BSN Faculty Handbook

Effective 08/01/25 - 07/31/26

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Contents

School of Nursing Leadership

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Introduction and Purpose

Purpose

This handbook is designed to provide information relevant to the BSN faculty of the School of Nursing (SON) and contains only information specific to nursing. It includes the curriculum and SON Faculty Bylaws. Faculty are to refer to the Austin Peay State University Faculty Handbook, which covers specific information for which faculty are responsible.

Accreditors

The BSN School of Nursing is accredited by the Commission on Collegiate Nursing Education (CCNE), the Tennessee Board of Nursing, and the Southern Association of Colleges and Schools Commission on Colleges (SACS COC). This document later provides more information on our accreditors.

Mission, Vision, and Core Values

Table 1 provides information on APSU University and the SON mission, vision, and core values, which must be congruent.

Table 1
Mission, Vision, and Core Values

APSU Mission	SON Mission
Austin Peay State University is a mission-driven, community-minded institution that provides transformational experiences through innovative, creative, and scholarly activities. We welcome and inspire an inclusive community of learners to make a positive impact regionally and globally.	The mission of Austin Peay State University School of Nursing is to prepare an inclusive community of learners at the undergraduate and graduate levels in a manner that meets the patient-centered healthcare needs of our society.
APSU Vision	**SON Vision**
We will be the region's university of choice for those seeking to improve their lives. We will achieve this vision through student-centered teaching, unique developmental opportunities and our focus on innovative research and public service.	The vision of APSU School of Nursing is to be the regional school of choice for students seeking baccalaureate and graduate nursing degrees. Graduates will provide quality, patient-centered care to their communities.

APSU Core Values	SON Core Values
- Academic Excellence - Integrity - Community - Community - Personal Growth - Lifelong Engagement - Collaboration	- Student Success - Professionalism - Community - Caring - Safety - Integrity - Civility - Collaboration - Life-long engagement - Innovation

Strategic Goals

Table 2 lists the strategic goals for the SON. This was developed to provide congruency with the university's strategic goals and a direction for working forward. This was created in the 2023-2024 academic year.

Table 2

SON Strategic Goals with Objectives

Pillar 1	Pillar 2	Pillar 3	Pillar 4
The Academic Experience	**The Student Experience**	**The Employee Experience**	**The Community Experience**
Goal 1: The School of Nursing (SON) will be a premier regional program known for high-quality, student-centered teaching.	**Goal 1**: The SON will cultivate a civil community.	**Goal 1**: The SON will cultivate a civil community.	**Goal 1**: The SON will develop and enhance mutually beneficial community partnerships.
Goal 2: The SON will evolve academic pathways to strengthen our emphasis on delivering quality programs that address community and regional needs.	**Goal 2**: The SON will offer each student the opportunity to have a variety of interactions and experiences.	**Goal 2:** The SON will empower employees to meet their own learning and development objectives.	**Goal 2:** The SON will increase community involvement by offering a robust and unique program.

| Goal 3: The SON will optimize our institutional infrastructure to meet the academic needs of our students	Goal 3: The SON will ensure that all students are equipped to pursue their educational and nursing career goals in an empowering environment.	Goal 3: The SON will support an environment where all employees can grow and flourish.	Goal 3: The SON will create an atmosphere that promotes sustained faculty, student, and alumni engagement.
		Goal 4: The SON will cultivate a culture of connectedness in which employees intentionally engage with students to enrich the campus experience and influence student success.	

Structure of SON

SON Organization Chart

Figure 1 outlines the organization of the SON. It includes the Dean. The SON is part of the College of Behavioral and Health Sciences.

Figure 1
SON Organizational Chart

AUSTIN PEAY STATE UNIVERSITY
SCHOOL OF NURSING ● ORGANIZATIONAL CHART
Last revised October 3rd, 2022
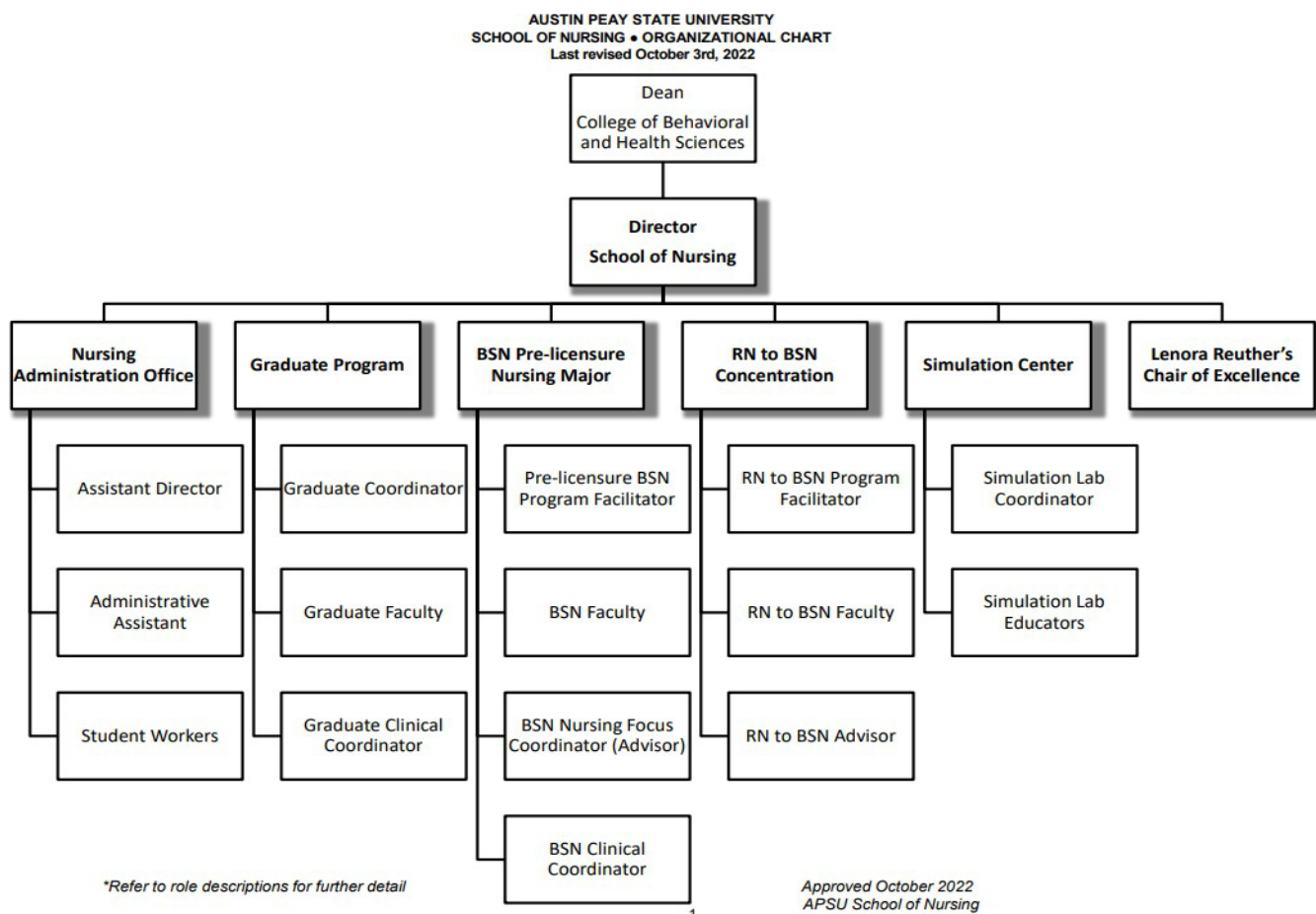
SON Faculty Bylaws

Article I—Name

The name of the organization shall be the Austin Peay State University School of Nursing Faculty Organization (NFO).

Article II—Purpose and Function

Section I

The purpose of this organization shall be to provide faculty input into the governance of the School of Nursing so that its mission, vision, and goals can be effectively implemented and evaluated. The organization shall facilitate necessary changes in the nursing program or the school itself. It shall also provide a means of effectively meeting societal needs.

Section II

The functions of the organization shall be to:

1. Serve as the common ground and means by which faculty function as a community of scholars and act in shared governance.
2. Facilitate the development, implementation, and evaluation of the School of Nursing's mission, vision, and goals.
3. Develop SON-wide faculty policies, procedures, and criteria consistent with the program's mission, vision, and goals.
4. Encourage student input and shared governance within the School of Nursing.
5. Participate in planning for the programs, the organization of the School, and the budgetary allocations necessary for implementing the plans.
6. Assist in the allocation of resources and budgeted funds for the SON.
7. Promote faculty development and clinical/professional expertise.
8. Promote and facilitate communication among the members of the Faculty and the faculty leadership of the School of Nursing.
9. Vote on policies/procedures and items which impact the SON as a whole (i.e., Mission/Vision/Goals, RTP Criteria)

Article III—Membership

Section I

The membership shall consist of all persons holding either tenure, tenure track, or clinical track appointments in the School of Nursing at Austin Peay State University.

Section II

Student representation shall be a component of all School of Nursing committees. Only actively enrolled undergraduate and graduate students may participate.

- Academic Policy Committee
- Curriculum Committee
- Program Evaluation Committee
- Resources Committee
- Baccalaureate Undergraduate Faculty Organization (BFO)
- Graduate Faculty Organization (GFO)

There may be appointed ad hoc committees; however, they are not standing committees of the SON.

Article IV—Officers

Section I

The chairperson shall be the Director of the School of Nursing. The functions of the Director shall be to:

a) Call and preside over the NFO general meetings;
b) Appoint members and chairs of the committees of Undergraduate and Graduate standing committees.

c) Serve as or appoints an ex officio member on all faculty organization committees;
d) Establish ad hoc and/or sub-committees as needed. Monitor the progress of sub-committees and ad hoc groups when appropriate.
e) Establish an Advisory Committee comprised of external stakeholders whose function shall be to facilitate communication with providers and consumers, to give support and guidance, and to advise of the needs of the communities of interest. The Advisory Committee shall meet at least once a year or as needed. The Director shall provide a report to the NFO.

