



Faculty Handbook

Department of Nursing

School of Natural Sciences

Fresno Pacific University

This handbook is for faculty in the nursing department at Fresno Pacific University.

Faculty are responsible for using the handbook as a source of guidance regarding questions with respect to both academic and non-academic policies and procedures.

Changes in the information in this handbook may be implemented immediately throughout the academic year. Any changes in program policy or procedure will be communicated via email to the student's FPU email address.

September 17, 2019

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1. FRESNO PACIFIC UNIVERSITY NURSING DEPARTMENT

1.1 MISSION

We develop nursing professionals equipped with the *values, knowledge, and skills* to improve health for all through leadership and service.

1.2 THE FRESNO PACIFIC UNIVERSITY IDEA

The Fresno Pacific Idea reflects the university's interpretation of what it means to be a community of learners committed to a distinctive vision of Christian higher education. The Idea serves as a center for reflection and action and as a guide for forming a vision of the future. Rooted in the past and continuously re-shaped by the present, the Idea provides a foundation for the university's understanding of itself and of the mission to which it is called.

In pursuing this mission, the university affirms the significance of knowledge which is a foundation for wisdom and virtue. As a Christian liberal arts community, Fresno Pacific University is an integral part of the mission of the church. From this Christian and liberal arts center, the university seeks to engage members of its community in a collaborative search for knowledge and experience which lead toward a perceptive and creative relationship with God, humanity and the natural world. On this foundation, the university seeks to build and to extend the Kingdom of God by enabling persons to serve church and society.

The Fresno Pacific Idea articulates the university's primary identity, its vision of community and its relation to the larger world. The parts of the Idea are not mutually exclusive, but complementary. Together, they form an organic whole.

FRESNO PACIFIC UNIVERSITY IS A CHRISTIAN UNIVERSITY

Fresno Pacific University seeks to be a collegium centered upon Christ and His church. It is committed to the ideals of God's Kingdom and to the perspective of the liberal arts in which integration of faith, learning and action is a primary goal.

With others in the Anabaptist-Mennonite and believers' church tradition, the university encourages voluntary acknowledgment of the sovereignty of God, of the triumph of God's Kingdom, of the presence of God's Spirit in the life of the church and of the Lordship of Christ in all of life.

As an extension of the educational mission of the Mennonite Brethren Church, the university affirms the authority of the Bible over all matters of faith and life; the church as a community of redeemed people; a life of discipleship leading to holiness, witness and service; the call to serve Jesus by ministering to human need and alleviating suffering; the practice of reconciliation and love in settings of violence, oppression and injustice; and the development of spiritual maturity through disciplines such as prayer, study and meditation.

All authentic knowledge and experience are unified under God. All aspects of reality are understood to be parts of a larger whole. There is no contradiction then between the truth of revelation, of scholarly investigation and of action. The university encourages members of the Fresno Pacific University community toward a reflective and critical perspective on the nature of humanity and its relation to the world. Thus, the liberal arts enlarge the foundation for life-long learning and for advanced study in a discipline or profession. The university affirms that wisdom grows out of commitment to Christian faith and the integrative perspective of the liberal arts. Both are essential to developing a holistic view of God, self and the world.

Since education is understood to be a life-long process, university programs include a variety of academic and professional baccalaureate, graduate and non-degree programs. Each program builds on the integrative foundation of the liberal arts, encouraging thoughtful reflection on those beliefs and values that contribute to personal and societal wholeness. The intersection of Christian belief, the liberal arts and an ethic of service provides an educational perspective that leads to an examined understanding of God, self and the world that unites theory with practice.

FRESNO PACIFIC UNIVERSITY IS A COMMUNITY OF LEARNERS

Fresno Pacific University recognizes the importance of the interpersonal dimension of the learning process. The university believes that community grows out of common commitments and that learning is the result of interaction between persons, ideas and experiences. Thus, the university seeks to provide settings in which individuals can achieve such interaction within a community committed to learning and service. It believes that as individuals become more responsible with and accountable to one another, they are better able to understand themselves and to make thoughtful commitments to God, the church and the world.

The university seeks to accept each member of the community as unique, with purpose and value. Ethnic and religious identity is affirmed as a basis for respectful

pluralism. While acknowledging individual differences, the university also holds to the believers' church expression of community as a body that transcends individualism and those cultural, national and ethnic boundaries which separate and alienate.

Believing that the Gospel transcends the limitations of all cultures and ideologies and that inclusiveness enriches community, Fresno Pacific University welcomes those of different cultural, national, ethnic and religious backgrounds to participate in its educational experience. The university invites those from other church traditions, both as faculty and students, to enter into dialogue and faithful practice with those in the Anabaptist-Mennonite and believers' church tradition in following Christ and in sharing the university's mission. In keeping with its voluntaristic church tradition, the university affirms the community formed as individuals relate to God and does not discriminate against students who cannot freely and honestly make such a commitment. The university encourages persons to serve across cultures and throughout the world as passionate disciples of Christ and as constructive members of society.

