neuroscience Nurses
3. AAOHN, American Association of Occupational Health Nurses
4. ABNN, American Board of Neuroscience Nursing
5. AMSN, Academy of Medical-Surgical Nurses
6. ANCC, American Nurses Credentialing Center
7. ANNA, American Nephrology Nurses' Association
8. AORN, Association of periOperative Registered Nurses
9. APHON, Association of Pediatric Hematology/Oncology Nurses
10. APNA, American Psychiatric Nurses Association
11. ARN, Association of Rehabilitation Nurses
12. AWHONN, Association of Women's Health, Obstetrics and Neonatal Nursing
13. BCEN, Board of Certification for Emergency Nursing
14. INTNSA, International Nurses Society on Addictions
15. NBCHPN, National Board for Certification of Hospice and Palliative Nurses
16. NGNA, National Gerontological Nursing Association
17. NNSDO, National Nursing Staff Development Organization
18. ONCC, Oncology Nursing Certification Corporation
19. ONS, Oncology Nursing Society
20. SUNA, Society of Urologic Nurses and Associates

APPENDIX B

New Course Proposals & Catalog Program Change Forms

NEW GRADUATE COURSE REQUEST

GRADNEW.ITP (on Informed Filler)

Return original to:

Division of Graduate Studies
 Harold H. Haak Administrative Center
 4th Floor, Henry Madden Library
 Mail Stop ML51

Graduate Program: Pediatric CNS/Nurse Educator

Department: Nursing

Contact Person: Cricket Barakzai

Phone: 82430

E-mail: maryb

Catalog pg. # 352

Use this form if your course is: (please select the box below that best describes your course)

- (a) new (never has been taught before)
- (b) conversion (break-out of a "topics" course as a new course)
- (c) significant change to an existing course
- (d) other Break-out of an independent study course as a new course

NOTE: If the changes you make on this form are different from what you submitted on your mock-ups to catalog, then you **must** revise your mock-ups and resubmit them to the catalog office.

If you wish to delete or make minor revisions to an existing graduate course, use the "Graduate Course Change or Deletion" form (GRADCHG.ITP on Informed Filler).

1. NEW COURSE:

Prefix/ Catalog Long Course
 Subject NURS Number 237 Title Fundamental Topics for the Pediatric Units Max/Total 3
Ped CNS I Clinical Nurse Specialist Letter
 Short Title (16 spaces maximum) for Printing _____ Grading Basis (Letter, CR/NC, RP, Mixed)
 Course Classification (C/S#) C-5

Note: If the proposed course has been offered previously as a topics course or is the expansion of an existing course, complete the following for the previous course:

Prefix/ Catalog Long Course
 Subject NURS Number 290 Title Fundamental Topics for the Pediatric Units Max/Total 3
Clinical Nurse Specialist

Catalog Description of New Course: (40 words only, excluding prerequisite, lecture-lab hours)

Prerequisites: NURS 210, NURS 211, NURS 221, NURS 225.. Co-requisite: NURS 238. This course will focus on advanced and complex health concerns in the Pediatric population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population

2. NEW COURSE QUESTIONS:

(Each item **must** be addressed; attach additional sheet(s) as needed.)

- A. How frequently is the new course expected to be offered? annually
- B. What is the expected enrollment? 15
- C. What is/are the mode(s) of course delivery (e.g., lecture, seminar, supervision, distance learning)? Please see the attached "Definitions of Graduate Level Instruction in the CSU."
Seminar
- D. Identify all new resources (special facilities, library resources, technical assistance, etc.) needed to institute the course.
none
- E. Is this course required or elective? required
- F. Is there another course(s) covering similar subject matter:
- within your department? No Yes (if yes, complete section 4)
 - at California State University, Fresno? No Yes (if yes, complete section 4)
- G. Has this course been previously offered as a topics course? Yes No
If yes, how many times? once
- H. Justification for New Course: (Please attach an explanation detailing the need for this new course.)

3. Please attach a course outline/syllabus that:

- Follows the guidelines stated in the "**Policy on Course Syllabi and Grading**" (June 1997) as published in the Academic Policy Manual (pg. 241-1, 241-2, 241-3).
- Illustrates how the course meets the criteria described in "**Definitions of Graduate Level Instruction in the CSU**" (see attached).

NOTE: Proposed Topics (T) courses should include a sample course outline/syllabus that follows the above guidelines and includes criteria by which the department will select future topics courses.

4. CONSULTING SIGNATURES (if required)

In an effort to avoid course duplication and misunderstandings, signatures must be obtained from those departments potentially affected by proposed changes.

I have read the new graduate course proposal and support the offering of this course.

Yes No

If no, please explain your concern(s):

Department Chair (of department being consulted)

Department

Department

Department Chair (typed name)

Department Chair (typed name)

Department Chair Signature

Department Chair Signature

Date

Date

5. REQUIRED SCHOOL SIGNATURES (verifies proposal has been approved)

Graduate Program Coordinator

Ndidi Griffin

Typed Name

Signature



Date

8/21/12

Department Chair

Mary D. Barakzai

Typed Name

Signature



Date

8/21/12

School Curriculum (or Credential) Committee Chair (if applicable)

Helen Miltiades

Typed Name

Signature

Date

School Dean

Andrew Hoff

Typed Name

Signature

Date

- For committee use only -

**UNIVERSITY GRADUATE COMMITTEE/GRADUATE CURRICULUM SUBCOMMITTEE
REVIEW RECOMMENDATION:**

- Request Approved
- Request Denied
- Request Deferred

Date of Action

Explanation:

Recommendation approved by:

Jean, Division of Graduate Studies/or designee

Sharon Brown-Welty

Typed Name

Signature

Date

Provost/Vice President for Academic Affairs/or designee

William Covino

Typed Name

Signature

Date

Attachment

Rev. 12/11

DEFINITIONS OF GRADUATE LEVEL INSTRUCTION IN THE CSU

A. The Graduate Course

1. It is assumed that students who enroll in graduate courses possess:
 - a. Maturity, responsibility, and scholarly integrity appropriate to study beyond the baccalaureate level.
 - b. A broad base of knowledge, usually represented by the possession of the bachelor's degree.
 - c. Competence in the specified field, usually represented by a substantial body of upper-division study in the field or in a closely related field.
 - d. A command of basic techniques and skills essential for independent, self-directed study in the field.
2. The graduate course deals with more complex ideas, materials, techniques or problems than the undergraduate course, and demands searching and exhaustive analysis.
3. The graduate course requires:
 - a. The identification and investigation of theory or principle.
 - b. The application of theory to new ideas, problems, and materials.
 - c. Extensive use of bibliographic and other resource materials with emphasis on primary sources of data.
 - d. Demonstration of competence in the scholarly presentation of the results of independent study.
4. Satisfactory completion of a graduate course requires more creative thinking than an upper-division course.
5. Performance expectations for graduate student enrolled in undergraduate-level courses normally are such that students complete at least one additional assignment. The quality of their written and oral performance in the course normally would be at least one grade point higher than that of an undergraduate. Performance expectations for undergraduate students enrolled in graduate-level courses are such that where campus policy permits undergraduate enrollment in a graduate course, the quality of the written and oral performance of undergraduates in the course normally would be at least half a grade point higher than that of an undergraduate enrolled in an undergraduate course.

B. Lecture-Discussion

The lecture-discussion course conforms to the criteria for graduate courses in general, and

1. Is an organized course with regularized content.
2. Is a combination of lectures and group discussion, based on specialized studies and research.
3. Involves consideration of a series of vital problems, reviews trends, examines different points of view, and interprets issues.
4. Involves problem analysis, research, and high level participation in discussion.
5. Involves the use of a wide variety of material and resources which provide a range and depth beyond that obtainable through a single textbook, although the use of a basic textbook may be appropriate in some lecture-discussion courses.
6. Provides an opportunity for synthesis and analysis through scholarly writing and through course examination that go beyond simple recall of fact.

C. Seminar

The seminar conforms to the criteria for graduate courses in general, and

1. Is organized around a series of related problems significant to the discipline.
2. May have a focus which varies from semester to semester within the framework of the general objectives.
3. Limits the lecture, when it does occur, to setting the stage and clarifying issues.
4. Requires that students assume primary responsibility for an investigation that will contribute to the objectives of the seminar and that they report, interpret, and defend their findings orally as well as in writing.
5. Within the framework of general goals, may allow student participation in course planning and in course evaluation.
6. Has class meetings primarily to develop, share, and critically examine independent investigations by members of the group. Time devoted to individual or small-group conferences under the direction of the professor may on occasion replace general class meetings.

D. Laboratory

Laboratory coursework conforms to the criteria for graduate courses in general and focuses on data gathering and analysis, with an emphasis on research and investigation rather than on laboratory techniques. Its chief distinguishing characteristic is the use of specialized facilities and relatively independent investigation.

E. Field Work and Clinical Practice

Field work and clinical practice require that

1. The students have a high level of theoretical competence and a mastery of the basic skills necessary to perform professional duties with a minimum of direction.
2. The selection of experiences provides opportunity for the student to
 - a. Bring to bear and apply a high level of theoretical knowledge.
 - b. Exercise judgment of a high order.
 - c. Assume responsibility for determining procedures as well as for implementing them.
 - d. Report the experience to a supervising instructor in such a way as to point out its significance, to explain the rationale behind his/her major decisions, and to evaluate their adequacy.

F. Graduate Independent Study

At the graduate level independent study is based upon the assumptions set forth in part in the section above entitled, "The Graduate Course." Furthermore, such independent study

1. Has a specific objective related to the student's educational goals and to a graduate program.
2. Is precisely defined as a result of joint planning by the professor and the student.
3. Required periodic and final demonstration of competence in scholarly presentation of the result of the independent study.

Source: Office of the Chancellor, California State University

Justification for NURS 237 as a Required Graduate Course

In 2008, the American Nurses Credentialing Center (ANCC) retired its generalist Clinical Nurse Specialist national certifying examination and instituted population-focused tests. Because our courses did not have a population focus, our graduates were not eligible for certification, severely constraining their employment opportunities. The ANCC requires that the population focus be clearly stated in the course title and that 2 didactic courses of 3 units each be provided, along with 2 clinical courses providing a total of 500 direct patient care hours, each with the population focus in the title as well. Therefore, the Department of Nursing has restructured the CNS courses with either an adult-gero focus or a pediatric focus. This course will replace the previous NURS 230 (Seminar in Advanced Practice Nursing for the Clinical Specialist).

CALIFORNIA STATE UNIVERSITY, FRESNO

DEPARTMENT OF NURSING

NURS 237

FUNDAMENTAL TOPICS FOR THE PEDIATRIC CLINICAL NURSE SPECIALIST

COURSE SYLLABUS

FACULTY

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CALIFORNIA STATE UNIVERSITY, FRESNO

DEPARTMENT OF NURSING

COURSE NUMBER: NURS 237

COURSE TITLE: Fundamental Topics for the Pediatric Clinical Nurse Specialist.

UNITS: Three (3)

PREREQUISITES: NURS 210; NURS 211, NURS 221, NURS 225

CO-REQUISITE: NURS 238

FACULTY:

CLASS DATES AND TIME:

LOCATION: TBA

WEBSITE:

CATALOG DESCRIPTION:

Prerequisites: NURS 210, NURS 211, NURS 221, NURS 225. Co-requisite: NURS 238. This course will focus on advanced and complex health concerns in the Pediatric population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population.

COURSE DESCRIPTION:

This course is designed to advance the theoretical knowledge base of developmental processes and illness states in Pediatric patient population and to transition the graduate nursing student into the Clinical Nurse Specialist role as a practitioner and provider of care. The course will explore the role of the CNS in the provision of care for Pediatric patients with basic healthcare in a variety of healthcare settings

COURSE ORGANIZATION:

The student-centered course objectives will be achieved through the use of lecture, demonstration, audiovisual aids, student initiated discussion and presentations, case analysis, and selected readings. Students are required to have access to and competency in use of Blackboard.

ATTENDANCE/PARTICIPATION:

It is expected that each student will come prepared to be involved in class activities. Class participation includes discussion that reflects the knowledge of assigned readings, critical thinking the application of the knowledge, presentations, and small group activities. If you miss a class, it is your responsibility to obtain any information, announcements, or deadlines.

It is your responsibility to check on-line for announcements to any change in requirements or deadlines.

REQUIRED TEXTS:

Burns, Catherine, Dunn, A.D., Brady, M.A. et al. (2009) *Pediatric Primary Care* (4th Ed). Saunders.

Hamric, A., Spross, J., & Hanson, C. (2009). *Advanced nursing practice: An integrative approach* (4th Ed.). Philadelphia: W.B. Saunders

American Association of Critical Care Nurses (2007). McKinley, M.G. (Ed.). *Acute and critical Care Clinical Nurse Specialists: Synergy for best practices*. St. Louis: W.B. Saunders.

COURSE GOALS:

1. Demonstrate in-depth knowledge of pathophysiologic processes, disease management and health promotion in the Pediatric patient population.
2. Examine the integration of pediatric growth and development stages into the planning of health care specific to that population.
3. Beginning examination of knowledge of CNS roles and competencies in the provision of patient care.

STUDENT LEARNING OBJECTIVES:

Upon completion of this course the student will:

1. Demonstrate beginning knowledge of pathophysiologic processes, disease management and health promotion for the Pediatric patient population.
2. Distinguish between the different developmental life stage, wellness, and illness needs that impact a patient's care across the Pediatric age spectrum.
3. Provide direct care to selected patients based on the needs of that patient and the CNS's specialty knowledge and skills.
4. Verbalize increasing understanding of the needs of the patient and family transitioning to various care settings.
5. Provide leadership for collaborative, evidence-based revision of diagnoses and plans of care designed to improve patient outcomes.
6. Determine when evidence based guidelines, policies, procedures and plans of care need to be tailored to the individual patient.
7. Provide consultation to staff nurses, medical staff and interdisciplinary colleagues.
8. Demonstrate knowledge of assessment and management of normal and variations in developmental processes of the adult/gerontology patient.
9. Analyze selected CNS competencies and CNS practice models related to the care of the Pediatric patient.
10. Examine outcomes of CNS practice based on recent research findings.

TOPICS LIST

1. Pediatric Core
 - a. Physical assessment review
 - b. Stages of growth and development
 - c. Family and Culture in context of Pediatric Care
 - d. Hospitalization and Illness
 - e. Pain Management

- f. Immunizations
- 2. Systems Disorders
 - a. Respiratory
 - b. Cardiovascular
 - c. Infectious Disease
 - d. Integumentary
 - e. Gastrointestinal
- 3. CNS Topics
 - a. Advanced Practice Nursing roles
 - a. Caring Practices
 - b. Systems Thinking
 - c. Outcomes Evaluation and Performance Improvement
 - d. Research-based care and Evidence-based Practice
 - e. Putting caring into practice: self-care
 - f. CNS Nursing Models: application to care of the target patient
 - i. Synergy Model
 - ii. Fenton & Brykczynski's Expert Clinical Domains
 - iii. Strong Memorial Hospital's Model of Advanced Practice
 - g. Research on outcomes of Clinical Nurse Specialist Practice

ASSIGNMENTS & POINT VALUES

In-Class written discussion as assigned 20%

(10 classes x 2 points each)

Disease process presentation 20%

CNS Role Topic presentation 20%

Reflective Papers 10%

(5 papers x 2 points each)

Written Case Study 30%

TOTAL 100%

GRADING CRITERIA:

A = 90-100%

B = 80-89%

C = 70-79%

D = 60-69%

F < 60%

In order to pass NURS 237, the student must achieve a minimum grade of 70% ('C').

WRITTEN ASSIGNMENT GUIDELINES:

1. All written Assignments must be submitted through both the Blackboard assignment link, and to the appropriate link on Blackboard Discussion board. EXCEPTION: the Written Case Study does not get posted to Discussion Board; but it is turned in through the Blackboard assignment link.
2. All written assignments must follow the guidelines of the APA style manual (6th Ed.).
3. Written assignments will be graded for technical writing (grammar, spelling, punctuation) and professional appearance. Written assignments are to include:
 - a. Cover page which includes (at a minimum) the course number, name(s) of students included in the assignment
 - b. Reference page
 - c. Rubric provided to be attached as final page.
 - d. These pages (items a, b, and c) do not count in the required page count for the assignment.
 - e. When posting assignments to Blackboard, use the Assignment area provided. Use the following format: "Nursing 237, Assignment Name, Group Number or your Name" the finished product and describe your own part under the appropriate assignment heading.
4. Failure to follow any of above instructions will result in an automatic 10% point loss on the paper.
5. All group members receive the same grade on an assignment.

6. Assignments are due by 10:00 pm on the due date. Late assignments are subject to a 10% point deduction per day late. I will allow for early submission but I do not excuse any late assignment unless I am notified prior to the due date and agree to accept a late assignment.

ASSIGNMENTS

In-class Written Assignments

Due date: Variable.

Guidelines: The instructor will pose a question and you will write a short (1-2 paragraph) answer to the question. This question may be posed at beginning, middle, or end of class. If you fail to turn in a paper, you lose two points. There is no makeup.

Disease Process Presentation and CNS Role Topics Presentation

Due Dates: Disease Process Presentation TBA

CNS Role Topic Presentation TBA

1. The guidelines are the same for both the Disease Process presentation and the CNS Role Topic presentation.
2. On or before the first day of class, group membership, specific topics, and due dates will be decided.
3. For each assignment, the topic is to be presented to the class. Innovation in teaching is encouraged, the only requirement is that some form of the presentation (Power Point slides, a written topic outline, questions for the group to answer, etc) is submitted thru the Blackboard assignment link, and on discussion board. Presentation should be 15-30 minutes; you will be stopped at 30 minutes.

