

**Rhode Island College Zvart Onanian
School of Nursing /St. Joseph Hospital
School of Nurse Anesthesia (SJHSNA)**



**DNP Didactic and Clinical Nurse
Anesthesia Handbook
Class of 2027**

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SECTION I: Program Overview

Introduction

Welcome to Rhode Island College Zvart Onanian School of Nursing/St. Joseph Hospital School of Nurse Anesthesia (RIC Zvart Onanian SON/SJHSNA). SJHSNA was founded and initially accredited in 1962. We are proud to have graduated over 400 Certified Registered Nurse Anesthetist from this program. We pride ourselves on being a close-knit nurse anesthesia program that collaborates as a family within the anesthesia community. The program is located in Providence, RI and through a partnership with RIC Zvart Onanian SON we provide our graduate students with a front-loaded academic curriculum followed by multiple clinical practicum rotations paired with classroom and hybrid learning opportunities through graduation where the student will successfully complete a Doctor of Nursing Practice with a specialty in Nurse Anesthesia degree.

The following handbook serves as a guide for students regarding their education, clinical practicum, policy and procedures and standards for graduation related to their education while matriculated at SJHSNA Doctor of Nursing Practice Nurse Anesthesia (DNP NA) Program. **The handbook should be referred to on a continuous basis as the main resource of information while matriculated in the SJHSNA DNP NA Program.** RIC Zvart Onanian SON/SJHSNA students must also refer to the Rhode Island College Handbook for BSN-DNP Students (with specialization in Nurse Anesthesia), the RIC Graduate Studies Policies and Procedures Manual, and the RIC Manual of Academic Policies and Procedures.

Disclaimer

This Handbook is subject to an annual review and the Program Administration reserves the right to revise policies, procedures, amendments, and deletions within this handbook on an as-needed basis to improve the quality of both the education and outcomes of the program in addition to reflecting the standards established by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA). The program administration will notify the graduate students via email if such changes are to occur while the graduate student is enrolled in the program.

Accreditation

RIC Zvart Onanian SON/SJHSNA is fully accredited by the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs, a specialized accrediting body recognized by the Council for Higher Education Accreditation (CHEA) and the US Department of Education. The program maintains full accreditation thru May 2026. The COA may be contacted at:

Council on Accreditation of Nurse Anesthesia Educational Programs (COA)
10275 W. Higgins Rd., Suite 906
Rosemont, IL. 600618-5603
Main Number: 224-275-9126
Fax Number: 847-728-8128
E-mail: accreditation@coacrna.org
<https://www.coacrna.org>

Program Mission Statement

SJHSNA focuses on enhancing and expanding the knowledge and skills of the professional registered nurse in a graduate framework so that he/she/they, as a nurse anesthetist, can function safely and effectively in numerous settings with patients across the lifespan. This is accomplished through application of educational principles, methodology, theory, research, and practice in a range of activities related to anesthesia through optimum utilization of clinical, simulation lab and didactic learning resources. The missions of SJHSNA and RIC Zvart Onanian School of Nursing synergize to promote accessible higher education including professional majors while respecting diversity and valuing academic excellence. SJHSNA is guided by the values of respect, compassion, responsibility, and teamwork.

Program Philosophy

St. Joseph Hospital School of Nurse Anesthesia evolves from the following statements of philosophy:

1. Demands of a more health-oriented citizenry for expanding health care requires continuing assessment, evaluation, and updating of all aspects of health, including education of health care providers.
2. Administration of anesthesia is an advanced nursing specialty and an essential component of the health care team.
3. The knowledge base, clinical experience, and attitude of select registered nurses can serve as the foundation for the preparation of competent, effective nurse anesthetists.
4. Qualified instructors and preceptors operating within a graduate framework and accredited comprehensive health agencies contribute to the milieu for qualitative learning experiences for student registered nurse anesthetists as they become self-directed.
5. Learning is a life-long process, and the continued development of the nurse anesthetist, through scholarship and research is essential for individual, moral and professional responsibility to care for patients using best practices in nurse anesthesia.

Program Beliefs

The program believes that care, competence, and integrity are the heart of the vigilant profession of nurse anesthesia.

- Care denotes values guiding practice, which includes respect, empathy, integrity, compassion, excellence and vigilance in the delivery of care.
- Competence refers to the skill and knowledge of relevant scientific disciplines and to the vigilance that we exercise.
- Integrity includes honesty such as admitting mistakes, forthrightness with patients, families and other team members and accountability with respect to medications and actions.

Diversity, Equity & Inclusion Statement:

St. Joseph Hospital School of Nurse Anesthesia stands with the AANA's belief in the commitment to diversity, equity, and inclusion justified in cultural awareness, sensitivity, and competency of all persons up to but not limited to the community, patients, providers, faculty, students, applicants, and administrators' knowledge, experience, values, ideas, attitudes, and skills. SJHSNA believes in providing holistic, patient-centered anesthesia care for patients from diverse backgrounds in a variety of settings across the lifespan. SJHSNA is committed to promoting diversity and inclusiveness within our community and nurse anesthesia program. We foster opportunities to behave equitably and remain respectful to individual beliefs, cultural norms, practices, customs, and traditions. We will continue to support and embrace community differences/values that align with the improvement of successful healthcare access and impartiality while improving health outcomes for individuals, families, and communities.

Family Education Rights and Privacy Act

FERPA is a federal law that protects the privacy of student education records. FERPA generally prohibits the improper disclosure of personally identifiable information derived from education records. RIC Zvart Onanian SON/SJHSNA adheres to FERPA requirements.

DNP Nurse Anesthesia Program Outcomes

Upon completion of the Graduate Program in Nurse Anesthesia, the Graduate student must be able to:

- Integrate scientific principles in the provision of safe, patient-centered anesthesia care across the life- span.
 - ✓ Graduate must be able to demonstrate vigilance with the delivery of patient care while abstaining from unrelated activities within the perioperative setting.
 - ✓ Graduate must demonstrate the ability to protect patients from medically induced complications throughout the perioperative setting.
- Implement organizational and systems leadership principles for quality improvement and problem solving in the health care system.
 - ✓ Graduate must display the ability to apply knowledge in critical decision making and problem solving.
 - ✓ Graduate must provide patient-centered wholistic care while employing evidence-based practice.
 - ✓ Graduate adheres to the *Code of Ethics for Certified Registered Nurse Anesthetists*.
- Synthesize and apply clinical scholarship and analytic methods to nurse anesthesia practice.
 - ✓ Interpret and integrate information from a variety of monitoring modalities including both noninvasive and invasive techniques.
 - ✓ Graduate must apply science-based theories and beliefs to explore new practice approaches to nurse anesthesia in patients of extreme ages and across the lifespan.
 - ✓ Graduate must analyze strategies to improve patient outcomes in a variety of populations while remaining cost effective.
- Demonstrate competency in systems/technology and patient care technology for the improvement and transformation of health care.
 - ✓ Graduate must demonstrate the ability to use systems/technology to support and improve patient care/healthcare systems.

- ✓ Graduate must examine alternative business practices throughout nurse anesthesia delivery settings and interpret the different models of practice.
- Advocate for change in health care practice through policy evaluation and development.
 - ✓ Graduate must apply knowledge acquired from didactics and formulate it to practice in critical decision making and problem solving.
 - ✓ Graduate must be able to discuss and collaborate with patients of all ages, their family members, and healthcare professionals that have stemmed from acquired interpersonal and communication skills.
- Provide leadership in interprofessional collaboration to improve health care outcomes for individuals and populations across the lifespan.
 - ✓ Graduate must be able to incorporate critical and insightful thinking in his/her/they leadership approach to nurse anesthesia practice.
 - ✓ Graduate must display leadership through autonomous modalities of practice throughout their education.
- Design strategies in clinical prevention and population health to improving the nation's health.
 - ✓ Graduate must hold themselves accountable for his/her/they practice while exploring new strategies to improve patient outcomes through anesthesia.
 - ✓ Graduate must display knowledge regarding the impact of public policy making on the distribution of nurse anesthesia care on a state and federal level.
 - ✓ Graduate must implement analytical methodologies for the evaluation and formulation of health care related to public policy changes across the nation.
- Utilize advanced critical thinking and judgment in the management of clinical situations and systems.
 - ✓ Graduate must evaluate and interpret health related outcomes in a variety of clinical based settings.
 - ✓ Graduate must hold themselves accountable for medical diagnoses made in the perioperative setting.
 - ✓ Graduate must utilize adequate critical thinking skills while maintaining vigilance in the clinical setting to prepare them for autonomous nurse anesthetist practice.

In addition to the program outcomes, the graduate student must obtain proficiency in the following:

- Perform a pre-anesthetic assessment and interview and physical assessment, to include:
 - ✓ Psychological preparation of the patient for anesthesia and surgery.
 - ✓ Obtaining an accurate health history from the patient and/or family.
 - ✓ Evaluation of the patient's physical and psychological status identifying abnormalities that will have implications on the anesthesia plan of care including evaluation of all laboratory, radiographic, POCUS and any other related diagnostic test data.
- Formulate a comprehensive and well thought out anesthesia management plan.
- Conduct a proficient and detailed anesthetic machine check.
- Administer a physiologically sound anesthetic, using general and/or regional techniques and procedures that are compatible with the condition of the patient.
- Identify the need for, and insert, a variety of invasive monitoring devices including peripheral intravenous, arterial, and central venous catheters.

- Develop and execute an effective plan for fluid and blood component administration.
- Execute and maintain effective mechanical ventilation integrating available information.
- Implement and supervise appropriate physical positioning of the patient to ensure safety for the patient and optimum working conditions for the surgical team.
- Recognize indications of physiological stress demonstrated by patients and initiate appropriate interventions.
- Implement indicated crisis interventions for the patient undergoing anesthesia and surgery to facilitate safe and effective patient care as well as efficient and harmonious function of the health care team.
- Function as a resource person for the respiratory care of patients receiving mechanical ventilation.
- Perform a postoperative evaluation of a patient while examining ways to learn from the assessment.
- Critically evaluate and apply research in preparation of a Doctor of Nursing Practice project.
- Function as a positive member of the health team and the role model for future health care providers.
- Pass the Self Evaluation Exam (SEE) with a score according to the SEE policy/procedure put forth by the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA).
- Assume the role of a Certified Registered Nurse Anesthetist while maintaining a commitment to diversity, equity, and inclusiveness within the community.

The DNP Nurse Anesthesia Program has specific educational objectives and outcome criteria consistent with the requirements put forth by its accrediting agency (Council on Accreditation of Nurse Anesthesia Educational Programs [COA]):

The DNP Nurse Anesthesia student will demonstrate that they have procured all knowledge, skills, and competencies in patient safety, perianesthetic management, critical thinking, communication, and the expertise needed to fulfill their professional duty and responsibility. Nurse Anesthesia students will demonstrate proficiency, safety, and confidence in their ability to manage independent anesthesia care at a level consistent with that of a new graduate upon entry into nurse anesthesia practice.

PATIENT SAFETY:

The graduate must demonstrate the ability to:

1. Be vigilant in the delivery of patient care.
2. Refrain from engaging in extraneous activities that abandon or minimize vigilance while providing direct patient care (e.g., texting, reading, emailing, etc.).
3. Conduct a comprehensive equipment check.
4. Protect patients from iatrogenic complications.

PERIANESTHESIA

The graduate must demonstrate the ability to:

1. Provide individualized care throughout the perianesthesia continuum.
2. Deliver culturally competent perianesthesia care (*see Glossary, "Culturally competent"*).

3. Provide anesthesia services to all patients across the lifespan (*see Glossary, "Anesthesia services" and "Across the lifespan"*).
4. Perform a comprehensive history and physical assessment (*see Glossary, "Comprehensive history and physical assessment"*).
5. Administer general anesthesia to patients with a variety of physical conditions.
6. Administer general anesthesia for a variety of surgical and medically related procedures.
7. Administer and manage a variety of regional anesthetics.
8. Maintain current certification in ACLS and PALS.

CRITICAL THINKING

The graduate must demonstrate the ability to:

1. Apply knowledge to practice in decision making and problem solving.
2. Provide nurse anesthesia services based on evidence-based principles.
3. Perform a preanesthetic assessment before providing anesthesia services.
4. Assume responsibility and accountability for diagnosis.
5. Formulate an anesthesia plan of care before providing anesthesia services.
6. Identify and take appropriate action when confronted with anesthetic equipment-related malfunctions.
7. Interpret and utilize data obtained from noninvasive and invasive monitoring modalities.
8. Calculate, initiate, and manage fluid and blood component therapy.
9. Recognize, evaluate, and manage the physiological responses coincident to the provision of anesthesia services.
10. Recognize and appropriately manage complications that occur during the provision of anesthesia services.
11. Use science-based theories and concepts to analyze new practice approaches.
12. Pass the National Certification Examination (NCE) administered by the NBCRNA.

COMMUNICATION

The graduate must demonstrate the ability to:

1. Utilize interpersonal and communication skills that result in the effective exchange of information and collaboration with patients and their families.
2. Utilize interpersonal and communication skills that result in the effective interprofessional exchange of information and collaboration with other healthcare professionals.
3. Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of interprofessional care.
4. Maintain comprehensive, timely, accurate, and legible healthcare records.
5. Transfer the responsibility for care of the patient to other qualified providers in a manner that assures continuity of care and patient safety.
6. Teach others

LEADERSHIP

The graduate must demonstrate the ability to:

1. Integrate critical and reflective thinking in his or her leadership approach.
2. Provide leadership that facilitates intraprofessional and interprofessional collaboration.

PROFESSIONAL ROLE

The graduate must demonstrate the ability to:

1. Adhere to the *Code of Ethics for the Certified Registered Nurse Anesthetist*.
2. Interact on a professional level with integrity.
3. Apply ethically sound decision-making processes.
4. Function within legal and regulatory requirements.
5. Accept responsibility and accountability for his or her practice.
6. Provide anesthesia services to patients in a cost-effective manner.
7. Demonstrate knowledge of wellness and substance use disorder in the anesthesia profession through completion of content in wellness and substance use disorder (*see Glossary, "Wellness and substance use disorder"*).
8. Inform the public of the role and practice of the CRNA.
9. Evaluate how public policy making strategies impact the financing and delivery of healthcare.
10. Advocate for health policy change to improve patient care.
11. Advocate for health policy change to advance the specialty of nurse anesthesia.
12. Analyze strategies to improve patient outcomes and quality of care.
13. Analyze health outcomes in a variety of populations.
14. Analyze health outcomes in a variety of clinical settings.
15. Analyze health outcomes in a variety of systems.
16. Disseminate scholarly work.
17. Use information systems/technology to support and improve patient care.
18. Use information systems/technology to support and improve healthcare systems.
19. Analyze business practices encountered in nurse anesthesia delivery settings.