The university believes that knowledge and understanding are formed in community; that learning takes place through dialogue and discourse between people who have different experiences and perspectives and that such wisdom begins with humility. These understandings join teachers and students as partners in a mutual search for truth and wholeness.

The university's belief in community expresses itself in patterns of leadership and governance that are servant oriented and participatory and which lead toward consensual decision making.

The university seeks to carry out its educational mission through faculty, students, staff and board members who participate in church and society, share a mutual respect for educational goals and community standards and are committed to enhancing the quality of the educational experience for all its members.

FRESNO PACIFIC UNIVERSITY IS PROPHETIC

Fresno Pacific University believes that to be prophetic is to serve the church and society by engaging in dialogue with and critique of contemporary culture and practice. The university encourages informed reflection on personal, institutional and societal values which contribute to developing a vision for wholeness, justice

and reconciliation. It offers leadership to the church and the world by enabling persons to extend perceptive, creative and skillful responses to current issues; to illuminate darkness with light and dispel ignorance with wisdom and understanding. It seeks to bring an integrative, Christian ethic and perspective to present day thought and experience and to a common search for the better way.

Fresno Pacific University understands learning to be a journey; a journey of exploration, reflection and transformation; a journey toward deepened meaning and faith growing out of creative encounter with Christ and the world. The university believes that such learning may be nurtured through many different modalities and in many different settings and that it should be encouraged to continue throughout life. Thus, the university values imaginative, experimental and innovative ways of engaging students and faculty in the process of learning even as it seeks to remain faithful to its core values and identity.

Fresno Pacific University is a deliberate and continuing attempt to realize the vision expressed in the Fresno Pacific Idea. The Idea gives the university reason for existence, courage for growth and stimulus for adventure

1.3 HISTORY

Nursing at FPU began with serious discussion in the fall of 2007 to explore the health needs of the San Joaquin Valley and to determine the feasibility of starting a nursing program. The university Board of Trustees granted approval to develop a program in 2007 and an interim consultant/director was hired to develop an RN to BSN Adult Degree Completion Program. A Nursing Community Advisory group reviewed and approved the RN to BSN program in August 2008 and, in February of 2009, the first cohort of students entered the program. CCNE granted initial accreditation in May 2009, and the self-study was completed and full accreditation granted in 2010.

In 2010, FPU began considering a proposal to develop an MSN program intended to prepare nurse practitioners and nursing educators. Campus review processes culminated in approval by the university Board of Trustees in 2011. The program accepted its first cohort of students in 2012. In 2014, the CCNE granted accreditation to the MSN program and renewed accreditation for the RN to BSN program.

In 2014 the nursing Community Advisory Committee met for an extended analysis of the Central Valley's health care needs and FPU's strategic vision. The

recommendation from this retreat was that FPU should pursue a holistic, mission-driven, four-year BSN program. A proposal was completed received university Board of Trustees approval in June 2017, with the Board Finance Committee's final approval in September 2017. The Feasibility Study was completed and approved by the California Board of Registered Nursing in June 2019.

Spring 2008- Conceptualized RN – BSN Program

Spring 2008- Followed the University approval process for the program

Spring 2008- First program director hired

Spring 2009-The RN – BSN program planned and launched

March 2010- Commission on Collegiate Nursing Education (CCNE) site visit

Fall 2010- The CCNE board met and the RN – BSN program received five-year initial CCNE accreditation approval retroactive to Spring 2010

Spring 2011 Conceptualization of the MSN – FNP Program

Summer 2011- Nursing Administrative Assistant was approved and hired

Fall 2012 – First MSN cohort launched

Fall 2013- First full-time faculty member hired

Fall 2013- Nursing Simulation Lab established

Fall 2014 – CCNE site visit with initial approval of MSN and 5-year reapproval of RN – BSN program

Fall 2014 - Conceptualization of the BSN Traditional Program

Spring 2019 - Second departmental staff position added

Summer 2019 - Initial Feasibility Study approved for BSN Traditional Program

Fall 2019 CCNE and California Board of RN (BRN) site visit scheduled for MSN 5-year review and initial BSN Traditional proposal

1.4 ACCREDITATION

Both the MSN and the RN-to-BSN nursing programs are accredited through the American Association of Colleges of Nursing (AACN) through the Commission on Collegiate Nursing Education (CCNE).

CCNE provides a summary of the accreditation history for the nursing program at FPU online. In brief, the RN-to-BSN program was granted initial accreditation by CCNE in May 2009, the self-study was completed, and full accreditation was granted in 2010. In fall 2014, CCNE granted accreditation to the MSN and renewed accreditation for the RN-to-BSN. Those accreditation terms expire on June 30, 2020, and June 30, 2025, respectively.