Hint on Power Points: If using Power-Point presentation, slides should only be used to convey general ideas. A slide should only have 4-5 short lines, and you should only need max of 10 slides. You should be able to speak to your topic, rather than read the Power-Point. As a general rule, you should use 24-point font size or larger.

4. Assignment Rubrics will be provided on first day of class. Read and follow them.
5. For both assignments, requests will be taken for presentation date; however, everyone expected to be ready to present by posted due date. If you are not able to present when called on, you will lose 20% of available points for your assignment. If a group member(s) is absent, the remaining group members are expected to present. Absent group members will be given a makeup assignment, but will only be able to make up a maximum of 80% of the points available.

Reflective Papers

Due dates: Reflective papers are due within one week (7 days, including weekends) of the related presentation. No points will be awarded for papers that are submitted later than that date.

1. Each student may choose any of the disease process or CNS role presentations on which to reflect.
2. The purpose of this paper is to consider a patient or situation you have seen in your recent clinical practice, and relate it to the topic of choice.
3. To write this paper, follow these guidelines:
 - a. Briefly describe the patient or the situation
 - b. Describe how the presentation is related to the patient or the situation. What are the similarities or differences?
 - c. Identify your feelings about the management/care the patient received, or how the situation was handled. Good or not so good? Why or why not?
 - d. Make any suggestion or improvement you might integrate when you are next in a similar situation, based on what you learned from this presentation and discussion.
4. A reflective paper is due within one week of the presentation.
5. There is no rubric other than guidelines given above (#3)

Case Study

Due Date:

Details to be posted.

SYLLABUS SUBJECT TO CHANGE

This syllabus and schedule are subject to change in the event of extenuating circumstances. If you are absent from class, it is your responsibility to check on announcements made while you were absent. Check Blackboard Announcements page frequently.

FALL 2012 COURSE SCHEDULE

Week/Date	Due	Topic	Reading Assignment Due Assignments Due
1		Syllabus Overview (Topics Course and Practicum) Pediatric Physical Assessment Review	Video
2		Developmental life stages, wellness, and illness states across the Pediatric age spectrum	Burns, 1, 2, 3
3		Developmental Stages in Pediatrics: Patient Management	Burns, Ch 4-8
4		Health Promotion, Perception, and Management Patterns CNS Role: Defining Advanced Practice Roles	Burns, Ch 9, 10 Hamric, Ch 3
5	Reflective Paper 1	Disease States: Respiratory CNS Role: Seven Core Competencies of APNs	Burns, Ch 31 Hamric Ch 3
6		Disease States: Cardiovascular CNS Role: Role Development	Dunphy, Ch 30 Hamric, Ch 4
7	Reflective Paper 2 due	Disease States: Respiratory	Dunphy, Ch 9
8		Disease States: Gastrointestinal	Burns, Ch 32

Week/Date	Due	Topic	Reading Assignment Due Assignments Due
9		Nature, Purpose, and Components of Professional Practice Models CNS Models and Theories: 1) Synergy Model 2) Fenton & Brykczynski's Expert Clin Domains 3) Strong Memorial Model of Adv. Practice	Preface to Hamric Hamric, Ch 2 McKinley Ch. 3
10	Reflective Paper 3 due	Disease States: Genitourinary Gynecologic	Burns 34, 35
11		Disease States: Musculoskeletal Disorders	Burns, Ch 37
12		Disease States: Genetic Disorders	Burns, Ch 40
13	Reflective Paper4 due	CNS Roles: Systems Thinking Putting Caring Into Practice	McKinley, Ch9 (Reading TBA)
14		Disease States: Psychological	Dunphy, Ch. 18
15			
16		Research-based care vs. Evidence-Based Practice	TBA
17	Reflective Paper 5 due	Research: Outcomes of CNS Advanced Practice	TBA
18	Written Case Study	Class Summation	

Week/Date	Due	Topic	Reading Assignment Due Assignments Due
No Final Exam		Faculty Consultation Days	

UNIVERSITY POLICIES

STUDENTS WITH DISABILITIES:

Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in the Henry Madden Library, Room 1202 (278-2811).

HONOR CODE:

"Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities." You should:

- a) understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration)
- b) neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading.
- c) take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action.

Instructors may require students to sign a statement at the end of all exams and assignments that "I have done my own work and have neither given nor received unauthorized assistance on this work." If you are going to use this statement, include it here.

CHEATING AND PLAGIARISM:

"Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the Class Schedule (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations).

COMPUTERS:

"At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a

printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from Information Technology Services (<http://www.csufresno.edu/ITS/>) or the University Bookstore. In the curriculum and class assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources."

DISRUPTIVE CLASSROOM BEHAVIOR:

"The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop an understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class."

COPYRIGHT POLICY:

Copyright laws and fair use policies protect the rights of those who have produced the material. The copy in this course has been provided for private study, scholarship, or research. Other uses may require permission from the copyright holder. The user of this work is responsible for adhering to copyright law of the U.S. (Title 17, U.S. Code). To help you familiarize yourself with copyright and fair use policies, the University encourages you to visit its Copyright Web Page (<http://csufresno.edu/library/information/copyright/>).

Technology Innovations for Learning & Teaching (TILT) course web sites contain material protected by copyrights held by the instructor, other individuals or institutions. Such material is used for educational purposes in accord with copyright law and/or with permission given by the owners of the original material. You may download one copy of the materials on any single computer for non-commercial, personal, or educational purposes only, provided that you (1) do not modify it, (2) use it only for the duration of this course, and (3) include both this notice and any copyright notice originally included with the material. Beyond this use, no material from the course web site may be copied, reproduced, re-published, uploaded, posted, transmitted, or distributed in any way without the permission of the original copyright holder. The instructor assumes no responsibility for individuals who improperly use copyrighted material placed on the web site.

Blackboard Assistance:

For help with Blackboard contact Technology Innovations for Learning and Teaching at 278-7373 or send an email to tiltsupport@csufresno.edu.

NEW GRADUATE COURSE REQUEST

GRADNEW.ITP (on Informed Filler)

Return original to:

Division of Graduate Studies
 Harold H. Haak Administrative Center
 4th Floor, Henry Madden Library
 Mail Stop ML51

Graduate Program: Pediatric CNS/Nurse Educator
 Department: Nursing
 Contact Person: Cricket Barakzai
 Phone: 82430
 E-mail: maryb
 Catalog pg. # 352

Use this form if your course is: (please select the box below that best describes your course)

- (a) new (never has been taught before)
- (b) conversion (break-out of a "topics" course as a new course)
- (c) significant change to an existing course
- (d) other Break-out of an independent study course as a new course

NOTE: If the changes you make on this form are different from what you submitted on your mock-ups to catalog, then you **must** revise your mock-ups and resubmit them to the catalog office.

If you wish to delete or make minor revisions to an existing graduate course, use the "Graduate Course Change or Deletion" form (GRADCHG.ITP on Informed Filler).

1. NEW COURSE:

Prefix/Subject	Catalog Number	Long Course Title	Units Max/Total
<u>NURS</u>	<u>238</u>	<u>Practicum in Advanced Clinical Nursing</u>	<u>5</u>
<u>Peds CNS Pract I</u>			<u>for the Pediatric Clinical Nurse Specialist</u>
Short Title (16 spaces maximum) for Printing			Grading Basis (Letter, CR/NC, RP, Mixed)
Course Classification (C/S#) <u>S-36</u>			

Note: If the proposed course has been offered previously as a topics course or is the expansion of an existing course, complete the following for the previous course:

Prefix/Subject	Catalog Number	Long Course Title	Units Max/Total
<u>NURS</u>	<u>290</u>	<u>Practicum in Advanced Clinical Nursing</u>	<u>3</u>
<u>for the Pediatric Clinical Nurse Specialist</u>			

Catalog Description of New Course: (40 words only, excluding prerequisite, lecture-lab hours)

Prerequisites: NURS 210 & NURS 221. Co-requisite: NURS 237. Supervised clinical practice with emphasis on NANCS competencies applied to common problems in health promotion, maintenance, and restoration of pediatric patients in a complex health care system. (one-hour clinical conference per week) (255 direct patient care clinical hours).

2. NEW COURSE QUESTIONS:

(Each item **must** be addressed; attach additional sheet(s) as needed.)

A. How frequently is the new course expected to be offered? annually

B. What is the expected enrollment? 15

C. What is/are the mode(s) of course delivery (e.g., lecture, seminar, supervision, distance learning)? Please see the attached "Definitions of Graduate Level Instruction in the CSU."

Supervision

D. Identify all new resources (special facilities, library resources, technical assistance, etc.) needed to institute the course.

none

E. Is this course required or elective? required

F. Is there another course(s) covering similar subject matter:

• within your department? No Yes (if yes, complete section 4)

• at California State University, Fresno? No Yes (if yes, complete section 4)

G. Has this course been previously offered as a topics course? Yes No
If yes, how many times? once

H. Justification for New Course: (Please attach an explanation detailing the need for this new course.)

3. Please attach a course outline/syllabus that:

• Follows the guidelines stated in the "**Policy on Course Syllabi and Grading**" (June 1997) as published in the Academic Policy Manual (pg. 241-1, 241-2, 241-3).

• Illustrates how the course meets the criteria described in "**Definitions of Graduate Level Instruction in the CSU**" (see attached).

NOTE: Proposed Topics (T) courses should include a sample course outline/syllabus that follows the above guidelines and includes criteria by which the department will select future topics courses.

4. CONSULTING SIGNATURES (if required)

In an effort to avoid course duplication and misunderstandings, signatures must be obtained from those departments potentially affected by proposed changes.

I have read the new graduate course proposal and support the offering of this course.

Yes No

If no, please explain your concern(s):

Department Chair (of department being consulted)

Department

Department

Department Chair (typed name)

Department Chair (typed name)

Department Chair Signature

Department Chair Signature

Date

Date

5. REQUIRED SCHOOL SIGNATURES (verifies proposal has been approved)

Graduate Program Coordinator

Ndidi Griffin

Typed Name

Signature

Date

Department Chair

Mary D. Barakzai

Typed Name

Signature

Date

School Curriculum (or Credential) Committee Chair (if applicable)

Helen Miltiades

Typed Name

Signature

Date

School Dean

Andrew Hoff

Typed Name

Signature

Date

- For committee use only -

**UNIVERSITY GRADUATE COMMITTEE/GRADUATE CURRICULUM SUBCOMMITTEE
REVIEW RECOMMENDATION:**

- Request Approved
- Request Denied
- Request Deferred

_____ **Date of Action**

Explanation:

Recommendation approved by:

Dean, Division of Graduate Studies/or designee

Sharon Brown-Welty

Typed Name

Signature

Date

Provost/Vice President for Academic Affairs/or designee

William Covino

Typed Name

Signature

Date

Attachment

Rev. 12/11

DEFINITIONS OF GRADUATE LEVEL INSTRUCTION IN THE CSU

A. The Graduate Course

1. It is assumed that students who enroll in graduate courses possess:
 - a. Maturity, responsibility, and scholarly integrity appropriate to study beyond the baccalaureate level.
 - b. A broad base of knowledge, usually represented by the possession of the bachelor's degree.
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 - d. A command of basic techniques and skills essential for independent, self-directed study in the field.
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3. The graduate course requires:
 - a. The identification and investigation of theory or principle.
 - b. The application of theory to new ideas, problems, and materials.
 - c. Extensive use of bibliographic and other resource materials with emphasis on primary sources of data.
 - d. Demonstration of competence in the scholarly presentation of the results of independent study.
4. Satisfactory completion of a graduate course requires more creative thinking than an upper-division course.
5. Performance expectations for graduate student enrolled in undergraduate-level courses normally are such that students complete at least one additional assignment. The quality of their written and oral performance in the course normally would be at least one grade point higher than that of an undergraduate. Performance expectations for undergraduate students enrolled in graduate-level courses are such that where campus policy permits undergraduate enrollment in a graduate course, the quality of the written and oral performance of undergraduates in the course normally would be at least half a grade point higher than that of an undergraduate enrolled in an undergraduate course.

B. Lecture-Discussion

The lecture-discussion course conforms to the criteria for graduate courses in general, and

1. Is an organized course with regularized content.
2. Is a combination of lectures and group discussion, based on specialized studies and research.
3. Involves consideration of a series of vital problems, reviews trends, examines different points of view, and interprets issues.
4. Involves problem analysis, research, and high level participation in discussion.
5. Involves the use of a wide variety of material and resources which provide a range and depth beyond that obtainable through a single textbook, although the use of a basic textbook may be appropriate in some lecture-discussion courses.
6. Provides an opportunity for synthesis and analysis through scholarly writing and through course examination that go beyond simple recall of fact.

C. Seminar

The seminar conforms to the criteria for graduate courses in general, and

1. Is organized around a series of related problems significant to the discipline.
2. May have a focus which varies from semester to semester within the framework of the general objectives.
3. Limits the lecture, when it does occur, to setting the stage and clarifying issues.
4. Requires that students assume primary responsibility for an investigation that will contribute to the objectives of the seminar and that they report, interpret, and defend their findings orally as well as in writing.
5. Within the framework of general goals, may allow student participation in course planning and in course evaluation.
6. Has class meetings primarily to develop, share, and critically examine independent investigations by members of the group. Time devoted to individual or small-group conferences under the direction of the professor may on occasion replace general class meetings.

D. Laboratory

Laboratory coursework conforms to the criteria for graduate courses in general and focuses on data gathering and analysis, with an emphasis on research and investigation rather than on laboratory techniques. Its chief distinguishing characteristic is the use of specialized facilities and relatively independent investigation.

E. Field Work and Clinical Practice

Field work and clinical practice require that

1. The students have a high level of theoretical competence and a mastery of the basic skills necessary to perform professional duties with a minimum of direction.
2. The selection of experiences provides opportunity for the student to
 - a. Bring to bear and apply a high level of theoretical knowledge.
 - b. Exercise judgment of a high order.
 - c. Assume responsibility for determining procedures as well as for implementing them.
 - d. Report the experience to a supervising instructor in such a way as to point out its significance, to explain the rationale behind his/her major decisions, and to evaluate their adequacy.

F. Graduate Independent Study

At the graduate level independent study is based upon the assumptions set forth in part in the section above entitled, "The Graduate Course." Furthermore, such independent study

1. Has a specific objective related to the student's educational goals and to a graduate program.
2. Is precisely defined as a result of joint planning by the professor and the student.
3. Required periodic and final demonstration of competence in scholarly presentation of the result of the independent study.

Source: Office of the Chancellor, California State University

Justification for NURS 238 as a Required Graduate Course

In 2008, the American Nurses Credentialing Center (ANCC) retired its generalist Clinical Nurse Specialist national certifying examination and instituted population-focused tests. Because our courses did not have a population focus, our graduates were not eligible for certification, severely constraining their employment opportunities. The ANCC requires that the population focus be clearly stated in the course title and that 2 didactic courses of 3 units each be provided, along with 2 clinical courses providing a total of 500 direct patient care hours, each with the population focus in the title as well. Therefore, the Department of Nursing has restructured the CNS courses with either an adult-gero focus or a pediatric focus. This course will replace the previous NURS 229 (Practicum in Advanced Clinical Nursing for the Clinical Specialist).

California State University, Fresno
Department of Nursing

Practicum in Advanced Clinical Nursing for the Pediatric Clinical Nurse Specialist

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Course Number: NURS 238

Units: 5 Units

Placement in Curriculum: Second Semester Graduate Program

Prerequisite: NURS 210, NURS 221

Co-requisite: NURS 237

Faculty:

Office Hours:

COURSE DESCRIPTION: Prerequisites: NURS 210, NURS 221. Co-requisite: NURS 237. Supervised clinical practice with emphasis on NANCS competencies applied to common problems in health promotion, maintenance, and restoration of pediatric patients in a complex healthcare system. (one-hour clinical conference per week) (255 direct patient care clinical hours)

COURSE OBJECTIVES: The student will work under the guidance of a preceptor to incorporate the following course objectives into the practicum experience. Upon completion of this course the student will be able to meet objectives as outlined in each of five major CNS focus areas.

Clinical:

1. Demonstrate knowledge of assessment, evaluation, and nursing management of a variety of disease processes in the Pediatrics population.
2. Provides expert patient assessment and formulates nursing diagnosis through such means as observation, inspection, palpation, auscultation, review of available records, and conducting interviews.
3. Critically analyze, interpret and use appropriate knowledge, research and theories to meet the health care needs of diverse urban and rural client populations.
4. Develop competence and accountability in an advanced practice nursing role.

Education:

1. Assists with and promotes staff development through a) mentoring of individual staff and (b) provision of formal classes within the student's clinical setting.
2. Serves as a preceptor to nursing students, new RN graduates and RNs reentering the workforce.
3. Provides patient education to individuals, families, or groups based on knowledge and application of teaching methods relevant to cultural, gender, age, and socioeconomic characteristics of learners.

Research:

1. Uses clinical inquiry and research in an advanced specialty area of practice.
2. Demonstrates ability to:
 - a. Identify and locate research articles pertinent to an area of practice.
 - b. Critically read and analyze a research article.
 - c. Determine appropriateness of incorporation of research findings into clinical practice.
3. Stays abreast of current literature in the specialty area of practice.
4. Initiates research into topics that directly impact nursing care and applies measurement and evaluation methodologies to assess outcomes.