The Council on Accreditation of Nurse Anesthesia Educational Programs. (2023, January 30). *Standards for Accreditation of Nurse Anesthesia Programs - Practice Doctorate*. <https://www.coacrna.org/wp-content/uploads/2023/02/Standards-for-Accreditation-of-Nurse-Anesthesia-Programs-Practice-Doctorate-revised-January-2023.pdf>

SECTION II: Student Resources

Library Facilities:

Students enrolled in the RIC Zvart Onanian SON/SJHSNA have access to the following libraries:

- Adams Library at RIC
- SJHSNA Library in the Program Administrations School office

Teaching Resources:

Printed Material

- Course Textbooks
- Journals and Periodicals
 - Anesthesia and Analgesia
 - Various medical journals available electronically and in print in the hospital and Adams libraries.

Anesthesia simulators:

- Simulation Lab at Rhode Island Nurse Education Center (RINEC)
- Spinal and Epidural
- Cricothyroidotomy
- Central Line
- Arterial Line
- Intubation/LMA Mannequins (Adults and Pediatrics)
- Any other related simulation preparations administered by RIC/SJHSNA Faculty

Audio visual Aids:

- LCD projector for Power Point presentations
- Lap top computer for presentations

Additional Resources:

- RIC Writing Center - available at rinec-writing@ric.edu
 - APA formatting
 - General Writing Skills
 - Grammar
 - Research Skills
- RIC Mental Health Support – Rhode Island College HOPE
 - (401) 456-HOPE
- RIC Counseling Center
- Please visit the Rhode Island College website for additional information/resources.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

SECTION III

ADMINISTRATIVE POLICIES/PROCEDURES MANUAL

ADMINISTRATION AND FACULTY

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

COMPLIANCE WITH POLICIES AND PROCEDURES ON ACCREDITATION

POLICY/PROCEDURE 01:

The Program Administrators and faculty at SJHSNA maintain the standards, policies, procedures, and requirements of the accrediting agency, The Council on Accreditation (COA) of Nurse Anesthesia Educational Programs as well as the DNP program at RIC Zvart Onanian SON maintains the standards and requirements by its accrediting agency, the Commission on Collegiate on Nursing Education (CCNE).

The Program Administrators and Faculty at SJHSNA will take corrective action if necessary to act in accordance with the standards, policies, procedures, and requirements of the COA of Nurse Anesthesia Educational Programs. In addition, the Program Administrators will ensure compliance with the *Standards for Accreditation of Nurse Anesthesia Educational Programs* by conducting an annual evaluation of the Program.

Any program changes and revisions that are to be made must come with the approval of the COA of Nurse Anesthesia Educational Programs, Program Medical Director, Program Administrator, Assistant Program Administrator, faculty, as well as the designated College/University Administrators and committees who oversee the Program. External consultants are used to assist as appropriate with the accreditation process and decision-making process.

Under no circumstances does the Program Administration ignore any citation from an accrediting agency. Any partial compliance or noncompliance with the accrediting agency will be monitored, evaluated, and resolved. It is the policy of the Program Administrators and faculty to fully cooperate with the College/University it is affiliated with in correcting any and all deficiencies in the program that is identified by the accrediting agency. The anesthesiology departments at the clinical site affiliates (through affiliation agreements/contracts) share in this effort.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

POLICY CONGRUENCY AND REVISIONS

POLICY/PROCEDURE 02:

All policies and procedures of the SJHSNA DNP Nurse Anesthesia Program will be reviewed annually by the Program Administrators and updated as pertinent and deemed necessary. All policies and procedures are reviewed and approved by the Medical Director of the Program. Any and all policies in congruency with Rhode Island College's policies and procedures are reviewed and approved by the DNP Program Director and the Graduate Nursing Department Chair. Updated versions of all policies and procedures will be sent as a notification to the students who are currently enrolled in the program.

Notification to the students of any policy/procedure change within this Handbook will be within 24 hours of the change. The notification to the student will be sent via RIC E-mail of high importance. By opening the email, the student verifies that he/she/they have been notified of the change. All students, faculty, and program administrators will be held to all new and amended policies immediately upon posting or notification.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

PROGRAM COMMUNICATION

POLICY/PROCEDURE 03:

St. Joseph Hospital School of Nurse Anesthesia (SJHSNA) DNP NA Program believes in effective communication in both academic and healthcare settings. Communication is vitally important as it pertains to professionalism within the Program. The main source of communication between Program Administrators and students is via the RIC email and/or SJHSNA email.

Communication is provided to students via the following platforms:

1. RIC E-mail
2. SJHSNA email (sjhsna@gmail.com)
3. RIC Blackboard Learn
4. Typhon case log notices
5. Memo or Letter
6. Phone

In addition to the means of communication within this policy, it is also the policy of the Program to:

- Maintain file folders in the anesthesia office area for all current clinical students. Students are required to check their file folders as appropriate.
- Maintain office hours according to the course syllabus and also by appointment upon the student's request.
- Respond to student emails to the Program within 48 business hours.
- Acquire and maintain RIC e-mail accounts in order to facilitate communication with students and faculty.
- Keep RIC Office 365 OneDrive up to date for all students on a monthly basis in order for students to appropriately upload and submit the required Anesthetic Management Plans, Clinical Evaluations, Clinical Postoperative Evaluations, and First Day New Orientation Checklists.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

RECRUITMENT OF STUDENTS

POLICY/PROCEDURE 04:

SJHSNA is in accordance with and complies with the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs policies concerning student recruitment. The COA policy is stated below:

Truth and accuracy are evidenced in recruiting and admissions practices, academic calendars, catalogs, publications, grading, and advertising.

Policy:

The SJHSNA DNP NA Program may only recruit students in a manner that is truthful. The program will only publish and disperse publications, catalogues and advertisements that contain complete, current, and accurate information regarding the program's current facts, data, and details. All recruitment and admission activities will be nondiscriminatory and will comply with SJHSNA policies/procedures, RIC policies/procedures, State and Federal standards, as well as standards set forth by the COA. Recruitment may only be done by those who are knowledgeable about the current policies/procedures, curriculum, and standards of the Program.

The following websites have electronic Program Information available to the public:

SJHSNA Website: <https://www.sjhsna.com>

Rhode Island College Website: <https://ric.edu>

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

TUITION AND FEES

POLICY/PROCEDURE 05:

Current tuition and fee information is available to students prior to registration and admission into the Program. All tuition and fees information is available electronically and can be retrieved on the Rhode Island College website at <https://www.ric.edu> as well as St. Joseph Hospital School of Nurse Anesthesia website at <https://www.sjhsna.com>

RICSON (Tuition and fees are the same for all students, regardless of residency)
Per credit hour total of 91 credit hours..... \$1,100 per credit hour
Additional per credit hour fees.....\$35.00

SJHSNA
Non-refundable commitment fee (due within 14 days of acceptance).....\$1500
AANA Associate Membership.....\$200
SEE Exam x 2.....\$265.00
Typhon Group (clinical record keeping)\$150.00
Student Professional Liability Insurance.....\$275.00
APEX Anesthesia 3-year subscription.....\$499.00
Wellness Modules.....\$110.00
Licensure for RI, MA, (Fees are different for each state)

Disclaimer: Tuition and fees are subject to change.

National Certification Exam:
The fee is currently \$1045.00, and subject to change. The fee for the National Certification Examination will be remitted to NBCRNA.

Financial Aid:
Financial aid is available through the Rhode Island College Financial Aid Office for students who qualify. Detailed information is available by visiting the Rhode Island College Financial Aid Office at RIC.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

STUDENT RECORDS

POLICY/PROCEDURE 06:

Accurate, current, and cumulative records of all students' educational activities are maintained for all currently enrolled students.

Student records are maintained in separate folders and are confined securely within the SJHSNA Program Administrators office. Student records include, but are not limited to, the following:

1. Admissions Application for the RIC Zvart Onanian SON/SJHSNA DNP NA Program.
2. Transcript (s) for the undergraduate degree and any transfer credit transcripts (s) from graduate school.
3. Copy of current Rhode Island and Massachusetts RN Professional Licensure
4. Copy of current BLS, ACLS, PALS
5. Verification of the student's status, i.e. disciplinary action (s) taken against student and/or probation, candidate for degree
6. Didactic records of student's transcript (electronic)
7. Advisement records and meeting minutes record (s) with Program Administrators signed by both the Program Administrator and/or advisor.
8. Clinical records relevant to the student. Clinical case logs maintained electronically and are accessible by SJHSNA Program Administrators
9. Evaluations of each student.
10. Verification of each student's AANA Associate Membership

With the graduation of the student, cumulative records will be maintained in the Program's Administrators office for a minimum of five (5) years. After this period, the student's cumulative records may be stored in a site outside of the Program Administrators office but will remain in a secure area. Following completion of the program, a copy of the student's "transcript of student record" is retained as part of the student's completed file and stored securely in the Program Administrators/Program Administrator Assistant's office indefinitely. A copy of the student summative evaluations will be secured indefinitely in the Program Administrative Assistants office. Clinical evaluations are maintained for a minimum of one (1) year, or until documentation of certification attainment.

Please see DNP NURSE ANESTHESIA STUDENT REVIEW OF RECORDS POLICY for how to attain a copy of student records.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

PROGRAM COMMITTEES

POLICY/PROCEDURE 07:

SJHSNA Standing Committees

Objectives

- To promote through immediate and long-range planning of the program philosophy and objectives.
- To foster a unity of purpose by encouraging members to express their own ideas and opinions.
- To work with others to promote both professionalism and organizational growth.
- To maintain continuous self-evaluation of the SJHSNA DNP NA Program

Standing Committees

1. Admissions
2. Program Evaluation
3. RICSON/SJHSNA Partnership Council
4. Grievance

1. Admissions Committee

- a. Members
 - Medical Director, SJHSNA or his designee
 - Program Administrator, SJHSNA
 - Assistant Program Administrator, SJHSNA
 - RIC Dean of SON
 - RIC DNP Program Director
 - RIC Graduate Nursing Department Chair
- b. Purpose:

Review and evaluate the admission process and selection of qualified candidates for presentation to the RIC Zvart Onanian SON DNP Committee for final review and acceptance.
- c. Meetings are held two times each year and on an as needed basis.
- d. Responsibilities
 - Reviews admission criteria for program.
 - Determines interview process.
 - Participates in interviews of applicants.
 - Selects the best qualified applicants for admission in keeping with current criteria for the program.

2. Program Evaluation Committee

- a. Membership

- Medical Director, SJHSNA or his designee
 - Program Administrator, SJHSNA
 - Assistant Program Administrator, SJHSNA
 - Staff CRNA
 - DNP NA Student (appointed yearly)
- b. Purpose
- Evaluates the total program periodically and implements appropriate action to insure its continued development.
 - Evaluates the program to make sure that the program is being held to and accomplishing standards set forth by the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs.
- c. Meetings are conducted two times a year.
- d. Responsibilities
- Discuss post graduate evaluations and employer evaluations.
 - Reviews instructor/student evaluation procedures and recommends changes.
 - Makes recommendation, which will aid in the execution of a well-constructed program.
 - Discuss SEE and/or NCE exam results and discuss ways to improve student scores.
 - Uses the Standards for Accreditation of Nurse Anesthesia Programs to
 1. Assess the quality of the Program
 2. Establish goals, and methods of achieving them
 3. Contributes to the self-study evaluation

3. RICSON/SJHSNA Partnership Council

The RICSON/SJHSNA Partnership Council will meet biannually in order to provide oversight and input regarding the nurse anesthesia option.

- a. Membership
- Program Administrator, SJHSNA
 - Assistant Program Administrator, SJHSNA
 - RIC DNP Program Director
 - RIC faculty from nurse anesthesia option
 - CRNA preceptor-NBA
 - CRNA practitioner
 - Student representative from nurse anesthesia option (appointed yearly)
- b. Purpose
- Review nurse anesthesia program curriculum
 - Oversee compliance with educational standards set forth by the COA, CCNE, etc.
 - Oversee program evaluations
 - Review budgetary issues

4. Grievance Committee

- a. Membership
- Two Physician Representatives
 1. One anesthesiologist
 2. One surgeon

3. Two CRNA clinical preceptors
4. One public Member
5. One Student
6. One unaffiliated educator

b. Purpose

- Purpose of the Grievance Committee is to serve as an objective /unbiased body, to which a student or clinical instructor may appeal to review a prior decision made in a specific case which he/she/they feels to be inappropriate.

c. Meetings

- The Grievance Committee shall meet when petitioned by a student or faculty member.
- There shall be a majority of members present to hear a petition.
 - ~ Meetings will be conducted within the confines of the Rhode Island Nurse Education Center at a time mutually agreed upon by the parties involved.

d. Functions

- Hear the entire testimony concerning the petitioner and the specific case.
 - Take advisement from legal counsel as necessary.
 - Evaluate all facets of the case presented and implications for future reference.
 - Record all pertinent data and formally document case.
 - Make and issue a final written decision to petitioner and parties involved with recommendations where indicated.

Committee Assignments

Admission Committee

Dr. Vijayendra Sudheendra, M.D., Medical Director
 Elena Litmanovich, DNP, MS, CRNA, Program Administrator
 Katie Ricci, DNP, MSN, CRNA, Assistant Program Administrator
 Justin Dilibero, DNP, APRN, CCRN-K, CCNS, ACCNS-AG, FCNS, Interim Dean
 Kara Misto, PhD, RN, DNP Program Director
 Debra Servello, DNP, APRN- ACNP-BC, Professor, Graduate Nursing Department Chair

Program Evaluation Committee

Dr. Vijayendra Sudheendra, M. D., Medical Director
 Elena Litmanovich, DNP, MS CRNA Program Administrator
 Katie Ricci, DNP, MSN, CRNA, Assistant Program Administrator
 Barbara Achey, CRNA
 Karen Flynn, MSNA, CRNA
 Ashlyn Crean, BSN, SRNA
 Theodore Kaiser, BSN, SRNA

RICSON/SJHSNA Partnership Council

Elena Litmanovich, DNP, MS, CRNA, Program Administrator
 Katie Ricci, DNP, MSN, CRNA, Assistant Program Administrator
 Kara Misto, PhD, RN, DNP Program Director
 Anne Tierney, DNP, M.Ed., CRNA
 Marie Rahme, MSN, CRNA

Justin Dilibero, DNP, APRN, CCRN-K, CCNS, ACCNS-AG, FCNS, Interim Dean
Christopher Santilli, BSN, SRNA
John Hoyt, BSN, SRNA

Grievance Committee

Dr. James Park, MD - Anesthesiologist
Dr. Michael Lin, MD - Surgeon
Michelle Kozloski - Public Member
Linda Marsella, MSNA, CRNA
Barbara Achey, MSNA, CRNA
Anne Tierney, DNP, M.Ed., CRNA
Kellie McGarry, BSN, SRNA, Student Representative

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DNP NA EVALUATION PROCESS

POLICY/PROCEDURE 08:

Policy Statement: The systematic evaluation process is a systematic process for continuous self-assessment of the Program. The evaluation process is meant to include all aspects of the program including, but not limited to didactic instruction, clinical instruction, student/faculty accomplishment and gratification of the program. This systematic evaluation process allows for the program as a whole to evaluate the strengths and weaknesses within the program and be able to come up with program interventions that meet the continued needs of the program. This evaluation is created to meet the standards set forth by the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs.