1.5 ORGANIZATION AND GOVERNANCE

Fresno Pacific University academic programs are organized into five schools. The health sciences programs are housed within the School of Natural Sciences. Academic affairs of each school are administered by a dedicated dean. The School of Natural Sciences is composed of two divisions, “Health Sciences” and “Math/Science”, each administered by a division chair. Programs associated directly with the health sciences, including nursing, are housed within the Division of Health Sciences. Natural Sciences faculty meet collectively once each month in the NS Caucus to address academic affairs. “Nursing” is a department administered by a department chair. The Nursing Department has three programs, each administered by a program director.

1.6 FACULTY PERSONNEL POLICIES

Personnel policies govern recruitment, hiring, evaluation, and promotion of all faculty including the nursing faculty, as identified in the Faculty Handbook ([Faculty Handbook](#)).

All full-time and permanent part-time faculty hires require national searches, a minimum of master’s level education in the field of instruction, alignment with the FPU mission and diversity commitment, and approval by the president and board of trustees. All expenses for posting positions and interviewing candidates are covered by the provost’s budget.

In addition to all university requirements, nursing faculty are required to maintain an unrestricted California Registered Nurse license and may have program/role specific requirements.

1.7 FACULTY DEVELOPMENT AND EVALUATION PROCESSES

Regular Faculty. Once hired, all full-time and part-time faculty undergo informal review and evaluation during their first and second years. This process, including a self-study, classroom observations, and a review with their program or division chair, is intended primarily to aid faculty in identifying strengths and areas of potential growth. Formal evaluations are conducted by FPU's Rank and Continuing Status Committee and occur in the third and sixth year, and every five years thereafter. All faculty are evaluated with respect to teaching, scholarship, and service.

Faculty teaching, scholarship, service, and practice are important to the mission of FPU and are encouraged by training and support in keeping with the mission, goals, and expected faculty outcomes of the university as identified in the Faculty Handbook. Any full-time or regular part-time nursing faculty member may apply to the provost for financial resources for travel, conferences, and related professional development.

All new faculty are required to attend new faculty development sessions organized by the Provost's Office and the BSN Program Director. This requirement is communicated in the new faculty hire letter. New faculty are given nonteaching load to give them space for the work of orienting to the institution.

The specific schedule of orientation events may vary year to year, but generally consist of a day of orientation before the semester begins and regular sessions across the first year. Topics cover broad needs of new faculty, including strategies for teaching, diverse student needs, resources for teaching.

Adjunct Faculty. Fresno Pacific University continues to evaluate quality of adjunct instruction after the initial hire through multiple means. To assist in the evaluation and improvement of teaching and learning practice, individual courses are evaluated by students at the end of each course using the *IDEA Student Ratings of Instruction (SRI)*. The *SRI* is the primary instrument used by FPU to obtain student feedback on course and instructional satisfaction and effectiveness. The *SRI* measures students' perception of achievement of the effectiveness of faculty instructional strategies in relation to course instructional goals. It offers data for the purpose of 1) encouraging faculty consideration in fostering instructional improvement, 2) facilitating faculty evaluations, and 3) providing an indirect measure of student learning. Results from these evaluations assist in evaluation of both faculty and curriculum. Faculty-specific and program-specific *SRI* data

support change in instructional practices, with the aim of improving student learning.

Apart from the SRI, FPU has recently systematized procedures for adjunct faculty evaluation. This formalized process, intended to clearly communicate faculty expectations and to provide early formative feedback to faculty, includes informal and formal reviews. During the first semester of teaching, the Program Director or a professional peer informally reviews each new adjunct's teaching. The review concludes with a discussion of teaching, scholarship, and community service expectations. During the second semester of teaching, and every fourth semester thereafter, the Program Director formally evaluates instruction. Data from these evaluations is used both for evaluation of faculty and to provide feedback to faculty, identifying both strengths and weaknesses with the intent of fostering improvement in pedagogy.

1.8 STUDENT AND FACULTY DISPUTE RESOLUTION

Occasionally, a student may find cause to question the action of a professor regarding requirements of a course, teaching effectiveness, comments made in a class that seem derogatory or inflammatory, criticism of the student, general performance or sanctions given for academic dishonesty. Students should first discuss their concerns with the instructor. If the student and faculty member cannot resolve the issue satisfactorily, or if the student does not feel comfortable speaking directly with the instructor, the student should consult with the program director, who will attempt to resolve the issue. Decisions may be appealed to the department chair or dean of the appropriate school for a final resolution.