Section II
The Assistant Director's functions for the NFO shall be to:
a) Record or designate someone to take the minutes of all the NFO meetings;
b) Provide each member with a digital copy of the minutes;
c) File a copy of the minutes.

Article V—Meetings
Section I
Meetings of the NFO shall be held on a regular schedule no less than twice a year. An agenda must be available for all members prior to each meeting.

Section II
The Director may call additional meetings.

Article VI—Voting
Section I
Issues that require a vote will not be presented unless a quorum is present. A quorum consists of at least three-fourths of the membership, excluding the Director.

Section II
The Director will not vote unless the vote is necessary to break a tie of the membership.

Article VII—Committees
Section I
The SON and its associated programs use committees to perform various tasks to complete the work of the SON. There shall be a minimum of two faculty members on each committee. Students shall be members of committees as described in Article III, Section II. Each committee may elect a committee secretary to keep the minutes of the meetings.

Section II
The chairperson of each committee shall call meetings of the committee as often as is required to carry out the committee's functions. The role of the committee chairperson includes the following:

- Schedule committee meetings for the academic year.
- Develop the agenda for the meetings.
- Review the committee minutes.
- Ensure the secretary distributes and archives minutes.
- Preside over meetings.
- Orient new members at the start of the academic year to committee responsibilities.
- Report at all BFO/GFO meetings as needed.

Section III
The Director may appoint ex-officio, non-voting members to the committee Membership (i.e., staff members, full-time temporary faculty).

Section IV
There are standing committees at the baccalaureate and graduate levels. The charge and task for the committees are the same for both programs as described in Article VII, Section V:

The standing committees established for the Baccalaureate program are as follows:
1. Academic Policy Committee
2. Admissions and Retention
3. Faculty Development Committee
4. Curriculum Committee
5. Program Evaluation Committee
6. Resources Committee
7. Baccalaureate Faculty Organization (BFO)

The Standing Committees established for the Graduate Program are as follows:
1. Program Evaluation / Academic Policy (PEAP)
2. Curriculum / Admissions and Retention
3. Faculty Development and Resources
4. Graduate Faculty Organization (GFO)

Section V
The following are the responsibilities of all standing committees, except where noted:
1. Each standing committee shall meet a minimum of two times per academic year. Committee chairpersons shall call for additional meetings as necessary.
2. Every committee is responsible for following the timeline to complete the committee's tasks, data collection, analysis, reporting, and recording assigned in the systematic evaluation plan.
3. Committee chairpersons are expected to present reports and anything that needs further voting at the program level at the BFO or GFO-meetings.

4. Ensure that student participants are invited to the meetings and have full representation.

Section VI

The functions of the committees are listed under each committee title.

1. Baccalaureate/Graduate Faculty Organization (BFO/GFO)
   a) Establish and review Program Outcomes (POs).
   b) Review, discuss and approve policies and procedures brought forward as a recommendation from committees impacting the program as a whole;
   c) Review standing committee reports.
   d) Communicate and make announcements to the program faculty and student participants.

2. The Academic Policy Committee
   a) Review academic and non-academic program policies as required per the systematic evaluation plan and as needed. Forward recommendations to the appropriate faculty organization (BFO or GFO if the program is impacted) and then to the NFO if it affects the entire SON.
   b) Collaborates with the program Admissions and Retention Committee to formulate, review, evaluate and revise policies for admission, advanced standing, and re-admission;
   c) Reviews the program's student and faculty guidelines/handbooks as directed by the systematic evaluation plan, ensuring policies are congruent with university policies or providing a reasonable rationale for differences;
   d) Oversee student scholarships for the program.
   e) Bring forward substantive policy changes which impact the program to the BFO or GFO as a recommendation from the committee.
   f) Review the APSU bulletin for accuracy related to policies.

3. The Admission and Retention Committee
   a) Reviews and evaluates applicants' credentials for admission and/or retention to the nursing program;
   b) Grants admission to the nursing program to eligible students taking into consideration the availability of space as determined by faculty: student ratio and clinical facilities available;
   c) Notifies those students granted admission or placed on a waiting list;
   d) Reviews enrollment trends and calculates retention rates per the systematic evaluation plan;
   e) Formulates, reviews, evaluates, and revises policies for admission and re-admission in collaboration with the Academic Policy Committee;
   f) Publicizes policies for admission and ensures that the website and all materials are accurate;

g) Collaborates with the university admission office.
h) Bring forward substantive admission changes impacting the program to the BFO or GFO as a recommendation from the committee.
i) Review the APSU bulletin for admission information accuracy.

4. Faculty Development Committee
   a) Collaborate with the faculty and Director to plan continuing education offerings for the program and/or School of Nursing;
   b) Graduate and BSN Faculty Development Committees review and revise SON Faculty By-laws bringing forward any recommendations to the NFO.
   c) Reviews and revises New Faculty Orientation Plan (including adjunct faculty);
   d) Collect, compile and report faculty data required for the systematic evaluation plan, faculty outcomes, governing organizational reports, and accreditation.
   e) If CEUs are awarded, complies with the established criteria of the granting agency in awarding CEUs in nursing

5. The Curriculum Committee
   a) Establish and revise program-level outcomes (Program Outcomes and EPSLOs) that align with accreditation and professional standards.
   b) Complete curricular mapping on a regular cycle. Ensure that content and learning experiences increase in complexity across the curriculum.
   c) Evaluate new or revised course outcomes, module objectives, and course topics to ensure that program-level outcomes/competencies are achieved.
   d) Conduct a review of program courses to determine whether they meet degree requirements and program standards per the systematic evaluation plan.
   e) Evaluate clinical learning to ensure outcomes/competencies are being met.
   f) Review and report course and program-level outcomes by evaluating course snapshots and making recommendations to the faculty. Ensure that the EPSLO measures/assessments are not removed or altered without the committee's approval.
   g) Makes recommendations for revisions in the program based on evaluation, recommendations, and professional and societal needs;
   h) Reviews and summarizes faculty and student evaluation of clinical agencies and actions are taken.
   i) Review and approve new and substantive change course proposals. Forward recommendations for substantive revisions and additions to the BFO/GFO for approval.
   j) Analyze data and make recommendations as appropriate to the program's systematic evaluation plan.
   k) Review the bulletin for curricular accuracy (course descriptions, etc.)
   l) Initiate changes to the curriculum in the APSU Curriculum Online Interface system.

6. Program Evaluation Committee
    a) Develop and monitor an ongoing systematic plan of evaluation consistent with accreditation standards.
    b) Present summarized evaluation data to the BFO/GFO.
    c) Develop strategies for implementing the program's systematic evaluation plan consistent with accreditation standards.
    d) (Baccalaureate) Develops, distributes, reviews, analyzes, and revises evaluation forms and surveys required for this committee for program evaluation per the systematic evaluation plan.
    e) Review and analyze evaluation data related to the Program Outcomes (retention, licensure/certification, employment rates, etc.) and make recommendations to the BFO/GFO.

7. The Resources Committee
    a) Provides a means for faculty and student input into recommendations for books and other publications related to nursing to be purchased by the University Library or by the School of Nursing;
    b) Maintains an inventory of the books and publications in the University Library that are related to Nursing;
    c) Deletes old titles from the Library with the assistance of the librarian;
    d) Recommends equipment to be purchased by the School of Nursing;
    e) Maintains an inventory of equipment, both hardware and software, which is located within the School of Nursing;
    f) Finds a means for repairing or replacing needed equipment;
    g) (Baccalaureate) Develops, distributes, reviews, analyzes, and revises evaluation forms and surveys required for this committee for program evaluation per the systematic evaluation plan.
    h) *(Graduate)* Facilitates the distribution, analysis, and dissemination of student and faculty satisfaction surveys, exit surveys, alum surveys, and employer/practice surveys.

Article VII—Rules of Order
The rules contained in Robert's Rules of Order (Revised) shall govern the organization in all cases where they are applicable and do not conflict with the By-Laws. Robert's Rules of Order (Revised)

Article VIII—By-Laws Revision
The By-Laws of the Faculty Organization may be revised, amended, or appealed by a vote of three-quarters of the membership at any of the general Faculty Organization meetings provided that any proposed changes have been circulated in writing to the

membership at least one week in advance of the meeting during which the vote is to take place. (Approved May 2022)

SON Committee Members
The SON committee members are determined each fall. The Director of the SON appoints the Chair of each committee and sometimes places faculty and staff on appropriate committees. If the Director does not assign everyone to a committee, the faculty and staff may choose the committee they want to serve. The current list of committee members can be found in Accreditation Station on the learning management system.

Job Responsibilities
Use the following link for the BSN Faculty Handbook Job Descriptions.

SON Course Communication Policy
The following is the Courses Communication Policy Statement to be placed in the syllabus. Reply to student emails within 24-48 hours Monday through Friday. Response times may vary during weekends and holidays.

Faculty Course Coordinator
All courses will have a course coordinator appointed. The coordinator will oversee the implementation and evaluation of the course for which they are designated. The coordinator will collaborate effectively with other course team members to accomplish the following:

1.   Administrative tasks:
- All course syllabi are required by the university to be in the D2L Course 3 days before the first day of classes starting.