The program will utilize continuous development of evaluation, which by design will help the program to objectively assess program goals that are attained and design future goals for the program's needs.

BSN-DNP NA PROGRAM SYSTEMATIC EVALUATION PLAN

Evaluation method	DNP NA students	Clinical preceptors	Program administration	SON (school of nursing)	Graduates	Alumni
Formative Clinical Evaluation	1.Weekly clinical Self -evaluation 2.Mid-semester Formative Clinical self-evaluations	1.Weekly clinical evaluations of students	1. Reviews Formative Clinical evaluations 2. Conducts Mid-semester Formative Clinical evaluations			
Formative Didactic Evaluation			Review: 1.Mid-semester Course grades 2.Report students at risk to the DNP director	SON faculty: ongoing review: 1. student progress of course outcomes through each semester 2.Mid-semester course grades 3. Report students at risk to the DNP director and the NA program administration		
Summative Clinical Evaluation	End of Practicum Summative clinical Self-evaluation		1.Evaluation and grading at the end of the clinical practicum	DNP director: 1.Reviews of the summative clinical		

			2. Reports students at risk to the DNP director	evaluation results. 2.Reports outcomes to the Graduate Program Committee.		
Summative Didactic Evaluation	Quizzes, exams, assignments		1.Review of the course grades 2.Reports students at risk to the DNP director and graduate committee	DNP director: Review of results at the monthly graduate committee meeting		
End- of program evaluation of students	1.SEE meeting a total score of 430, 2.remediation plan with the individualized learning contract if the SEE score<430 3. retake of the SEE. 4.Comprehensive exam at the end of study 5.Maintaining GPA of 3.0, 6. meeting graduate standards (attachment 134)		1. Review of: Typhon and SEE results 2. report at the SJHSNA program evaluation committee, RICSON graduate committee, and RICSON/SJHSNA partnership council committee 3. Exit interview with students	DNP director/ faculty: 1.review RICSON Performance improvement plan for the DNP (attachment 145). 2.DNP project competency checklist		
Faculty advising of students	Meet with the NA school faculty/ DNP faculty/ DNP project advisors once each semester		Conduct formal and informal advisory meetings with students once each semester to discuss the formative and summative clinical and didactic evaluations and students' progress toward achieving graduate standards	SON faculty: DNP faculty adviser/ DNP scholarly project advisors meet with students at least once a semester		
DNP student evaluation of program			1.Review results of DNP students' evaluation of program 2. Share evaluation feedback with clinical coordinators and the clinical sites 3. present result at the SJHSNA program evaluation committee	1. Results presented: 1. The Graduate Department Graduate Student outcomes committee, 2.Graduate Department Committee (including the DNP and NA Directors) Annually	1.RICSON DNP end-of program evaluation survey (attachment 166). 2.Clinical sites and clinical preceptors evaluations 3. Program director and the assistant program director evaluations 4.SJHSNA	

					overall program evaluation	
RICSON One year and three- year post- graduation surveys			Review and discuss at the SJHSNA program evaluation committee	Reviewed by: 1. The Graduate department students' outcomes committee 2. DNP program committee 3. Graduate program committee		1. DNP One-year post graduate survey 2. DNP Three- years post graduate survey
RICSON One-year and three - year employer electronic survey				Reviewed by: 1. Graduate committee 2. DNP program committee 3. Graduate and student outcomes committee		
SJHSNA DNP one- year post graduate evaluation			Review and discuss at the SJHSNA program evaluation committee			One-year post graduate survey
SJHSNA employer evaluation of DNP graduates			Review and present at the SJHSNA Program evaluation committee			

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

SECTION IV

ADMINISTRATIVE POLICIES/PROCEDURES MANUAL

STUDENTS AND CURRICULUM

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

ADMISSIONS

POLICY/PROCEDURE 09: Admission requirements are defined, published, and utilized for selecting applicants for interviewing. Publication can be found on the SJHSNA website at <https://www.sjhsna.com>

DNP NA Program admission requirements are consistent with the COA of Nurse Anesthesia Educational Programs, the School, and Rhode Island College.

The DNP NA program has a limited number of spots for each cohort and meeting the minimum requirements for admission does not guarantee admission to the Program. The admissions committee members are the deciding personnel for selection of applicants into the Program.

The following information is the current application requirements for admission:

1. A completed application form accompanied by a \$50 nonrefundable application fee.
2. A baccalaureate degree in nursing from an NLNAC or CCNE accredited program.
3. Applicants with international degree and grade equivalency to that of a regionally accredited institution in the United States.
4. Official transcripts of all undergraduate and graduate records.
5. Completion of an undergraduate-level statistics course (MATH 240 or its equivalent) with a minimum grade of C.
6. A minimum GPA of 3.0 on a 4.0 scale in undergraduate coursework.
7. A preferred undergraduate minimum of GPA of 3.0 in science courses.
8. An official report on the Test of English as a Foreign Language (TOEFL) from international applicants for whom English is not their first language.
9. A professional resume or curriculum vitae.
10. Three professional references. One must be from a clinical supervisor.
11. A statement of intent that demonstrates the candidate's leadership and practice experience and reasons for pursuing doctoral study. The statement should be representative of the applicant's writing ability. The statement should be two-to-four typed pages, double-spaced and written in 12-point font.
12. Proof of residency is required for in-state tuition.
13. An interview may be required.

Additional requirements for DNP NA applicants include:

1. Completion of CHEM 106 or an undergraduate course in organic chemistry within the past 7 years, and with a minimum grade of C (preferred grade of B).
2. Current unrestricted licensure for practice in both the State of Rhode Island and the State of Massachusetts (due to clinical rotations in both states).
3. Current AHA BLS and ACLS certification (PALS certification prior to clinical).
4. A minimum of one year of critical care experience. A complete definition of accepted critical care experience is found on the SJHSNA website at <https://www.sjhsna.com>
5. CCRN certification is preferred.

6. An interview is required.

Skills and abilities applicants and students must demonstrate:

The professional performance skills and abilities that applicants, students, and graduates must display are outlined below. A graduate of the program must be able to fulfill the professional performance skills, responsibilities, and duties of a Certified Registered Nurse Anesthetist that is consistent with the American Association of Nurse Anesthetist (AANA) *Professional Practice Manual for the Certified Registered Nurse Anesthetist* documents: *Scope of Nurse Anesthesia Practice*, *Code of Ethics for the Certified Registered Nurse Anesthesiology*, and *Standards for Nurse Anesthesia Practice*. A candidate for the program must be able to demonstrate the following abilities and skills laid out in the five categories: Communication, Motor, Physical Stamina, Intellectual, Behavioral and Social Attributes. Reasonable accommodation for those with documented disabilities will be considered on an individual basis, but a candidate must be able to perform in an independent manner. Both applicants and students are required to update the Program on any health-related changes/status (including medications) that may have an impact on observation, communication, motor, physical stamina, intellectual, behavioral, and social attributes listed below. Also, candidates and students are required to update the Program of any health-related changes/status that may impact vigilance, alertness, and the ability to exercise safe patient care at all times.

Observation: Students must have sufficient sensory capacity to observe in lecture, the laboratory and all perioperative settings. Sensory skills adequate to perform a physical examination. Functional hearing and tactile sensation must be adequate to observe a patient's condition and to elicit information from computerized monitors and procedures regularly required in a physical examination, such as inspection, auscultation and palpation.

Communication: Students must be able to communicate effectively in both academic and healthcare settings. Candidates must show evidence of effective written and verbal communication skills and the ability to work in teams.

Motor: The ability to participate in basic, diagnostic and therapeutic maneuvers and procedures (e.g. palpation, auscultation, drawing blood, starting IV) is required. Candidates must have sufficient motor skills to execute movements reasonably required to provide care to patients related to anesthesia practice, including but not limited to the ability to help move or lift them. Candidates must be able to move between settings, such as clinic, classroom building and hospital.

Physical Stamina: Sufficient to complete the rigorous course of didactic and clinical study is required. Long periods of sitting, standing, or moving are required in classroom, laboratory and clinical experiences.

Intellectual: Students must be able to measure, calculate, reason, analyze and synthesize, both in quiet environments and in areas where distractions, noise and other stressors are present. Problem solving is a critical skill demanded of CRNA's. This requires all of these intellectual abilities. In addition, candidates should be able to comprehend graphic displays of physiologic data, distinguish artifact on monitor display and understand three-dimensional relationships and the spatial relationships of structure. Candidates must be able to read and understand medical and

nursing literature. In order to complete the degree, they must be able to demonstrate mastery of these skills and the ability to use them cohesively in a timely and often critical fashion in problem solving and patient care.

Behavioral and Social Attributes: Students must possess the emotional health required for full utilization of their intellectual abilities, the exercise of good judgment and the prompt completing of all academic and patient care responsibilities. The development of mature, sensitive and effective relationships with patients and other members of the health care team is essential. The ability to effectively function in the face of uncertainties inherent in clinical practice, flexibility, compassion, integrity, motivation, interpersonal skills, and concern for others are all required. Students must understand situational awareness within their education, both in the didactic and clinical settings and apply them to practice.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

CODE OF ETHICS

POLICY/PROCEDURE 10:

Ethics

The Program shall be conducted within the ethical and moral standards defined by those professional groups, institutions, agencies, government boards and other entities having an impact on the program.

St. Joseph Hospital School of Nurse Anesthesia subscribes to the Code of Ethics put forth by the American Association of Nurse Anesthetists (AANA) found at [https://www.aana.com/docs/default-source/practice-aana-com-web-documents-\(all\)/professional-practice-manual/code-of-ethics-for-the-crna.pdf?sfvrsn=d70049b1_8](https://www.aana.com/docs/default-source/practice-aana-com-web-documents-(all)/professional-practice-manual/code-of-ethics-for-the-crna.pdf?sfvrsn=d70049b1_8)

“These ethics are described as “Code of Ethics for the CRNA that define the essentials of honorable behavior for the Nurse Anesthetist.”

“The AANA recognizes the American Nurses Association (ANA) Code of ethics as the foundation for ethical values, duties, and responsibilities in nurse practice.”

Violation of the Code of Ethics above are grounds for dismissal from the program.

As such, our graduate nurse anesthesia students recognize their responsibility to:

- Respect human rights and the values, customs, culture, and beliefs of patients and their family members.
- Support the well-being of the patients under their care, regardless of patient race, color, religion, age, sex, nationality, sexual orientation, disability, social or economic status.
- Demonstrate a high level of competence, attend professional educational activities, and participate in peer review and other continuous quality improvement mechanisms.
- Exhibit professionalism by being responsible and accountable for individual judgments and actions, verifying that patients have given informed consent, and being responsible for patient safety.
- Express awareness of the obligation to collaborate with others in the delivery of safe, competent, quality patient care.
- Maintain confidentiality regarding patients’ privacy as well as other professional matters concerning peers, students, and school applicants.
- Protect patients from harm and advocate for patients.
- Protect patients and/or animals involved in research according to accepted ethical practice and applicable law.
- Pay back student loans and conduct themselves in an honest, equitable and constructive manner.

- Be accountable and responsible for their actions, including self-awareness and assessment of fitness for duty.
- Abide by the policies regarding non-discrimination as put forth by the Program. Non-discrimination treats all supervisors, colleagues, students, and applicants equally and without regard to race, color, marital status, nationality, religion, age, gender, disability, sexual orientation, or any other status protected by law. It is our policy to conduct all practices in compliance with Title VII of the Civil Rights Act of 1964.
- Refrain from fraternizing with instructors/supervisors outside of school functions.