2. BSN TRADITIONAL UNDERGRADUATE PROGRAM

The newest nursing program at FPU is the traditional BSN program, launching Fall 2020. Initial approval was granted by the California Board of Registered Nursing (BRN) summer 2019. This is a four-year residential program with general education and science courses in the first two years and nursing courses in the final two years. Application and admission is required during the second year to enter the BSN program.

2.1 BSN PROGRAM OUTCOMES

1. Integrate theory and research-based knowledge and skills from arts, humanities, and sciences to develop a foundation for professional and personal life.
2. Demonstrate knowledge and understanding of nursing science and theory.
3. Demonstrate clinical competence and skills as a baccalaureate generalist.
4. Demonstrate analytical inquiry for evidence-based health care practice to improve the quality of care.
5. Demonstrate compassionate, spiritual, ethical, culturally sensitive, and professional clinical decision-making skills.
6. Use inter-professional communication and collaboration for improving client-centered health outcomes across the life span.
7. Utilize system engineering and information management to facilitate health promotion, disease prevention, and maintenance of health in delivering patient-and population-based services.
8. Demonstrate professional leadership through advocacy directed toward influencing health care policy to improve the health care system.
9. Evaluate and enhance one's own professional values within the context of altruism, autonomy, human dignity, integrity, social justice, and conflict resolution.
10. Understand the role and responsibilities of a professional nursing leader in the health care system by embracing the value of lifelong learning.
11. Engage in the care of self in order to care for others.

2.2 BSN ASSESSMENT – CURRICULUM MAP

Each program at FPU, including each of the nursing programs, is evaluated relative to the university’s mission and philosophy. The nursing programs are aligned with FPU’s mission, philosophy, and learning outcomes (Tables 2.2 and 2.3).

Table 2.2 Congruence: University and Program Mission to Professional Nursing Standards

University	Program	Professional Standards (BSN)	Professional Standards (MSN)
Develops students for leadership and service through excellence in Christian higher education.	Develops nursing professionals equipped with the values, knowledge, and skills to improve health for all through leadership and service.	<p>Mission statements are consistent with: <i>AACN Essentials of Baccalaureate Education, 2008;</i></p> <p><i>AACN Public Health: Recommended Baccalaureate Competencies and Curricular Guidelines for Public Health Nursing, September 2013;</i></p> <p><i>AACN Recommended Baccalaureate Competencies and Curricular Guidelines for the Nursing Care of Older Adults, September 2010;</i></p> <p><i>ICN Code of Ethics for Nurses, 2012;</i></p> <p>and <i>AACN White paper: Expectations for practice experiences in the RN to Baccalaureate curriculum, October, 2012</i></p>	<p>Mission statements are consistent with: <i>AACN Essentials of Master’s Education in Nursing, 2011;</i></p> <p><i>NTF Criteria for Evaluation of Nurse Practitioner Programs National Task Force on Quality Nursing Practitioner Education, 2012;</i></p> <p><i>Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education, 2008;</i></p> <p><i>ICN Code of Ethics for Nurses, 2012;</i></p> <p>and the <i>NONPF Nurse Practitioner Core Competencies, 2017)</i></p>

Congruence of Philosophy and Expected Student Outcomes with University and Professional Nursing Standards

FPU's philosophy emphasizes mission, values, characteristics, which include the significance of a Christian community, service to others, academic and professional excellence, student-focused pedagogy, and education which is both innovative and response. The existing RN-BSN program's philosophy shares institutional mission, values, and characteristics. Common elements include: liberal education, professional values, core competencies, core knowledge, and role development (AACN Essentials of Baccalaureate Education, 2008).

The existing MSN program builds on the holistic knowledge base and practice competencies of the baccalaureate prepared nurse while expanding the philosophical, theoretical and scientific basis for the advanced practice providing primary care throughout the lifespan in diverse environments. Components of the MSN/FNP program in congruence with FPU's philosophy are science and humanities, professional values, core competencies, core knowledge, skills and abilities, and role development (AACN, Essentials of Master's Education in Nursing, 2011 and NONPF Nurse Practitioner Core Competences, 2012).

The BSN program delivers educational objectives to meet required learning outcomes for institutional requirements as well as BSN requirements, preparing graduates to successfully complete master's level expectations.

The expected student outcomes for the BSN program include outcomes for FPU's RN-BSN and MSN/FNP programs. The following tables demonstrate alignment among all outcomes, beginning with FPU's University Learning Outcomes (USLOs) to the RN-BSN and MSN programs, followed by those two programs' alignment with AACN and NONPF outcomes, as applicable.