- Order desk copies of textbooks if needed for their faculty team members. Textbooks must be used a minimum of two years;
- Orient adjunct faculty to roles and responsibilities for student learning settings. This includes providing all required documents and electronic resources for course to facilitate their assignment;
- Individually notify students through Navigate sending a GovSignal throughout semester when student is not obtaining a 76% on exams.
- Ensure that syllabus is in the SON prescribed template and meets ADA requirements;
- Complete and ensure compliance with all ADA and student disability needs;
- Submitting an electronic copy (via submission to Curriculum D2L Shell) per semester per course. As outlined in our MEP, specific documents must be uploaded for all courses to the Curriculum Course Notebook in the D2L shell at the end of each semester.
    - Course Documents Required if applicable:
        - Course Syllabus
        - Course Calendar
        - Clinical Schedule
        - Course Snapshot

- Content Mastery Exam Results
- BSN Guidelines and Syllabus Acknowledgment Quiz Results

- Plan, manage and oversee the course learning modules through the online learning platform (D2L);
- Responsible for course preparation, course updates, and maintaining grades in D2L.
- Ensuring that substantive changes to the course content are reviewed by the curriculum committee prior to implementation. Additionally, changes to course activities that are used to measure student learning outcomes in the Master Evaluation Plan will need to be submitted to the curriculum committee, whether the change is considered substantive by the faculty;
- If the course has a clinical component in which there is another faculty member coordinating the clinical portion, both faculty coordinators must collaborate to update syllabus.

Faculty Clinical Coordinator

All clinical courses will have a faculty clinical coordinator appointed. The faculty clinical coordinator will oversee the implementation and evaluation of the clinical course for which they are designated. The clinical coordinator will collaborate effectively with other course team members to accomplish the following:

1.   Manage obligations for health regulations, current CPR, and validation of malpractice and health insurance coverage. There is a list in the SON Student Guidelines of all clinical requirements. The following is the current practice.
- At the end of the spring semester, the BSN Clinical Coordinator (staff) will compile the necessary requirements for each student and send a mass email containing the BG/DS codes along with a reminder to renew their tuberculosis (TB) requirement. (Some students renew their TDAP and BLS certifications while in the program, BSN Clinical Coordinator (staff) ensures that each student is aware of what is needed. The due date for these requirements is July 1st.
- If students do not submit their requirements by the deadline, the BSN Clinical Coordinator (staff) sends an email to each course coordinator to inform them of what the student is missing and that they are past the due date. As a result, the student will receive a clinical unsatisfactory evaluation at the start of the semester (during the first week of class).
- Occasionally students who are having financial issues are provided with some flexibility to complete these requirements if time permits. The course coordinator is always notified when the BSN Clinical Coordinator (staff) provides an extension.
- The Faculty Clinical Coordinator is not responsible for verifying the students' health regulations but manages the consequences for student's failure to meet health requirements on time.

2.   Administrative tasks: All course syllabi are required by the university to be in the D2L Course 3 days before the start of class.
- Participates in Clinical Faculty Day.
- Coordinates with Adjunct Coordinator to ensure adjuncts are notified and attending Clinical Faculty Day.
- Orient adjunct faculty to roles and responsibilities in supporting student success within

the clinical setting. This includes providing all required course materials and electronic resources to facilitate student achievement in the assigned clinical course;

- Order desk copies of textbooks if needed for their faculty team members. Textbooks must be used a minimum of two years;
- Individually notify students in writing of failing status for the course via Clinical Failure form and through Navigate sending a GovSignal. Keeping the Clinical Failure document (hardcopy or electronic) in a secure location until student's graduation.
- Keeping an electronic copy (via submission to Curriculum D2L Shell) per semester. As outlined in our MEP, specific documents must be uploaded for all courses to the Curriculum Course Notebook in the D2L shell at the end of each semester. All requirements may not be applicable for a clinical course.

  Course Documents Required if applicable:
    - Course Syllabus
    - Course Calendar
    - Clinical Schedule
    - Course Snapshot
    - Content Mastery Exam Results
    - BSN Guidelines and Syllabus Acknowledgment Quiz Results

- Ensure that syllabus, calendar is in the SON prescribed template and meets ADA requirements;
- Ensure compliance with all ADA and student disability needs;
- Plan, manage and oversee the course learning modules through the online learning platform (D2L) if applicable;
- Plan and oversee laboratory activities and student clinical placements;
- If a new clinical placement site is initiated, course faculty clinical coordinator is responsible for discussing site information and assisting the BSN Clinical Coordinator (Staff);
- Notifying the BSN clinical coordinator of the need for additional clinical placements, and may recommend potential clinical placements;
- If the course has a clinical component in which there is a separate faculty member coordinating the clinical portion, both faculty coordinators must collaborate to update syllabus;
- Notify administration and the Undergraduate Nursing Adjunct Coordinator of needed clinical adjunct faculty as soon as possible (e.g., We have ___ number of students, I need 6 adjuncts on x, y, or z day to teach in ___ area)
- *Ensure that substantive course content changes are reviewed by the curriculum committee before implementation.* Additionally, any changes to course activities used to measure student learning outcomes in the Master Evaluation Plan (MEP) must be submitted to the curriculum committee, regardless of whether the clinical faculty considers the change substantive;
- Responsible for preparing and updating clinical course grades and maintaining them in D2L to ensure consistency with the didactic final grades.

Required Attendance at Commencement Exercises

APSU holds three commencement exercises during the year: December, May and August. Faculty will be required to participate, in regalia, in at least two of the three exercises unless exempted by their dean based on extenuating circumstances. Chairs/directors shall make every effort to ensure that their department or school is adequately represented at all commencements. (University

Faculty Handbook, 25-26, page 28)

The Director will use that same list of commencements as the description of the academic year to help define the time framework of when we must attend 2 graduations.

Master Evaluation Plan

Each academic year, in the fall, the SON approves a new master evaluation plan (MEP). The MEP is the competency laid out by our accrediting body, CCNE. The SON Program Evaluation Committee is responsible for developing and monitoring the documentation of the MEP. The MEP is a large table where all SON committees document their responsibilities. The following program outcomes and SON faculty outcomes are only two of the many items that are within the MEP. All faculty members are responsible for understanding how the MEP is developed and the role and rationale of the MEP.

Program Outcomes

School of Nursing Baccalaureate Program Outcomes (POs) show the educational program's effectiveness and guide the maintenance and revision of the APSU Baccalaureate Nursing Program.

Following graduation from the BSN Program, the following outcomes will be achieved:
1. **Certification Rates:** 85% of PLBSN (Pre-licensure BSN) students will pass the NCLEX-RN on the first attempt every calendar year (MEP Standard IV-C)
2. **Completion Rates:** 85% of the BSN program students will graduate from their degree program within 150% of the length of the program (7 semesters) (MEP Standard IV-B).
3. **Employment Rates:** 80% (per CCNE) of BSN graduates will report full-time employment upon completion of the program. (Completed within 12 months of graduation – collected prior to graduation – Fall, Spring, & Summer) (MEP Standard IV-E)
4. **Student Satisfaction:** 80% of graduating students who respond to the survey will rate overall satisfaction with the program at a 4.0 or better (5-point scale) on the BSN Student Exit Survey (MEP Standard IV-I; BSN Student Exit Survey Q2)
5. **Civility:** 100% of BSN students will pledge they are committed to practicing civilly in the workplace on the Senior Exit Survey. (From MEP "other program" outcomes, Standard IV-I)

6. **Program Student Learning Outcomes:** 100% of BSN graduates will achieve our Program Student Learning Outcomes (MEP "other program" outcomes, Standard IV-I)

7. **Preparation for Nursing Role:** 80% of alumni who respond to the Alumni Survey will report that the program prepared them for their nursing role (MEP Standard IV-I; Alumni Survey Q10)

8. **Graduate Continuing Education:** 30% of graduating students will indicate that they plan to attend graduate school or pursue certification in a specialty area on the Senior Exit Survey (MEP Standard IV-I; Senior Exit Survey Q12, Q13)

SON Faculty Outcomes

Table 3 lists the SON faculty outcomes that are part of the MEP. This data is collected annually and typically reported during MEP day at the end of the spring semester.

Table 3
SON Faculty Outcomes

Outcome	Achievement Levels

RTP or Post-Tenure Process	• 100% of tenured and tenure track faculty move through the RTP or post-tenure process each year according to APSU Policy and SON department criteria. Identify the following:
	  1. % of faculty that utilize the university "stop the clock"
	  2. % of faculty in rank
	  3. % of faculty retained each year

Teaching	• BSN faculty effectiveness will be rated 3.5 or above on a 6-point scale in aggregate student evaluations of teaching effectiveness.

Scholarship & Terminal Degree	• 100% of tenured and tenure track faculty will complete publications, presentations, and/or continuing education in their education, nursing, or their specialty area each year.
	• During a three-year period, 100% of faculty will have an opportunity to present at a conference, publish, or complete other scholarly activities.
	• 50% of full-time BSN faculty will have earned a doctorate or be working toward a terminal degree.
	• Over a three-year period, 50% of full-time faculty will participate in research or complete/renew a terminal degree or certification such as:
	  a. Certified Healthcare Simulation Educator (CHSE)
	  b. Certified Nurse Educator (CNE)
	  c. Certified Academic Clinical Nurse Educator (CNE/cl)
	  d. FNP (certified)
	  e. Quality Matters Reviewer and/or Master
	  f. Cultural Competency and Diversity
	  g. Gerontological Nursing Certification
	  h. Terminal degree

| Professional Service and Practice	• 100% of full-time faculty will participate in continuing education activities each academic year. • 100% of new faculty without prior teaching experience will attend a conference specifically intended for new educators within 3 years of hire. • 100% of new faculty will attend University-sponsored new faculty orientation. • 50% of BSN faculty will maintain an active clinical practice.

Retention, Tenure, & Promotion

Tenure Track and Tenured faculty must meet specific Retention, Tenure, & Promotion deadlines. The APSU Personnel Actions Calendar document is developed and distributed by the University and can be located in the 2025-2026 Personnel Actions (Retention, Tenure, and Promotion).