References

1. American Association of Nurse Anesthesiology Code of Ethics for the Certified Registered Nurse Anesthetist. [https://www.aana.com/docs/default-source/practice-aana-com-web-documents-\(all\)/professional-practice-manual/code-of-ethics-for-the-crna.pdf?sfvrsn=d70049b1_8](https://www.aana.com/docs/default-source/practice-aana-com-web-documents-(all)/professional-practice-manual/code-of-ethics-for-the-crna.pdf?sfvrsn=d70049b1_8) Accessed May 5, 2023.
2. American Nurses Association Code of Ethics for Nurses with Interpretive Statements. <https://www.nursingworld.org/practice/nursing-excellence/ethics/code-of-ethics-for-nurses/> Accessed May 5, 2023.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DNP NURSE ANESTHESIA STUDENT RIGHTS

POLICY/PROCEDURE 11:

The DNP Nurse Anesthesia student reserves the right to expect that the Program Administrators will:

- Be conducted in an ethical framework with high moral standards relative to patients, students, faculty and conducting agency.
- Provide adequate supervision in all anesthetizing areas at all times by a CRNA and/or an Anesthesiologist.
- Assure that committed time is not in excess of 64 total hours/week, in compliance with the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs standards.
- Maintain accurate, cumulative records of all educational activities during the matriculation period and thereafter according to the accrediting agency.
- Provide evaluation and feedback through end-of-semester advisory meetings, individual meetings as needed, and meet all evaluation standards set forth by the COA of Nurse Anesthesia Educational Programs throughout the length of the Nurse Anesthesia Program.
- Provide the student registered nurse anesthetist with the didactic, simulation, and clinical opportunities to obtain the necessary knowledge, skills, and abilities to fulfill the objectives of the DNP Nurse Anesthesia program and perform the duties of a Certified Registered Nurse Anesthetist according to the American Association of Nurse Anesthetist (AANA) *Professional Practice Manual for the Certified Registered Nurse Anesthetist* documents: *Scope of Nurse Anesthesia Practice*, *Code of Ethics for the Certified Registered Nurse Anesthesiology*, and *Standards for Nurse Anesthesia Practice*.
- According to its students, all rights under The Family Educational Rights and Privacy Act of 1974. Therefore, SJHSNA will not disclose information from students' education records without the written consent of students except as permitted by FERPA.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DNP NURSE ANESTHESIA STUDENT RESPONSIBILITIES

POLICY/PROCEDURE 12:

The program has the right to expect that the student will:

- Function within the legal rights of a registered professional nurse while recognizing one's own responsibility and accountability for his/her/they practice.
- Adhere to the American Association of Nurse Anesthesiology (AANA) *Code of Ethics for Certified Registered Nurse Anesthetists*.
- Follow ALL policies and procedures of the College, the SJHSNA DNP Nurse Anesthesia Program and each individual clinical site including, but not limited too mandatory vaccination requirements.
- Attend all mandatory scheduled classes and anesthesia department meetings on time and according to policies/procedures.
- Exhibit professionally appropriate behaviors at all times with patients, patient family members, faculty, professors/instructors, program administrators, preceptors, and members of the health care team, etc.
- Obtain and submit clinical evaluations, clinical postoperative evaluations, and anesthetic management plans on or before the due date, according to clinical practicum syllabi.
- Recognize their own limitations and seek consultation when indicated within the perioperative period.
- Demonstrate preparation for the delivery of patient care with vigilance.
- Be vigilant in the delivery of patient care and refrain from engaging in extraneous activities (such as texting or emailing) that abandon or minimize vigilance while providing direct patient care.
- Perform duties required for safe and effective patient care.
- Present for clinical with a healthy mind and body while remaining free from the effects of substances such as, but not limited to alcoholic beverages, recreational drugs, and intoxicants.
- Develop an anesthesia management plan for a specific number of cases per month according to the appropriate clinical practicum syllabus.
- Wear appropriate business professional attire at professional meetings/dinners as well as all presentations throughout the curriculum.
- Conduct oneself in a professional manner when attending didactic classes, simulation lab sessions, clinical practicum rotations and professional meetings/recruitment dinners.
- Adhere to the ethical and legal responsibilities for repayment of student loans from any source.
- Deliver anesthesia care to patients in a nondiscriminatory manner and a culturally competent fashion.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

PATIENT RIGHTS

POLICY/PROCEDURE 13:

- Students are required to respect patients and their rights at all times.
- Patients have a right to know who is administering their anesthesia.
- Patients have a right to expect that anesthesia provided by a student will be under the supervision of a CRNA and/or an anesthesiologist and how the two have a relationship. Under no circumstances will a student deliver anesthesia or care for a patient that is meant to be deceiving to the patient.
 - Students will identify themselves as **critical care registered nurses in a nurse anesthesia education program.**
- Patients have a right to expect that both the SRNA and supervising preceptor (CRNA and/or Anesthesiologist) providing their anesthesia services are mentally alert and not mentally or physically impaired due to substances, intoxicants, or alcohol, fatigue, or other debilitating conditions.

Additional patient rights include:

- Considerate, respectful, and nondiscriminatory care.
- Full disclosure.
- Being fully informed about their treatment and provider.
- Protection of confidentiality.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DNP NURSE ANESTHESIA STUDENT REVIEW OF RECORDS POLICY

POLICY/PROCEDURE 14:

The SJHSNA Program Administrators will allow a review of all of the DNP Nurse Anesthesia student's records maintained by the DNP Nurse Anesthesia Program at any time. A copy of the records may be obtained following submission of a written request to the Program Administrator. The requested information will be copied for the student within 10 business days of the DNP Nurse Anesthesia Student's request submission.

The written request must be delivered to the SJHSNA Program Administrator via a paper copy, signed and dated by the DNP Nurse Anesthesia Student. The written request to review student records may not be written via email and sent electronically through a personal or College affiliated email.

The DNP Nurse Anesthesia Student has a right to see a copy of all documentation made regarding inadequate or substandard performance as well as a Right to Due Process (See Due Process Policy).

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

FREEDOM FROM HARASSMENT POLICY

POLICY/PROCEDURE 15:

It is the desire of St. Joseph Hospital School of Nurse Anesthesia to maintain and encourage an atmosphere that is free of sexual harassment (Title IX), intimidation or coercion. It is the policy not to tolerate any verbal or physical conduct including, but not limited to unwelcomed sexual advances, which creates an intimidating, offensive, or hostile environment by employees, supervisors, managers, preceptors, or students under any circumstances. This policy applies to students, instructors, preceptors, supervisors and administrators in all school related settings and activities including social events.

Refer to <https://www.ric.edu/departament-directory/office-institutional-equity/title-ix> for current Rhode Island College regulations regarding sexual harassment (Title IX), or sexual misconduct.

If a student experiences any bullying or incivility while matriculating with the SJHSNA DNP Nurse Anesthesia Program, please report the incident to the Program Administrator or Assistant Program Administrator.

It is the responsibility of the Program Administrators to evaluate and resolve any issue regarding sexual harassment, sexual misconduct, bullying, incivility, discrimination, or general harassment etc. SJHSNA Program Administrators will collaborate with the affiliated College/University to take the appropriate steps to resolve any issue regarding Title IX, bullying, and incivility.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

ATTENDANCE AND SICK TIME

POLICY/PROCEDURE 16:

Consistent and punctual attendance is a personal and professional responsibility for all students enrolled in the DNP Nurse Anesthesia (NA) Program. Students are required to attend all scheduled instruction including class, simulation lab sessions, and clinical practicum. The student is also expected to demonstrate a commitment to both the program and profession of a Certified Registered Nurse Anesthetist.

Personal business, non-emergent physician/doctor appointments, job interviews, car dealership appointments, etc. must be scheduled during the student's own time and are NOT to be SCHEDULED DURING CLASS, simulation labs or clinical time except in an emergency situation and in accordance with the TIME OFF POLICIES and PROCEDURES.

Students who arrive late to a class that is already in progress must wait until the next break in the class to enter the classroom. If a student misses more than half of the allotted scheduled class time it will be considered absent, and one (1) day will be deducted from the student's Personal Time Off Bank. Any material that is missed during class time due to absence by the student is the student's responsibility to recover the material on their own. If a scheduled class is scheduled to be in person, the student is not permitted to use a video learning platform to attend the class. The student must be in person in the classroom as long as the scheduled class is in person. If the class is scheduled to be via online or on a video learning platform, the student is expected to be present for the entire length of the class/lecture. Any patterns of tardiness will be addressed, documented, and may result in disciplinary action. Individual instructors may issue additional policies as part of the course syllabus as well.

In addition to scheduled classes, students are required to attend departmental in-services at their respective clinical sites. The Program Administrators may mandate attendance at state and local anesthesia meetings and other guest lectures.

Students are exempt from clinical practicum during an approved Personal Time Off in accordance with the TIME OFF POLICIES and PROCEDURES.

In the event of illness, injury or personal emergency preventing attendance to a class or simulation lab session, the student is to notify the class professor via email in advance of the scheduled class session as soon as possible within 24-hours. If the student does not notify the class professor ahead of time, the student is REQUIRED to provide medical documentation from a health care provider for the delay, or any other documentation that might be applicable to the situation.

Upon three (3) unauthorized absences from a course, the assignment of a grade of "F" for the course will be allotted. If no call no show for an unauthorized absence in clinical practicum

without notice ahead of time may constitute grounds for dismissal from the SJHSNA DNP Nurse Anesthesia Program.

Late Arrival or Early Departure:

Consistent punctual arrival and attendance is a personal and professional responsibility for all students enrolled in the SJHSNA DNP NA Program. Late arrival and/or early departure from class, simulation lab sessions or clinical without permission from the Program Administrator and/or class professor will be treated in the same manner as an unauthorized absence. If an illness, injury, or personal emergency prevents on-time or full session attendance, the student is to notify the class professor via email in advance of the schedule class, simulation lab, or clinical time.

Professional Behavior in the Classroom:

The adoption of professional behaviors is also expected by turning cellphones off or to silent mode during class. Texting or checking email during class is never considered appropriate behavior by a student registered nurse anesthetist.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

TIME OFF POLICY and PROCEDURES

POLICY/PROCEDURE 17:

The DNP Nurse Anesthesia Program must balance a reasonable time off policy and procedure with meeting certification eligibility requirement mandated by the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs and the National Board of Certification and Recertification of Nurse Anesthetists (NBCRNA). An obligation of both the program and the student during the time of enrollment. This policy considers a reasonable balance between the safeguards for the health and well-being of the student, preceptors, and patients while also setting standards for professionalism and teamwork. Students who do not comply with the time commitments and the time-off policy and procedures may be subject to deferral of graduation or dismissal from the program.

Didactic Courses:

Where an illness, injury, or personal emergency prevents a student from attending a class session, the student is required to notify the class professor via email in advance for the scheduled class time. If a student cannot email due to incapacitation, please email the professor/faculty as soon as possible within 24 hours. A student who cannot attend class on the day of a scheduled exam or quiz, must notify the professor/faculty member administering the exam via email before the start of the class time. It is up to the class professor/faculty member to how he/she/they would like to administer the exam or quiz to said student who misses the scheduled exam or quiz. An opportunity will be provided for the students to review their exam upon request by the students.

Clinical Practicum Courses Call Out:

Students who cannot attend clinical practicum due to illness, injury, personal emergency are **required** to complete the following:

1. Notify the affiliated clinical site personnel according to the individual clinical site policy.
2. Notify the Program Administrator (Dr. Elena Litmanovich) via text message prior to 0600 on the day that the student will be calling out for.
3. Notify the SJHSNA Program Administrative Assistant, Glenda Luzzi, via the school office phone and leave a message on the answering machine prior to 0600, stating the reason for the call out, the date of the call out and the time of the call. The SJHSNA Program Administrative Assistant's phone number is as follows: **(401) 456-3638**

Student clinical practicum call outs due to illness, injury, personal emergency, or if the required paperwork for the clinical site is not submitted on time will count toward the total number of

days from the PERSONAL TIME OFF BANK for each student. If the student is to miss clinical practicum days due to a school function such as a conference etc. PTO will **NOT** be deducted from said students allotted personal time off bank. All clinical days missed will be reviewed and considered by the Program Administrators.

Bereavement Time:

In case of the death of an immediate family member, the student will be granted three (3) days off. Immediate family members will be defined as spouse/partner, children, parents, siblings. The student is allowed one (1) day off for extended family death. If the student chooses to use any additional time off, the total hours of days will be deducted from the student's personal time off bank.

Jury Duty:

If the student is called to serve as a juror for jury duty, the notice must be submitted to the Program Administrator. The student will NOT be deducted days from their personal time off bank for the hours/days of missed clinical practicum/class.

PERSONAL TIME OFF BANK:

Semesters 1-4: Students didactic course schedule follows the Rhode Island College (RIC) academic calendar and provides allotted personal time off for holidays, semester breaks, and Spring break week. Students follow the RIC academic calendar and are not permitted any extra time off outside of the allotted academic breaks stated above during the first four (4) semesters.

Semesters 5-9: There is no elective time off from didactic courses, students are expected to attend all scheduled classes during the semester. Please see the ATTENDANCE AND SICK TIME policy/procedure for missing scheduled classes and/or simulation lab sessions. Starting the break following the fourth semester of the program, students no longer follow the RIC academic calendar. Clinical course schedules run continuously, irrespective of the academic calendar. Students are required to attend all mandated simulation lab sessions and/or operating room orientation days starting during the break following their fourth semester in the program (following the 1st semester of the student's second year).

Personal Time Off (PTO) is prohibited during all specialty rotations including obstetrics, pediatrics, Cardiac, and Neurosurgical rotations. Students are able to use their personal time off days from their personal time off bank during all other clinical practicum rotations.

Personal Time Off (PTO):

To promote the educational objectives of the Program, Personal Time Off (PTO) is permitted. Students will only be granted PTO days if they are in good academic standing with the program. The total number of PTO allotted to each student's Personal Time Off bank is **20 days**. Personal time off may be requested for vacation time, sick time, or time off to attend a review course.

Absence from clinical in excess of 20 days will result in deferral of graduation and clinical time will need to be made up in order to be eligible to graduate. The granting of personal time off will be limited to 20% of the class per day and must be approved by the Program Administrator.

PTO requests must be submitted to the Program Administrative Assistant, Glenda Luzzi, via email starting with the last 7 days of the month leading up until the 1st day of the month for a PTO request to be taken two (2) months later. For example, requests for time off in July must be submitted between the days of April 25th to May 1st. If a request is submitted by the student after the 1st of the month for PTO to be taken two (2) months later, the request will be automatically denied. **During the months of June, July, August, and September, PTO is restricted to 10% of the class per day** and must be approved by the Program Administrator. Any student's PTO requests during specialty rotations due to illness, injury, or personal emergency will be reviewed and considered by the Program Administrators. The Program Administrators or Program Administrative Assistant will notify the student of the granted or denied PTO request within 7 days following the 1st of the month of the request via email. For example, if a request was made on April 26th for time off in July, the student will be notified by the end of day on May 7th if their request has been approved or denied PTO.

The maximum number of consecutive days that a student can request PTO is 1 week. If the student is in a clinical practicum rotation that is 5 days/week then the maximum number of PTO days the student can use is 5 consecutive days. Students may not keep all of their PTO days in their Personal Time Off Bank to use during the last semester of clinical Practicum. Any PTO days not used by the student during the course of semesters 5-9 will be forfeited.

Clinical Site Dismissal:

If for any reason, a clinical practicum site cancels the student's clinical day, the student must notify both the Program Administrative Assistant and Program Administrator via email. The student will be given the option to report to the primary site, Our Lady of Fatima Hospital, or use PTO from the student's Personal Time Off Bank.

Inclement Weather Days:

Students are required to attend scheduled clinical experiences that are held at the respected clinical sites. If a travel ban is implemented by the state, students are excused from clinical without use of their PTO hours. As in a professional career, students are not expected to jeopardize their safety. If a student does not feel that they are able to travel safely to their clinical site/clinical practicum location, please report to both the Administrative Assistant and Program Administrator in the way that is outlined under Clinical Practicum Courses Call Out in this policy/procedure. If the student deems it too unsafe to travel to a clinical site for their clinical practicum and the travel ban is not implemented by the state, a PTO day will be deducted from the student's Personal Time Off Bank.