Table 3. Student Outcomes Alignment: University, Programs, and Professional Nursing Standards 3a. Outcomes Alignment: BSN PSLOs to FPU USLOs

BSN PSLOs										
FPU USLOs	1	2	3	4	5	6	7	8	9	10
1. Oral					X					
2. Written					X					
3. Content	X	X				X	X	X	X	
4. Reflection	X	X		X	X					X
5. Critical	X	X				X	X	X	X	X
6. Moral				X				X	X	X
7. Service		X		X						
8. Cultural		X				X		X	X	X
9. Quantitative								X		
10. Information Technology								X		

Summary: Except for RN-BSN 3, every RN-BSN PSLO is aligned with FPU USLOs, and all USLOs are represented in the RN-BSN program. (RN-BSN 3 is to demonstrate clinical competence and skills and has no USLO equivalence.)

3c. Outcomes Alignment: BSN PSLOs to AACN outcomes

BSN PSLOs										
AACN Learning Outcomes	1	2	3	4	5	6	7	8	9	10
AACN 1	X		X			X				
AACN 2		X								
AACN 3						X				
AACN 4								X		
AACN 5							X	X		
AACN 6					X				X	
AACN 7								X		
AACN 8				X					X	X
AACN 9	X	X	X	X	X	X	X	X	X	X

Summary: Each of AACN's 9 learning outcomes are addressed by the RN to BSN learning outcomes

2.3 FACULTY PERSONNEL POLICIES

Faculty Qualifications

All faculty must meet FPU qualification standards for hiring and evaluation as specified in the FPU Faculty Handbook (<https://intranet.fresno.edu/system/files/july-2019.pdf>) and the California BRN's criteria (CCR 1425).

Policy on Faculty Remediation

The minimum qualifications for BSN nursing instructors are defined in the Nursing Faculty Handbook (section 2.3). Where departmental needs and instructor potential coincide, a remediation plan may be developed to bring the instructor's qualification into compliance. Any remediation plan must be approved by the Nursing Chair, Provost and BRN. Remediation plans may include, but are not limited, to:

- Co-teaching with a qualified nursing instructor
- Release time to take additional CE, coursework or certification training (ongoing professional development)
- Release time to gain requisite clinical experience

Program Director

The director of the program shall meet the following minimum qualifications:

1. A master's or higher degree from an accredited college or university which includes course work in nursing, education or administration;
2. One (1) years' experience as an administrator with validated performance of administrative responsibilities consistent with CCR section 1420(h);
3. Two (2) years' experience teaching in pre- or post-licensure registered nursing programs; and
4. One (1) year's continuous, full-time or its equivalent experience direct patient care as a registered nurse; or
5. Equivalent experience and/or education as determined by the board.

Assistant Director

The assistant director shall meet the following minimum qualifications:

1. A master's or higher degree from an accredited college or university which includes course work in nursing, education or administration;
2. Two (2) years' experience teaching in pre- or post-licensure registered nursing programs; and
3. One (1) year's continuous, full-time or its equivalent experience direct patient care as a registered nurse; or
4. Equivalent experience and/or education as determined by the board.

Nursing Faculty

Faculty may only teach a course in which they possess content expertise as defined by the following minimum qualifications:

Within the previous five years, in geriatrics, medical-surgical, mental-health/psychiatric nursing, obstetrics, or pediatrics, you possess:

1. One (1) year's continuous, full-time or its equivalent experience providing direct patient care as a registered nurse in the designated nursing area;
or
2. One (1) academic year or of registered nurse level clinical teaching experience in the designated nursing area or its equivalent that demonstrate clinical competency; **and**
3. Completion of at least one (1) years' experience teaching courses related to registered nursing **or** completion of a post-baccalaureate course which includes practice in teaching registered nursing.

Content Expertise

The content expert will provide oversight -- ongoing evaluation and development of revisions -- of the curriculum for the designated content area. Additional qualifications unique to content expert role are:

1. A master's degree in the designated nursing area;

or

2. A master's degree that is not in the designated nursing area **and**:
 - Has completed thirty (30) hours of continuing education or two (2) semester units or three (3) quarter units of nursing education related to the designated nursing area; **or** has national certification in the designated nursing area from an accrediting organization, such as the American Nurses Credentialing Center (ANCC);

and

3. Has a minimum of two hundred forty (240) hours of clinical experience within the previous three (3) years in the designated nursing area; **or** has a minimum of one (1) academic year of registered nurse level clinical teaching experience in the designated nursing area within the previous five (5) years.

2.4 FACULTY EVALUATION PROCESSES

BSN faculty evaluation processes are defined in the FPU Faculty Handbook. Currently, there are no additional requirements.

3. RN - BSN DEGREE COMPLETION PROGRAM

The Bachelor of Science in Nursing prepares RN students, who have associates degrees, to become leaders in professional fields. The RN - BSN program develops nursing professionals equipped with the values, knowledge and skills to improve health for all through leadership and service. Courses are designed to broaden academic foundation while focusing on clinical decision-making, critical thinking, holistic care and leadership instruction. Community and public health nursing, as well as nursing research processes, are important components of the program. Leadership instruction includes FPU's signature peace and conflict management.