Consultation:

1. Provides clinical expertise and makes recommendations to physicians, other health care providers, patients, and health care organizations.
2. Reviews standards of practice to determine appropriateness and to reflect current nursing clinical practice.

Leadership:

1. Uses theory/research as a foundation for clinical leadership and CNS research based practice.
2. Participates in the professional development of self, others, and the nursing profession.
3. Belongs to and participates in professional organizations.

4. Serves as a change agent in health care settings by developing health care standards, assisting in the implementation of standards, facilitating goal setting and achievements, and evaluating outcomes.

Class Dates and Times: Students will meet as designated by assigned clinical faculty.

Student Responsibilities for Clinical Practicum:

- 1) Students are responsible for arranging preceptors, with faculty assistance as needed.
- 2) Clinical preceptors must be Master's prepared Clinical Nurse Specialists. Any exceptions must be discussed with clinical faculty/lead instructor.
- 3) Hospitals or health care facilities in which you will be working must have a contract with CSUF. Carol Rayner, Nursing Office, can assist you with this.
- 4) Preceptor information sheet and preceptor CV must be submitted to clinical faculty no later than TBA
- 5) Written personal objectives are to be submitted to clinical faculty by TBA
- 6) Students may not count paid time related to a job as clinical hours for this class.

Teaching Methods:

This class depends heavily on student-directed activities designed and planned to meet course objectives, under the direction of clinical faculty and preceptor. Student success will be measured by achievement of objectives, feedback from preceptor(s), and faculty assessment of student journals and written papers.

Attendance: It is expected that students will attend any scheduled meetings with clinical faculty. Additionally, students are expected to attend all scheduled clinical activities. Students are expected to be dressed appropriately for the activity, and arrive at all activities on time.

Textbooks: No specific texts required for this course.

It is expected that students will have access to CSUF email, access to and ability to use Blackboard learning system, and access to the Internet. It is also expected that the student have access to and ability to use Madden library search engines.

Grading Criteria

Assignments:

Personal Goals	5 points
Paperwork (Preceptor information Sheet, Health Clearance, Copy of RN license)	5 points
Mid-Point Clinical Log of Hours	10 points
Final Clinical Log of Hours	30 points

Completed Preceptor Evaluation	10 points
Final Portfolio	30 points
Participation in meetings with clinical faculty and preceptors	10 points
Completion of 255 clinical hours	Pass or Fail

Completion of all items on this list is required to pass the course. Student may not begin clinical hours until Personal Goals and Preceptor Information Sheet are submitted. Failure to submit the final clinical log of hours, the final portfolio, the preceptor evaluation sheet, or to complete 255 hours will result in failure of course.

Grading Criteria:

- A = 90-100%
- B = 80-89%
- C = 70-79%
- D = 60-69%
- E = <60%

Subject to Change Statement

This syllabus and schedule are subject to change in the event of extenuating circumstances. If you are absent from class, it is your responsibility to check on announcements made while you were absent.

Guidelines for Clinical Journal

Due Date:

Mid-point journal due: **TBA** (may email to Keitha, or place in mailbox in nursing office)

Final journal due in clinical portfolio: **TBA**

Purpose of Clinical Journal:

1. To assist student, preceptor, and faculty in planning, implementing, and evaluating clinical experiences.
2. To assist student, preceptor, and faculty in assessing progress toward meeting both class and individual goals in NURS 237 (Topics).

Format for Clinical Journal:

1. A template for clinical journals is located on Blackboard.
2. Final journal should be one contiguous form, with most recent activities at top of table. If you have more than one clinical experience within a week, make an entry for each experience in the journal.
3. Journal includes:
 - a. Date and hours for each day's experience
 - b. Preceptor or mentor name (A preceptor is a Master's prepared CNS preceptor; a mentor is a person with whom you work with for specific experiences – perhaps a case manager, a department manager, or another professional related to your objectives. You will have one preceptor; you may work with numerous mentors. Your preceptor should approve clinical hours completed with mentors.

- c. Daily hours/Cumulative hours completed
- d. Brief narrative of experiences
- e. Identify both course objectives and personal objectives addressed in this activity. By the end of class it is expected that you will have completed activities demonstrating experience(s) within each course and personal objective.

NURS 238 Portfolio

Due Date: TBA

The following guidelines apply to your semester portfolio:

1. Portfolios are to be submitted in paper format, in a 3-ring binder. Binder must include:
 - a. A front page on the binder itself, identifying:
 - i. Student name
 - ii. Course names for both lecture and practicum
 - iii. Semester
 - b. Table of Contents
 - c. Individual Tabs identifying each binder entry
 - d. Course Objectives
 - e. Personal Objectives
 - f. All written or printed assignments: written papers, PowerPoint printouts, case studies, etc. from both courses
 - g. Any documents, policies, procedures, or educational handouts to which you had significant input in the course of your clinical hours. Please be aware of personal privacy – you may identify others by title, but not by name.
 - h. Final copy of your journal. Your journal must include documentation of hours in each of the five CNS competencies emphasized in this course: clinical practice, research, collaboration, education, and leadership. Your journal should reflect completion of both the syllabus goals for NURS 238, as well as your personal goals.
 - i. Your preceptor information sheet and your preceptor evaluation
2. This is a summation of all of your activities from the semester, for both the Lecture and the Practicum NURS 238 classes. Each portfolio will be unique, reflecting your goals and experiences.
3. You may include references to professional articles or web-sites you used throughout the semester, but do not include the articles or printouts from websites.

The portfolio is to be submitted to your clinical faculty no later than TBA. Points for the journal are given in the Practicum course. **While you do not receive points for this binder in the Topics Course, failure to submit it will result in failure in both Topics and Practicum classes.**

**Nursing 238: Pediatrics CNS Practicum
Spring 2013**

Assignment Due Dates

Assignment	Description	Due	Point Value
Individual Objectives	Identify personal objectives and specific activities (goals) you will pursue with your preceptor. These goals should reflect the objectives of this class.	TBA	10
Required Paperwork	Preceptor information sheet (available on BB) and preceptor CV Health clearance form Copy of RN license	TBA	10
Individual meetings	Meetings as confirmed with clinical faculty, preceptors, and site visits	TBA	10
Clinical Journals	Clinical Journals (Log of Hours) Mid-Point:	TBA	10
	Final Log (in Portfolio)		30
Preceptor Evaluation	Form available on Blackboard. Submit in Portfolio	TBA	20
Final Portfolio	See description in syllabus.	TBA	30
Clinical Hours	Complete 255 hours of approved practicum experience .	TBA	Pass or Fail

UNIVERSITY POLICIES

For information on the University's policy regarding cheating and plagiarism, refer to the Class Schedule (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations). You may also access information on these policies at the following website:

http://www.csufresno.edu/academics/policies_forms/instruction/RequiredSyllabusPolicyStatements.htm

Students with Disabilities: Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in the Henry Madden Library, Room 1202 (278-2811).

Honor Code: "Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities." You should:

- a) understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration)
- b) neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading.
- c) take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action.

Cheating and Plagiarism: "Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the Class Schedule (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations).

Computers: "At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from Information Technology Services (<http://www.csufresno.edu/ITS/>) or the University Bookstore. In the curriculum and class

assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources."

Disruptive Classroom Behavior: "The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class."

Copyright policy: Copyright laws and fair use policies protect the rights of those who have produced the material. The copy in this course has been provided for private study, scholarship, or research. Other uses may require permission from the copyright holder. The user of this work is responsible for adhering to copyright law of the U.S. (Title 17, U.S. Code). To help you familiarize yourself with copyright and fair use policies, the University encourages you to visit its copyright web page:
<http://www.csufresno.edu/library/about/policies/docs/copyrtpolicyfull.pdf>

Digital Campus course web sites contain material protected by copyrights held by the instructor, other individuals or institutions. Such material is used for educational purposes in accord with copyright law and/or with permission given by the owners of the original material. You may download one copy of the materials on any single computer for non-commercial, personal, or educational purposes only, provided that you (1) do not modify it, (2) use it only for the duration of this course, and (3) include both this notice and any copyright notice originally included with the material. Beyond this use, no material from the course web site may be copied, reproduced, re-published, uploaded, posted, transmitted, or distributed in any way without the permission of the original copyright holder. The instructor assumes no responsibility for individuals who improperly use copyrighted material placed on the web site.

NEW GRADUATE COURSE REQUEST

GRADNEW.ITP (on Informed Filler)

Return original to:

Division of Graduate Studies
Harold H. Haak Administrative Center
4th Floor, Henry Madden Library
Mail Stop ML51

Graduate Program: Pediatric CNS/Nurse Educator
Department: Nursing
Contact Person: Cricket Barakzai
Phone: 82430
E-mail: maryb
Catalog pg. # 352

Use this form if your course is: (please select the box below that best describes your course)

- (a) new (never has been taught before)
- (b) conversion (break-out of a "topics" course as a new course)
- (c) significant change to an existing course
- (d) other _____

NOTE: If the changes you make on this form are different from what you submitted on your mock-ups to catalog, then you **must** revise your mock-ups and resubmit them to the catalog office.

If you wish to delete or make minor revisions to an existing graduate course, use the "Graduate Course Change or Deletion" form (GRADCHG.ITP on Informed Filler).

1. NEW COURSE:

Prefix/ Catalog Long Course
Subject NURS Number 255 Title Advanced Topics for the Pediatric Clinical Units Max/Total 3
Peds CNS 2 Nurse Specialist. Letter
Short Title (16 spaces maximum) for Printing _____ Grading Basis (Letter, CR/NC, RP, Mixed)
Course Classification (C/S#) C-5

Note: If the proposed course has been offered previously as a topics course or is the expansion of an existing course, complete the following for the previous course:

Prefix/ Catalog Long Course
Subject NURS Number 288T Title Advanced Topics for the Pediatric Clinical Units Max/Total 3
Nurse Specialist.

Catalog Description of New Course: (40 words only, excluding prerequisite, lecture-lab hours)

Prerequisites: NURS 237 & NURS 238. Co-requisite: NURS 256. This course will focus on advanced and complex health concerns in the Pediatric population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population

2. NEW COURSE QUESTIONS:

(Each item **must** be addressed; attach additional sheet(s) as needed.)

- A. How frequently is the new course expected to be offered? annually
- B. What is the expected enrollment? 15
- C. What is/are the mode(s) of course delivery (e.g., lecture, seminar, supervision, distance learning)? Please see the attached "Definitions of Graduate Level Instruction in the CSU."
Seminar
- D. Identify all new resources (special facilities, library resources, technical assistance, etc.) needed to institute the course.
none
- E. Is this course required or elective? required
- F. Is there another course(s) covering similar subject matter:
- within your department? No Yes (if yes, complete section 4)
 - at California State University, Fresno? No Yes (if yes, complete section 4)
- G. Has this course been previously offered as a topics course? Yes No
If yes, how many times? once
- H. Justification for New Course: (Please attach an explanation detailing the need for this new course.)

3. Please attach a course outline/syllabus that:

- Follows the guidelines stated in the "Policy on Course Syllabi and Grading" (June 1997) as published in the Academic Policy Manual (pg. 241-1, 241-2, 241-3).
- Illustrates how the course meets the criteria described in "Definitions of Graduate Level Instruction in the CSU" (see attached).

NOTE: Proposed Topics (T) courses should include a sample course outline/syllabus that follows the above guidelines and includes criteria by which the department will select future topics courses.

4. CONSULTING SIGNATURES (if required)

In an effort to avoid course duplication and misunderstandings, signatures must be obtained from those departments potentially affected by proposed changes.

I have read the new graduate course proposal and support the offering of this course.

Yes No

If no, please explain your concern(s):

Department Chair (of department being consulted)

Department

Department

Department Chair (typed name)

Department Chair (typed name)

Department Chair Signature

Department Chair Signature

Date

Date

5. REQUIRED SCHOOL SIGNATURES (verifies proposal has been approved)

Graduate Program Coordinator

Ndidi Griffin

Ndidi Griffin

8/21/12

Typed Name

Signature

Date

Department Chair

Mary D. Barakzai

Mary D. Barakzai

8/21/12

Typed Name

Signature

Date

School Curriculum (or Credential) Committee Chair (if applicable)

Helen Miltiades

Typed Name

Signature

Date

School Dean

Andrew Hoff

Typed Name

Signature

Date

- For committee use only -

**UNIVERSITY GRADUATE COMMITTEE/GRADUATE CURRICULUM SUBCOMMITTEE
REVIEW RECOMMENDATION:**

Request Approved

Request Denied

Request Deferred

_____ **Date of Action**

Explanation:

Recommendation approved by:

Dean, Division of Graduate Studies/or designee

Sharon Brown-Welty

Typed Name

Signature

Date

Provost/Vice President for Academic Affairs/or designee

William Covino

Typed Name

Signature

Date

Attachment

Rev. 12/11

DEFINITIONS OF GRADUATE LEVEL INSTRUCTION IN THE CSU

A. The Graduate Course

1. It is assumed that students who enroll in graduate courses possess:
 - a. Maturity, responsibility, and scholarly integrity appropriate to study beyond the baccalaureate level.
 - b. A broad base of knowledge, usually represented by the possession of the bachelor's degree.
 - c. Competence in the specified field, usually represented by a substantial body of upper-division study in the field or in a closely related field.
 - d. A command of basic techniques and skills essential for independent, self-directed study in the field.
2. The graduate course deals with more complex ideas, materials, techniques or problems than the undergraduate course, and demands searching and exhaustive analysis.
3. The graduate course requires:
 - a. The identification and investigation of theory or principle.
 - b. The application of theory to new ideas, problems, and materials.
 - c. Extensive use of bibliographic and other resource materials with emphasis on primary sources of data.
 - d. Demonstration of competence in the scholarly presentation of the results of independent study.
4. Satisfactory completion of a graduate course requires more creative thinking than an upper-division course.
5. Performance expectations for graduate student enrolled in undergraduate-level courses normally are such that students complete at least one additional assignment. The quality of their written and oral performance in the course normally would be at least one grade point higher than that of an undergraduate. Performance expectations for undergraduate students enrolled in graduate-level courses are such that where campus policy permits undergraduate enrollment in a graduate course, the quality of the written and oral performance of undergraduates in the course normally would be at least half a grade point higher than that of an undergraduate enrolled in an undergraduate course.

B. Lecture-Discussion

The lecture-discussion course conforms to the criteria for graduate courses in general, and

1. Is an organized course with regularized content.
2. Is a combination of lectures and group discussion, based on specialized studies and research.
3. Involves consideration of a series of vital problems, reviews trends, examines different points of view, and interprets issues.
4. Involves problem analysis, research, and high level participation in discussion.
5. Involves the use of a wide variety of material and resources which provide a range and depth beyond that obtainable through a single textbook, although the use of a basic textbook may be appropriate in some lecture-discussion courses.
6. Provides an opportunity for synthesis and analysis through scholarly writing and through course examination that go beyond simple recall of fact.

C. Seminar

The seminar conforms to the criteria for graduate courses in general, and

1. Is organized around a series of related problems significant to the discipline.
2. May have a focus which varies from semester to semester within the framework of the general objectives.
3. Limits the lecture, when it does occur, to setting the stage and clarifying issues.
4. Requires that students assume primary responsibility for an investigation that will contribute to the objectives of the seminar and that they report, interpret, and defend their findings orally as well as in writing.
5. Within the framework of general goals, may allow student participation in course planning and in course evaluation.
6. Has class meetings primarily to develop, share, and critically examine independent investigations by members of the group. Time devoted to individual or small-group conferences under the direction of the professor may on occasion replace general class meetings.

D. Laboratory

Laboratory coursework conforms to the criteria for graduate courses in general and focuses on data gathering and analysis, with an emphasis on research and investigation rather than on laboratory techniques. Its chief distinguishing characteristic is the use of specialized facilities and relatively independent investigation.

E. Field Work and Clinical Practice

Field work and clinical practice require that

1. The students have a high level of theoretical competence and a mastery of the basic skills necessary to perform professional duties with a minimum of direction.
2. The selection of experiences provides opportunity for the student to
 - a. Bring to bear and apply a high level of theoretical knowledge.
 - b. Exercise judgment of a high order.
 - c. Assume responsibility for determining procedures as well as for implementing them.
 - d. Report the experience to a supervising instructor in such a way as to point out its significance, to explain the rationale behind his/her major decisions, and to evaluate their adequacy.

F. Graduate Independent Study

At the graduate level independent study is based upon the assumptions set forth in part in the section above entitled, "The Graduate Course." Furthermore, such independent study

1. Has a specific objective related to the student's educational goals and to a graduate program.
2. Is precisely defined as a result of joint planning by the professor and the student.
3. Required periodic and final demonstration of competence in scholarly presentation of the result of the independent study.

Source: Office of the Chancellor, California State University

Justification for NURS 255 as a Required Graduate Course

In 2008, the American Nurses Credentialing Center (ANCC) retired its generalist Clinical Nurse Specialist national certifying examination and instituted population-focused tests. Because our courses did not have a population focus, our graduates were not eligible for certification, severely constraining their employment opportunities. The ANCC requires that the population focus be clearly stated in the course title and that 2 didactic courses of 3 units each be provided, along with 2 clinical courses providing a total of 500 direct patient care hours, each with the population focus in the title as well. Therefore, the Department of Nursing has restructured the CNS courses with either an adult-gero focus or a pediatric focus. This course will replace the previous NURS 250 (Seminar in Clinical Specialization).