Holiday Time Makeup:

Due to some clinical sites recognizing Holidays that may not be recognized in other clinical sites, the student will have the option to report to the primary site, Our Lady of Fatima Hospital, for a clinical day instead of using a PTO day during their clinical rotation.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

CONFERENCE/EDUCATION TIME

POLICY/PROCEDURE 18:

Students are granted four (4) days to use for conference or education such as the American Assembly of Nurse Anesthesiology (AANA), New England Assembly of Student Registered Nurse Anesthetists (NEASRNA), Rhode Island Assembly of Nurse Anesthetists (RIANA) meetings, etc. (Review courses are not considered conferences/education). Requests will be limited to 20% of the class. Conferences must be preapproved by the Program Administrator and certificate of completion must be submitted via email to the Program Administrative Assistant and Program Administrator. Conferences or education time will only be approved as long as the student is within good academic standing. Attending educational conferences such as those by the AANA etc., are encouraged of students throughout the program.

The clinical practicum time/days and class time missed during the granted four (4 days) will not be deducted from the student's Personal Time Off Bank. During any class time missed due to conference or education will be the student's responsibility to attain any information that was presented during that time.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

ENVIRONMENTAL AND OCCUPATIONAL RISKS, EXPOSURE, CHEMICAL HAZARDS

POLICY/PROCEDURE 19:

Environmental and occupational risks, exposures, injuries, and exposure to chemical hazards may occur secondary to your position and participation in clinical practicum education as a Student Registered Nurse Anesthetist (SRNA).

As both registered nurses and graduate SRNAs there are inherent environment and occupational risk exposures and potential for injury in the scope of healthcare services. As a registered nurse and student of this Program, you have the obligation to be informed of and practice all available precautionary and risk reduction practices applicable to the provision of anesthesia care and health care in general. This includes but is not limited to aseptic and sterile techniques. Students who enroll in this program and participate in the clinical practicum education portion of this program do so with the full knowledge and assumption of risks associated with the allocation of health care services.

- Selected inhalation anesthetic agents are thought to be hepatotoxic and on occasion an anesthetist may develop a sensitivity to agents, which is reflected in abnormal liver function studies. While no cause-and-effect relationship has been established, consideration should be given to these findings in choosing anesthesia as a specialty.
- Most hospitals have installed anesthetic gas exhaust systems for minimizing risk to operating room personnel. All of the clinical affiliates have scavenging systems for waste gases. It has not been established whether the risks to personnel are eliminated by these exhaust systems.
- Anesthesia caregivers are frequently exposed to blood products, body secretions and used syringes and needles. All students are expected to strictly adhere to universal precautions whenever involved in patient care that involves potential for contact with mucous membranes, secretions, or open wounds. Gloves, protective eye wear and masks are immediately and readily available at each anesthetizing site and must be worn according to standard precautions. Proper regard for and performance of aseptic technique is mandatory to protect both patients and anesthesia caregivers. All students must be vaccinated against Hepatitis B prior to clinical practicums. Students are also required at all times to engage in universal Covid precautions per the clinical site policies and procedures. Any necessary Covid precautions equipment are required to be readily available for students to utilize at all times at the affiliated clinical site.
- Anesthesia personnel are also frequently exposed to x-rays during operative procedures. Lead aprons and thyroid shields are available at each anesthetizing site and must be worn during fluoroscopy or X ray procedures.
- Responsibility for accepting risks associated with this specialty rests with the individuals who choose to work within this environment, rather than the institutions who take reasonable precautions to minimize potential risk.
- Material Safety Data Sheets may be found on the Our Lady of Fatima intranet database.

- All students are required to follow OSHA policy. Failure to follow blood and body fluid precaution is a critical clinical weakness. This means that protective gear such as goggles/face shield masks must be worn whenever body fluid contact is likely and according to JACHO standards. In the OR, this occurs on many occasions but certainly during induction, emergence, invasive procedures and in trauma cases where there can be blood loss and splashing from the surgical field.
- Head covering: All head and facial hair must be completely covered. All disposable headcovers should be removed when leaving the operating room suite. Infection control protects patients and providers.

Our affiliated clinical practicum sites comply will all required patient and health care worker equipment and regulations pertaining to safety. Safety equipment, Personal Protective Equipment (PPE), safety devices and safety equipment, policies and procedures are in place or available at each clinical site.

If the student were to have an incident where he/she/they have been exposed to bodily fluids, biohazardous materials, or needle stick, etc. during the clinical practicum at one of our affiliated clinical sites, he/she/they are meant to follow the protocols of the clinical site/hospital while they are at the clinical site. Students must follow the affiliated clinical site policies and procedures regarding filling out an incident report and following through with medical care if the student chooses to receive medical care. If the student becomes ill, injured, or have exposure at an affiliated clinical site, they may elect to be examined/treated at the affiliated clinical site/hospital facility, or may seek medical care through their personal physician. If treated at the facility, the hospital/clinic will bill the student's insurance carrier, and/or charge the student, for all care given/received. Rhode Island College, St. Joseph Hospital School of Nurse Anesthesia (SJHSNA), Narragansett Bay Anesthesia (NBA), or affiliated clinical sites are NOT financially responsible for health care charges incurred by students as a result of illness, injury, or exposure to bodily fluids or chemical hazards. Students are not considered employees at our affiliated clinical sites, the College, the anesthesiology practice group, and worker's compensation is not applicable.

In the event of a student illness, injury, or exposure while at one of our affiliated clinical sites, the student must report it to the Clinical Site Coordinator and the Program Administrator within 24 hours of the event. The purpose of this report is to make both the Clinical Site Coordinator and Program Administrator aware of the situation, the status of the student, and advised of any safety concerns and prevention issues that may warrant a follow-up with medical care. This reporting should not violate any confidentiality or HIPPA standards of either the student or patient.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DRUG AND ALCOHOL-FREE WORKPLACE

POLICY/PROCEDURE 20:

The DNP NA Program has a vital interest in maintaining a safe, healthy, and efficient environment for its students and patients. Recognizing that substance use disorder (SUD), previously known as chemical dependency is both a chronic and progressive disease known to be a professional hazard. The purpose of this policy is to provide student guidelines for the prevention and management of substance use and abuse within the nurse anesthesia program.

By providing a drug free environment, SJHSNA DNP NA Program will be better able to assure a safe and equitable practice setting for students, anesthesia practitioners and their patients. Our DNP NA students are expected to comply with the hospital policies at each clinical site regarding a drug and alcohol-free workplace. SJHSNA prohibits the illicit or unauthorized possession, use, manufacture, sale or distribution of illicit drugs and alcohol on hospital property and College grounds/campus. Students are personally responsible to comply with federal, state, and local laws and the hospital's drug and alcohol policy. Students are prohibited from reporting to the clinical area under the influence of drugs or alcohol. Violation of the policy may be subject to immediate disciplinary action up to and including dismissal from the program, report to the state licensing board, and complaint to local law enforcement authorities.

The Program's curriculum will include topics covering substance use disorders and the importance of wellness and mental health to healthcare professionals. Students are mandated to purchase the AANA wellness modules and complete the modules within the Program's curriculum.

SJHSNA Program is responsible for identifying individuals with deteriorating academic/clinical performance, behavioral changes and excessive absenteeism but is not responsible for diagnosing the nature of the problem.

With reasonable suspicion, SJHSNA Program Administrators will act to intervene and refer a student for assessment of substance abuse or mental health disorder.

Rhode Island College, the affiliated clinical site, SJHSNA, and/or Narragansett Bay Anesthesia are NOT financially responsible for the student's healthcare/mental health care assessment, treatment, and/or recovery programs costs. The financial responsibility is solely that of the student.

If a student is found to be under the influence of alcohol, illegal drugs, or illicit substances including marijuana while in class, clinical practicum, simulation labs, or while on the College grounds/campus may be subject to disciplinary action up to and including dismissal from the program.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

SOCIAL MEDIA POLICY

POLICY/PROCEDURE 21:

The purpose of this policy to maintain the protection of sensitive and confidential information related to St. Joseph Hospital School of Nurse Anesthesia (SJHSNA) and uphold the professional reputation of the SJHSNA DNP NA Program. This policy refers to the use of mobile devices, social media of any kind, and internet communications related to confidential information about SJHSNA (including faculty, students, staff, classroom, and clinical activities), patients, Rhode Island College, the Zvart Onanian School of Nursing, or affiliated clinical sites.

SJHSNA follows the Health Insurance Portability and Accountability Act (HIPAA). In addition, SJHSNA adheres to the social media policy of Rhode Island College Zvart Onanian School of Nursing as published in the Handbook for BSN to DNP Students (with specialization in Nurse Anesthesia) stated below.

SOCIAL MEDIA POLICY

HIPAA – Compliant use of Mobile Devices, Social Media and the Internet. The purpose of this policy is to maintain the protection of sensitive and confidential information related to the School of Nursing and uphold the professional reputation of the School of Nursing and Rhode Island College. This policy applies to the use of mobile devices, social media and internet communications related to confidential information about the School of Nursing (including the faculty, staff, students, classroom, and clinical activities), patients, and (SON) clinical affiliates.

SON students, faculty and staff must always protect individuals' rights to privacy and confidentiality and communicate sensitive and confidential information in accordance with the **Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA)**. Social media are web-based or mobile technologies used for interactive communication. RICSON encourages responsible use of Mobile Devices to access electronic information that can be helpful in forming plans of care for patients and for professional communication. Examples of social media include but are not limited to, collaborative projects (e.g. Wikipedia), blogs and microblogs (e.g. Twitter), content communities (e.g. YouTube), social networking sites (Facebook), virtual game worlds, and virtual social worlds (e.g. Second Life).

Members of the SON community are expected to observe the American Nurses Association's (ANA) Principles for Social Networking (American Nurses Association, 2011. Navigating the World of Social Media).

ANA's Principles for Social Networking

1. Nurses must not transmit or place online individually identifiable patient information.
2. Nurses must observe ethically prescribed professional patient – nurse boundaries.

3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm a patient's privacy, rights, or welfare to the attention of appropriate authorities.
6. Nurses should participate in developing institutional policies governing online conduct.

The policy requires that all:

- Be aware of the necessity of maintaining professional boundaries while using electronic media.
- Follow HIPAA guidelines at all times. Identifiable information concerning patients/clinical activities must not be posted in any online forum.
- Protect confidential, sensitive, and proprietary information. Do not share or post any information related to nurse-patient contact or about the SON.
- Do not post comments on social media sites about patients, clinical facilities, employees of facilities, faculty or other students as these posts violate the individual's right to privacy and may incur liability – even if the posts do not specifically identify individuals.
- Do not use mobile devices to take photos of patients or patient information.
- Use PDAs and other devices only as authorized by faculty and clinical affiliates.
- Have a responsibility to report any breach of confidentiality or privacy to a School of Nursing administrator or faculty member.

Consequences:

- Violations of patient privacy will be subject to HIPAA and FERPA procedures/guidelines and consequences.
- Students who share confidential or unprofessional communication may be subject to disciplinary action, up to and including dismissal from the program.

In accordance with the RIC Zvart Onanian SON social media policy, it is required that all students:

- Be aware of the necessity of maintaining professional boundaries while using electronic media.
- Follow HIPAA guidelines at all times. Identifiable information concerning patients/clinical activities must not be posted in any online forum, including but not limited to Wikipedia, Facebook, Twitter, Instagram, Snapchat, TikTok.

- Protect confidential, sensitive, and proprietary information. Do not share or post any information related to nurse-patient contact or about the RIC Zvart Onanian SON or SJHSNA.
- Do not post any pictures on any social media platform with the use of SJHSNA logo or name.
- Do not post comments on social media sites about patients, clinical facilities, employees of facilities, faculty or other students as these posts violate the individual's right to privacy and may incur liability—even if the posts do not specifically identify individuals.
- Do not use mobile devices to take photos of patients or patient information.
- Use devices only as authorized by faculty, clinical affiliates, and its preceptors.
- Have a responsibility to report any breach of confidentiality or privacy to a Rhode Island College Zvart Onanian SON administrator, SJHSNA administrator, or faculty member. Photographic release consent forms are obtained by SJHSNA for social media postings that pertain to program sanctioned activities.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

EMPLOYMENT OUTSIDE OF THE STUDENT ROLE

POLICY/PROCEDURE 22A:

Employment during matriculation in the DNP NA Program of study is strongly discouraged. Part-time employment as a registered nurse during matriculation of the program is also strongly discouraged.

Successful completion of the SJHSNA DNP NA program requires a substantial time commitment year-round. An objective of this program of study is to develop strong and competent clinical practitioners who collaborate with others in the delivery of anesthesia care. This requires extensive clinical experience in the administration of anesthesia. Preparation for clinical cases and didactic concepts requires a great degree of self-study. Nurse anesthesia students are expected to prepare for all cases in the operating room ahead of the scheduled case. Students are informed during the interview process of the total and complete commitment to the program and how extensive it is.

In accordance with the Council on Accreditation of Nurse Anesthesia Educational Programs and state law, Registered Nurse Anesthesia Students shall not be employed as Nurse Anesthetists by title or function while enrolled in the Nurse Anesthesia Program.

POLICY/PROCEDURE 22B:

Per COA, Standards for Accreditation of Nurse Anesthesia Program - Practice Doctorate Revised January 30, 2023. Reasonable time commitment – A reasonable number of hours to ensure patient safety and promote effective student learning should not exceed 64 hours per week. This time commitment includes the sum of the hours spent in class and all clinical hours averaged over 4 weeks. Students must have a 10-hour rest period between scheduled clinical duty periods (i.e., assigned continuous clinical hours). At no time may a student provide direct patient care for a period longer than 16 continuous hours.

If circumstances should necessitate casual employment as a registered nurse, there must be a 10-hour rest period prior to a clinical day. If a student chooses to be employed during enrollment in the program and lacks the ability to remain in good academic standing, the Program Administrator and Assistant Program Administrator will carefully assess the situation and meet with student to discuss a plan to be successful in the program. The student is **required** to terminate their employment status outside of the student's role in the program if they are unable to remain in good academic standing.

Please note that the student clinical assignment schedule will NOT be adjusted to any work schedule during the student's matriculation in the SJHSNA DNP NA Program.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

PROFESSIONAL LIABILITY INSURANCE AND HEALTH INSURANCE

POLICY/PROCEDURE 23:

Professional Liability Insurance:

Students must be covered by specified and current professional liability insurance throughout their program of study. St. Joseph Hospital School of Nurse Anesthesia covers students under the group liability insurance policy provided by Narragansett Bay Anesthesia. Students must have individual anesthesia liability coverage in a 1 million/3 million coverage. This is the responsibility of the student to purchase and obtain the professional liability insurance through AANA Insurance Services. A copy must be on file at SJHSNA and sent to the Administrative Assistant, Glenda Luzzi.

Students who do not provide evidence of the obtainment of professional liability insurance coverage in a 1 million/3million coverage will NOT be permitted to engage in patient care activities at the clinical site.