All departments at APSU have their own specific RTP Guidelines. The SON-specific guidelines are located at the School of Nursing RTP Criteria, effective Aug 1, 2023. All e-dossiers are completed in APSU's Watermark.

Curriculum

APSU BSN Curriculum Outline

Figure 2 demonstrates how the SON develops the curriculum and how it relates to national standards. The SON chooses the accrediting body [CCNE (Commission on Collegiate Nursing Education)] and includes other standards that are followed to guide the curriculum (BSN Essentials and QSEN Competencies). The SON uses these national standards to develop our program outcomes (EPSLOs) and build the APSU BSN curriculum (course objectives, module objectives, assessments, and activities to measure the outcomes).

Figure 2
Curriculum Outline Cascade
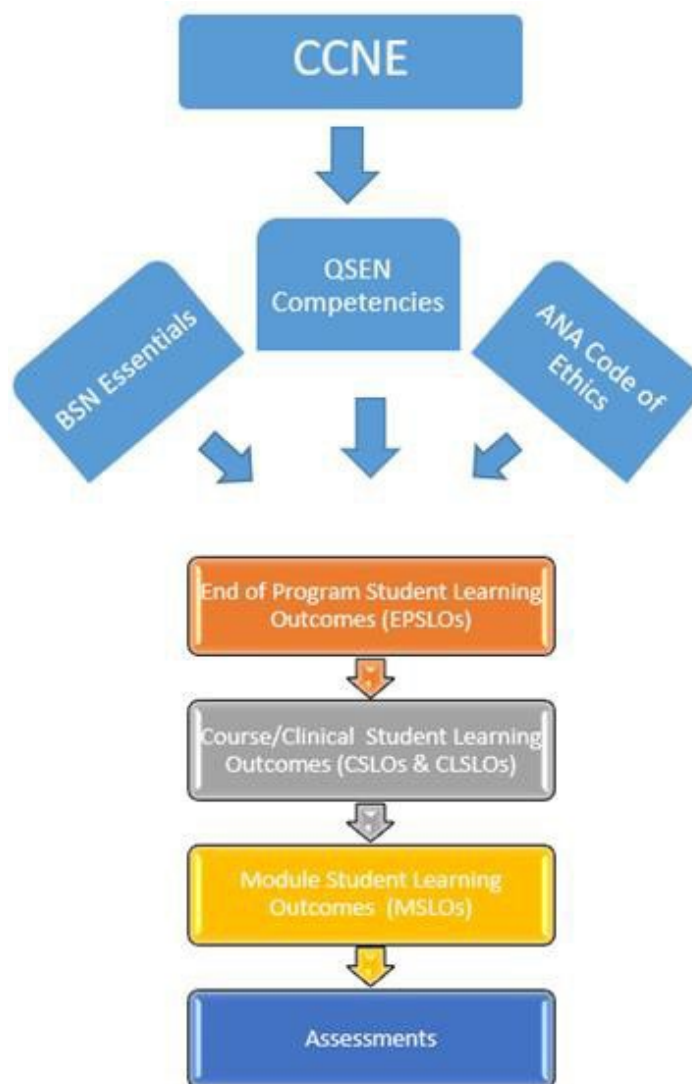
Professional Standards

The following professional standards guide the curriculum of the BSN program:

- Tennessee Board of Nursing Standards of Practice
- Quality and Safety Education for Nurses (QSEN) Pre-Licensure Competencies
- American Association of College of Nursing (AACN) Essentials of Baccalaureate Education for Professional Nursing Practice, 2021.
- ANA Code of Ethics

Quality and Safety Education for Nurses (QSEN) Pre-Licensure Competencies Improving quality and safety within the healthcare system is an essential aspect of baccalaureate-level nursing education. In keeping with the Institute of Medicine's core competencies (2003) and the National Advisory Board, nursing pre-licensure programs

should meet objectives in preparing future nurses who have the knowledge, skills, and attitudes to guide quality improvement and safety within the healthcare system. The QSEN competencies are a platform for programs to develop a curriculum that will aid in transitioning Baccalaureate nurses into the nursing profession with the intent of continuous education (QSEN, 2012). The QSEN Baccalaureate-Level Competencies are as follows:

1. Patient-Centered Care Quality Improvement (QI)
2. Teamwork & Collaboration
3. Evidence-based Practice (EBP)
4. Quality Improvement (QI)
5. Safety
6. Informatics

       The 2021 BSN Essentials: Entry-Level Professional Nursing Education The 2021 AACN Essentials contains 10 domains, 45 competencies, and 230 sub- competencies, with eight concepts woven throughout. Nursing students will be responsible for all competencies and sub-competences as new graduates.

The Essentials: Core Competencies for Professional Nursing Education "provides the framework for preparing individuals as members of the discipline of nursing, reflecting expectations across the trajectory of nursing education and applied experiences" (p.1)

The domains are "broad distinguishable areas of competence that, when considered in the aggregate, constitute a descriptive framework for the practice of nursing" (AACN Essentials, 2021, p.10).

The AACN Essentials, 2021, Domains and their descriptor are included below in Table 4.

Table 4
Overview of BSN Essential Domains and Descriptors

Domain	Domain Descriptor
Domain 1: Knowledge for Nursing Practice	"Integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, as well as knowledge from other disciplines, including a foundation in liberal arts and natural and social sciences. This distinguishes the practice of professional nursing and forms the basis for clinical judgment and innovation in nursing practice" (AACN Essentials, 2021, p. 27).
Domain 2: Person-Centered Care	Person-centered care focuses on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and

	developmentally appropriate. Person-centered care builds on a scientific body of knowledge that guides nursing practice regardless of specialty or functional area. (AACN Essentials, p. 29)
Domain 3: Population Health	Population health spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and non-traditional partnerships from affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes. (AACN Essentials, p. 33)
Domain 4: Scholarship for Nursing Discipline	The generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care. (AACN Essentials, p. 37)
Domain 5: Quality and Safety	Employment of established and emerging principles of safety and improvement science. Quality and safety, as core values of nursing practice, enhance quality and minimize risk of harm to patients and providers through both system effectiveness and individual performance. (AACN Essentials, p. 40)
Domain 6: Interprofessional Partnerships	Intentional collaboration across professions and with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience and strengthen outcomes. (AACN Essentials, p. 42)
Domain 7: Systems-Based Practice	Responding to and leading within complex systems of health care. Nurses effectively and proactively coordinate resources to provide safe, quality, equitable care to diverse populations. (AACN Essentials, p. 44)
Domain 8: Informatics and Healthcare Technologies	Information and communication technologies and informatics processes are used to provide care, gather data, form information to drive decision-making, and support professionals as they expand knowledge and wisdom for practice. Informatics processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practices and professional and regulatory standards. (AACN Essentials, p. 46-48)
Domain 9: Professionalism	Formation and cultivation of a sustainable professional nursing identity, accountability, perspective, collaborative disposition, and comportment that reflects nursing's characteristics and values. (AACN Essentials, p. 49)

Domain 10: Personal, Professional, and Leadership Development	Participation in activities and self-reflection that foster personal health, resilience, and well-being, lifelong learning, and support the acquisition of nursing expertise and assertion of leadership. (AACN Essentials, p. 53-54)

Each Essentials concept serves as a core component of knowledge, facts, and skills across multiple situations and contexts within nursing practice. Each concept functions as a "hub for transferable knowledge, thus enhancing learning when learners make cognitive links to other information through mental constructs" (The Essentials: Executive Summary, p. 2). Integrating concepts within the competencies and sub-competencies is essential for the application throughout the educational experience and serves as a foundation for students learning (The Essentials: Executive Summary). The eight featured concepts and explanations included within the Essentials are below in Table 5.

Table 5
Nursing Concepts and Their Explanations

Concept	Concept Explanation
Clinical Judgement	"As one of the key attributes of professional nursing, clinical judgment refers to the process by which nurses make decisions based on nursing knowledge (evidence, theories, ways/patterns of knowing), other disciplinary knowledge, critical thinking, and clinical reasoning. This process is used to understand and interpret information in the delivery of care. Clinical decision-making based on clinical judgment is directly related to care outcomes" (Essentials, 2021, p.12).
Communication	"Communication, informed by nursing and other theories, is a central component in all areas of nursing practice. Communication is defined as an exchange of information, thoughts, and feelings through a variety of mechanisms. The definition encompasses the various ways people interact with each other, including verbal, written, behavioral, body language, touch, and emotion. Communication also includes intentionality, mutuality, partnerships, trust, and presence. Effective communication between nurses and individuals and between nurses and other health professionals is necessary for the delivery of high quality, individualized nursing care. With increasing frequency, communication is delivered through technological modalities. Communication also is a core component of team-based, interprofessional care and closely interrelated with the concept Social Determinants of Health" (Essentials, 2021, p.12).
Compassionate Care	"As an essential principle of person-centered care, compassionate care refers to the way nurses relate to others as human beings and involves "noticing another person's vulnerability, experiencing an emotional reaction to this, and acting in some way with them in a way that is