- The BS in Nursing is accredited by CCNE.
- Graduates of the program meet California BRN requirements to apply for the Public Health Nurse certification.
- Cohorts groups meet face-to-face for class one night per week.
- Cohort of 12-20 adults progress through the program together.
- Experienced faculty and assignments that apply to everyday life.
- Students come from a variety of life stages and cultural backgrounds.
- Courses offered in a blended format.

3.1 RN - BSN PROGRAM OUTCOMES

1. Integrate theory and research-based knowledge and skills from arts, humanities, and sciences to develop a foundation for professional and personal life.
2. Demonstrate knowledge and understanding of nursing science and theory.
3. Demonstrate clinical competence and skills as a baccalaureate generalist.
4. Demonstrate analytical inquiry for evidence-based health care practice to improve the quality of care.
5. Demonstrate compassionate, spiritual, ethical, culturally sensitive, and professional clinical decision-making skills.
6. Use inter-professional communication and collaboration for improving client-centered health outcomes across the life span.
7. Utilize system engineering and information management to facilitate health promotion, disease prevention, and maintenance of health in delivering patient-and population-based services.

8. Demonstrate professional leadership through advocacy directed toward influencing health care policy to improve the health care system.
9. Evaluate and enhance one's own professional values within the context of altruism, autonomy, human dignity, integrity, social justice, and conflict resolution.
10. Understand the role and responsibilities of a professional nursing leader in the health care system by embracing the value of lifelong learning.
11. Engage in the care of self in order to care for others.

3.2 RN - BSN ASSESSMENT - CURRICULUM MAP

RN to BSN PSLOs										
FPU USLOs	1	2	3	4	5	6	7	8	9	10
1. Oral					X					
2. Written					X					
3. Content	X	X				X	X	X	X	
4. Reflection	X	X		X	X					X
5. Critical	X	X				X	X	X	X	X
6. Moral				X				X	X	X
7. Service		X		X						
8. Cultural		X				X		X	X	X
9. Quantitative								X		
10. Information Technology								X		

RN – BSN program student learning outcomes (SLOs) align with FPU's university SLOs.

Summary: Except for RN-BSN 3, every RN-BSN PSLO is aligned with FPU USLOs, and all USLOs are represented in the RN-BSN program. (RN-BSN 3 is to demonstrate clinical competence and skills and has no USLO equivalence.)

RN – BSN PSLOs align with AACN outcomes:

RN to BSN PSLOs										
AACN Learning Outcomes	1	2	3	4	5	6	7	8	9	10
AACN 1	X		X			X				
AACN 2		X								
AACN 3						X				
AACN 4								X		
AACN 5							X	X		
AACN 6					X				X	
AACN 7								X		
AACN 8				X					X	X
AACN 9	X	X	X	X	X	X	X	X	X	X

Summary: Each of AACN's 9 learning outcomes are addressed by the RN to BSN learning outcomes

3.3 RN - BSN FACULTY PERSONNEL POLICIES

See above under Section 2.3 – Faculty Personnel Policies

3.4 RN - BSN FACULTY EVALUATION PROCESSES

See above under Section 2.4 – Faculty Evaluation Process

4. MSN FAMILY NURSE PRACTITIONER PROGRAM

With a focus on assessment, prevention and instruction, the Master of Science in Nursing gives a broad education, applicable to today's evolving healthcare field. FPU develops nursing professionals equipped with the values, knowledge and skills to improve health for all through leadership and service. An FNP emphasis focuses on primary care across the lifespan with practicums that prepare you for this specialty. Family nurse practitioners demonstrate a commitment to, and understanding of, the relevance of the family's identified community in the delivery of family-centered care. Fresno Pacific's MSN offers clinical placement in our innovative residency program, where students gain hands-on training with a wide range of complex and varied patients across family practice, women's health, pediatrics, and primary care, equipping you for national FNP certification exams.

4.1 MSN PROGRAM OUTCOMES

1. Critical Analysis: Critically analyze information to provide leadership, education, and service across the lifespan in healthcare settings. (AACN: 1) (NONPF: 1)
2. Theoretical Integration: Integrate applicable leadership, organization, and role theories to lead and teach at micro and macro levels in health care. (AACN: 1, 2) (NONPF: 1, 2)
3. Technologies Integration: Employ informatics and healthcare technologies to evaluate and improve the quality and safety of patient care. (AACN: 3, 5) (NONPF: 3, 5)
4. Evidence into Practice: Utilize evidence-based scholarship, leadership, and ethical health care policy, practice, and service in clinical prevention and health care maintenance across the lifespan. (AACN: 4, 6) (NONPF: 4, 5, 6)
5. Collaboration and Advocacy: Professionally collaborate and advocate for the improvement of individual, family, and community health outcomes across the life span. (AACN: 6, 7, 8) (NONPF: 2, 6, 7)
6. Health Disparities: Apply ethically and culturally sound principles and solutions to complex socio-economic issues related to family, community, and population health. (AACN: 3, 8) (NONPF: 4, 8, 9)
7. Advanced Practice: Demonstrate advanced knowledge, skills, and professional dispositions to lead and promote change in healthcare settings. (AACN: 1-9) (NONPF: 1-9)
8. Christian Integration: Synthesize Christian beliefs and values in the nursing field to advance a culture of excellence professionally and personally through life-long learning. (AACN: 1, 9) (CNS: G) (NONPF: 8, 9)