CALIFORNIA STATE UNIVERSITY, FRESNO
DEPARTMENT OF NURSING

NURS 255
*ADVANCED TOPICS FOR THE PEDIATRIC
CLINICAL NURSE SPECIALIST*

COURSE SYLLABUS

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CALIFORNIA STATE UNIVERSITY, FRESNO
Department of Nursing

Course Number: NURS 255

COURSE TITLE: ADVANCED TOPICS FOR THE PEDIATRIC CLINICAL NURSE SPECIALIST.

Units: Three (3)

Prerequisites: NURS 237 & NURS 238

Co-requisite: NURS 256

FACULTY: TBA

Class Dates and Time: TBA Fall

Location: TBA

CATALOG DESCRIPTION:

Prerequisites: NURS 237 & NURS 238. Co-requisite: NURS 256. This course will focus on advanced and complex health concerns in the Pediatric population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population.

COURSE DESCRIPTION:

This course is designed to advance the theoretical knowledge base of developmental processes and illness states in Pediatric patient population and to transition the graduate nursing student into the Clinical Nurse Specialist role as a practitioner and provider of care. The course will explore the role of the CNS in the provision of care for Pediatric patients with basic healthcare in a variety of healthcare settings

COURSE ORGANIZATION:

The student-centered course objectives will be achieved through the use of lecture, demonstration, audiovisual aids, student initiated discussion and presentations, case analysis, and selected readings. Students are required to have access to and competency in use of Blackboard.

ATTENDANCE/PARTICIPATION:

It is expected that each student will come prepared to be involved in class activities. Class participation includes discussion that reflects the knowledge of assigned readings, critical thinking in the application of the knowledge, presentations, and small group activities. If you miss a class, it is your responsibility to obtain any information, announcements, or deadlines.

It is your responsibility to check on-line for announcements to any change in requirements or deadlines.

REQUIRED TEXTS:

Burns, Catherine, Dunn, A.D., Brady, M.A. et al. (2009) *Pediatric Primary Care* (4th Ed). Saunders.

Hamric, A., Spross, J., & Hanson, C. (2009). *Advanced nursing practice: An integrative approach* (4th Ed.). Philadelphia: W.B. Saunders

American Association of Critical Care Nurses (2007). McKinley, M.G. (Ed.). *Acute and critical Care Clinical Nurse Specialists: Synergy for best practices*. St. Louis: W.B. Saunders.

COURSE GOALS:

1. Demonstrate in-depth knowledge of pathophysiologic processes, disease management and health promotion in the Pediatric patient population.
2. Examine the integration of pediatric growth and development stages into the planning of health care specific to that population.

3. Advanced examination of knowledge of CNS roles and competencies in the provision of patient care.
4. Integration of CNS Role and Competencies into care of Pediatric patient population

STUDENT LEARNING OBJECTIVES:

Upon completion of this course the student will:

1. Demonstrate advanced knowledge of pathophysiologic processes, disease management and health promotion for the Pediatric patient population.
2. Plan patient assessment and interventions based on patient developmental stage, family needs, and cultural influences.
3. Provide direct care to selected patients based on the needs of that patient and the CNS's specialty knowledge and skills.
4. Verbalize increasing understanding of the needs of the patient and family transitioning to various care settings.
5. Provide leadership for collaborative, evidence-based revision of diagnoses and plans of care designed to improve patient outcomes.
6. Determine when and how evidence based guidelines, policies, procedures and plans of care need to be tailored to the individual patient.
7. Provide consultation to staff nurses, medical staff and interdisciplinary colleagues with goals of expanding knowledge base of colleagues, improving patient outcomes, and strengthening healthcare systems.
8. Analyze selected CNS competencies and CNS practice models related to the care of the Pediatric patient.
9. Examine outcomes of CNS practice based on recent research findings.

TOPICS LIST

1. Child Health Status in United States
2. Health Perception and Health Management Patters
3. Breastfeeding and Nutrition
4. Immunizations
5. Activities, Sports, Sleep and Rest for Children and Adolescents
6. Cognitive-Perceptual Patterns
 - a. Autism
 - b. Attention-Deficit/Hyperactivity Disorder
 - c. Blindness
 - d. Deafness
7. Environmental Health Issues
8. Complementary Medicine

9. Eye Disorders

10. CNS Topics

- a. Novice to Expert: CNS Competencies
- b. Spheres of Influence: Defining the Impact of the CNS
- c. Clinical Judgment
- d. CNS as Facilitator of Learning
- e. Advocacy and Moral Agency
- f. Direct and Indirect Care Practices
- g. CNS and Holistic Perspectives of Nursing
- h. Evolving Information Technologies
- i. Current Issues and Future Trends

ASSIGNMENTS & POINT VALUES

In-Class written discussion as assigned 20%

(10 classes x 2 points each)

Disease process presentation	25%
CNS Role Topic presentation	25%
Case Study Presentations	<u>30%</u>
TOTAL	100%

GRADING CRITERIA:

A = 90-100%

B = 80-89%

C = 70-79%

D = 60-69%

F < 60%

In order to pass NURS 255, the student must achieve a minimum grade of 70% ('C').

ASSIGNMENTS

In-class written assignments

Due date: Variable.

Guidelines: The instructor will pose a question and you will write a short (1-2 paragraph) answer to the question. This question may be posed at beginning, middle, or end of class. If you fail to turn in a paper, you lose two points. There is no makeup.

Disease Process Presentation

Due Dates: Disease Process Presentation TBA

1. On or before the first day of class, group membership, specific topics, and due dates will be decided.
2. For each assignment, the topic is to be presented orally to the class. Innovation in teaching method is encouraged. Presentation should be 15-30 minutes; you will be stopped at 30 minutes.
3. Assignment Rubrics will be provided on first day of class. Read and follow them.
4. Requests will be taken for presentation date; however, everyone is expected to be ready to present by posted due date. If you are not able to present when called on, you will lose 20% of available points for your assignment. If a group member(s) is absent, the remaining group members are expected to present the topic
5. Absent group members will be given a makeup assignment, but will only be able to makeup a maximum of 80% of the points available.

CNS Role Topic Presentation

1. On or before the first day of class, group membership, specific topics, and due dates will be decided.
2. For each assignment, the topic is to be presented orally to the class. Innovation in teaching method is encouraged,. Presentation should be 15-30 minutes; you will be stopped at 30 minutes.
3. Assignment Rubric will be provided on first day of class. Read and follow them.

4. Requests will be taken for presentation date; however, everyone is expected to be ready to present by posted due date. If you are not able to present when called on, you will lose 20% of available points for your assignment. If a group member(s) is absent, the remaining group members are expected to present the topic
5. Absent group members will be given a makeup assignment, but will only be able to makeup a maximum of 80% of the points available.

Case Study

Due Date: Variable.

1. Student is to choose a patient from his/her practice to use for this case study. NOTE: Use patient initials or fake name – do not violate patient privacy.
2. Case Study presentation is to include the following:
 - a. Clinical presentation: History, presentation, assessment, diagnosis/problem list..
 - b. CNS implications: Discuss the case in terms of at least one CNS intervention with patient, family, or other professional colleagues involved in the case.
 - c. Reflection: Retrospectively, what would you have done differently, and why?
3. Presentation should take approximately 30 minutes; at 40 minutes you will be cut off.

SYLLABUS SUBJECT TO CHANGE

This syllabus and schedule are subject to change in the event of extenuating circumstances. If you are absent from class, it is your responsibility to check on announcements made while you were absent. Check Blackboard Announcements page frequently.

FALL 2012 COURSE SCHEDULE

Week/ Date	Due	Topic	Reading Assignment Due Assignments Due
1		Syllabus Overview (Topics Course and Practicum) Child Health Status in the United States	Burns, Ch 1
2		Medical: Health Perception and Health Management Patterns	Burns, Ch 10, 11, 12

Week/ /Date	Due	Topic	Reading Assignment Due Assignments Due
		Breast Feeding and Nutrition CNS Role: Novice to Expert: CNS Competencies	McKinley, Ch 2
3		Medical: Immunizations Activities, Sports, Sleep & Rest CNS Role: Spheres of Influence – Defining Impact of the CNS	TBA Burns, Ch 5 McKinley, Ch 4
4		Medical: Autism Hyperactivity/Attention-Deficit CNS Role: Clinical Judgement Facilitator of Learning	Burns Ch 6 McKinley Ch 5 McKinley Ch 7
5		Medical: Blindness, Deafness CNS Role: Advocacy & Moral Agency Direct and Indirect Patient Care I Practices	Burns Ch 6 McKinley Ch 10 Hamric, Ch. 19
6		Medical: Environmental Health Issues CNS Role: Evolving Information Technologies	Burns Ch 7 McKinley Ch 25
7		Medical: Complementary Medicine (may take up to one hour if	Burns, Ch 8, McKinley Ch 15 , Hamric, Ch 22,

Week/ /Date	Due	Topic	Reading Assignment Due Assignments Due
		desired) CNS Role: Current Issues and Future Trends (may take up to one hour if desired)	
8		Case Studies Presentations	
9		Case Studies Presentations	
10		Case Studies Presentations	
11		Case Studies Presentations	
12		Case Studies Presentations	
13		Case Studies Presentations	
14		Case Studies Presentations	
15		Case Studies Presentations	
16		Case Studies Presentations	
17		Case Studies Presentations	
18		CNS licensure process/paperwork	
No Final Exam		Faculty Consultation Days	

UNIVERSITY POLICIES

STUDENTS WITH DISABILITIES:

Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in the Henry Madden Library, Room 1202 (278-2811).

HONOR CODE:

"Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities." You should:

- a) understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration)
- b) neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading.
- c) take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action.

Instructors may require students to sign a statement at the end of all exams and assignments that "I have done my own work and have neither given nor received unauthorized assistance on this work." If you are going to use this statement, include it here.

CHEATING AND PLAGIARISM:

"Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the Class Schedule (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations).

COMPUTERS:

"At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the

workstations and software, which may vary by academic major, are updated periodically and are available from Information Technology Services (<http://www.csufresno.edu/ITS/>) or the University Bookstore. In the curriculum and class assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources."

DISRUPTIVE CLASSROOM BEHAVIOR:

"The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class."

COPYRIGHT POLICY:

Copyright laws and fair use policies protect the rights of those who have produced the material. The copy in this course has been provided for private study, scholarship, or research. Other uses may require permission from the copyright holder. The user of this work is responsible for adhering to copyright law of the U.S. (Title 17, U.S. Code). To help you familiarize yourself with copyright and fair use policies, the University encourages you to visit its Copyright Web Page (<http://csufresno.edu/library/information/copyright/>).

Technology Innovations for Learning & Teaching (TILT) course web sites contain material protected by copyrights held by the instructor, other individuals or institutions. Such material is used for educational purposes in accord with copyright law and/or with permission given by the owners of the original material. You may download one copy of the materials on any single computer for non-commercial, personal, or educational purposes only, provided that you (1) do not modify it, (2) use it only for the duration of this course, and (3) include both this notice and any copyright notice originally included with the material. Beyond this use, no material from the course web site may be copied, reproduced, re-published, uploaded, posted, transmitted, or distributed in any way without the permission of the original copyright holder. The instructor assumes no responsibility for individuals who improperly use copyrighted material placed on the web site.

Blackboard Assistance:

For help with Blackboard contact Technology Innovations for Learning and Teaching at 278-7373 or send an email to tiltsupport@csufresno.edu.

NEW GRADUATE COURSE REQUEST

GRADNEW.ITP (on Informed Filler)

Return original to:

Division of Graduate Studies
Harold H. Haak Administrative Center
4th Floor, Henry Madden Library
Mail Stop ML51

Graduate Program: Pediatric CNS/Nurse Educator
Department: Nursing
Contact Person: Cricket Barakzai
Phone: 82430
E-mail: maryb
Catalog pg. # 352

Use this form if your course is: (please select the box below that best describes your course)

- (a) new (never has been taught before)
- (b) conversion (break-out of a "topics" course as a new course)
- (c) significant change to an existing course
- (d) other _____

NOTE: If the changes you make on this form are different from what you submitted on your mock-ups to catalog, then you **must** revise your mock-ups and resubmit them to the catalog office.

If you wish to delete or make minor revisions to an existing graduate course, use the "Graduate Course Change or Deletion" form (GRADCHG.ITP on Informed Filler).

1. NEW COURSE:

Prefix/ Subject NURS Catalog Number 256 Long Course Title Pediatric Clinical Nurse Specialist Units Max/Total 5
Peds CNS Pract 2 Practicum Letter
Short Title (16 spaces maximum) for Printing _____ Grading Basis (Letter, CR/NC, RP, Mixed)
Course Classification (C/S#) S-36

Note: If the proposed course has been offered previously as a topics course or is the expansion of an existing course, complete the following for the previous course:

Prefix/ Subject NURS Catalog Number 288T Long Course Title Pediatric Clinical Nurse Specialist Units Max/Total 5
Practicum

Catalog Description of New Course: (40 words only, excluding prerequisite, lecture-lab hours)

Prerequisites: NURS 237 & NURS 238. Co-requisite: NURS 255. Supervised clinical practice with emphasis on complex and multi-system disease processes in the pediatric patient population in a variety of healthcare systems. Clinical Nurse Specialist roles and competencies, as defined by professional organizations, are utilized in the planning of care. (one hour clinical conference per week.) (255 direct patient care clinical hours)

2. NEW COURSE QUESTIONS:

(Each item **must** be addressed; attach additional sheet(s) as needed.)

A. How frequently is the new course expected to be offered? annually

B. What is the expected enrollment? 15

C. What is/are the mode(s) of course delivery (e.g., lecture, seminar, supervision, distance learning)? Please see the attached "Definitions of Graduate Level Instruction in the CSU."

Supervision

D. Identify all new resources (special facilities, library resources, technical assistance, etc.) needed to institute the course.

none

E. Is this course required or elective? required

F. Is there another course(s) covering similar subject matter:

• within your department? No Yes (if yes, complete section 4)

• at California State University, Fresno? No Yes (if yes, complete section 4)

G. Has this course been previously offered as a topics course? Yes No
If yes, how many times? once

H. Justification for New Course: (Please attach an explanation detailing the need for this new course.)

3. Please attach a course outline/syllabus that:

• Follows the guidelines stated in the "Policy on Course Syllabi and Grading" (June 1997) as published in the Academic Policy Manual (pg. 241-1, 241-2, 241-3).

• Illustrates how the course meets the criteria described in "Definitions of Graduate Level Instruction in the CSU" (see attached).

NOTE: Proposed Topics (T) courses should include a sample course outline/syllabus that follows the above guidelines and includes criteria by which the department will select future topics courses.

4. CONSULTING SIGNATURES (if required)

In an effort to avoid course duplication and misunderstandings, signatures must be obtained from those departments potentially affected by proposed changes.

I have read the new graduate course proposal and support the offering of this course.

Yes No

If no, please explain your concern(s):

Department Chair (of department being consulted)

Department

Department

Department Chair (typed name)

Department Chair (typed name)

Department Chair Signature

Department Chair Signature

Date

Date

5. REQUIRED SCHOOL SIGNATURES (verifies proposal has been approved)

Graduate Program Coordinator

Ndidi Griffin

Typed Name

Signature

Ndidi Griffin

Date

8/21/12

Department Chair

Mary D. Barakzai

Typed Name

Signature

Mary D. Barakzai

Date

8/21/12

School Curriculum (or Credential) Committee Chair (if applicable)

Helen Miltiades

Typed Name

Signature

Date

School Dean

Andrew Hoff

Typed Name

Signature

Date

- For committee use only -

**UNIVERSITY GRADUATE COMMITTEE/GRADUATE CURRICULUM SUBCOMMITTEE
REVIEW RECOMMENDATION:**

Request Approved

Request Denied

Request Deferred

Date of Action

Explanation:

Recommendation approved by:

Dean, Division of Graduate Studies/or designee

Sharon Brown-Welty

Typed Name

Signature

Date

Provost/Vice President for Academic Affairs/or designee

William Covino

Typed Name

Signature

Date

Attachment

Rev. 12/11

DEFINITIONS OF GRADUATE LEVEL INSTRUCTION IN THE CSU

A. The Graduate Course

1. It is assumed that students who enroll in graduate courses possess:
 - a. Maturity, responsibility, and scholarly integrity appropriate to study beyond the baccalaureate level.
 - b. A broad base of knowledge, usually represented by the possession of the bachelor's degree.
 - c. Competence in the specified field, usually represented by a substantial body of upper-division study in the field or in a closely related field.
 - d. A command of basic techniques and skills essential for independent, self-directed study in the field.
2. The graduate course deals with more complex ideas, materials, techniques or problems than the undergraduate course, and demands searching and exhaustive analysis.
3. The graduate course requires:
 - a. The identification and investigation of theory or principle.
 - b. The application of theory to new ideas, problems, and materials.
 - c. Extensive use of bibliographic and other resource materials with emphasis on primary sources of data.
 - d. Demonstration of competence in the scholarly presentation of the results of independent study.
4. Satisfactory completion of a graduate course requires more creative thinking than an upper-division course.
5. Performance expectations for graduate student enrolled in undergraduate-level courses normally are such that students complete at least one additional assignment. The quality of their written and oral performance in the course normally would be at least one grade point higher than that of an undergraduate. Performance expectations for undergraduate students enrolled in graduate-level courses are such that where campus policy permits undergraduate enrollment in a graduate course, the quality of the written and oral performance of undergraduates in the course normally would be at least half a grade point higher than that of an undergraduate enrolled in an undergraduate course.