	meaningful for people" Compassionate care is interrelated with other concepts such as caring, empathy, and respect and is also closely associated with patient satisfaction" (Essentials, 2021, p.12).
Determinants of Health	"Determinants of health, a broader term, include personal, social, economic, and environmental factors that impact health. Social determinants of health, a primary component of determinants of health "are the conditions in the environment where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes and risks." The social determinants of health contribute to wide health disparities and inequities in areas such as economic stability, education quality and access, healthcare quality and access, neighborhood and built environment, and social and community context (Healthy People, 2030). Nursing practices such as assessment, health promotion, access to care, and patient teaching support improvements in health outcomes. The social determinants of health are closely interrelated with the concepts of diversity, equity, and inclusion, health policy, and communication" (Essentials, 2021, p.12).
Diversity, Equity, and Inclusion	"Collectively, diversity, equity, and inclusion (DEI) refers to a broad range of individual, population, and social constructs and is adapted in the Essentials as one of the most visible concepts. • Diversity references a broad range of individual, population, and social characteristics, including but not limited to age; sex; race; ethnicity; sexual orientation; gender identity; family structures; geographic locations; national origin; immigrants and refugees; language; any impairment that substantially limits a major life activity; religious beliefs; and socioeconomic status. • Inclusion represents environmental and organizational cultures in which faculty, students, staff, and administrators with diverse characteristics thrive. Inclusive environments require intentionality and embrace differences, not merely tolerate them. • Equity is the ability to recognize the differences in the resources or knowledge needed to allow individuals to fully participate in society, including access to higher education, with the goal of overcoming obstacles to ensure fairness. • To have equitable systems, all people should be treated fairly, unhampered by artificial barriers, stereotypes, or prejudices. Two related concepts that fit within DEI include structural racism and social justice" (Essentials, 2021, p.12)
Evidence-Based Practice	"The delivery of optimal health care requires the integration of current evidence and clinical expertise with individual and family preferences. Evidence-based practice is a problem-solving approach to the delivery of health care that integrates best evidence from studies and patient care data with clinician expertise and patient preferences and values (Melnyk, Fineout-Overhold, Stillwell, & Williamson, 2010). In addition, there is a need to consider those scientific studies that ask: whose

	perspectives are solicited, who creates the evidence, how is that evidence created, what questions remain unanswered, and what harm may be created? Answers to these questions are paramount to incorporating meaningful, culturally safe, evidence-based practice (Nursing Mutual Aid, 2020)" (Essentials, 2021, p.13).
Health Policy	"Health policy involves goal-directed decision-making about health that is the result of an authorized public decision-making process (Keller & Ridenour, 2021). Nurses play critical roles in advocating for policy that impacts patients and the profession, especially when speaking with a united voice on issues that affect nursing practice and health outcomes. Nurses can have a profound influence on health policy by becoming engaged in the policy process on many levels, which includes interpreting, evaluating, and leading policy change" (Essentials, 2021, p.14).

American Nurses Association Code of Ethics for Nurses

The ANA Code of Ethics for Nurses serves as a guideline for the ethical standards for nurses as they enter the nursing profession. Nurses have a moral duty to the community to practice with respect and competency and promote advocacy and optimal care for healthcare populations.

- **Provision 1**: The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
- **Provision 2**: The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
- **Provision 3**: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
- **Provision 4**: The nurse has authority, accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to provide optimal patient care.
- **Provision 5**: The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
- **Provision 6**: The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
- **Provision 7**: The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
- **Provision 8**: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.

Student Learning Outcomes

End of Program Student Learning Outcomes (EPSLOs) are measurable statements that express what a student will know, do, or think at the end of the learning experience. The following EPSLOs are consistent with standards of professional practice and align with the

American Association of Colleges of Nursing (AACN) Essentials of Baccalaureate Practice, 2021.

EPSLOs Congruency with AACN Essentials

End of Program Student Learning Outcomes (EPSLOs)

Graduates of the BSN Program will be able to:
1. Collaborate in safe, cost-effective, quality care using evidence-based practice to support optimal outcomes for individuals and populations within complex healthcare systems (BSN Essentials Domain 1, 2, 3, 4, 5, 6, 7, 8, & 9).
2. Participate in activities and self-reflection that foster personal health, resilience, and well-being, lifelong learning, and support the acquisition of nursing expertise and assertion of systems-based leadership (BSN Essentials Domains 7 & 10).
3. Utilize information and healthcare technology to guide clinical decision-making across complex systems (BSN Essentials Domains 6, 7, & 8).
4. Provide inclusive care for diverse populations by identifying social determinants of health and advocating equitable care across a variety of settings (BSN Essentials Domains 2, 3, & 7).
5. Exhibit nursing ethics, professionalism, and professional values (BSN Essentials 3, 6, 9, & 10).
6. Synthesize, apply, and disseminate nursing knowledge to improve health and transform care (BSN Essentials Domains 1, 2, 4, & 5).

Courses and Course Sequencing

Undergraduate BSN Nursing Major (Pre-Licensure) BSN Curriculum

The current undergraduate curriculum is 71 credit hours with 728 clinical hours. Figure 3 outlines a sample four-year plan with nursing course sequencing.

Figure 3

Sample Four-Year Plan with Course Sequencing

		Fall Semester	Credit Hrs		Spring Semester	Credit Hrs
First Year	AP	APSU 1000 – Freshman Orientation	1	AP	ENGL 1020 – English Composition II	3
	AP	ENGL 1010 – English Composition I	3	AP	BIOL 2020/2021 – Human Anatomy and Physiology II w/lab	4
	AP	BIOL 2010/2011 – Human Anatomy and Physiology I w/lab	4	AP	History Core	3
	AP	History Core	3	AP	Humanities and Fine Arts Core	3
	AP	Humanities and Fine Arts Core	3	AP	PSYC 1030 – Intro to Psychology	3
	AP	SOC 1010 – Intro to Sociology	3			
		TOTAL SCH	**17**		**TOTAL SCH**	**16**

		Fall Semester			Spring Semester	
Second Year	AP	ENGL 2330 – Topics in World Lit	3		NURS 2010 – **Introduction to Professional Nursing**	3
	AP	COMM 2045 – Public Speaking	3		NURS 2020/2021 – Nursing Assessment and Clinical	4
	AP	MATH 1530 – Elements of Statistics	3		NURS 2030/2031 – **Fundamentals of Nursing and Clinical**	8
		BIOL 2300/2301 – Principles of Microbiology	4		NURS 2040 – Intro to Pharmacology	1
		PSYC 3100 – Developmental Psychology	3			
		TOTAL SCH	**16**		**TOTAL SCH**	**16**

		Fall Semester			Spring Semester	
Third Year		NURS 3020 – Psychopharmacology	2			
		NURS 3060/3061 – Psychiatric Mental Health Nursing & Clinical	7		NURS 3070/3071 – Adult Health I Nursing and Clinical	8
		NURS 3210 – Intro to Nursing Research	3		NURS 3080 – **Lifespan Pharmacology**	4
		TOTAL SCH	**12**		**TOTALSCH**	**12**

		Fall Semester			Spring Semester	
Fourth Year		NURS 4050/4051 – Community and Public Health Nursing & Clinical	6		NURS 4040/4041 – Maternal Child Nursing & Clinical	8
		NURS 4060/4061 – Adult Health II Nursing & Clinical	8		NURS 4070/4071 – Leadership and Management of Professional Nursing & Clinical	6
		NURS 4080 – Trends and Issues of Professional Nursing	2		NURS 4100 – Clinical Integration	1
		TOTAL SCH	**16**		**TOTAL SCH**	**15**

RN to BSN Curriculum

All RN to BSN courses is delivered online and are 7-week courses.

Table 6

RN to BSN Course Offerings (began Fall 2025)

Fall Session A (7-week courses)	Credit Hours	Fall Session B (7-week courses)	Credit Hours
NURS 3300 Concepts of Professional Nursing for RNs	3	NURS 3390/3391 Nursing Assessment for RNs/Lab	4
NURS 3310 Research for RNs	3	NURS 4351 Community Nursing for RNs Clinical	3
NURS 3380 Pathophysiology for RNs	2	NURS 4371 Leadership for RNs Clinical	3
NURS 4350 Community Nursing for RNs	3	NURS 4380 Trends & Issues for RNs	3
NURS 4370 Leadership for RNs	3		
Spring Session A (7-week courses)		**Spring Session B (7-week courses)**	
NURS 3300 Concepts of Professional Nursing for RNs	3	NURS 3390/3391 Nursing Assessment for RNs/Lab	4
NURS 3310 Research for RNs	3	NURS 4351 Community Nursing for RNs Clinical	3
NURS 3380 Pathophysiology for RNs	2	NURS 4371 Leadership for RNs Clinical	3
NURS 4350 Community Nursing for RNs	3	NURS 4380 Trends & Issues for RNs	3
NURS 4370 Leadership for RNs	3		
Summer Session 3 (7-week courses)			
NURS 3300 Concepts of Professional Nursing for RNs	3		
NURS 3310 Research for RNs	3		
NURS 3341 Elective: Holistic Nursing for RNs	3		
NURS 3343 ER Nursing	3		
NURS 3344 Elective: Wound Management for RNs	3		

SON Curriculum Course Notebook Guidelines

As outlined in our MEP, specific documents **must be uploaded** for all courses by the last day of the semester to the Curriculum Course Notebook in the D2L shell at the end of each semester.

Course Documents Required:
- Course Syllabus
- Course Calendar
- Clinical Schedule (if applicable)
- Course Snapshot
- Content Mastery Exam Results (if applicable)
- BSN Guidelines and Syllabus Acknowledgment Quiz Results

Additional Course Documents Required (**If Applicable**)

Additional documents may be required for some courses if applicable to their course. These documents may include assessment methods and results for SACSCOC, teaching/learning practices, or student assessment for CCNE. Courses and documents required to upload are subject to change. Required additional documentation can be found in Accreditation Station and/or Course Notebooks in D2L.

A list of required course documents, naming requirements, and any additional information can be found in Accreditation Station and/or Course Notebook D2L shells.

Curriculum Committee Approval

While course faculty have "academic freedom", there are certain aspects of the course that cannot be changed without approval from the Curriculum Committee. Proposed course changes must be submitted via the approved form (Proposed Changes to a BSN Course Form) to the Curriculum Committee for discussion and approval. The proposal form is also located in Appendix A.