Health Insurance:

Health insurance for each individual student is mandatory at all times as long as the student is matriculated in the program. Students must demonstrate that they have current health care coverage at the time of enrollment and maintain it throughout the entirety of the program. A copy of the health insurance coverage must be on file with SJHSNA. Failure to maintain health insurance coverage can result in suspension or dismissal from the program. Health Insurance is available through Rhode Island College and may be used at the student's discretion. If a student chooses to reject health insurance through Rhode Island College, the student must show proof of other outside health insurance and must be on file with SJHSNA DNP NA Program.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

HOUSING/MEALS/TRANSPORTATION/PARKING/OTHER EXPENSES

POLICY/PROCEDURE 24:

The student is made aware of the additional costs that come with being enrolled in the Program at the beginning of matriculation and during the program orientation.

Free parking is available at SJHSNA, Rhode Island Nurse Education Center (RINEC) parking garage, and many of our affiliated clinical sites. Other affiliated clinical sites that require payment for parking is the student's responsibility for the additional costs of parking according to each individual clinical site policy.

Students are also responsible for the purchase of textbooks, stethoscope, and shoes. The student must provide personal transportation to and from all affiliation clinical sites and buildings in which classes and simulation lab sessions are held.

Students are held responsible for the additional costs of housing, meals, transportation, and parking that is not already free for the student. Rhode Island College, the affiliated clinical sites, SJHSNA, and/or Narragansett Bay Anesthesia are NOT financially responsible for the costs of housing/meals/transportation/parking, etc. The financial responsibility is solely that of the student.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

REGISTERED NURSE LICENSURE AND BLS, ACLS, PALS CERTIFICATION

POLICY/PROCEDURE 25:

Registered Nurse Licensure:

Per COA, Standards for Accreditation of Nurse Anesthesia Program - Practice Doctorate Revised January 30, 2023. Program Admission requirements include – An unencumbered license as a registered professional nurse and/or an APRN in the United States or its territories or protectorates.

Students must obtain a valid and current registered professional nursing license prior to the start of the Program and maintain the license throughout the entirety of the Program.

Students must obtain a valid and current Rhode Island Registered Professional Nursing license and a Massachusetts Registered Professional Nursing license before the start of clinical practicum I. A copy must be on file at all times with the SJHSNA Program Administrative Assistant. If a student is found to have an expired or missing nursing license, the individual student will be removed from clinical and unable to practice as a student registered nurse anesthetist. PTO will be deducted from the Personal Time Off Bank until a valid current license is produced. Failure to maintain current licensure may be grounds for deferral of graduation or dismissal from the program.

BLS, ACLS, PALS Certification:

All DNP NA students enrolled in this program must maintain Basic Life Support certification (BLS), Advanced Cardiovascular Life Support (ACLS) certification, and Pediatric Advanced Life Support (PALS) certification starting with, and through the conclusion of clinical practicum rotations. Failure to maintain certifications will result in the removal from clinical rotations and Personal Time Off (PTO) days will be deducted from the student's Personal Time Off Bank until the student obtains the appropriate certifications. It is the student's responsibility to make arrangements to schedule and complete any necessary courses and/or renewal courses. The RIC Zvart Onanian SON and SJHSNA do not offer certification classes. Students are responsible for the financial obligations required for the BLS, ACLS, and PALS courses and renewal courses.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

BACKGROUND CRIMINAL IDENTIFICATION

POLICY/PROCEDURE 26:

St. Joseph Hospital School of Nurse Anesthesia (SJHSNA) adheres to the Rhode Island College Handbook for BSN to DNP Students (with specialization in Nurse Anesthesia) Background criminal identification policy stated on page 12. The policy is as follows:

All graduate nursing students admitted to a clinical track must have a Background Criminal Identification (BCI) done through Castle Branch <https://portal.castlebranch.com/RH11> prior to the start of clinical rotations. The BCI will be verified by the SON. An information sheet describing how to initiate a background check is available in the graduate program office.

A copy of the BCI will be on file at SJHSNA. Information on how to initiate a background check will be administered to the students prior to the start of Clinical Practicum I.

If a student fails to obtain a BCI by the start of Clinical Practicum I or if the student's BCI does not get renewed in time, the student will have one (1) personal time off (PTO) day deducted from their Personal Time Off bank for each day that the student missed clinical time.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

PROGRAM AND STUDENT COMMUNICATIONS

POLICY/PROCEDURE 27:

Students are responsible for both receiving and if appropriate, sending messages to Program Administrators, Administrators assistant, staff, and faculty.

Communication is provided to students via the following platforms:

1. RIC E-mail
2. SJHSNA email (sjhsna@gmail.com)
3. RIC Blackboard Learn
4. Typhon case log notices
5. Memo or Letter
6. Phone

Students are required to notify the SJHSNA and RIC Zvart Onanian SON of any and all changes of name, mailing address, phone number, e-mail address or other vital information within 3 working days of the change. The student must also notify the AANA and NBCRNA of these changes as well. Students are required to maintain a current emergency contact person information on file with the SJHSNA DNP NA Program office.

All students are issued a RIC e-mail account upon enrollment and are to maintain the RIC e-mail account in order to facilitate communication. All Program communication to and from the student will be via the RIC email account and NOT a personal email account. All students are required to check their RIC email account on a daily basis. SJHSNA and RIC encourages and requires all students to utilize their RIC email for communications.

Students have the responsibility to follow up any letter or memo addressed to students and respond immediately upon retrieval of the letter or memo. Emails that are marked as “high importance” need to be responded to within 24 hours. Failure to respond to “high importance” emails sent by the Program Administrators or Program Administrators Assistant within 24 hours, excluding holidays, may result in disciplinary action up to but not limit to probation as this is considered unprofessional behavior and insubordination. Emails that are NOT marked as “high importance” need to be responded to within 48 hours. Failure to respond to non-high importance emails within 48 hours may result in disciplinary action up to but not limited to probation as this is considered unprofessional behavior and insubordination.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

PHYSICAL EXAMINATION AND IMMUNIZATIONS REQUIREMENTS

POLICY/PROCEDURE 28:

St. Joseph Hospital School of Nurse Anesthesia adheres to the RIC Health and Wellness Policies published in the Handbook for BSN-DNP Students (with specialization in Nurse Anesthesia) and all students are required to follow the health and wellness policies in said manual. All immunization requirements are guided by RIC Zvart Onanian SON/SJHSNA policy as well as the State of Rhode Island Department of Health regulations and Massachusetts Department of Health regulations. Immunization requirements may be subject to change with modifications in state law and or RIC Zvart Onanian SON/affiliated clinical site policies. A copy of the student's immunization record must be on file with SJHSNA at all times. Affiliated clinical sites may change their immunization requirements based on unprecedented time (i.e., pandemic), and the student is expected to adhere to the affiliated clinical site immunization policies. If the student is noncompliant with required immunizations of either the following Health and Wellness policy below and/or the affiliated clinical sites required immunizations policies, the student will not be able to attend clinical and one (1) PTO day will be deducted from their Personal Time Off Bank for each clinical day missed. The inability to successfully complete a clinical practicum will result in an incompleteness of graduation requirements.

The Health and Wellness Policy states as follows:

All nursing students must have the following information on file in RIC HEALTH SERVICES, located in Brown Hall on the RIC campus. Tel (401) 456-8055; FAX: (401) 456-8890.

Nursing: Health & Immunization Requirements

All Nursing Students must have the following information on file at RIC HEALTH SERVICES:

1. **COVID-19 vaccination** required (1-2 doses based on manufacturer of vaccine)
2. **Surveillance COVID-19 testing** required for those who have been approved for exemption of the COVID-19 vaccine. (Medical/Religious Exemptions need review and approval by Student Health Services)
3. An Admission **Physical Exam**
4. **One** dose of **Tetanus-Diphtheria-Pertussis (Tdap)**
5. **Two MMR's (Measles, Mumps, Rubella)** or blood **titers** confirming immunity.
6. **Three** doses of **Hepatitis B** vaccine. A **Hepatitis B Surface Antibody titer** to confirm seroconversion is recommended 1-2 months after the final dose.
7. Provider documented proof, including date or age, of **Chicken Pox** disease or a **Varicella titer** confirming immunity or **two doses of Varicella vaccine.**
8. Annual **QuantIFERON Gold negative blood test** or An initial **2-step PPD**** tuberculin skin test **and yearly PPD** updates (or Chest X-Ray if PPD positive and **yearly TB assessment**, which is completed at Student Health Services).

9. **Flu vaccine** each fall semester.
10. Color Blind Testing

****2-Step PPD** – two separate TB tests planted at least one week apart but not more than a year apart prior to entering nursing clinical.

HEALTH REQUIREMENTS

All nursing students must provide RIC Health Services (located in Browne Hall) with documentation of an admission physical exam and immunizations as listed above, and will need to submit their printed report from student health services to the DNP Program Director on admission and at the start of each academic year. Information may be submitted in person, by fax or on-line through the **Medicat Patient Portal** which may be accessed through “My RIC” or here: Login (medicatconnect.com)

Call RIC Health Services at (401) 456-8055 to review your record.

Physical exams, most vaccines and TB testing (PPD’s) are available **free of charge** with an appointment in Health Services. If you are unable to find your vaccine record, blood titers to prove immunity can be ordered by Health Services staff.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

CLINICAL CREDENTIALING

POLICY/PROCEDURE 29:

All DNP NA students who are meant to start clinical practicum at the Programs affiliated clinical sites, proceed to next clinical practicum courses along the Program's plan of study and engage in patient care/contact must comply with requirements described in the policies/procedures of the current SJHSNA DNP Didactic and Clinical Nurse Anesthesia Handbook and Rhode Island College Handbook for BSN-DNP (with specialization in anesthesia). All students must maintain and provide documentation of appropriate credentials as required by state law, institutional policies of the clinical or academic entities involved, and the Council on Accreditation of Nurse Anesthesia Educational Programs standards. Credentials include but are not limited to the following:

- Current Rhode Island and Massachusetts Professional Registered Nurse license
- Current BLS, ACLS prior to admission and throughout enrollment in the program
- PALS certification prior to the commencement of **NURS 570** NA Clinical Practicum I
- AANA Associate Membership throughout enrollment in the program
- All health, physical, and immunization requirements of both the College and affiliated clinical sites involved

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

STUDENT CLINICAL ATTENDANCE AND BEHAVIOR

POLICY/PROCEDURE 30:

Student clinical schedules (days/week and hours/week) are subject to change at the discretion of the Program Administrators and affiliated clinical sites.

Students will currently attend clinical on a Monday to Friday schedule. There is no clinical on weekends and/or observed holidays (See observed Holidays below). It is **expected** that the student will be dressed in scrubs and ready for duty by 6:30am. Case preparation may require the student to be on duty **earlier than 6:30am** to set up for complicated cases or unfamiliar situations.

If the student is attending clinical at an affiliates site that is five (5) days/week with eight (8) hour shifts, students are to **stay until 4pm** for continuity of care and educational requirements/experiences. If the student is attending clinical at an affiliated site that is four (4) days/week with ten (10) hour shifts, students are to **stay until 5:30pm**.

It is anticipated that the student will review their patient's records the day prior to the scheduled case of the clinical site (site specific). It is the student's responsibility to see and evaluate all patient data preoperatively. Students that have cases that start later than 7:30 should assist other students or CRNAs with patient preparation. Students should check with their preceptor or the clinical coordinator regarding reassignment whenever cases are canceled, if there is a long break in the room, or if the room finishes before 3:30pm. Students must check with their immediate supervisor prior to leaving the operating room and/or any area of the clinical site where anesthesia services are required. Morning break is 15 minutes. It is standard practice in anesthesia departments for breaks to be 15 minutes in duration. Adhering to this time frame is essential. Lunch is 30 minutes. It is expected that unassigned clinical time will be used for educational endeavors/studying for didactic courses.

Each student is required to attend and actively participate in clinical conferences as required by each clinical site. There should be no textbooks or classroom work brought into the OR. Each student is expected to comply with the dress code and Department of Anesthesia policies of each affiliating clinical site institution. This includes infection control, hazardous chemical policies, and attendance at department meetings.

Students are reminded that the vigilant nature of anesthesia practice precludes texting, messaging, emailing, or any use of an electronic device outside of educational purpose to the specific case during clinical assignments.

Responsibilities before leaving clinical:

- Clean up your area and dispense of medications according to the affiliated clinical site
- Check assignment and research pre op assessment for the following day.
- Visit post op patients (site dependent).
- Pre op rounds on the following days' patients (site dependent).
- Notify clinical coordinator and/or supervisor if coordinator is not available prior to leaving the clinical site.

Observed Holidays:

There are no clinical assignments on weekends and observed holidays for students. The following holidays are observed by the DNP NA Program:

New Years Day	Labor Day
Presidents Day	Columbus Day
Memorial Day	Thanksgiving Day
Independence Day	Day after Thanksgiving
Victory Day	Christmas

Holidays observed by the clinical site that are not observed by the Program may be taken by the student by using PTO. The student does have the option of attending a clinical day at the Programs primary clinical site, Our Lady of Fatima Hospital. The student must notify the Program Administrative Assistant via email regarding attending clinical at Our Lady of Fatima Hospital instead of using a PTO day from the student's Personal Time Off bank.

Part Time vs Full Time Clinical:

In the Fall of year two (Clinical Practicum I), students will attend clinical on a part-time basis through the end of the semester. Part-time clinical basis includes three (3) days per week for the entire semester at your designated clinical site assigned by the Program Administrators. Clinical site dependent, students will either attend clinical for three (3) 8-hour shifts or three (3) 10-hour shifts per week during Clinical Practicum I.

Starting with Clinical Practicum II (Spring of year two), students will attend clinical on a full-time basis. A full-time basis includes a minimum of 40 hours per week. Clinical site dependent, the students will attend clinical either five 8-hour shifts or four 10-hours shifts per week. Hours and days may be subject to change at the discretion of the Program Administrators and the affiliated clinical sites.

Clinical Practicum Objectives:

Each clinical practicum has a specific set of objectives that is clearly stated in the syllabus for each clinical practicum course (clinical Practicum I – V). The stated objectives are part of the summative evaluation process that takes place at the end of each clinical practicum. Failure to meet these objectives during the course of the student's current clinical practicum may result in disciplinary action set forth by the Program Administrators. A student who is not performing at an acceptable level or failure to meet the clinical practicum objectives will be counseled by the Program Administrators and may be subject to disciplinary action up to dismissal from the program.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

CLINICAL SITE CONDUCT

POLICY/PROCEDURE 31:

Success in the Nurse Anesthesia Profession requires certain behavioral attributes from students. Including but not limited to empathy, discipline, honesty, integrity, personal regard for others, the ability to work effectively with others in a team environment, and the ability to address a crisis or emergency situation in a composed manner. Adherence to these attributes requires a high level of maturity and self-control, even in highly stressful situations. During clinical practicums, students must conduct themselves in a highly professional manner consistent with the patient care responsibilities with which they will be entrusted.