B. Lecture-Discussion

The lecture-discussion course conforms to the criteria for graduate courses in general, and

1. Is an organized course with regularized content.
2. Is a combination of lectures and group discussion, based on specialized studies and research.
3. Involves consideration of a series of vital problems, reviews trends, examines different points of view, and interprets issues.
4. Involves problem analysis, research, and high level participation in discussion.
5. Involves the use of a wide variety of material and resources which provide a range and depth beyond that obtainable through a single textbook, although the use of a basic textbook may be appropriate in some lecture-discussion courses.
6. Provides an opportunity for synthesis and analysis through scholarly writing and through course examination that go beyond simple recall of fact.

C. Seminar

The seminar conforms to the criteria for graduate courses in general, and

1. Is organized around a series of related problems significant to the discipline.
2. May have a focus which varies from semester to semester within the framework of the general objectives.
3. Limits the lecture, when it does occur, to setting the stage and clarifying issues.
4. Requires that students assume primary responsibility for an investigation that will contribute to the objectives of the seminar and that they report, interpret, and defend their findings orally as well as in writing.
5. Within the framework of general goals, may allow student participation in course planning and in course evaluation.
6. Has class meetings primarily to develop, share, and critically examine independent investigations by members of the group. Time devoted to individual or small-group conferences under the direction of the professor may on occasion replace general class meetings.

D. Laboratory

Laboratory coursework conforms to the criteria for graduate courses in general and focuses on data gathering and analysis, with an emphasis on research and investigation rather than on laboratory techniques. Its chief distinguishing characteristic is the use of specialized facilities and relatively independent investigation.

E. Field Work and Clinical Practice

Field work and clinical practice require that

1. The students have a high level of theoretical competence and a mastery of the basic skills necessary to perform professional duties with a minimum of direction.
2. The selection of experiences provides opportunity for the student to
 - a. Bring to bear and apply a high level of theoretical knowledge.
 - b. Exercise judgment of a high order.
 - c. Assume responsibility for determining procedures as well as for implementing them.
 - d. Report the experience to a supervising instructor in such a way as to point out its significance, to explain the rationale behind his/her major decisions, and to evaluate their adequacy.

F. Graduate Independent Study

At the graduate level independent study is based upon the assumptions set forth in part in the section above entitled, "The Graduate Course." Furthermore, such independent study

1. Has a specific objective related to the student's educational goals and to a graduate program.
2. Is precisely defined as a result of joint planning by the professor and the student.
3. Required periodic and final demonstration of competence in scholarly presentation of the result of the independent study.

Source: Office of the Chancellor, California State University

Justification for NURS 256 as a Required Graduate Course

In 2008, the American Nurses Credentialing Center (ANCC) retired its generalist Clinical Nurse Specialist national certifying examination and instituted population-focused tests. Because our courses did not have a population focus, our graduates were not eligible for certification, severely constraining their employment opportunities. The ANCC requires that the population focus be clearly stated in the course title and that 2 didactic courses of 3 units each be provided, along with 2 clinical courses providing a total of 500 direct patient care hours, each with the population focus in the title as well. Therefore, the Department of Nursing has restructured the CNS courses with either an adult-gero focus or a pediatric focus. This course will replace the previous NURS 251 (Practicum in Clinical Specialization).

**California State University, Fresno
Department of Nursing**

Course Name: Pediatric Clinical Nurse Specialist Practicum

Course Number: NURS 256

Units: 5 Units

Placement in Curriculum: Third Semester Graduate Program

Prerequisite: NURS 237 & NURS 238

Co-requisite: NURS 255

Faculty: TBA

Office Hours:

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COURSE DESCRIPTION: Prerequisites: NURS 237 & NURS 238. Co-requisite: NURS 255. Supervised clinical practice with emphasis on complex and multi-system disease processes in the pediatric patient population in a variety of healthcare systems. Clinical Nurse Specialist roles and competencies, as defined by professional organizations, are utilized in the planning of care. (one hour clinical conference per week.) (255 direct patient care clinical hours)

COURSE OBJECTIVES: The student will work under the guidance of a preceptor to incorporate the following course objectives into the practicum experience. Upon completion of this course the student will be able to meet objectives as outlined in each of five major CNS focus areas.

Clinical:

1. Demonstrate knowledge of assessment, evaluation, and nursing management of a variety of disease processes in the Pediatrics population.
2. Provides expert patient assessment and formulates nursing diagnosis through such means as observation, inspection, palpation, auscultation, review of available records, and conducting interviews.
3. Critically analyze, interpret and use appropriate knowledge, research and theories to meet the health care needs of diverse urban and rural client populations.
4. Develop competence and accountability in an advanced practice nursing role.

Education:

1. Assist with and promotes staff development through a) mentoring of individual staff and (b) provision of formal classes within the student's clinical setting.
2. Serve as a preceptor to nursing students, new RN graduates and RNs reentering the workforce.
3. Provide patient education to individuals, families, or groups based on knowledge and application of teaching methods relevant to cultural, gender, age, and socioeconomic characteristics of learners.

Research:

1. Use clinical inquiry and research in an advanced specialty area of practice.
2. Demonstrate ability to:
 - a. Identify and locate research articles pertinent to an area of practice.
 - b. Critically read and analyze a research article.
 - c. Determine appropriateness of incorporation of research findings into clinical practice.
3. Stay abreast of current literature in the specialty area of practice.
4. Initiate research into topics that directly impact nursing care and applies measurement and evaluation methodologies to assess outcomes.

Consultation:

1. Provide clinical expertise and makes recommendations to physicians, other health care providers, patients, and health care organizations.
2. Review standards of practice to determine appropriateness and to reflect current nursing clinical practice.

Leadership:

1. Use theory/research as a foundation for clinical leadership and CNS research based practice.
2. Participate in the professional development of self, others, and the nursing profession.
3. Belong to and participates in professional organizations.
4. Serve as a change agent in health care settings by developing health care standards, assisting in the implementation of standards, facilitating goal setting and achievements, and evaluating outcomes.

CLASS DATES & TIMES:

Students will meet as designated by assigned clinical faculty.

STUDENT RESPONSIBILITIES FOR CLINICAL PRACTICUM:

- 1) Students are responsible for arranging preceptors, with faculty assistance as needed.
- 2) Clinical preceptors must be Master's prepared Clinical Nurse Specialists. Any exceptions must be discussed with clinical faculty/lead instructor.
- 3) Hospitals or health care facilities in which you will be working must have a contract with CSUF. Carol Rayner, Nursing Office, can assist you with this.
- 4) Preceptor information sheet and preceptor CV must be submitted to clinical faculty no later than **TBA**
- 5) Written personal objectives are to be submitted to clinical faculty by **TBA**
- 6) Students may not count paid time related to a job as clinical hours for this class.

TEACHING METHODS:

This class depends heavily on student-directed activities designed and planned to meet course objectives, under the direction of clinical faculty and preceptor. Student success will be measured by achievement of objectives, feedback from preceptor(s), and faculty assessment of student journals and written papers.

ATTENDANCE:

It is expected that students will attend any scheduled meetings with clinical faculty. Additionally, students are expected to attend all scheduled clinical activities. Students are expected to be dressed appropriately for the activity, and arrive at all activities on time.

TEXTBOOKS:

No specific texts required for this course. It is expected that students will have access to CSUF email, access to and ability to use Blackboard learning system, and access to the Internet. It is also expected that the student have access to and ability to use Madden library search engines.

ASSIGNMENTS:

Personal Goals	5 points
Paperwork (Preceptor information Sheet, Health Clearance, Copy of RN license)	5 points
Mid-Point Clinical Log of Hours	10 points
Final Clinical Log of Hours	30 points
Completed Preceptor Evaluation	10 points
Final Portfolio	30 points
Participation in meetings with clinical faculty and preceptors	10 points
TOTAL	100 points

Completion of 255 clinical hours

Pass or Fail

Completion of all items on this list is required to pass the course. Student may not begin clinical hours until Personal Goals and Preceptor Information Sheet are submitted. Failure to submit the final clinical log of hours, the final portfolio, the preceptor evaluation sheet, or to complete 162 hours will result in failure of course.

GRADING CRITERIA:

A = 90-100%

B = 80-89%

C = 70-79%

D = 60-69%

E = <60%

SUBJECT TO CHANGE STATEMENT:

This syllabus and schedule are subject to change in the event of extenuating circumstances. If you are absent from class, it is your responsibility to check on announcements made while you were absent.

GUIDELINES FOR CLINICAL JOURNAL

Due Date:

Mid-point journal due: **TBA** (may email to Keitha, or place in mailbox in nursing office)

Final journal due in clinical portfolio: **TBA**

Purpose of Clinical Journal:

1. To assist student, preceptor, and faculty in planning, implementing, and evaluating clinical experiences.
2. To assist student, preceptor, and faculty in assessing progress toward meeting both class and individual goals in NURS 255.

Format for Clinical Journal:

1. A template for clinical journals is located on Blackboard.
2. Final journal should be one contiguous form, with most recent activities at top of table. If you have more than one clinical experience within a week, make an entry for each experience in the journal.
3. Journal includes:
 - a. Date and hours for each day's experience
 - b. Preceptor or mentor name (A preceptor is a Master's prepared CNS preceptor; a mentor is a person with whom you work with for specific experiences – perhaps a case manager, a department manager, or another professional related to your objectives. You will have one preceptor; you may work with numerous mentors. Your preceptor should approve clinical hours completed with mentors.
 - c. Daily hours/Cumulative hours completed
 - d. Brief narrative of experiences
 - e. Identify both course objectives and personal objectives addressed in this activity. By the end of class it is expected that you will have completed

activities demonstrating experience(s) within each course and personal objective.

NURS 256 PORTFOLIO

Due Date: TBA

The following guidelines apply to your semester portfolio:

1. Portfolios are to be submitted in paper format, in a 3-ring binder. Binder must include:
 - a. A front page on the binder itself, identifying:
 - i. Student name
 - ii. Course names for both lecture and practicum
 - iii. Semester
 - b. Table of Contents
 - c. Individual Tabs identifying each binder entry
 - d. Course Objectives
 - e. Personal Objectives
 - f. All written or printed assignments: written papers, PowerPoint printouts, case studies, etc. from both courses
 - g. Any documents, policies, procedures, or educational handouts to which you had significant input in the course of your clinical hours. Please be aware of personal privacy – you may identify others by title, but not by name.
 - h. Final copy of your journal. Your journal must include documentation of hours in each of the five CNS competencies emphasized in this course: clinical practice, research, collaboration, education, and leadership. Your journal should reflect completion of both the syllabus goals for NURS 256, as well as your personal goals.
 - i. Your preceptor information sheet and your preceptor evaluation
2. This is a summation of all of your activities from the semester, for both the Lecture and the Practicum NURS 255 & 256 classes. Each portfolio will be unique, reflecting your goals and experiences.
3. You may include references to professional articles or web-sites you used throughout the semester, but do not include the articles or printouts from websites.

The portfolio is to be submitted to your clinical faculty no later than TBA Points for the journal are given in the Practicum course. **While you do not receive points for this binder in the Topics Course, failure to submit it will result in failure in both Topics and Practicum classes.**

ASSIGNMENT DUE DATES

Assignment	Description	Due	Point Value
Individual Objectives	Identify personal objectives and specific activities (goals) you will pursue with your preceptor. These goals should reflect the objectives of this class.	TBA	10
Required Paperwork	Preceptor information sheet (available on BB) and preceptor CV Health clearance form Copy of RN license	TBA	10
Individual meetings	Meetings as confirmed with clinical faculty, preceptors, and site visits	TBA	10
Clinical Journals	Clinical Journals (Log of Hours) Mid-Point:	TBA	10
	Final Log (in Portfolio)		30
Preceptor Evaluation	Form available on Blackboard. Submit in Portfolio	TBA	20
Final Portfolio	See description in syllabus.	TBA	30
Clinical Hours	Complete 162 hours of approved practicum experience .	TBA	Pass or Fail

UNIVERSITY POLICIES

For information on the University's policy regarding cheating and plagiarism, refer to the Class Schedule (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations). You may also access information on these policies at the following website:

http://www.csufresno.edu/academics/policies_forms/instruction/RequiredSyllabusPolicyStatements.htm

Students with Disabilities: Upon identifying themselves to the instructor and the university, students with disabilities will receive reasonable accommodation for learning and evaluation. For more information, contact Services to Students with Disabilities in the Henry Madden Library, Room 1202 (278-2811).

Honor Code: "Members of the CSU Fresno academic community adhere to principles of academic integrity and mutual respect while engaged in university work and related activities." You should:

- a) understand or seek clarification about expectations for academic integrity in this course (including no cheating, plagiarism and inappropriate collaboration)
- b) neither give nor receive unauthorized aid on examinations or other course work that is used by the instructor as the basis of grading.
- c) take responsibility to monitor academic dishonesty in any form and to report it to the instructor or other appropriate official for action.

Cheating and Plagiarism: "Cheating is the actual or attempted practice of fraudulent or deceptive acts for the purpose of improving one's grade or obtaining course credit; such acts also include assisting another student to do so. Typically, such acts occur in relation to examinations. However, it is the intent of this definition that the term 'cheating' not be limited to examination situations only, but that it include any and all actions by a student that are intended to gain an unearned academic advantage by fraudulent or deceptive means. Plagiarism is a specific form of cheating which consists of the misuse of the published and/or unpublished works of others by misrepresenting the material (i.e., their intellectual property) so used as one's own work." Penalties for cheating and plagiarism range from a 0 or F on a particular assignment, through an F for the course, to expulsion from the university. For more information on the University's policy regarding cheating and plagiarism, refer to the Class Schedule (Legal Notices on Cheating and Plagiarism) or the University Catalog (Policies and Regulations).

Computers: "At California State University, Fresno, computers and communications links to remote resources are recognized as being integral to the education and research experience. Every student is required to have his/her own computer or have other personal access to a workstation (including a modem and a printer) with all the recommended software. The minimum and recommended standards for the workstations and software, which may vary by academic major, are updated periodically and are available from Information Technology Services (<http://www.csufresno.edu/ITS/>) or the University Bookstore. In the curriculum and class

assignments, students are presumed to have 24-hour access to a computer workstation and the necessary communication links to the University's information resources."

Disruptive Classroom Behavior: "The classroom is a special environment in which students and faculty come together to promote learning and growth. It is essential to this learning environment that respect for the rights of others seeking to learn, respect for the professionalism of the instructor, and the general goals of academic freedom are maintained. ... Differences of viewpoint or concerns should be expressed in terms which are supportive of the learning process, creating an environment in which students and faculty may learn to reason with clarity and compassion, to share of themselves without losing their identities, and to develop and understanding of the community in which they live . . . Student conduct which disrupts the learning process shall not be tolerated and may lead to disciplinary action and/or removal from class."

Copyright policy: Copyright laws and fair use policies protect the rights of those who have produced the material. The copy in this course has been provided for private study, scholarship, or research. Other uses may require permission from the copyright holder. The user of this work is responsible for adhering to copyright law of the U.S. (Title 17, U.S. Code). To help you familiarize yourself with copyright and fair use policies, the University encourages you to visit its copyright web page:

<http://www.csufresno.edu/library/about/policies/docs/copyrtpolicyfull.pdf>

Digital Campus course web sites contain material protected by copyrights held by the instructor, other individuals or institutions. Such material is used for educational purposes in accord with copyright law and/or with permission given by the owners of the original material. You may download one copy of the materials on any single computer for non-commercial, personal, or educational purposes only, provided that you (1) do not modify it, (2) use it only for the duration of this course, and (3) include both this notice and any copyright notice originally included with the material. Beyond this use, no material from the course web site may be copied, reproduced, re-published, uploaded, posted, transmitted, or distributed in any way without the permission of the original copyright holder. The instructor assumes no responsibility for individuals who improperly use copyrighted material placed on the web site.

California State University, Fresno

Appendix C
CAS & MSN Application

CALIFORNIA STATE UNIVERSITY, FRESNO
DEPARTMENT OF NURSING

APPLICATION INFORMATION FOR
MASTER OF SCIENCE DEGREE IN NURSING
POST-MASTER'S CERTIFICATE
FALL 2013

GENERAL INFORMATION

The department offers a Commission on Collegiate Nursing Education (CCNE) accredited program (www.aacn.nche.edu), which leads to the Master of Science degree in Nursing (MSN). Presently, the department offers two Nurse Practitioner (NP) Tracks: Family Nurse (FNP) and Pediatric Nurse (PNP), and two Clinical Nurse Specialist/Nurse Educator options: Pediatric CNS/Nurse Educator and Pediatric Clinical Nurse Specialist/Nurse Educator. Students who have a master's degree in nursing may be eligible for the post-master's NP certificate. The post-master's certificate at California State University, Fresno consists of thirty-one (31) units. Applicants may receive credit toward the NP certificate for previous graduate courses. Typically, the main courses that are requested for credit are the advanced theories and advanced issues courses. In order to request a course waiver, the applicant must submit a copy of the course description, objectives, and assignments for review by the Graduate Coordinator. At that time, the course of study will be determined with input from the student and graduate curriculum committee. All applicants must complete a two-part application process: to the University Graduate Division and to the Department of Nursing. Note: The Department of Nursing will not process your application until you have applied to the University.