Some course changes require additional steps, such as Curriculog submission. The course changes that require approval are:
- Course name
- Course pre-requisites or co-requisites
- Course delivery method (hybrid, online, face-to-face, etc.)
- Course description
- Course outcomes
- Clinical outcomes
- Course topics
- EPSLO Assignment/Measurement (if applicable)

Course faculty have the right to change course textbooks. However, if multiple courses use the same resource, steps must be taken to involve all courses and course faculty before

making changes. The Curriculum Committee must be notified if any textbooks are changed. Textbooks cannot be changed once registration for courses begins. Please see APSU Textbook Adoption Policy for more information.

Accreditation

Accreditation Expires: December 31, 2033
Continuous Improvement Process Report (CIPR) Deadline: May 2028 (presumed); usually completed at the halfway point
https://www.aacnnursing.org/CCNE

CCNE Mission and Purposes

The Commission on Collegiate Nursing Education (CCNE) is an autonomous accrediting agency, contributing to the improvement of the public's health. The Commission strives to promote the quality and integrity of baccalaureate, graduate, and residency/fellowship programs in nursing. The Commission serves the public interest by assessing and identifying programs that engage in effective educational practices. As a voluntary, self-regulatory process, CCNE accreditation supports and encourages continuous quality improvement in nursing education and nurse residency/fellowship programs.

CCNE accreditation is a nongovernmental peer review process that operates in accordance with nationally recognized standards established for the practice of accreditation in the United States and its territories. Accreditation by CCNE is intended to accomplish at least five general purposes:

1. To hold nursing programs accountable to the community of interest -- the nursing profession, consumers, employers, institutions of higher education, nursing students, nurse residents and fellows -- and to one another by providing that these programs have mission statements, goals, and outcomes that are appropriate to prepare individuals to fulfill their expected roles.
2. To evaluate the success of a nursing program in achieving its mission, goals, and outcomes.
3. To assess the extent to which a nursing program meets accreditation standards.
4. To inform the public of the purposes and values of accreditation and to identify nursing programs that meet accreditation standards.
5. To foster continuing improvement in nursing programs, and, thereby, in professional practice.

Scope
CCNE serves higher education institutions and healthcare organizations throughout the United States.

Values

CCNE accreditation activities are premised on a statement of principles or values. These are that the Commission will:

a. Foster *trust* in the process, in CCNE, and in the professional community.
b. Focus on stimulating and supporting *continuous* quality improvement in nursing programs and their outcomes.
c. Be inclusive in the implementation of its activities and maintain an openness to the *diverse institutional and individual issues and opinions* of the community of interest.
d. Rely on *review* and *oversight* by peers from the community of interest.
e. Maintain *integrity* through a consistent, fair, and honest accreditation process.
f. Value and foster *innovation* in both the accreditation process and the programs to be accredited.
g. Facilitate and engage in *self-assessment*.
h. Foster an educational climate that supports program students, graduates, and faculty in their pursuit of *life-long learning*.
i. Maintain a high level of *accountability* to the publics served by the process, including consumers, students, employers, programs, and institutions of higher education.
j. Maintain a process that is both *cost-effective* and *cost-accountable*.
k. Encourage programs to develop graduates who are *effective professionals* and *socially responsible* citizens.
l. Ensure *autonomy* and *procedural fairness* in its deliberations and decision-making processes.

https://www.aacnnursing.org/CCNE-Accreditation/Who-We-Are

Next visit: 2026-2027

Tennessee Board of Nursing Mission
The board's mission is to safeguard the health, safety and welfare of Tennesseans by requiring that all who practice nursing within this state are qualified and licensed to practice. Board responsibilities center around three broad functions—licensure, education and practice. The board grants licenses to licensed practical nurses, registered nurses, advanced practice registered nurses (certificate), and registered nurse first assistants (certificate) who meet the requirements of the statutes and rules. Only graduates of approved schools of nursing are eligible to take the National Council Licensure Examination (NCLEX), which is required for licensure.

Tennessee Board of Nursing

Clinical Faculty Guidelines

Introduction and Purpose

This handbook is designed to offer information relevant to the BSN clinical faculty of the School of Nursing and contains only those policies and procedures specific to clinical nursing faculty.

On-Boarding Workflow: New Part-Time (Adjunct) BSN Clinical Faculty

- **BSN 'Clinical Course" Coordinator Faculty:** Email the potential part-time BSN Clinical Faculty the application link People Admin Clinical Adjunct Position Posting and inform the applicant of the required materials (Cover letter, CV, & Transcripts) to apply for the position.
    - *Part-Time (Adjunct) BSN Clinical Faculty Qualifications:*
        - **Minimum Qualifications**
            - RN (active, TN)
            - Academically prepared for areas in which they teach (degree specialization, specialty coursework, or other as appropriate)
            - Clinical Expertise: minimum of 3 years of active clinical practice and maintains clinical expertise in the relevant area of practice
            - Graduate degree
        - **Exceptions**: justification is required for any faculty who do not have a graduate degree (CCNE II-E).
    - https://www.aacnnursing.org/Portals/42/CCNE/PDF/Standards-Final-2018.pdf

- **BSN 'Clinical Course' Coordinator Faculty:** May recommend potential applicants to the Director's Office but are not responsible for recruiting or securing adjunct faculty.
- **ADON:** Periodically checks for applications in the application portal. The ADON will reach out to HR & request the 'release of the applicant' as needed. Emails the BSN Clinical Coordinator Staff of the new potential part-time BSN Clinical Faculty.
- **BSN Clinical Coordinator Staff:** Emails the new part-time applicant a list of the clinical requirements to begin gathering (RN Licensure, Immunizations, etc.), coping the BSN Clinical 'Course' Coordinator & ADON, and emails the new, part-time faculty with the CastleBranch login to upload required clinical materials.
- **Director's Office:** Reviews the CV and transcripts and completes a letter of exception as applicable upon Director approval. The BSN Clinical Course Coordinator Faculty is copied when the paperwork is submitted to HR.
- **Director's Office:** Once the HR Welcome email is received, the BSN 'Clinical Course' Coordinator Faculty is copied to provide an update/notification. The BSN Clinical Coordinator Staff are notified as well.
- **BSN Clinical Coordinator Staff & BSN Clinical Course Coordinator Faculty**: Work together to complete facility-specific clinical orientation/paperwork.
- **BSN 'Clinical Course' Coordinator Faculty**: Complete the clinical assignment in collaboration with the new Part-Time (Adjunct) BSN Clinical Faculty. The maximum load is 12 TLC per semester and 27 per AY.

Clinical Faculty Requirements

BSN Clinical Coordinator Staff: Ensures clinical faculty understand clinical requirements, orientation, training guidelines, and deadlines per facility. A specific list of requirements is located in Accreditation ~ Facility Clinical Requirements. Will serve as the point of contact between the facility and colleagues. Will ensure specific facility requirements are maintained and up to date in Accreditation Station > Facility Clinical Requirements.

Facility	Drug Screen	Background Check	Comments
BACH	No	No	Ft. Campbell
Cumberland Hall	Yes	Yes	
Jennie Stuart	Yes	Yes	
Matthew Walker	No	Yes	
St. Thomas	Yes	Yes	
Tennova	Yes	Yes	Active Tennova employee: no records needed
Tri-Star	Yes	Yes	CMC/ Skyline/ NorthCrest/ Horizon
Unity	No	Yes	
VA Hospital	Yes	Yes	No student files are needed unless requested
VUMC/VMC	Yes	Yes	Requires 2-step TB or Quantiferon

*New hires may request a current background check from HR.

To order Background Checks and/or Drug Screening:
Order Background Check Only (Code: TX98bg)
Order Background Check & Drug Screen (Code: TX98)
Order Drug Screen Only (Code: TX98DT)

Ordering through CastleBranch ensures the specific requirements are met and assists as a tracking tool.

All Clinical Faculty maintain CastleBranch files. Instructions are provided upon hire. The nursing Admin office will audit for compliance each semester.

Policies for Clinical Adjunct

- **APSU Email**: APSU will issue each faculty an email. It is the responsibility of adjunct faculty to check the APSU email at least once a week during their contract.
- **Faculty Dress Code**: Adjunct faculty will wear the APSU clinical faculty name tag. Faculty dress should be appropriate for the clinical setting. Specific requirements should be discussed with the course coordinator.
- **Faculty Illness**: Contracts are based on the number of days/hours the adjunct is to work. In case of illness, the adjunct should notify the students, clinical unit, and course coordinator. The adjunct faculty will be responsible for working with the course

coordinator to make up the clinical time with the students before the allotted clinical time ends.

- **Student Illness**: Adjunct faculty are responsible for notifying the course coordinator if a student does not attend any scheduled clinical rotations.
- **Inclement Weather**: The SON follows APSU's inclement weather policy. If the campus is closed or classes are delayed due to inclement weather, clinicals will also be canceled or delayed. When planning for early morning clinicals, if the university has announced no delay or cancellation, the adjunct instructor should use their best judgment and communicate their plans to their group and the course coordinator. Students should also be permitted to make decisions regarding their ability to safely attend clinical if a decision by the university has not yet been made.
- **Academic Integrity**: The APSU academic honesty and integrity policy applies to students in both classroom and clinical settings. All students are expected to complete their work independently of others unless specifically authorized to work together by the faculty. Academic misconduct is defined as:
  - *Plagiarism*. The adoption or reproduction of ideas, words, statements, images, or works of another person as one's own without proper attribution.
  - *Cheating*. Using or attempting to use unauthorized materials, information, or aids in any academic exercise or test/examination. The term academic exercise includes all work submitted for credit or hours.
  - *Fabrication*. Unauthorized falsification or invention of any information or citation in an academic exercise.
  - *Facilitation or Collusion*. Assisting or attempting to assist another to violate a provision of the institution's student code of conduct regarding academic misconduct.
  - If adjunct faculty suspect that a student has committed academic misconduct in the clinical setting (ex., plagiarizing clinical paperwork or fabricating patient care documentation), the adjunct should notify the course coordinator immediately and prepare a statement of the incident, as well as any documentation to support their concerns.
- **Student Illness at Clinical**: If a student becomes ill at clinical or cannot complete the clinical hours safely, the adjunct faculty should send the student home, noting the hours to be made up, and notify the course coordinator. The adjunct should work with the student and the course coordinator to reschedule clinical time for the student.
- **Grading Policy**: Adjunct faculty should provide timely and thoughtful feedback on all clinical assignments, generally within one week of submission (or per course requirements). All clinical assignments must be satisfactorily completed for students to receive a passing clinical grade. In addition, students must achieve a satisfactory score on all essential/critical areas of the clinical evaluation tool to pass the course. Please note that the same grade is given for both the class and clinical portion of the course. If a student fails clinically, they do not pass the class, and vice versa. If adjunct faculty

anticipate that a student will not be successful in an essential area of the clinical evaluation tool, they should notify the course coordinator and work with the student and coordinator to develop a remediation plan.