PREVENTION AS INTERVENTION

The US Preventative Services Task Forces' Guide to Clinical Preventive Services (USPSTF) defines **primary prevention** measures as those provided to individuals to prevent the onset of a targeted condition. Primary prevention measures include activities that help avoid a given health care problem. Examples include passive and active immunization against disease as well as health protecting education and counseling promoting the use of automobile passenger restraints and bicycle helmets. Since successful primary prevention helps avoid the suffering, cost and burden associated with disease, it is typically considered the most cost-effective form of health care.

Secondary prevention measures as those that identify and treat asymptomatic persons who have already developed risk factors or preclinical disease but in whom the condition is not clinically apparent. These activities are focused on early case findings of asymptomatic disease that occurs commonly and has significant risk for negative outcome without treatment. Screening tests are examples of secondary prevention activities, as these are done on those without clinical presentation of disease that has a significant latency period such as hyperlipidemia, hypertension, breast and prostate cancer. With early case finding, the natural history of disease or how the course of an illness unfolds over time without treatment can often be altered to maximize well-being and minimize suffering.

Tertiary prevention activities involve the care of established disease, with attempts made to restore to highest function, minimize the negative effects of disease, and prevent disease-related complications. Since the disease is now established, primary prevention activities may have been unsuccessful. Early detection through secondary prevention may have minimized the impact of the disease.

4.2 MSN ASSESSMENT – CURRICULUM MAP

MSN program student learning outcomes (SLOs) align with FPU’s university SLOs.

MSN PSLOs								
FPU USLOs	1	2	3	4	5	6	7	8
1. <i>Oral</i>					X			
2. <i>Written</i>					X		X	
3. <i>Content</i>		X		X		X	X	
4. <i>Reflection</i>				X		X		X
5. <i>Critical</i>	X		X					
6. <i>Moral</i>				X		X		X
7. <i>Service</i>				X			X	X
8. <i>Cultural</i>						X		
9. <i>Quantitative</i>	X							
10. <i>Information Technology</i>			X				X	

Summary: All MSN PSLOs are aligned with FPU USLOs; all USLOs are represented in the MSN program.

MSN PSLOs also align with AACN outcomes:

MSN PSLOs								
AACN Learning Outcomes	1	2	3	4	5	6	7	8
AACN 1	X	X					X	X
AACN 2		X					X	
AACN 3			X			X	X	
AACN 4				X			X	
AACN 5			X				X	
AACN 6				X	X		X	
AACN 7					X		X	
AACN 8					X	X	X	
AACN 9							X	X

Summary: Each of AACN’s 9 learning outcomes are addressed by the MSN learning outcomes.

MSN PSLOs also align with AACN NONPF outcomes:

MSN PSLOs								
NONPF Learning Outcomes	1	2	3	4	5	6	7	8
NONPF 1	X	X					X	
NONPF 2		X			X		X	
NONPF 3			X				X	
NONPF 4				X		X	X	
NONPF 5			X	X			X	
NONPF 6				X	X		X	
NONPF 7					X		X	
NONPF 8						X	X	X
NONPF 9						X	X	X

Summary: Each of NONPF's 9 learning outcomes are addressed by the MSN learning outcomes

4.3 MSN FACULTY PERSONNEL POLICIES

4.4 MSN FACULTY EVALUATION PROCESSES

Preceptor Evaluation of the Student and/or Preceptor

The NP Core Competencies serve as a foundation to guide students in their preparation to practice as a nurse practitioner and are required knowledge in the health care field. The competencies “are acquired through mentored patient care experiences with emphasis on **independent** and **interprofessional** practice; analytic skills for evaluating and providing **evidence-based, patient centered care** across settings; and advanced knowledge of the health care delivery system” (NONPF, 2012).

The MSN program at Fresno Pacific University integrates the NP competencies throughout the Family Nurse Practitioner program. Upon completion of the NURS 735A Primary Care Practicum, please complete the following evaluation examining the NP competencies. Circle the number (1-4) corresponding to the statement that best describes the level at which the student demonstrated competency in the practicum experience.

Upon completion, please return this form to the Fresno Pacific University Nursing office.