UNIVERSITY GRADUATE SCHOOL APPLICATION PROCESS

1. File application for graduate admission with the designated fee to the University by March 1, 2013. The application can be found at www.csumentor.edu/AdmissionApp/grad_apply.asp. For more information call (559) 278-4073.
2. File official transcripts from all post-baccalaureate schools; Graduate Admissions will verify a cumulative GPA of 2.50 on the last 60 units.
3. GRE scores are no longer required for admission to graduate programs in the Department of Nursing.
4. The Graduate Admissions Office will verify information and forward the file to the Department of Nursing.
5. If you are enrolled at CSUF as a post-baccalaureate student, you must submit a Change of Major form to the Graduate Studies Office in Thomas Administration before your application can be processed by the Department of Nursing.

DEPARTMENT OF NURSING APPLICATION PROCESS

File Department of Nursing Graduate Program Application by April 1, 2013. The application can be found in this document or at www.csufresno.edu/nursing/MSN.htm. To facilitate the admission process, you must **send copies** of the following:

- A. Department Application - See Page 3 - Be sure to sign where indicated.
- B. Official transcripts from all post-secondary schools. Transcripts must indicate:
 1. Baccalaureate Degree in Nursing from CCNE or NLN accredited school with cumulative GPA of 3.0.
 2. Completion of statistics, introductory research and health assessment courses.

3. Completion of GRE Have scores sent to the university and to the Department of Nursing
- C. Registered Nurse Licensure in California (requirement may be waived for international students).
- D. File three letters of recommendation (see guidelines).
- E. Complete the Department of Nursing's Graduate Program Written Essay (see Page 2).

All documents must be sent together in one package to be considered for admission to the Department.

Mail signed application and copies of the above material to:

Dr. Ndidi Griffin, Graduate Coordinator
California State University, Fresno
Department of Nursing
2345 E. San Ramon Ave, M/S MH25,
Fresno, CA 93740-8031
ndidig@csufresno.edu

SELECTION

Candidates selected for admission will be notified by May 15, 2013. The new student orientation will be scheduled the week prior to the fall semester, and selected candidates will be notified as to the date, time, and location of orientation.

EVALUATION OF PRIOR EDUCATION OR EXPERIENCE IN PRIMARY CARE

Students who are eligible for admission to graduate standing at California State University, Fresno may have prior educational preparation evaluated for waiver or substitution of required courses. In the case of a student requesting a waiver of graduate coursework, an evaluation of prior educational experience will be performed on an individual basis. Professional experience in primary care may also be evaluated on an individual basis for placement in the clinical courses and development of a curriculum to meet program requirements.

Components of this evaluation include, but are not limited to, a personal interview and review of transcripts, course material, and personal records. Based on this evaluation, an individualized plan for placement and progression in the graduate program will be developed, including the incorporation of alternate assignments.

GRADUATE PROGRAM WRITTEN ESSAY

The written essay is an important element for evaluation of your application and for admission into the Department of Nursing's Graduate Program. This essay will provide an opportunity for the selection committee to assess your writing ability and professional strengths and to evaluate your chances for success in advanced practice graduate work. This written essay is a major component of the selection process, and you need to give it thoughtful consideration. Instructions are as follows:

1. Develop a scholarly essay in which you include the following elements:
 - A. Introduction
 - B. Discussion of concepts
 1. Your theoretical framework for professional practice
 2. Your view of the role of nursing in advanced practice settings
 3. Your clinical experience in nursing
 4. Your non-nursing experiences relevant to your professional growth
 5. Your goals for graduate education
 - C. Conclusion
 - D. References
2. The document must be a 3-5 page typed essay, double-spaced, with 12-point type and one-inch margins.
3. Attach the essay to the signed Department of Nursing's Graduate Program Application form (see Page 3), verifying that the essay is your own work.

FINANCIAL AID

Contact the Financial Aid Office at (559) 278-2182 (www.csufresno.edu/catoffice/current/admssnsfees) for information about scholarships and loans. Federal traineeships are awarded to eligible students through the Department of Nursing (www.csufresno.edu/nursing).

GRADUATE ORIENTATION

An orientation session is offered during the second week in August to orient students to important aspects of the program and to meet other students and faculty. Students will be notified as to date, time, and location.

FOR FURTHER INFORMATION, Please contact:

Dr. Ndidi Griffin, Graduate Coordinator
Department of Nursing
California State University, Fresno
2345 E. San Ramon Avenue M/S MH25
Fresno, CA 93740-8031
Telephone: (559) 278-6697
Email: ndidig@csufresno.edu

The University General Catalog is available at www.csufresno.edu/catalog/
The Schedule of Courses is available at www.csufresno.edu/scheduling/

CALIFORNIA STATE UNIVERSITY, FRESNO
Department of Nursing
Graduate Program Application

Last Name	First	M.I.	Maiden	Soc. Sec.#
Street		City	State	Zip
Home Phone	Work Phone	Cell Phone		

E-Mail Address _____

Application for: Master's Degree _____ Post-Master's _____

Check option desired: FNP _____ PNP _____ Adult-gero CNS/Nurse Educator _____
 Pediatric CNS/ Nurse Educator _____

Do you expect to attend: Part-time _____ or Full-time _____

Indicate approximate date for completion of the following courses:

Nursing Research (NURS145) _____ Physical Assessment (NURS136) _____ Statistics _____

Colleges & Universities attended or currently enrolled. One official transcript must be submitted from each college or university attended except work in progress for the spring semester.* Attach to this application transcripts in sealed envelopes from institutions.							
All Institutions		Enrolled		# of Units Completed	Degree		
		From	To				
School Name	Location						

*Official transcripts showing grades for the in-progress spring term are due in the appropriate offices by June 1.

Previous degree dates: BS Nursing _____ MS Nursing _____ Other, specify _____

Previous experience: List your nursing experience starting with the most recent (attach additional sheet if necessary).

<u>Institution</u>	<u>Location</u>	<u>Position</u>	<u>Date</u>

I verify that the above information is accurate and that the Graduate Program Written Essay is my own work:

Signature _____

Date

Return this application with the Graduate Program Written Essay by April 1, 2013 to:

Dr. Ndidi Griffin, Graduate Coordinator
Department of Nursing
2345 E. San Ramon Avenue, M/S MH25
Fresno, CA 93740-8031

CALIFORNIA STATE UNIVERSITY, FRESNO
Master of Science Degree in Nursing
Nurse Practitioner Options

PROGRAM OF STUDY A minimum of 40 units is required for the degree

CORE COURSES ~ 13 UNITS

Course	Units
NURS 211~Advanced Pharmacology	3
NURS 212~Advanced Pathophysiology	2
NURS 221~Theoretical Foundations	2
NURS 223~Advanced Research Methodology	3
NURS 225~Advanced Nursing Issues	3
	13

ROLE SPECIALIZATION ~ 21 UNITS

Family Nurse Practitioner (FNP)	Units	Pediatric Nurse Practitioner (PNP)	Units
NURS 210~Health Assessment in Advanced Nursing Practice	3	NURS 210~Health Assessment in Advanced Nursing Practice	3
NURS 215~Obstetrics & Gynecology in Primary Care	3	NURS 215~Obstetrics & Gynecology in Primary Care	3
NURS 265~Family NP Role in Primary Prevention	2	NURS 262~Pediatric NP Role in Primary Prevention	2
NURS 264~Primary Practicum Family NP	4	NURS 263~Primary Practicum Pediatric NP	4
NURS 266~Family NP Role in Secondary Prevention	2	NURS 268~Pediatric NP Role in Secondary Prevention	2
NURS 267~Practicum in Secondary Prevention, Family NP	4	NURS 269~Practicum in Secondary Prevention, Pediatric NP	4
NURS 277~Family NP Role in Tertiary Prevention	2	NURS 279~Pediatric NP Role in Tertiary Prevention	2
NURS 278~Practicum in Tertiary Prevention, Family NP	4	NURS 280~Practicum in Tertiary Prevention, Pediatric NP	4
	24		24

THESIS, PROJECT, OR COMP EXAM ~ 3 UNITS

Students need to select one option:

- | | | |
|--|---|----------|
| 1. NURS 299 Thesis
OR | 3 | Units |
| 2. NURS 298 Project
OR | 3 | Units |
| 3. Comprehensive Exam (0 units - 3 cognate units required)
Cognates | 3 | Units of |

Total Program Units

40

CALIFORNIA STATE UNIVERSITY, FRESNO
Master of Science Degree in Nursing

Adult –Gero Clinical Nurse Specialist/Nurse Educator Option

PROGRAM OF STUDY A minimum of 44 units is required for the degree

CORE COURSES ~ 13 UNITS

Course	Units
NURS 211~Advanced Pharmacology	3
NURS 212~Advanced Pathophysiology	2
NURS 221~Theoretical Foundations	2
NURS 223~Advanced Research Methodology	3
NURS 225~Advanced Nursing Issues	3
	13

Pediatric Clinical Nurse Specialist/Nurse Educator Role Specialization ~ 28 UNITS

Course	Units
NURS 210 ~ Health Assessment in Advanced Nursing Practice	3
NURS 235 ~ Pediatric Fundamental Topics for the Clinical Nurse Specialist	3
NURS 236 ~ Practicum in Advanced Clinical Nursing for the Pediatric Clinical Nurse Specialist	5
NURS 253 ~ Advanced Topics for the Pediatric Clinical Nurse Specialist	3
NURS 254 ~ Adult-gero Clinical Nurse Specialist Practicum	5
NURS 240 ~ Curriculum Development in Nursing	3
NURS 241 ~ Instructional Methods in Nursing Education	3
NURS 242 ~ Evaluations Methods in Nursing Education	3
	28

THESIS, PROJECT, OR COMP EXAM ~ 3 UNITS

Students need to select one option:

- | | | |
|--|---|----------|
| 2. NURS 299 Thesis | 3 | Units |
| OR | | |
| 3. NURS 298 Project | 3 | Units |
| OR | | |
| 4. Comprehensive Exam (0 units - 3 cognate units required)
Cognates | 3 | Units of |

Total Program Units

44

CALIFORNIA STATE UNIVERSITY, FRESNO
Master of Science Degree in Nursing

Adult –Gero Clinical Nurse Specialist/Nurse Educator Option

PROGRAM OF STUDY A minimum of 44 units is required for the degree

CORE COURSES ~ 13 UNITS

Course	Units
NURS 211~Advanced Pharmacology	3
NURS 212~Advanced Pathophysiology	2
NURS 221~Theoretical Foundations	2
NURS 223~Advanced Research Methodology	3
NURS 225~Advanced Nursing Issues	3
	13

Pediatric Clinical Nurse Specialist/Nurse Educator Role Specialization ~ 28 UNITS

Course	Units
NURS 210 ~ Health Assessment in Advanced Nursing Practice	3
NURS 237. Fundamental Topics for the Pediatric Clinical Nurse Specialist	3
NURS 238. ~ Practicum in Advanced Clinical Nursing for the Pediatric Clinical Nurse Specialist	5
NURS 255. Advanced Topics for the Pediatric Clinical Nurse Specialist.	3
NURS 256. Pediatric Clinical Nurse Specialist Practicum	5
NURS 240 ~ Curriculum Development in Nursing	3
NURS 241 ~ Instructional Methods in Nursing Education	3
NURS 242 ~ Evaluations Methods in Nursing Education	3
	28

THESIS, PROJECT, OR COMP EXAM ~ 3 UNITS

Students need to select one option:

- | | | |
|--|---|----------|
| 3. NURS 299 Thesis | 3 | Units |
| OR | | |
| 4. NURS 298 Project | 3 | Units |
| OR | | |
| 5. Comprehensive Exam (0 units - 3 cognate units required)
Cognates | 3 | Units of |

Total Program Units

44

CALIFORNIA STATE UNIVERSITY, FRESNO
Department of Nursing

Course Descriptions for Graduate Core Courses

NURS 211 - Advanced Pharmacology - 3 Units Spring

Prerequisites: admission to the nursing graduate program.

Concepts include implementation of a therapeutic regimen utilizing pharmacologic agents/devices, management of common conditions with consideration for age, culture, ethnicity, and socioeconomic status. Incorporates pharmacokinetics, pharmacodynamics, physiologic/pathologic responses, and ethical/legal issues.

NURS 212 - Advanced Pathophysiology - 2 Units Fall

Prerequisites: admission to the graduate program in nursing or permission of instructor.

The relationship between normal physiology and pathological phenomena produced by altered states is analyzed. Physiologic responses to illness and treatment modalities across the life span are examined. Synthesis and application of current research regarding pathological changes are emphasized.

NURS 221 – Theories Foundations of Nursing Practice - 2 Units Fall

Prerequisites: admission to the graduate program in nursing.

Selected theories from nursing and related fields are examined and evaluated with emphasis on application in complex health care systems. The relationship between theory, research, and clinical practice is explored. (Formerly NURS 224)

NURS 223 - Advanced Research Methodology in Nursing - 3 Units Spring

Prerequisites: admission to the graduate program in nursing

In-depth study of research principles and techniques. Formulation of a comprehensive database, critical analysis of clinical issues, and application of research in the treatment regimen is incorporated.

NURS 225 - Advanced Nursing Issues: Health Care Policy, Ethics and Role Development - 3 Units Fall

Prerequisites: admission to the graduate program in nursing

The evolution of major issues relevant to advanced nursing practice is examined. Topics include: health care policy, organization, and financing; ethics; professional role development; and interdisciplinary communication and collaboration.

Total Core Units - 13

CALIFORNIA STATE UNIVERSITY, FRESNO
Department of Nursing

Course Descriptions for Family Nurse Practitioner Courses

NURS 210 – Health Assessment in Advanced Nursing Practice – 3 units Fall

Refinement of history taking, physical diagnosis, psychosocial, and developmental evaluation of multicultural clients and families. Includes differential diagnosis, clinical decision making, and client management across the life span. Pharmacology and laboratory techniques incorporated. Includes clinical performance component (2 lecture, 3 practicum hours).

NURS 215 ~ Obstetrics and Gynecology in Primary Care ~ 3 units (Spring)

Successful completion of NURS 210 or nurse practitioner certification. Introduction to basic obstetric and gynecologic content and skills used in primary care. Explores diagnosis and management of common obstetric and gynecologic conditions. Discusses early indications of serious obstetrical complications and the nurse practitioner role.

NURS 264 - Primary Practicum Family Nurse Practitioner – 4 units Spring

A practicum designed to prepare nurse practitioners to deliver health promotion and health maintenance services. Applications of individual, family, community, and nursing theories are addressed utilizing transcultural and intergenerational factors in interdisciplinary practice settings.

NURS 265 - Family Nurse Practitioner Role in Primary Prevention – 2 units Spring

Theoretical base for primary prevention: health maintenance, health promotion, health screening, health teaching, and anticipatory guidance for nurse practitioners. Case management techniques utilizing protocols/algorithms.

NURS 266 - Family Nurse Practitioner Role in Secondary Prevention – 2 units Fall

Theoretical base of secondary prevention in primary care settings. Assessment and management of acute self-limiting conditions. Use and development of algorithms/protocols for secondary prevention. Intensive pharmacology for nurse practitioners.

NURS 267 - Practicum in Secondary Prevention, Family Nurse Practitioner – 4 units Fall

Supervised clinical practice in a primary care setting with emphasis on secondary prevention for clients of all ages. Students work directly with preceptor and faculty member. Complete assessment and case management. (One hour clinical conference per week.)

NURS 277 - Family Nurse Practitioner Role in Tertiary Prevention – 2 units Spring

Theoretical base for tertiary prevention for families in primary care settings. Assessment and management of chronic conditions requiring reconstitution. Development of protocols/algorithms for tertiary prevention. Integration of knowledge related to primary, secondary, and tertiary prevention.

NURS 278 - Practicum in Tertiary Prevention, Family Nurse Practitioner – 4 units Spring

Supervised clinical practice in a primary care setting with emphasis on care of clients of all ages requiring tertiary prevention. Students work directly with a nurse practitioner and/or physician preceptor in a primary care setting. (One hour clinical conference per week.)

CALIFORNIA STATE UNIVERSITY, FRESNO
Department of Nursing

Course Descriptions for Pediatric Nurse Practitioner Courses

NURS 210 – Health Assessment in Advanced Nursing Practice – 3 units Fall

Refinement of history taking, physical diagnosis, psychosocial, and developmental evaluation of multicultural clients and families. Includes differential diagnosis, clinical decision making, and client management across the life span. Pharmacology and laboratory techniques incorporated. Includes clinical performance component (2 lecture, 3 practicum hours).

NURS 215 ~ Obstetrics and Gynecology in Primary Care ~ 3 units (Spring)

Successful completion of NURS 210 or nurse practitioner certification. Introduction to basic obstetric and gynecologic content and skills used in primary care. Explores diagnosis and management of common obstetric and gynecologic conditions. Discusses early indications of serious obstetrical complications and the nurse practitioner role.

NURS 262 - Pediatric Nurse Practitioner Role in Primary Prevention – 2 units Spring

Theoretic base for primary prevention, health maintenance, health promotion, health screening, health teaching, and anticipatory guidance for pediatric nurse practitioners with an emphasis on case management techniques using algorithms and standardized procedures.

NURS 263 - Primary Practicum Pediatric Nurse Practitioner – 4 units Spring

Prepares pediatric nurse practitioners to deliver promotion and health maintenance services. Addresses application of individual, family, community, and nursing theories using transcultural and intergenerational factors in interdisciplinary practice settings.

NURS 268 - Pediatric Nurse Practitioner Role in Secondary Prevention – 2 units Fall

Theoretical base of secondary prevention in pediatric primary care settings. Assessment and management of acute self-limiting conditions. Use and development of algorithms/protocols for secondary prevention. Intensive pharmacology for nurse practitioners.