Failure to adhere to these standards (noted below) may result in a disciplinary action ranging from a written warning to dismissal from the Program (depending upon the violation and the circumstances).

- Creating or contributing to situations that jeopardize patient safety.
- Follow all policies and procedures of the St. Joseph Hospital School of Nurse Anesthesia. (Unethical behavior such as academic dishonesty, falsifying logs or medical records is considered a violation)
- Respect the confidentiality of patients and fellow students. Students must follow all HIPPA laws. One is not permitted to discuss any patient with patient identifiers outside the clinical encounter situation. Students should not discuss other students with preceptors. For academic presentations, all personal identifying data, including name, initials, date of birth and facility where seen will be omitted.
- Unauthorized possession, use, copying, or distribution of hospital records, disclosure of information contained in such records to unauthorized persons.
- Use, distribution, or unauthorized possession of intoxicating beverages or drugs on hospital premises or reporting to work under the influence of alcohol and/or intoxicants. Please see DRUG AND ALCOHOL-FREE WORKPLACE policy/procedure.
- Unauthorized absence from the Anesthesia Department during regularly scheduled clinical hours.
- Failure or refusal to follow instructions of a duly assigned preceptor including refusal to accept clinical assignments.
- Acting in a disrespectful manner.
- Any disorderly conduct on hospital premises.
- Creating or contributing to unsanitary conditions.
- Theft, fraud, or unauthorized use of property belonging to the hospital, patient, patient family member or visitor.
- Adhere to the AANA *Code of Ethics for the Certified Registered Nurse Anesthetist*.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

CLINICAL SITE ROTATIONS

POLICY/PROCEDURE 32:

Affiliated clinical site rotations will be generated by both the DNP Nurse Anesthesia (NA) Program Administrator and Assistant Program Administrator. Clinical site rotations are based on student needs and learning opportunity experiences. The DNP NA Program Administrators do not guarantee the location of clinical placement or how far the student may travel in order to fulfill clinical obligations. Clinical site rotations will include specialty rotations in accordance with the standards and polices/procedures of the Council on Accreditation for Nurse Anesthesia Educational Programs.

The DNP NA Program administrators assign students to specific affiliated clinical sites. The main determining factor for assigning clinical site rotations is based on the learning needs of the student. Secondary determining factors for clinical site rotation assignments are based on location, travel distance, and fairness of student opportunities. DNP NA Program Administrators reserve the right to change clinical site rotation assignments at any time to accommodate the above determining factors listed.

Clinical site rotation assignments are made by the DNP NA Program Administrators with the intention of total fairness as it pertains to length of clinical site assignments throughout the entirety of the student's clinical practicum rotations. Clinical site rotation assignments are meant to meet the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs standards for number of specific cases and hours.

Clinical site rotations must remain flexible with our current affiliated clinical site contracts with the Program. In the event of the DNP NA Program Administrations acquiring a new clinical site contract with sites that have additional patient care experiences (ie., cardiac, neuro, pediatrics etc.), the Program Administrators have the choice to utilize a student to gain those experiences.

The clinical site rotations must provide improvement to the program of study through student opportunities to learn by ways of patient/clinical experience. All students are required to report to clinical site rotations that are assigned by the DNP NA Program administrators.

Students are advised to utilize caution in areas of select parking facilities around affiliated clinical sites regarding personal safety and safety of their vehicles. Students are required to park at their own risk at or near affiliated clinical sites. The Program does not have any financial obligation or responsibility for any theft or damage of any student's vehicle.

Affiliated Clinical Sites:

Consistent with the requirements from the COA, the DNP NA Program maintains contractual agreement with all entities that are necessary. As such, the following contracts are on file in the DNP NA Program Administrators Office:

- Our Lady of Fatima Hospital
- Rhode Island Hospital/Hasbro Children’s Hospital
- St. Vincent Medical Center
- West Roxbury VA Medical Center
- Kent Hospital
- Roger Williams Medical Center
- Lahey Hospital and Medical Center

Students rotate to hospitals where the program has clinical affiliations. Affiliations are designed to provide depth and enrichment of clinical experience.

Charter CARE Health Partner includes Our Lady of Fatima Hospital in North Providence, RI and Roger Williams Medical Center in Providence, RI.

Our Lady of Fatima Hospital: “Primary Clinical Site”

- Travel Distance: 4.3 miles from Rhode Island Nurse Education Center (RINEC)
- Main Operating Room: Experiences in General, Regional and MAC anesthesia for general surgery, orthopedics, urology, plastics, neuroskeletal, vascular, podiatry, pediatric dental, ENT and cataract cases.
- Endoscopy: Experiences in deep sedation techniques for upper and lower endoscopy cases.
- Off-site: X-ray department, CT scan, MRI, and Cardioversions.
- Dr. John Prinscott, MD (clinical coordinator)
 - Main OR desk contact: (401) 456-3113

Roger Williams Medical Center, Providence RI:

- Travel Distance: 10 miles from RINEC
- Main Operating Room: Experiences in general surgery, orthopedics, oncology, neuro, vascular, bariatrics
- Endoscopy: experiences in deep sedation techniques for upper and lower endoscopy cases
- Off site: X-ray, CT, MRI, cardioversions
- Contact: Dr. Timothy Connelly, MD, Barbara Achey, MSNA, CRNA (clinical coordinator)
 - Main OR desk contact: (401) 456-2125

Rhode Island Hospital, Providence. RI (Level-1 Trauma Center)

- Travel Distance: 0.6 miles from RINEC
- Experiences in neuro, general, thoracic, vascular, and some open-heart cardiac cases.
- Contact: Dr. Gildasio DeOliveira, MD, Chief of Anesthesia, Michelle Hanlon, MSNA, CRNA, Chief CRNA (clinical coordinator), Theresa Penneccchia, Administrative Assistant
 - Anesthesia Office (401) 444-5142.

RIH/Hasbro Children’s Hospital, Providence, RI

- Travel Distance: 0.6 miles from RINEC
- Experiences in anesthesia for pediatrics

- Contact: Same as Rhode Island Hospital

St. Vincent Hospital at Worcester Medical Center, Worcester, MA

- Travel Distance: 37 miles from RINEC
- Experience in Obstetrical Anesthesia.
- Contact: Dr. Dan Cook, Patty Avis, MSNA, CRNA, Co-Chief CRNA, John Pina, MSNA, CRNA (508) 982-5998, Co-Chief CRNA, (clinical coordinator) and Robin Simons, Administrative Assistant, (508) 363-6030.

VA Medical Center, West Roxbury, MA

- Travel Distance: 40 miles from RINEC
- Experiences in hearts, neuro, vascular, and general surgery cases.
- Contact: Dr. Kay. Leissner MD, Chief of Anesthesia, Nate VanHeuveln, MSNA, CRNA (clinical coordinator), (781) 985-9499 and Jeanne Palumbo, Anesthesia Administrative Assistant

Kent Hospital, Warwick, RI

- Travel Distance: 11 miles from RINEC
- Experience in ENT, GYN, Vascular, orthopedic, bariatric, and thoracic cases.
- Contact: Dr. Rich Pedro (401) 519-8544, Marie Rahme, MSNA, CRNA, (clinical coordinator) (978) 478-7424

Lahey Hospital and Medical Center, Burlington, MA

- Travel distance: 59 miles from RINEC
- Experiences, General, open-heart, cardiac, neuro, vascular
- Contact: Dr. Nathan Jones, MD, Amy Sullivan, CRNA (clinical coordinator) amy.c.sullivan@lahey.org

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

STUDENT CLINICAL SUPERVISION

POLICY/PROCEDURE 33:

In accordance with the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs, clinical supervision at our affiliated clinical sites is constrained to CRNA and physician anesthesiologists who are institutionally credentialed to practice. Also, the CRNA or physician anesthesiologist must be immediately available for consultation in the clinical/perioperative area.

DNP Nurse Anesthesia (NA) Program students must have specific direction from the supervising CRNA or Anesthesiologist before the administration of all medications to a patient. The DNP NA Program Student must also have specific direction from the supervising CRNA or Anesthesiologist AND the supervising CRNA and Anesthesiologist must be in the same room/location for both intubation and laryngeal mask airway (LMA) placement as well as extubation. Any DNP NA Program student who is to place an ETT, LMA or extubate a patient without the supervising CRNA or Anesthesiologist in the same room/location may be subject to dismissal from the Program at the discretion of the DNP NA Program Administrator. All situations and circumstances regarding the disobedience of said policy will be examined in detail prior to the DNP NA Program Administrator's decision for dismissal of the student. The student has the right to Due Process. Please see DUE PROCESS policy.

- Students should obtain their clinical assignment in the afternoon. The pre-anesthesia assessment should be reviewed. If the patient is in-house, the student must see the patient pre-op and do a pre-anesthesia assessment (site dependent).
- Students should discuss his/her plan of care with the supervisor.
 - Regarding implementation of the plan of care.
 - Perform a post anesthesia visit (site dependent).
- Students should conduct themselves as professionals during the clinical experience at all times.
- Students are expected to follow the infectious disease and blood born pathogen protocols at the respective affiliated clinical sites.

Student clinical assignments are consistent with COA of Nurse Anesthesia Educational Programs requirements and are supervised by the clinical coordinator at the affiliated clinical sites. At no time does the ratio of clinical preceptor exceed two (2) students to one (1) physician anesthesiologist/CRNA provider. Student clinical assignments are made by the clinical coordinator at affiliated clinical sites and ensures patient safety while taking into consideration the following components according to the COA:

- Complexity of the anesthetic and/or surgical procedure
- Student's knowledge and ability
- Comorbidities associated with the patient

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

CLINICAL EXPERIENCE DOCUMENTATION and STUDENT DOCUMENTATION

POLICY/PROCEDURE 34:

In accordance with the American Association of Nurse Anesthetists (AANA), Council on Accreditation (COA) of Nurse Anesthesia Educational Programs, and the National Board of Certification and Re-certification for Nurse Anesthetists (NBCRNA), student are required to maintain a record of both accurate and complete clinical experiences logs. These clinical logs are reviewed by the Program Administrator and/or Assistant Program Administrator on a regular basis.

Students are required to yield documentation as required by the DNP NA Program policies and Procedures, College, and affiliated clinical practicum sites. The following documents are required to be completed in a timely manner with full documentation:

1. Preoperative Assessment – each anesthetic case
2. The Anesthesia record – each anesthetic case
3. Post-operative note – each anesthetic case (site specific)
4. Incident reports – when suitable
5. Clinical Experience Record (Typhon) – Completed within **7 days** of clinical experience
6. Registration forms affiliated with the College
7. Financial Aid forms – If receiving financial aid, forms completed as outlined by regulation
8. Affiliated Clinical Site's onboarding paperwork

Submission of clinical records and data will be done electronically using the Clinical Experience Record (Typhon). Student Tracking System for Anesthesia Programs (NAST) - Typhon is a requirement for Clinical Practicum and starting with Clinical Practicum I. Students are responsible for the financial fee for Typhon electronic Clinical Experience Record. Students will be oriented to the Typhon Student Tracking system for Anesthesia Programs prior to the start of Clinical Practicum I. Experiences will be checked by the Program Administrators. Accuracy of records is essential and entirely the student's responsibility. Records must be completed within 7 days of the clinical experience. Students who fail to comply with the timely and accurate recording of clinical experiences according to this policy and procedure may be subject to disciplinary action set forth by the DNP NA Program Administrator.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

ANESTHESIA MANAGEMENT PLANS, CLINICAL EVALUATIONS, AND CLINICAL POSTOPERATIVE EVALUATIONS

POLICY/PROCEDURE 35:

Anesthesia Management Plans:

Students are required to read and prepare for surgical cases either the night before or when they receive their clinical assignment. Students are required to evaluate each individual assigned patient, by performing a focused preoperative assessment, a detailed medical and surgical history as well as a thorough review of the patient's diagnostic data. After review of the surgical procedure/case, the patient's medical and physical conditions, and any anesthetic implications, the student is to manufacture a comprehensive individualized and holistic anesthesia management plan. Anesthesia management plans are allowed to be verbal plans. The required amount of submitted hand-written anesthesia management plans is written in detail for the syllabus of the student's clinical practicum course. The template for the hand-written anesthesia management plans will be posted to the clinical practicum course on *RIC Blackboard Learn*. The hand-written anesthesia management plans are the original work from each student, and they are NOT allowed to be typed. Plagiarism on an anesthetic management plan is a violation of the Code of Academic Honesty Policy written in the RIC Handbook for BSN-DNP (with specialization in Nurse Anesthesia). Please see ACADEMIC HONESTY AND INTEGRITY.

The purpose of writing anesthesia management plans is not to reach a numeric goal, but to help the student apply concepts from the didactic portion of academia to clinical anesthesia, individualize the care of each patient's needs and document the student's knowledge and thinking for surgical cases.

Anesthesia management plans are updated and/or amended by the student throughout the clinical day in the student's downtime and/or breaks. Anesthesia management plans will be reviewed with both the clinical preceptor and student prior to caring for the patient. Clinical preceptors are encouraged to make suggestions and write comments on the anesthesia management plan in order to elevate learning for the student. The quality of the anesthetic management plan will be included in the overall performance and evaluation of the student. Any clinical preceptor is justified in requesting a written or verbal anesthesia management plan from a student at any time during the matriculation in the program, particularly for a surgical case that is complex or one that the student has not previously delivered anesthesia on.

Clinical Evaluations

Evaluation forms will be posted to RIC Blackboard Learn at the beginning of NA clinical practicum course. Additional Clinical Evaluations may be located in the Our Lady of Fatima Drs. Lounge above the student clinical folders. Each student will be shown their clinical folder during clinical orientation day. It is the responsibility of the student to obtain the required evaluations

for each clinical practicum and submit them every month as outlined in the NA Clinical Practicum syllabus. If the Program Administrator does not receive the minimum number of evaluations the student will receive a clinical warning. Program Administration takes into account the evaluation methods by the clinical sites. Deadline for submission is indicated in the NA Clinical Practicum syllabus. In order to allow the process of grading to work efficiently this timely submission of materials is essential. When the student receives an assessment by clinical preceptors that he/she/they “does not meet expectations” the student should contact their advisor for consultation.