	<i>Always</i>	<i>Most of the Time</i>	<i>Seldom</i>	<i>Never</i>
<i>Scientific Foundation Competencies</i>				
1. Critically analyzes data and evidence for improving advanced nursing practice.	4	3	2	1
2. Integrates knowledge from the humanities and sciences within the context of nursing science.	4	3	2	1
3. Translates research and other forms of knowledge to improve practice processes and outcomes.	4	3	2	1
4. Develops new practice approaches based on the integration of research, theory, and practice knowledge.	4	3	2	1
<i>Leadership Competencies</i>				
1. Assumes complex and advanced leadership roles to initiate and guide change.	4	3	2	1
2. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care.	4	3	2	1
3. Demonstrates leadership that uses critical and reflective thinking.	4	3	2	1
4. Advocates for improved access, quality and cost-effective health care.	4	3	2	1

5. Advances practice through the development and implementation of innovations incorporating principles of change.	4	3	2	1
6. Communicates practice knowledge effectively both orally and in writing.	4	3	2	1
7. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus.	4	3	2	1
<i>Quality Competencies</i>				
1. Uses best available evidence to continuously improve quality of clinical practice.	4	3	2	1
2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care.	4	3	2	1
3. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care.	4	3	2	1
4. Applies skills in peer review to promote a culture of excellence.	4	3	2	1
5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality.	4	3	2	1
<i>Practice Inquiry Competencies</i>				
1. Provides leadership in the translation of new knowledge into practice.	4	3	2	1

2. Generates knowledge from clinical practice to improve practice and patient outcomes.	4	3	2	1
3. Applies clinical investigative skills to improve health outcomes.	4	3	2	1
4. Leads practice inquiry, individually or in partnership with others.	4	3	2	1
5. Disseminates evidence from inquiry to diverse audiences using multiple modalities.	4	3	2	1
6. Analyzes clinical guidelines for individualized application into practice.	4	3	2	1
<i>Technology and Information Literacy Competencies</i>				
1. Integrates appropriate technologies for knowledge management to improve health care.	4	3	2	1
2. Translates technical and scientific health information appropriate for various users' needs. 2a). Assesses the patient's and caregiver's educational needs to provide effective, personalized health care. 2b). Coaches the patient and caregiver for positive behavioral change.	4	3	2	1
3. Demonstrates information literacy skills in complex decision making.	4	3	2	1
4. Contributes to the design of clinical information systems that promote safe, quality and cost-effective care.	4	3	2	1

5. Uses technology systems that capture data on variables for the evaluation of nursing care.	4	3	2	1
<i>Policy Competencies</i>				
1. Demonstrates an understanding of the interdependence of policy and practice.	4	3	2	1
2. Advocates for ethical policies that promote access, equity, quality, and cost.	4	3	2	1
3. Analyzes ethical, legal, and social factors influencing policy development.	4	3	2	1
4. Contributes in the development of health policy.	4	3	2	1
5. Analyzes the implications of health policy across disciplines.	4	3	2	1
6. Evaluates the impact of globalization on health care policy development.	4	3	2	1
<i>Health Delivery System Competencies</i>				
1. Applies knowledge of organizational practices and complex systems to improve health care delivery.	4	3	2	1
2. Effects health care change using broad based skills including negotiating, consensus-building, and partnering.	4	3	2	1
3. Minimizes risk to patients and providers at the individual and systems level.	4	3	2	1

4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.	4	3	2	1
5. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.	4	3	2	1
6. Analyzes organizational structure, functions and resources to improve the delivery of care.	4	3	2	1
7. Collaborates in planning for transitions across the continuum of care.	4	3	2	1
Ethics Competencies				
1. Integrates ethical principles in decision making.	4	3	2	1
2. Evaluates the ethical consequences of decisions.	4	3	2	1
3. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.	4	3	2	1
<i>Independent Practice Competencies</i>				
1. Functions as a licensed independent practitioner.	4	3	2	1
2. Demonstrates the highest level of accountability for professional practice.	4	3	2	1
3. Practices independently managing previously diagnosed and undiagnosed patients.	4	3	2	1

<p>3a). Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end of life care.</p> <p>3b). Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.</p> <p>3c). Employs screening and diagnostic strategies in the development of diagnoses.</p> <p>3d). Prescribes medications within scope of practice.</p> <p>3e). Manages the health/illness status of patients and families over time.</p>				
<p>4. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.</p> <p>4a). Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration.</p> <p>4b). Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.</p> <p>4c). Incorporates the patient’s cultural and spiritual preferences, values, and beliefs into health care.</p> <p>4d). Preserves the patient’s control over decision making by negotiating a mutually acceptable plan of care.</p>	4	3	2	1

PRECEPTOR /FACULTY NAME: _____

SIGNATURE: _____

STUDENT NAME/SIG: _____

NAME OF AGENCY: _____

DATE: _____