NURS 269 - Practicum in Secondary Prevention, Pediatric Nurse Practitioner – 4 units Fall

Supervised clinical practice in a pediatric primary care setting with emphasis on secondary prevention. Students work directly with a preceptor and faculty member. Complete assessment and case management. (One hour clinical conference per week.)

NURS 279. Pediatric Nurse Practitioner Role in Tertiary Prevention – 2 units Spring

Theoretical base for tertiary prevention for children in primary care settings. Assessment and management of chronic conditions requiring reconstitution. Development of protocols/algorithms for tertiary prevention. Integration of knowledge related to primary, secondary, and tertiary prevention.

NURS 280. Practicum in Tertiary Prevention, Pediatric Nurse Practitioner – 4 units Spring

Supervised clinical practice in a primary care setting with emphasis on care of children requiring tertiary prevention. Students work directly with a nurse practitioner and/or physician preceptor in a primary care setting. (One hour clinical conference per week.)

CALIFORNIA STATE UNIVERSITY, FRESNO
Department of Nursing
Course Descriptions for Adult-gero CNS/Nurse Educator Graduate Courses

NURS 210 – Health Assessment in Advanced Nursing Practice – 3 units

Refinement of history taking, physical diagnosis, psychosocial, and developmental evaluation of multicultural clients and families. Includes differential diagnosis, clinical decision making, and client management across the life span. Pharmacology and laboratory techniques incorporated. Includes clinical performance component (2 lecture, 3 practicum hours). **F**

NURS 235. Adult-gero Fundamental Topics for the CNS ~3 units

NACNS competencies examined within adult/geriatric population. Focus is on direct care emphasizing opportunities and challenges related to the unique development, the life progression, and wellness and illness across the adult/geriatric lifespan continuum. (Formerly NURS 288T) **S**

NURS 236. Practicum: Advanced Clinical Nursing for the Adult-gero CNS ~ 5 units

Supervised clinical practice with emphasis on NACNS competencies applied to health promotion, maintenance, and restoration of adult/geriatric patients in a complex health care system. (Formerly NURS 288T) **S**

NURS 240 – Curriculum Development in Nursing – 3 units

Theories and models of curriculum development incorporating educational needs assessment and design. Students present educational program using instructional design methodology including: objectives, learning characteristics, teaching methods, learning resources, and evaluation methods. Teaching practicum required (45 hours with master teacher in local site). **F**

NURS 241 – Instructional Methods in Nursing Education – 3 units

Instructional methods for nurse educators. Focus on nursing and education theories, motivation, learning/teaching styles, designing measurable outcomes, reinforcement strategies, principles of evaluation, and effective feedback. Teaching practicum required (45 hours with master teacher in local site). **S**

NURS 242 – Evaluation and Testing in Nursing Education – 3 units

Evaluation methods in classroom and clinical settings. Students will examine alternative assessment strategies, design and write test items, analyze test results, and develop clinical evaluation strategies. Teaching practicum required (45 hours with master teacher in local site). **F**

NURS 253. Advanced Topics for the Adult-gero Clinical Nurse Specialist. ~ 3 units.

Prerequisites: NURS 235 & NURS 236. Co-requisites: NURS 254. This course will focus on advanced and complex health concerns in the adult-gero population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population. **F**

NURS 254. Adult-gero Clinical Nurse Specialist Practicum. ~ 5 units.

Prerequisites: NURS 235 & NURS 236. Co-requisite: NURS 253. Supervised clinical practice with emphasis on NACNS competencies applied to health promotion, maintenance, and restoration of adult-geriatric patients in a complex healthcare system. (one hour clinical conference per week) (255 direct patient care clinical hours) **F**

CALIFORNIA STATE UNIVERSITY, FRESNO
Department of Nursing

Course Descriptions for Pediatric CNS/Nurse Educator Graduate Courses

NURS 210 – Health Assessment in Advanced Nursing Practice – 3 units

Refinement of history taking, physical diagnosis, psychosocial, and developmental evaluation of multicultural clients and families. Includes differential diagnosis, clinical decision making, and client management across the life span. Pharmacology and laboratory techniques incorporated. Includes clinical performance component (2 lecture, 3 practicum hours). **F**

NURS 237. Fundamental Topics for the Pediatric Clinical Nurse Specialist ~ 3 units.

Prerequisites: NURS 210, NURS 211, NURS 221, NURS 225. Co-requisite: NURS 238. This course will focus on advanced and complex health concerns in the Pediatric population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population. **S**

NURS 238. Practicum in Advanced Clinical Nursing for the Pediatric Clinical Nurse Specialist. ~ 5 units. Prerequisites: NURS 210, NURS 221. Co-requisite: NURS 237.

Supervised clinical practice with emphasis on NANCS competencies applied to common problems in health promotion, maintenance, and restoration of pediatric patients in a complex healthcare system. (one-hour clinical conference per week) (255 direct patient care clinical hours) **S**

NURS 240 – Curriculum Development in Nursing – 3 units

Theories and models of curriculum development incorporating educational needs assessment and design. Students present educational program using instructional design methodology including: objectives, learning characteristics, teaching methods, learning resources, and evaluation methods. Teaching practicum required (45 hours with master teacher in local site). **F**

NURS 241 – Instructional Methods in Nursing Education – 3 units

Instructional methods for nurse educators. Focus on nursing and education theories, motivation, learning/teaching styles, designing measurable outcomes, reinforcement strategies, principles of evaluation, and effective feedback. Teaching practicum required (45 hours with master teacher in local site). **S**

NURS 242 – Evaluation and Testing in Nursing Education – 3 units

Evaluation methods in classroom and clinical settings. Students will examine alternative assessment strategies, design and write test items, analyze test results, and develop clinical evaluation strategies. Teaching practicum required (45 hours with master teacher in local site). **F**

NURS 255. Advanced Topics for the Pediatric Clinical Nurse Specialist. ~ 3 units.

Prerequisites: NURS 237 & NURS 238. Co-requisite: NURS 256. This course will focus on advanced and complex health concerns in the Pediatric population. The role of the CNS as defined by state and national organizations will be integrated within the study of health and illness in the target population. **F**

NURS 256. Pediatric Clinical Nurse Specialist Practicum. ~ 5 units Prerequisites: NURS 237

& NURS 238. Co-requisite: NURS 255. Supervised clinical practice with emphasis on complex and multi-system disease processes in the pediatric patient population in a variety of healthcare systems. Clinical Nurse Specialist roles and competencies, as defined by professional organizations, are utilized in the planning of care. (one hour clinical conference per week.) (255 direct patient care clinical hours) **F**

**California State University, Fresno
Department of Nursing**

**FAMILY NURSE PRACTITIONER
SAMPLE MSN PROGRAM**

Example: Full Time Schedule

YEAR 1		YEAR 2	
<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>FALL SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3	NURS 211-Advanced Pharmacology	3
NURS 212-Advanced Pathophysiology	2	NURS 215 OB-GYN in Primary Care	3
NURS 221-Theories Foundations of Nursing Practice	2	NURS 223-Advanced Research Methodology in Nursing	3
NURS 225-Adv. Nsg. Issues: Health Care Policy, Ethics & Role Dev	3	NURS 264-Primary Practicum Family Nurse Practitioner	4
Total	<u>10</u>	NURS 265-Family Nurse Practitioner Role in Primary Prevention	2
		Total	<u>15</u>

<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 266-Family NP Role in Secondary Prevention	2	NURS 277-Family Nurse Practitioner Role in Tertiary Prevention	2
NURS 267-Practicum in Secondary Prevention Family NP	4	NURS 278-Practicum in Tertiary Prevention, Family NP	4
Total	<u>6</u>	NURS 298/N299-Project/Thesis (exclude If taking Comp Exam)	3
		3 unit Cognate (Comp exam)	0-3
		Total	<u>9</u>

Example: Part Time Schedule

YEAR 1		YEAR 2	
<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>FALL SEMESTER</u>	<u>UNITS</u>
NURS 221-Theories Foundations of Nursing Practice	2	NURS 211-Advanced Pharmacology	3
NURS 225-Advanced Nursing. Issues: Health Care Policy, Ethics, & Role Development	3	NURS 223-Advanced Research Methodology in Nursing	3
Total	<u>5</u>	Total	<u>6</u>

<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3	NURS 215 OB-GYN in Primary Care	3
NURS 212-Advanced Pathophysiology	2	NURS 264-Primary Practicum Family Nurse Practitioner	4
Total	<u>5</u>	NURS 265-Family Nurse Practitioner Role in Primary Prevention	2
		Total	<u>9</u>

<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 266-Family NP Role in Secondary		NURS 277-Family Nurse Practitioner Role	

Prevention	2	in Tertiary Prevention	2
NURS 267-Practicum in Secondary Prevention, Family NP	<u>4</u>	NURS 278-Practicum in Tertiary Prevention, Family Nurse Practitioner	4
Total	6	NURS 298/299-Project/Thesis/Cognate	3
		Comp Exam-if not enrolled in NURS 298 or 299	<u>0</u>
			9

**California State University, Fresno
Department of Nursing**

**PEDIATRIC NURSE PRACTITIONER
SAMPLE MSN PROGRAM**

Example: Full Time Schedule

YEAR 1		YEAR 2	
<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3	NURS 211-Advanced Pharmacology	3
NURS 212-Advanced Pathophysiology	2	NURS 223-Advanced Research Methodology in Nursing	3
NURS 221-Theories Foundations of Nursing Practice	2	NURS 262-Pediatric Nurse Practitioner Role in Primary Prevention	2
NURS 225-Advanced Nursing Issues: Health Care Policy, Ethics & Role Development	3	NURS 263-Primary Practicum Pediatric Nurse Practitioner	4
Total	10	Total	15
NURS 268-Pediatric Nurse Practitioner Role in Secondary Prevention	2	NURS 279-Pediatric Nurse Practitioner Role in Tertiary Prevention	2
NURS 269-Practicum in Secondary Prevention, Pediatric NP	4	NURS 280-Practicum in Tertiary Prevention, Pediatric Nurse Practitioner	4
Total	6	NURS 298/299 -Project/Thesis (exclude if taking Comp Exam 3 unit Cognate (Comp exam)	3 0-3
		Total	9

Example: Part Time Schedule

YEAR 1		YEAR 2		YEAR 3	
<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>	<u>FALL SEMESTER</u>	<u>UNITS</u>
NURS 221-Theories Foundations of Nursing Practice	2	NURS 211-Advanced Pharmacology	3	NURS 268-Pediatric Nurse Practitioner Role in Secondary Prevention	2
NURS 225-Advanced Nursing Issues: Health Care Policy, Ethics, & Role Development	3	NURS 223-Advanced Research Methodology in Nursing	3	NURS 269-Practicum in Secondary	
Total	5	Total	6		
NURS 210-Health Assessment in Advanced Nursing Practice	3	NURS 215 OB-GYN in Primary Care	3		
NURS 212-Advanced Pathophysiology	2	NURS 262-Pediatric Nurse Practitioner Role in Primary Prevention	2		
Total	5	NURS 263-Primacy Practicum Pediatric Nurse Practitioner	4		
		Total	9		
		NURS 279-Pediatric Nurse Practitioner Role in Tertiary Prevention	2		
		NURS 280-Practicum in Tertiary Prevention,			

Prevention, Pediatric Nurse Practitioner	Pediatric Nurse Practitioner	4
NURS 298/299-Project/Thesis/Cognate <u>3</u>	NURS 298/299-Project/Thesis/Cognate	3
Total 9	Comp Exam - if not enrolled in NURS 298 or 299	<u>0</u>
	Total	9

**California State University, Fresno
Department of Nursing**

**ADULT-GERO CLINICAL NURSE SPECIALIST/NURSE EDUCATOR
SAMPLE MSN PROGRAM**

Example: Full Time Schedule

<u>YEAR 1</u>	
<u>FALL SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3
NURS 212-Advanced Pathophysiology	2
NURS 221-Theories Foundations of Nursing Practice	2
NURS 225-Advanced Nursing Issues: Health Care Policy, Ethics & Role Development	3
NURS 240-Curriculum Development in Nursing	3
Total	13

<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 211-Advanced Pharmacology	3
NURS 223-Advanced Research Methodology in Nursing	3
NURS 235. Adult-gero Fundamental Topics for the CNS	3
NURS 236. Practicum: Advanced Clinical Nursing for the Adult-gero CNS	5
NURS 241-Instructional Methods in Nursing Education	3
Total	17

<u>YEAR 2</u>	
<u>FALL SEMESTER</u>	<u>UNITS</u>
NURS 253. Advanced Topics for the Adult-gero Clinical Nurse Specialist.	3
NURS 254. Adult-gero Clinical Nurse Specialist Practicum.	5
NURS 242-Evaluation & Testing in Nursing Ed 3 unit Cognate (Comp Exam)	3
Total	11-14

<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 298/299 -Project/Thesis (exclude if taking Comp Exam)	3
Total	3

Example: Part Time Schedule

<u>YEAR 1</u>	
<u>FALL SEMESTER</u>	<u>UNITS</u>
NURS 221-Theories Foundations of Nursing Practice	2
NURS 225-Advanced Nursing Issues: Health Care Policy, Ethics & Role Development	3
Total	5

<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 211-Advanced Pharmacology	3
NURS 223-Advanced Research Methodology in Nursing	3
Total	6

<u>YEAR 2</u>	
<u>FALL SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3
NURS 212-Advanced Pathophysiology	2
NURS 240-Curriculum Development in Nursing	3
Total	8

<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 235. Adult-gero Fundamental Topics for the CNS	3
NURS 236. Practicum: Advanced Clinical Nursing for the Adult-gero CNS	5
NURS 241-Instructional Methods in Nursing Education	3
Total	11

<u>YEAR 3</u>	
<u>FALL SEMESTER</u>	<u>UNITS</u>
NURS 253. Advanced Topics for the Adult-gero Clinical Nurse Specialist.	3

<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 298/299 -Project/Thesis (exclude if taking Comp Exam)	3

NURS 254.Adult-gero Clinical Nurse Specialist Practicum.	5	Total	3
NURS 242-Evaluation and Testing in Nursing Education	<u>3</u>		
Total	11		

Education	Total	$\frac{3}{11}$	
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**California State University, Fresno
Department of Nursing**

POST-MASTER'S FAMILY NURSE PRACTITIONER

YEAR 1		YEAR 2	
<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3	NURS 211-Advanced Pharmacology	3
NURS 212-Advanced Pathophysiology	<u>2</u>	NURS 215 OB-GYN in Primary Care	3
Total	5	NURS 264-Primary Practicum Family Nurse Practitioner	4
		NURS 265-Family Nurse Practitioner Role in Primary Prevention	<u>2</u>
		Total	12

<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNIT</u>
NURS 266 -NP Role in Secondary Prevention	2	NURS 277-Family Nurse Practitioner Role in Tertiary Prevention	2
NURS 267 -Practicum in Secondary Prevention Family Nurse Practitioner	<u>4</u>	NURS 278-Practicum in Tertiary Prevention Family Nurse Practitioner	<u>4</u>
Total	6	Total	6

POST-MASTER'S PEDIATRIC NURSE PRACTITIONER

YEAR 1		YEAR 2	
<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3	NURS 211-Advanced Pharmacology	3
NURS 212-Advanced Pathophysiology	<u>2</u>	NURS 215 OB-GYN in Primary Care	3
Total	5	NURS 262-Pediatric Nurse Practitioner Role in Primary Prevention	2
		NURS 263- Primary Practicum Pediatric Nurse Practitioner	<u>4</u>
		Total	12

<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 266-Family Nurse Practitioner Role in Secondary Prevention	2	NURS 279-Pediatric Nurse Practitioner Role in Tertiary Prevention	2
NURS 269-Practicum in Secondary Prevention Pediatric NP	<u>4</u>	NURS 280-Practicum in Tertiary Prevention Pediatric Nurse Practitioner	<u>4</u>
Total	6	Total	6

POST-MASTER'S ADULT-GERO CLINICAL NURSE SPECIALIST/NURSE EDUCATOR

YEAR 1		YEAR 2	
<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3	NURS 211-Advanced Pharmacology	3
NURS 212-Advanced Pathophysiology	2	NURS 235. Adult-gero Fundamental Topics for the CNS	3
NURS 253. Advanced Topics for the Adult-gero Clinical Nurse Specialist.	3	NURS 236. Practicum: Advanced Clinical Nursing for the Adult-gero CNS	5
NURS 254. Adult-gero Clinical Nurse Specialist Practicum.	5	NURS 241 Instructional Methods in Nursing Education	<u>3</u>
		Total	14

NURS 240 Curriculum Development in Nursing	3	
NURS 242-Evaluation and Testing in Nursing Education	3	
Total	19	

POST-MASTER'S PEDIATRIC CLINICAL NURSE SPECIALIST/NURSE EDUCATOR

YEAR 1			
<u>FALL SEMESTER</u>	<u>UNITS</u>	<u>SPRING SEMESTER</u>	<u>UNITS</u>
NURS 210-Health Assessment in Advanced Nursing Practice	3	NURS 211-Advanced Pharmacology	3
NURS 212-Advanced Pathophysiology	2	NURS 237. Fundamental Topics for the Pediatric Clinical Nurse Specialist	3
NURS 255. Advanced Topics for the Pediatric Clinical Nurse Specialist.	3	NURS 238. Practicum in Advanced Clinical Nursing for the Pediatric CNS	5
NURS 256. Pediatric Clinical Nurse Specialist Practicum.	5	NURS 241 Instructional Methods in Nursing Education	<u>3</u>
NURS 240 Curriculum Development in Nursing	3	Total	14
NURS 242-Evaluation and Testing in Nursing Education	3		
Total	19		

LETTER OF RECOMMENDATION GUIDELINES
MASTER OF SCIENCE DEGREE PROGRAM
CALIFORNIA STATE UNIVERSITY, FRESNO

Last Name	First Name	M.I.
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The person whose name appears above is applying for admission as a student of the Master of Science degree program at California State University, Fresno. We would appreciate your impression of the applicant related to:

1. Clinical nursing competence.
2. Interpersonal skills.
3. Personality, integrity, and ability.
4. Potential for success in the advanced practice role.
5. Applicant's references are to include:
 - a. Official letterhead if indicated
 - b. Name, Title, Address(es), contact phone number(s) and email to be provided by Professional References.