Responsibilities of Adjunct Faculty

1. Complete all nursing hiring requirements, including:
    a. Orientation to the clinical unit
    b. Meet with the Course Coordinator for information about course/clinical requirements (see Table 7)
    c. Mandatory new hire and annual training. (Clinical Faculty Day)

Table 7
Course Information and Teaching Assignment for Clinical Adjunct

Course Information and Teaching Assignment for Clinical Adjunct
Course Syllabus, Handouts, Forms, & Tools • Course Outline (D2L, see below) • Course Schedule (D2L, see below) • Clinical Assignments and list of students
Textbooks • Provided on an as-needed basis
Cooperating Agencies • Facility and unit assigned to • Unit-specific orientation based on agency requirements • Unit contacts • Unit policies & routines (for example, shadowing for one day on the unit if not working there)
Student Learning and Evaluation • Care Plans • Assignments • Grading recommendations • Simulation
Student Clinical Orientation • Parking • Computer access • EMR orientation • Medication administration procedures
Access to Course Documents and Rubrics • D2L, ATI, and EHR required training for all new employees.

Student Evaluation
- Ongoing communication throughout the semester with Course Coordinator related to deficiencies in student performance or the need for remediation
- Complete 2 per semester: Midterm (informal) & completion (formal of clinical experience.
- Performance Evaluations are to be submitted to the Course Coordinator within one week of the final clinical experience.
- Performance Evaluation rubric – found under Content within D2L Course Website
- Remediation issues (extra lab time, simulation, performance improvement plan)

Communication
- Ongoing with the Course Coordinator at least once a week. Establish a method of preferred communication with your student group.

Incident Reporting
- Per agency guidelines. DO NOT INCLUDE PATIENT DATA. Use an initial/room number but not identifying information. A copy of the incident report should be submitted to the Course Coordinator.

Role Conflict
When you are contracted as a clinical instructor in an adjunct capacity, you are an employee of both the School of Nursing and the entire Austin Peay State University. You may also be employed by an outside agency while fulfilling your contractual duties for APSU. It is the expectation that while performing clinical supervision in an outside facility (acute/long term/community), your priority will be the experience of the APSU student nurses. An APSU photo name badge will be provided to you and is expected to be worn to ALL clinical experiences. This name badge will indicate your primary purpose for being on the clinical unit to the staff at the clinical agency. As a role model for nursing students, please establish appropriate boundaries with the unit staff, especially if this is a unit that you serve in another professional role.

Evaluation of Adjunct Faculty
Students evaluate adjunct faculty and all nursing faculty at the end of each semester. The evaluation is administered through the learning management system, and adjunct faculty have access to the evaluations after final grades for the semester have been submitted.

Adjunct faculty also are evaluated by SON leadership or designee. This occurs each academic year, but all attempts are made to complete it in the fall semester. Part-time adjunct teaching in a didactic course will be evaluated using the following form: Part-time Instructor Evaluation. Part-time adjunct teaching clinical will be evaluated using the following form: SON Part-Time Clinical Evaluation.

Hiring and Orientation Process

The following is part of the APSU webpage Adjunct / Part-Time Instructor Processes. The following link will lead you to the Adjunct/Part-Time Instructors Processes, where there are several links, including the hiring and orientation process, with additional information for Adjunct (part-time) faculty.

Once the APSU Human Resources office receives the part-time instructor employment documents of the candidate to be employed as a part-time instructor, HR will initiate a background check of the candidate.

1. Human Resources will notify the applicant of the official hiring decision, with a copy to the department chair/director and the assistant to the department chair/director.
2. Human Resources will work with the candidate to obtain signatures on the contract and process all needed hiring forms and documentation, including official transcripts. HR will obtain an APSU email account and A number (if not already assigned) for the new part-time instructor.
3. The Center for Advancement of Faculty Excellence (CAFE) will invite the new part-time instructor to attend an orientation session to acclimate them to the APSU environment. These "university-level" orientations will be conducted in Fall, Spring, and Summer for new part-time instructors regarding APSU policies, procedures, and resources and an overall welcome to Austin Peay.
4. The department chair and faculty are responsible for conducting an orientation to the department with new part-time instructors, including but not limited to departmental policies, departmental expectations, including course syllabus, textbooks, and course and program learning outcomes; building safety and OSHA/TOSHA if applicable; information about confidentiality and FERPA (reinforcing the required university training), referral to D2L training and support, and the process used to evaluate part-time instructors in the department.
5. The departmental orientation for part-time instructors can be conducted in a group or individual setting at the department chair's discretion and in consideration of the needs and time constraints of the part-time instructors while ensuring an effective orientation to promote a quality teaching and learning environment for APSU students.

Clinical Faculty (Adjunct) Orientation Day

The SON APSU holds a clinical faculty (adjunct) orientation day for new and returning clinical instructors. This orientation day is held at least once an academic year (Fall semester) and may also be held during the spring semester. **Clinical Faculty Day is mandatory for all clinical instructors.** The mandatory SON orientation day is typically held the Friday before classes officially start for the semester, but the date and time will be communicated to you by the SON, course coordinator, or both. Information about the hiring process, pay, policies, part-time clinical adjunct

responsibilities, and other information specific to the clinical courses will be offered throughout the day.

Supervision of Students in Clinical

The instructor is responsible for instructing and supervising students in the clinical area. In addition, the instructor is responsible for providing learning experiences that facilitate applying and integrating theoretical principles, active participation and experience in patient care management, and observation with active involvement in professional roles for nurses in different settings. During clinical experiences, the focus for the **students should be on providing direct patient care** and being active participants on the clinical unit; observation activities and alternate experiences should be kept to a minimum. The instructor is also responsible for ensuring patient safety and the school's compliance with policies established by the clinical agency. Students may not take verbal orders, sign off ANY orders, witness narcotic wasting, or initiate/administer blood products. The student must always function within their scope of practice.

The APSU School of Nursing expects all clinical faculty to actively supervise students during their clinical experiences. The TN Nurse Practice Act, revised in 2019, defines supervision as: "Supervision means overseeing or inspecting with authority. The basic responsibility of the individual nurse who supervises others is to determine which nursing needs can be delegated safely to others and whether the individual to whom the duties are entrusted must be supervised personally" (page 25).

- Directly teach expected behaviors and routines for the specific clinical setting
- Pre-correct, remind, and prompt expected behavior and routine before and while on the clinical unit.
- Remain visible on the unit by continuously moving, scanning the area, and interacting with as many students as possible.
- Provide specific acknowledgments and contextually appropriate positive reinforcement for displays of expected behavior and routines.
- Being the primary supervisor of the care provided by the student so that you can accurately evaluate their clinical performance (unit RNs can supervise students performing care, but this should be the exception, as the clinical instructor is the preferred supervisor).
- Being a support person to both the students and the staff by assisting with patient care when able

The instructor is responsible for maintaining open communication with the unit's staff nurses and nurse managers by discussing clinical objectives and clarifying the students' activities before the clinical experience. It is recommended that the student assignments for the day be posted with the staff/charge nurse, and perhaps the nurse should note which students will be administering medications on the given shift. You may also want to provide the patient care assistants with a list of student assignments.

Patient Assignments

When making patient assignments, it is a good idea to confer with the staff nurses and/or charge nurse to create the most positive experience for the student. In addition, on some units, student assignments may influence staffing assignments, so good communication with the staff nurses is essential.

Some clinical units have defined Student Assignment Forms. If there is no designated form, an optional SON Clinical Assignment Sheet (Appendix D) is available for use.

Medication Administration

Initially, students are expected to pass medications with their clinical instructors to ensure they are proficient. Utilizing the "Rights and Safety Checks" document will guide the clinical instructors' evaluation of the student. After the student is deemed proficient and with the clinical instructor's approval, students can then pass medications with an assigned RN (depending on the clinical facility). If necessary, the "Rights and Safety Checks" document should be shared with unit RNs to ensure patient safety and continuity of administration.

Clinical instructors are responsible for working with students who need extra education on medication administration and should be checking with the staff RNs throughout clinical time to assess students' progress and to see if there are any concerns with the students who are giving medications.

Student Errors in Clinical

In the case of a medication error, the instructor, the student, and the staff nurse should consult with the patient's physician to correct the mistake and **ensure patient safety**. Please also follow any Event Reporting guidelines of the specific agency.

Appropriate documentation is essential for the student's evaluation and for instances where the mistake affects patient care. Medication errors or patient safety issues should be discussed with the Course Coordinator.

Evaluating Student Clinical Performance

Each course has objectives congruent with the program's mission, philosophy, and expected outcomes. The evaluation method of the student's clinical performance may vary somewhat, but there is consistency within the program for accreditation purposes. Each Course Coordinator should carefully review the clinical performance documentation with all clinical instructors for consistency.