Please give the reference to the applicant in a sealed envelope for them to turn in to the Department.

Please address your comments to:

Dr. Ndidi Griffin, Graduate Coordinator
Department of Nursing
California State University, Fresno
2345 East San Ramon Avenue M/S MH 25
Fresno, CA 93740-8031
559-278-6697
ndidig@csufresno.edu

LETTER OF RECOMMENDATION GUIDELINES
MASTER OF SCIENCE DEGREE PROGRAM
CALIFORNIA STATE UNIVERSITY, FRESNO

Last Name
M.I.

First Name

The person whose name appears above is applying for admission as a student of the Master of Science degree program at California State University, Fresno. We would appreciate your impression of the applicant as related to:

1. Clinical nursing competence.
2. Interpersonal skills.
3. Personality, integrity, and ability.
4. Potential for success in the advanced practice role.
5. Applicant's references are to include:
 - e. Official letterhead if indicated
 - f. Name, Title, Address(es), contact phone number(s) and email to be provided by Professional References.

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Dr. Ndidi Griffin, Graduate Coordinator
Department of Nursing
California State University, Fresno
2345 East San Ramon Avenue M/S MH 25
Fresno, CA 93740-8031
559-278-6697
ndidig@csufresno.edu

Appendix D
Curricula Vitae

CURRICULUM VITAE

Terea Ann Giannetta
671 E. Woodhaven Lane
Fresno CA 93720
559-434-3718

RN License: RN 265153 Exp. 1/31/12
CA Furnishing: NPF #335 Exp. 1/31/12

Education

DNP Brandman University - 2012
MSN California State University, Fresno – 1983 Nurse
Practitioner
Primary Care Pediatrics
HSC California State University, Fresno – 1981 Health Services Credential
BSN California State University, Sacramento – 1976

Experience

June 1992 - **Children's Hospital Central California/Valley Children's Hospital**
Present Madera CA
Pediatric Nurse Practitioner: Hematology/Oncology
Collaborative practice for the diagnosis and treatment of patients with
hematological and oncological diagnoses.

Jan. 1984 - **California State University, Fresno**
Present Fresno CA
Lecturer – Department of Nursing.
Course assignments include: Nursing of the Childrearing Family, Basic
Concepts in Nursing II, Practicum in Basic Concepts in Nursing II, Basic
Skill of Nursing II, Clinical Issues II, Health Appraisal, Pharmacology in
Nursing, Advanced Physical Assessment, Advanced Pathophysiology,
Nurse Practitioner Graduate course for both Theory and Practicum in
Primary, Secondary and Tertiary Interventions.

2003- present **California State University, Fresno**
Coordinator for Pediatric Nurse Practitioner Program

Dec 1995 - **Fresno Children's Medical Group**
Apr 1997 Fresno CA
Pediatric Nurse Practitioner for acute care and well child care
management in private practice setting.

May 1986 - **Fresno County Office of Education, Migrant Health**
June 1992 Fresno CA
Health Care Provider performing complete health assessments.

Sept 1985 - **California State University, Fresno**
Sept 1988 Fresno CA
Lecturer in Statewide Nursing Program, Fresno BSN Program. Variable
semesters for Health Assessment course.

- Nov 1980 - **Valley Medical Center (Now known as University Medical Center)**
Aug 1984 Fresno CA
 Pediatric Nurse Practitioner in Children's Clinic. Primary care provider for well and acutely ill children on a scheduled and drop-in basis at free-standing County clinic. Work closely with UCSF Resident Education Program.
- Oct 1978 - **Fresno Department of Education**
Aug 1980 Fresno CA
 Migrant Health Nurse. Combination of school nursing, health assessment, and follow-up services in schools in rural Fresno County. Responsible for coordinating day and evening clinics.
- Dec 1977 - **Valley Children's Hospital**
Sept 1978 Fresno CA
 Supervisor, North Wing. Twenty-four hour supervisory coverage of 36 bed surgical pediatric unit. Coordinate staff education.
- May 1976 - **Valley Children's Hospital**
Dec 1977 Fresno CA
 Staff Nurse. Total patient care of medical and surgical pediatric patients with cross-training in adult and pediatric cardiac critical care and pediatric intensive care.

PUBLICATIONS

"Oh no, the Newborn Screen is positive". *Journal of Pediatric Health Care*. 21 (1) 51-2, January/February 2007. 17198900

"To bleed or not to bleed". *Journal of Pediatric Health Care*. 20 (2) 128-9, March/April 2006. 16522490

Editorial Chair for *Kids Health Matters*. Published in conjunction with National Association of Pediatric Nurse Practitioners, Spring 2006, Fall 2006, Spring 2007, Fall 2007, Spring 2008, Fall 2008, Spring 2009, Fall 2009, Spring 2010, Fall 2010.

Expert Consultant to Pediatric Primary Care: A Handbook for Nurse Practitioners, W. B. Saunders Company, 2000.

Contributor in Instructor's Manual and Test Bank to accompany Foster, Hunsberger and Anderson: Family Centered Nursing Care of Children. 1989. Philadelphia: W. B. Saunders Company

Professional Affiliations, Community Service, Honors

National Association of Pediatric Nurse Practitioners-

Member since 1980

National Program Chair March 1996 – July 2001

Editorial chair for "Health Matters" publication for Spring 2006 to present

SJV-Central Valley Chapter member and current President

Clinical expert, Pediatric Palliative Care

Editorial Board member *Journal of Pediatric Health Care*, September 2003-July 2010
Editor, Specialty/acute care case studies, Sept 2004 to present
Sigma Theta Tau International Nursing Honor Society
Member since 1990, Mu Nu Chapter
President-Elect 2005-2006, President 2006-2008
Faculty Counselor
Awards Coordinator
Mentoring Award – May 2002
Central California Sickle Cell Community Council
Member since 1995
University of California, Davis, NP/PA program
Guest lecturer and clinical preceptor

Central Valley Coalition of Nursing Organizations –
Advanced Practice Nurse of the Year 1999
2009 “Nelms-Mullins Department Editor Award” from the *Journal of Pediatric Health Care*
2010 College of Health and Human Services Faculty Recognition Award

Presentations

University of San Diego, Teacher Credential program
Fresno County CHDP Providers
California School Nurse Association Annual meeting, 2005, 2006, 2007
Topics: Blood Dyscrasias, Sickle Cell Anemia, Physical Assessment, Immunization update
Sickle Cell Conference at St. Agnes Hospital, 2000
Tulare County School Nurses Annual Education Conference
Physical assessment and documentation update, March 2007
Menorrhagia in Adolescents, February 2010
NAPNAP National conference speaker –
“Blood Dyscrasias and Primary Care” April 2003
“Pediatric Palliative Care” March 2004
“Nutritional Anemias” April 2010*
“Menorrhagia in Adolescents” April 2010*
*both item invited to become permanent CE course on National web site
Children’s Hospital Central California, “Factor Use in Day Surgery”, June 2009
Hemophilia Foundations of Northern California, “Hemophilia and your Child”, March 2010
CHCC Intermediate Core lecture series, Hematological diagnoses: Diagnosis, and management
CHCC Pediatric Palliative Care Conference
UCSF Residency program: Nutritional Anemia
Professional Committees at Children’s Hospital Central California
Committee on Interdisciplinary Professional Practice (CIDP)
Interdisciplinary Professional Practice Committee (IPPC)
NP Forum – Chair
Ambulatory Clinical Oversight committee
Rural Health Care Clinic Consultant/Project Reviewer
Competence Assessment Process Committee
Executive Nursing Council
Interdisciplinary Care Committee

CPOE Governance Committee
Academic committees, California State University, Fresno
Faculty Council
Baccalaureate Curriculum Committee
Graduate Curriculum Committee
Graduate Advisory Council
School Nurse Advisory Council
Course Committee N131/N131L, Chair
Chair, CSUF Department of Nursing, Hall of Fame Committee

CURRICULUM VITAE

Keitha Mountcastle, R.N., Ed.D, CNS, NNP-BC

LICENSURE: Registered Nurse, State of California
Clinical Nurse Specialist, State of California
Neonatal Nurse Practitioner, State of California

CERTIFICATION: NCC Certification: Neonatal Clinician/Practitioner, Dec.
1990-current
Regional Trainer, Neonatal Resuscitation Program
Lead Instructor, the STABLE Program

EDUCATION: **Doctorate in Education/Educational Leadership (Ed.D.)**
University of California Davis/California State
University Fresno
June, 2003

**Master of Science, Perinatal/Neonatal
Nursing; March, 1985**
Neonatal Nurse Practitioner; March 1985
University of Utah, Salt Lake City, Utah

Bachelor of Science, Nursing; September, 1980
University of Arizona, Tucson, Arizona

EXPERIENCE:

Aug. 2004 - **CALIFORNIA STATE UNIVERSITY, FRESNO**
Present Fresno, California

Assistant Professor: Lead faculty for BSN Maternal/Newborn nursing (Nurs 132). Faculty for MSN research, nursing theories, and Clinical Nurse Specialist/Educator courses. Graduate level writing assessment faculty. Clinical Nurse Specialist Program Advisor.

Aug. 2007 - **COMMUNITY REGIONAL MEDICAL CENTER**
Jan. 2010 Fresno, California

Per diem Neonatal Nurse Practitioner/Staff Educator. Direct patient care in Neonatal Intensive Care Unit. Member: Process Improvement Team, Neonatal Developmental Care Project Team, and NICU Transition Team. Instructor: Neonatal Resuscitation Program and Neonatal Stabilization Program.

Aug. 2004 - **COMMUNITY REGIONAL MEDICAL CENTER**
Aug. 2007 Fresno, California

Per Diem Staff Nurse. Member: Process Improvement Team and Neonatal Developmental Care Project Team. Instructor: Neonatal Resuscitation Program and Neonatal Stabilization Program.

Mar. 2002 - **COMMUNITY REGIONAL MEDICAL CENTER**
Aug. 2004 Fresno, California

Manager, Neonatal Intensive Care Unit: Leadership and direction for 19-bed level III NICU. Supervision of 45 FTEs. Staffing, operational and capital budget, long-term planning. Overall responsibility for quality of care, regulatory compliance, and staff recruitment and retention.

Aug. 1998 - **COMMUNITY MEDICAL CENTERS**
Aug. 2002 Fresno, California

Clinical Nurse Specialist: Expert clinical resource for staff and resident physicians in NICU, Intermediate, and Well-Baby nurseries. Assess, plan, and implement educational programs. Maintain policies and procedures.

Feb. 1996 - **UTAH VALLEY REGIONAL MEDICAL CENTER**
Feb. 1998 Intermountain Health Care; Provo, Utah

Quality Improvement Coordinator, Women & Children's Services: Monitor patient care services provided by medical, nursing, and support staff. Identify variances from standard of care (JCAHO, national, hospital); implement/facilitate quality improvement teams to improve same. Provide support (data collection, education, references) to department managers, clinical educators, and medical staff. Support for Medical Staff in planning, implementing, and evaluation Quality Improvement programs.

Apr. 1991 - **UTAH VALLEY REGIONAL MEDICAL CENTER**
Feb. 1996 Provo, Utah

Charge Nurse: Coordinate patient care in 28 bed level III NICU. Member of hospital shared governance committee and clinical ladder committee; team leader of NICU infection control committee.

Apr. 1986 - **Director: Perinatal Transport/Outreach Program:**
Apr. 1991 Management neonatal transport team, to include budgeting, staffing, education, and regulatory compliance. Planned and

implementation of combined maternal/neonatal transport team, and implemented new perinatal outreach program.

PUBLICATIONS

- Mountcastle, K. (2010). An ounce of prevention: Decreasing painful interventions in the NICU. *Neonatal Network*, 29(6).
- Pinzon-Perez, H., & Mountcastle, K. (2010). Proposed Recommendations for Health Policies in Childhood Diabetes Prevention in The Dominican Republic: Implications for Nursing. *Hispanic Health Care International*, 8(3), 165-173.
- "Barriers to Research Utilization Among Clinical Nurse Specialists". Doctoral Dissertation, June 2003. Research Symposium 2003, California State University, Fresno/University of California Davis. May 1, 2003.
- "After Resuscitation: Getting the Sick Newborn Off to a 'STABLE' Start". San Joaquin/Sierra Perinatal Journal, Spring, 1999.
- "Care of the Neonate on the High Frequency Oscillator Ventilator". Staff Education Module. October, 1998.
- "Randomized Study of High-Frequency Oscillatory Ventilation in Infants with Severe Respiratory Distress Syndrome". HiFo Study Group, Journal of Pediatrics, April 1993.
- "Attitude, Satisfaction, and Perceptions of Newborn Intensive Care Staff Nurses Relative to the Role and Performance of Neonatal Nurse Practitioners" - Master's Thesis, 1985.

PRESENTATIONS

- "Basic Care of the Mechanically Ventilated Infant"; Nursing Core Curriculum, Multiple Presentations, April, 2009. Kaweah Delta Health Care District, Visalia, California.
- "Neonatal Pain: Effects of Repeated Exposure to Pain on the Developing Nervous System of the Neonate". Neonatal Core Curriculum, Multiple Presentations, October & November, 2007. Community Regional Medical Center, Fresno, CA.
- "Patent Ductus Arteriosus and Persistent Pulmonary Hypertension", Neonatal Core Curriculum, Multiple Presentations, October and November 2007. Community Regional Medical Center, Fresno, CA

- "Neonatal Pain: Potential Effects of Repeated Exposure to Pain on the Developing Nervous System of the Neonate". Presentation: NANN 23rd Annual Educational Conference. September 28, 2007.
- "Barriers to Research Utilization in Clinical Practice: Implications for Practitioners, Educators, and Administrators". 20th Annual Pacific Nursing Research Conference. March 22, 2007. Honolulu, HI.
- "Delivery Room Management – NRP Update for 2006". California CNS Network 9th Annual Conference, October 9, 2006, San Diego, California.
- "Management of Neonatal Pain". August 21, 2006. Community Regional Medical Center, OB M&M Conference, Fresno, CA.
- "Faculty Shortage: A Personal Perspective". Presentation: Devon Nunez' Summit on the Shortage of Licensed Healthcare Workers in the San Joaquin Valley. April 15, 2005.
- "Publication to Practice: The Role of the Clinical Nurse Specialist in the Integration of Research into Practice". Presentation: Fresno Association of Neonatal Nurses, Quarterly Education Meeting. Fresno, California. October 20, 2004.
- "Effect of Fluid Osmolality on Peripheral IV Dwell time in Neonates". Presentation: JDPEL Research Symposium 2001, California State University, Fresno/University of California Davis. May 3, 2001.
- "New Technologies: What's Hot, What's Not in the NICU". Conference presentation: Controversies in Respiratory Care. October, 1999; Fresno, CA.
- "Where is Baby Doe? – Government Regulation and Ethics in Medicine". Conference Presentation: 2nd Annual Perinatal Nursing Conference, June, 1985, Salt Lake City, UT.

Appendix E
Budget

NAME of Pro	Pediatric Clinical Nurse Specialist
TYPE of Prog	Certificate of Advanced Study
DATE of Prog	8/22/2012
<i>Created by Date at</i>	<i>mdb 8/22/12</i>

Assumptions

1	Number of Students	12
2	Number of Units to Complete Program	16
3	Registration Fee Per Unit	\$290
4	General Fund Reimbursement Percentage	15%
5	Chancellor Office Overhead Percentage	4%
6	State Controller's Office Overhead Percentage	1%
7	Division of Continuing and Global Education Overhead Percentage	29%
8	Graduate Studies Fee Per Student (One-Time)	\$100
9	Employee Benefits (% of Gross Wages)	8%
10	Program Reinvestment - School/College	60%
11	Program Reinvestment - Continuing and Global Education	40%
12	Salary Schedule 2322 for "Instructional Faculty, Special Programs"	\$24,832.00
	Salary Schedule 2322 for "Instructional Faculty, Special Programs"	\$0.00
	Salary Schedule 2322 for "Instructional Faculty, Special Programs"	\$0.00
13	Program Coordinator - Buyout, Additional Pay, Stipend, Direct Pay	\$0.00

Make a selection

Revenue

Registration Fees	\$55,680
TOTAL Revenue	\$55,680

Expenditures

General Fund Reimbursement - Registration Fees	\$8,352
Chancellor Office	\$2,227
State Controller's Office	\$557
Division Overhead	\$16,147
Graduate Services	\$1,200
Faculty Salary (Schedule 2322)	\$24,832
Program Coordinator	\$0
Employee Benefits - Faculty	\$1,987
Employee Benefits - Coordinator	
TOTAL Expenditures	\$55,302
NET Income	\$378

Program Reinvestment

Distribution to School/College	\$227
Distribution to Continuing and Global Education (APPD)	\$151

DATE Approved:	Manager of Administrative Operations
DATE Approved:	Senior Director