Feedback should be given to the students regularly. For example, if a student is unsafe, a private conversation is held with the student to discuss the instructor's concerns. Appropriate

documentation of this conversation is also essential and necessary. **Documentation should clearly describe the unsafe practice, the objective(s) not met, the actual consequences to the patient, the consequences if the student does not meet the objective(s), and the student's comments.** Students not meeting the course objectives must be made aware as soon as possible, and appropriate documentation should be initiated. One strategy to assist the student is to work with the student to develop a specific plan for their improved performance and have the student sign this plan.

Anecdotal notes help keep track of student performance. It is important to record both strengths and weaknesses and make notes on all students, not just the weaker ones. Keeping notes on only the students with problems could be seen as discriminatory. Weekly notes are also helpful when completing Performance Evaluations at midterm and the completion of clinical experiences.

Formative evaluation is ongoing feedback given throughout the semester. Formative feedback may be given orally or in writing. Formative evaluation is the basis for summative evaluation.

Summative evaluation is the evaluation given at the end of a clinical experience. Summative evaluation results in a grade of some type being provided (Clinical experiences are Pass/Fail). Clinical evaluation tools may differ among terms & courses. Still, all contain the same characteristics based on the QSEN Competency and are progress throughout the program, which evaluates the extent to which students have achieved course outcomes.

Evaluation data may be gathered from several sources. Of course, the instructor's observation of the student will be included, but the instructor may also ask the assigned patient broad questions to elicit data about the student's overall interaction. The instructor may also ask the staff nurse who worked with the student for informal input. Learner self-evaluations are also very useful. Students can be asked to grade themselves for the day's experience using the same instructor's tool and provide rationales for their self-reported grades. This can be a valuable tool to promote reflection and critical analysis of self-performance.

Clinical Instructor Thank You
On behalf of Austin Peay State University and the School of Nursing, **THANK YOU** for your time and commitment to the role of adjunct clinical instructor this semester for our nursing students. We sincerely appreciate the energy and professional influence you will share with our students. Your dedication to preparing student nurses is essential to ensure a caring and competent nursing workforce! Without your efforts, the profession would not continue to move forward in exciting and wonderful ways. We are proud to have you in this esteemed nursing program and appreciate all you do. We look forward to working with you again and again!

Appendices

Appendix A: Proposed Changes to a BSN Course Form

Course Number: [   ]   Course Name: [   ]

Date Submitted: [   ]   Submitted by: [   ]

Date Approved: [   ]

Date Not Approved and recommendations needed for approval:

[   ]

Curriculog submission needed:

☐ Yes

☐ No

Proposed changes to the course: (Select all that apply)

☐ Course Name (**Curriculog submission**)

☐ Course pre-requisites or co-requisites (**Curriculog submission**)

☐ Course Delivery Method (Hybrid, Online, Face-to-Face; **Curriculog submission**)

☐ Course Description (**Curriculog submission**)

☐ Course Outcomes

☐ Clinical Outcomes

☐ Course Topics

☐ SLO Assignment/Measurement (Checking this box means this course is linked to Accreditation SLO and SACSCOC; changing an assignment that is linked to either of these affects data collection and must be approved through the Curriculum Committee; See PLBSN.EPSLO Assignment Schedule.docx to determine if your course is linked to SLO/SACSCOC Assignment/Measurement)

Please provide the rationale(s) for the proposed change(s) to the course (Please be sure to align your rationale to the course outcomes).

Do your proposed course changes affect another course (such as the text being used by two courses, etc.)?

☐ Yes

☐ No

Please complete the following in accordance with the proposed changes (For example, if you are only proposing to change the course name, that is the only section that will need to be completed.)

Current Course Pre-requisites or Co-requisites

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Proposed Course Pre-requisites or Co-requisites

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Current Course Name:

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Proposed New Course Name:

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Proposed New Course Text (Please provide a link for the text):

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Current Course Delivery Method (Hybrid, Online, Face-to-Face):

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Proposed Course Delivery Method (Hybrid, Online, Face-to-Face):

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Current Course Description:

Proposed New Course Description:

Current Course Outcomes:

Proposed New Course Outcomes:

Current Clinical Outcomes:

Proposed New Clinical Outcomes:

Current Course Topics:

Proposed New Course Topics:

Additional Comments:
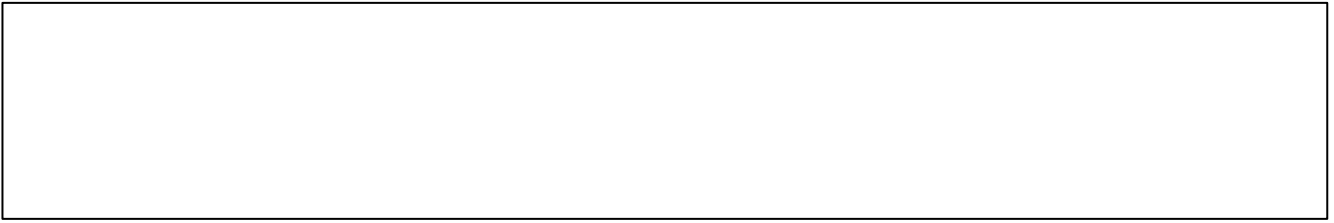
Appendix B: Commonly Used Abbreviations

AACN	American Association of Colleges of Nursing
ACEN	Accreditation Commission for Education in Nursing
ADON	Assistant Director of Nursing
AOQF	APSU Online Quality Fundamentals
APPQMR	Applying the Quality Matters Rubric
ARC	Academics, Research, and Committees
ATI	Assessment Technologies Institute
AY	Academic Year
BFO	Baccalaureate Faculty Organization
BON	Board of Nursing
BSF	Basic Skills Fair
CAFÉ	Center of Advancement of Faculty Excellence
CCNE	Commission on Collegiate Nursing Education
CLLO	Clinical Learning Outcome
CLO	Course Learning Outcome
CME	Content Mastery Exam (in ATI)
CoBHS	College of Behavioral and Health Sciences
CRN	Course Registration Number
D2L	Desire 2 Learn (APSU's learning management system)
DON	Director of Nursing
EPSLO	End of Program Student Learning Outcome
FTE	Full-Time Equivalent
GFO	Graduate Faculty Organization
INACSL	International Nursing Association for Clinical Simulation Learning
IPE	Interprofessional Education
LMS	Learning Management System
LOA	Leave of absence
MEP	Master Evaluation Plan
NFO	Nursing Faculty Organization (all nursing faculty)
OCI	On Campus Intensives (graduate program)
ODS	Office of Disability Services (old name)
PELP	President's Emerging Leaders Program
QM	Quality Matters
QSEN	Quality and Safety Education for Nurses
RTP	Retention, Tenure, and Promotion
SACSCOC	Southern Association of Colleges and Schools Commission on Colleges (university's accreditors)
SDRC	Student Disability Resource Center (used to be ODS)
SIM	Simulation
SNA	Student Nurses Association
SNAP	Student Nurse Austin Peay (APSU public health education)
SLO	Student Learning Outcome
SON	School of Nursing

STTI	Sigma Theta Tau International Nursing Honor Society (Sigma)
THEC	Tennessee Higher Education Commission
TNA	Tennessee Nurses Association
TLC	Teaching Load Credit (same as Workload Credit)
WLC	Workload Credit

Appendix C: Important BSN Program Standing Meetings/Events

BFO Meetings	Typically during the 3rd week of each month
Career Fair	A few hours of a day each semester (Designated dates by Career Services)
Clinical Faculty (Adjunct) Day	Friday before the start of classes
Civility Day Meeting	Designated time during 1st week of classes, if possible (not summer)
Commencement (Graduation)	CoBHS usually Friday morning at end of semester
Curriculum day	One designated day each semester
MEP Day	- Designated day at the beginning and end of each semester - Usually during faculty retreat and a day after graduation
NFO Meetings	Usually twice a semester & any called dates
Pinning	Thursday before graduation
Research Day	One afternoon in November and April at Tennova
Stethoscope Ceremony	One designated afternoon during the first week of the semester (if possible)
Symposium	A designated day in the Spring semester

Mandatory:
- BFO Meetings
- Civility Day
- Commencement (May required and at least one other, either December or August)
- Curriculum Day
- MEP Day
- NFO Meetings
- Pinning
- Specific Committee Meetings
- Symposium

Expected (Good to attend, but not mandatory):
- Career Fair
- Clinical Faculty (Adjunct) Day
- Research Day
- Stethoscope Ceremony

Appendix D: Adjunct Clinical Faculty Orientation Checklist

SON Adjunct Clinical Faculty Orientation Checklist

Orientation Items	Resources	Date Completed
Orientation to Clinical Faculty Role	--------------------------------	---------------------
Orientation Day on campus	Faculty Development Committee & Course Coordinator	
Expectations of Faculty role (active supervision, performance skills, etc.)	Adjunct Clinical Guidelines	
Review all documentation		
Expectations for the level of students (level of independence, professional behavior, etc.)		
Course Coordinator contact information		
Policies/Procedures for Clinical Experiences		
Undergraduate Nursing Student Guidelines		
Agency Orientation/ EMR training/ Facility Name Badge		
Pyxis access		
Unit Routine (clinical unit)		
Orientation to the Course		
D2L access for affiliated course		
Course content		
Course outline & Schedule		
Course-specific assignments		
Names & Email Addresses of Students		
Invitations to scheduled course meetings		
Grading criteria/rubrics		
Online Textbooks (upon request)		
Site visits clinical sites (1-2 times per semester)		
Role of Course Coordinator & Program Coordinator		
Orientation to the University & SON		
Process of Contract		
Program Mission/Philosophy/Student Outcomes		
Computer Access (Email, APSU ID)		
Banner Access		
Faculty Photo Name Badge		
Tour of the School of Nursing		
Introduction to Simulation		

*When completed, turn in to the Course Coordinator to be maintained in the adjunct's file.

APSU SON Clinical Assignment Sheet

Student Name	Patient Rm Number	Notes	Medications RN/Instructor