Students must maintain a passing average on clinical evaluations at the end of each clinical practicum in order to proceed to the next NA Clinical Practicum course and phase of the program.

The following is the scoring system on the clinical evaluation tool:

- 3= Meets Expectations
- 2= Needs Improvement
- 1= Does not meet expectations
- N/A = not applicable at this time. Not observed

Grading at end of semester:

<u>Key</u>	<u>Grade</u>
3.0	A
2.0	B
1.0	B minus

Clinical Postoperative Evaluations

Clinical Postoperative Evaluations must be completed by the student on each in-hospital patient. In many institutions the free anesthesia provider will do post op visits on all patients. This does not excuse the student from visiting patients that they were actively involved with. This visit may be an evaluation in the immediate recovery phase and again in the post recovery phase and/or within twenty-four hours. It allows the student to evaluate their anesthetic technique and management as well as to provide knowledge regarding the full scope of practice for the CRNA. A postoperative visit promotes positive relations between the student and the patient and fulfills requirements by the COA and NBCRNA.

Objectives for Postoperative Evaluation:

- Evaluate residual effects of premedication and anesthetic care.
- Assess pain, restlessness, or agitation in the immediate postoperative period.
- Assess vital signs.
- Evaluate patient complaints: i.e., muscle stiffness, nerve damage, corneal abrasions, sore throat, nausea/vomiting, or awareness.
- Determine appropriate management of the patient in the recovery phase.

Documentation:

- The student should document the visit and assessment on the patient’s postoperative record of the affiliated clinical site (site specific). If any complications are noted, these must be brought to the attention of the Anesthesiologist/CRNA.
- The student must complete a specific amount of Clinical Postoperative Evaluation per month while in the NA Clinical Practicum course. The specific number of Clinical Postoperative Evaluations will be specified in the NA clinical practicum syllabus and will be included in the overall student grade for the NA clinical practicum course.

Submission of Anesthesia Management Plans (AMP)/Clinical Evaluations (CE)/Clinical Postoperative Evaluations (CPE):

Each Anesthesia Management Plan (AMP), Clinical Evaluation (CE), and Clinical Postoperative Evaluation (CPE) will be submitted on time by the student according to the clinical practicum course syllabus. The student will upload the specific amount of each AMP, CE, and CPE stated on the clinical practicum course syllabus to RIC Microsoft Office 365 OneDrive. A specific folder for each student will be created in RIC Microsoft Office 365 OneDrive by the Program Administrators for each month in accordance with AMPs, CEs, and CPEs. The student is to ONLY upload files to the specific folder created for them. The student is NOT allowed to edit the folders created or create new folders that pertain to AMPs, CEs, and CPEs in RIC Microsoft Office 365 OneDrive. Program Administrators are the only people who are allowed to edit folders and create new folders for students. Late submission of AMPs, CEs, and CPEs will be reflected in the overall grade and evaluation for the student’s NA clinical practicum course. The student must submit the AMPs, CEs, and CPEs using the following format:

“Last name, what the student is submitting, date” for each AMP, CE, and CPE.

Example:

Parrish AMP 5.8.2023

Parrish AMP 5.1.2023 – 5.31.2023

The student may choose to submit each AMP, CE, and/or CPE individually or all at once during the month required.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

CLINICAL CALL EXPERIENCE

POLICY/PROCEDURE 36:

SJHSNA DNP NA Program is in accordance with the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs standards for call experience stated as follows:

The program provides opportunities for students to obtain clinical experiences outside the regular clinical schedule by a call experience or other mechanism. Call experience - Call is a planned clinical experience outside the normal operating hours of the clinical facility, for example, after 5 PM and before 7 AM, Monday through Friday, and on weekends. Assigned duty on shifts falling within these hours is considered the equivalent of an anesthesia call, during which a student is afforded the opportunity to gain experience with emergency cases. Although a student may be assigned to a 24-hour call experience, at no time may a student provide direct patient care for a period longer than 16 continuous hours.

SJSHNA Call Experience:

Call experiences may be subject to change at the discretion of DNP NA Program administrators and affiliated clinical site clinical coordinators and staff. Call experience may be changed or added within affiliated clinical sites to provide opportunities for students to experience both emergency cases and enrich the students understanding of emergency and unscheduled surgery as compared to elective surgery. Student call duty will be rotated so time can be as equally distributed as possible to the entire student body. Students who are on-call will always have an anesthesiologist or CRNA in attendance. One student from each class shall be selected to make the student call schedule. It is this student's responsibility to plan a fair rotation. The student in charge of the call schedule shall send copies to all students via email. A copy must also be submitted to the Program Administrator and Program Administrative Assistant via email. Once the schedule is posted, each student is expected to take his/her/they call on the scheduled day. Changing the call schedule is not encouraged. However, if necessary, the student must make arrangements to cover their call, as a professional CRNA would.

Current call experiences for students includes two (2) affiliated clinical sites and one (1) late day at one (1) other affiliated clinical site. Student guidelines for call experiences will be clearly stated in the Clinical Practicum course syllabus for that specific clinical practicum rotation.

When on call the student will:

- Report to the Anesthesiologist on call for assignment prior to 3:30 pm.
- Have an anesthesiologist or CRNA immediately available for the student.
- Have the designated room, in the Main OR, for emergency surgery in readiness.
- Remain at the clinical site until the end of the call shift or be within 30 minutes of the hospital until the end of the call shift if no cases are currently running.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

CONTROLLED SUBSTANCE ACCOUNTABILITY

POLICY/PROCEDURE 37:

As student nurse anesthetists you will be responsible for the dispensing, administering, and wasting of controlled substances. The following guidelines must be followed meticulously. Deviation from these guidelines may result in clinical probation or dismissal from the program.

- All controlled substances will be kept under the control of the person who signed for them.
- Controlled substances should not be exchanged between department members or fellow students.
- It is the responsibility of each SRNA to accurately document all medications given. The medication administered and the dose must be confirmed prior to closing the patient chart.
- Any unused controlled substances must be wasted or returned to the correct patient. This must be done after each case to reduce the possibility of an error.
- All controlled medication wastes and returns must be done with another anesthesia provider or an RN as a witness.
- If a discrepancy is found, the policy of the facility at which it occurred will be followed.
- In addition, the program administrator and assistant program administrator must be informed by the SRNA immediately via email if a discrepancy has occurred.
- Multiple discrepancies will be looked at closely and could result in clinical probation or dismissal from the program.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

SELF-EVALUATION EXAMINATION (SEE) AND REMEDIATION

POLICY/PROCEDURE 38:

All students are required to take the Self-Evaluation Examination (SEE), administered by the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA). Students must take the SEE a minimum of two (2) times during the course of study in the program. The first-time students take the SEE will be at the conclusion of their second year in the program and will be part of the NURS 616 syllabus/course. The SEE is intended as a self-assessment tool for the student in preparation for the National Certification Examination (NCE) during the first two years of enrollment in the program. During the final year of the program the student must pass the SEE with a minimum score prescribed in the NURS 636 syllabus/course in order to receive a passing grade in the course. The examination will be used as an outcome indicator for the program. The student is responsible for the financial expense of each SEE and for completing the examinations within the timeframe outlined in the course syllabi stated above.

Students will receive a day to complete this requirement prior to the test deadline without the use of PTO for both the first and second SEE attempt. Senior students failing to complete the SEE by the deadline will be responsible for fulfilling the requirement on their own time. Second-year and third-year SEE exam requests will be limited to 20% of the class per date requested. Those students who do not pass the SEE during the first time as outlined in the syllabi for the NURS 616 course will be reviewed with the Program Administrators and a 12-week self-evaluated remediation plan will be created by the student and submitted to the Program Administrators according to the NURS 616 syllabi. Failure to complete the self-evaluated remediation plan may result in disciplinary action up to dismissal from the program.

The SEE taken in the student's third-year of the program will be part of the NURS 636 course and failure to complete the SEE with a passing score according to the NURS 636 syllabi will result in a course "Incomplete". Third-year students may take the SEE as many times as possible up to graduation in order to pass the SEE and the NURS 636 course. The student is responsible for the financial expense of the SEE for every time the examination is taken by the student. Failure to pass the SEE by graduation will result in an incomplete "I" grade for the semester for NURS 636 course and a deferral of graduation. Deferral of graduation will be granted to the student for a maximum of one semester following the original graduation date. During this time the student must sit for and pass the SEE in order to graduate from the SJHSNA DNP NA Program and sit for the National Certification Examination (NCE) put forth by the National Board of Certification and Recertification of Nurse Anesthetists (NCE). If the student fails to meet the requirement of passing the SEE within the allotted deferral of graduation time, the student will be reviewed by the Program Administrators, DNP Director, and Dean of the College to evaluate the performance of the student throughout their matriculation in the program. A decision will be made by all parties involved in the reviewal process and the student will be notified for the allowance of retaking of the course a year later, due to the lockstep nature of the

program or if the student will be dismissed from the program based on the failure to complete the NURS 636 course according to the **ACADEMIC GRADING POLICY**.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

Student SEE Remediation Contract

I, _____, recognize that the Self-Evaluation Examination (SEE) score that was received during the first attempt of my second year in the St. Joseph Hospital School of Nurse Anesthesia Doctor of Nursing Practice Nurse Anesthesia (SJHSNA DNP NA) Program was unsatisfactory for the requirements of the NURS 616 syllabus and course. I understand that my SEE score is below the benchmark put forth in the NURS 616 syllabus and because of this I am required to create a 12-week self-evaluated remediation plan. I understand that the remediation plan is not prepared as punishment, but as a way to evaluate strengths and weaknesses related to my knowledge of the topics that I am tested on for both the SEE and National Certification Examination (NCE).

I will collaborate with the SJHSNA Program Administrators to develop a 12-week remediation plan that will help me to be successful with passing the SEE and NCE during my final year of the Program and post-graduation. I am meant to submit the 12-week remediation plan to the Program Administrators via RIC email within two (2) weeks following the meeting and review of my SEE scores.

I will complete the 12-week remediation plan over the course of my next semester in addition to the courses I am enrolled in during the same semester. I understand that failure to comply with and complete the 12-week remediation plan I have created for myself may result in a disciplinary action up to dismissal from the program.

Student Name (Print) _____

Student Signature _____ Date _____

Program Administrator Signature _____

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

ACADEMIC AND COURSE PREPARATION

POLICY/PROCEDURE 39:

Students are responsible for all reading and written work assigned in class. All assignments must be completed by the due date unless other arrangements have been made in advance with the course professor/instructor. All assigned readings should be completed before the class to allow effective classroom participation.

Students are permitted to use electronic devices such as laptops, tablets, or mobile devices for the purpose of classroom related activities ONLY. Classroom distractions are not permitted in class by students attending the course and students must be mindful of any distractions used by an electronic device. Those students who disobey this policy and use any electronic device for a purpose not related to classroom activities will be given a verbal warning and asked to shut down and/or close the electronic device. If a student repeatedly uses an electronic device for any reason outside of the classroom related activities, he/she/they will be asked to leave the classroom and any material missed from the rest of the class will be the student's responsibility outside of the professor/instructors help. If over half of the class time remains when a student who is breaking this Academic and Course Preparation policy is asked to leave the classroom, one (1) day of PTO will be deducted from the students Personal Time Off Bank.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

ACADEMIC HONESTY AND INTEGRITY

POLICY/PROCEDURE 40:

Rhode Island College Zvart Onanian School of Nursing/SJHSNA recognizes that the nursing profession is based on a standard of honesty and personal and professional integrity. In order to achieve the missions of the College and the School of Nursing and develop the high ethical standards required of nursing practice, academic honesty is an integral part of the DNP NA program. Students and faculty are jointly responsible for maintaining an honest environment and all must work together to ensure the success of the academic honesty policy. All students within the School of Nursing are expected to maintain academic honesty and integrity.

Examples of dishonesty would include, but are not limited to cheating, plagiarism, theft, unauthorized assistance, falsifying information related to clinical cases, time logs or patient medical records. Assisting in the commission of any of the afore-mentioned examples is also a violation of this policy. Violation of this policy is subject to due process. Students must also adhere to the Academic Integrity Policy in the RIC Graduate Studies Policies and Procedures Manual as well as the Rhode Island College Manual of Academic Polices and Procedures Academic Integrity Policy, Section 9.1 found at <https://www.ric.edu/documents/academic-policies-and-procedures>

SJHSNA is also in accordance with the Code of Academic Honesty Policy written in the RIC Handbook for BSN-DNP (with specialization in Nurse Anesthesia).

The Code of Academic Honesty Policy states as follows:

The School of Nursing at Rhode Island College recognizes that the nursing profession is based on a standard of honesty and personal and professional integrity. In order to achieve the mission of the College and the School of Nursing, and develop the high ethical standards required for nursing practice, academic honesty is an integral part of the nursing program. Students and faculty are jointly responsible for maintaining an honest environment and all must work together to ensure the success of the academic honesty policy. All students within the School of Nursing are expected to maintain the code of academic honesty. This means that all academic work is presented without plagiarism, cheating or unauthorized assistance.

The Goals of the Academic Honesty Policy in the School of Nursing are to:

- Promote a culture of academic honesty within the School of Nursing.
- Increase understanding of acts that are designated as academically dishonest behaviors.
- Maintain the academic reputation of the School of Nursing.
- Clearly define the process related to matters of academic dishonesty.

Violation of the Code of Academic Honesty

Incidents of academic dishonesty will be adjudicated through the College's usual disciplinary process. Specifically, when a faculty member suspects a student has committed academic dishonesty, the faculty member will confront the student and may determine the appropriate action to be taken. Penalties could include repercussions on the assignment/test, up through failure for the course. A student who disagrees with the faculty member's decision may appeal to the Board of College Discipline; or a faculty member may elect to send the case immediately to the Board without passing judgment. The Board has a full range of sanctions available to it, from a warning up through suspension or expulsion from the College.

Behaviors that constitute Academic Dishonesty are prohibited. Examples of academic dishonesty include but are not limited to the following:

(Adopted from Academic Honesty policies from West Hills Community College, University of Maryland Baltimore, School of Nursing; University of Rochester, University of Arkansas/Fayetteville, University of Houston/Clear Lake, University of Michigan, and Rhode Island College Handbook of Policies, Practices and Regulations).

- Plagiarism – Any attempt to present someone else's work as one's own, on quizzes, examinations, reports, or term papers, etc., constitutes plagiarism, an act closely analogous to the theft of money or goods to any form of swindling or fraud, and in the academic world, just as deplorable. There are various forms of plagiarism of which the following are most common:
 - **Word-for-word plagiarism.** This includes (a) the submission of another person's work as one's own; (b) the submission of work from any source whatever (book, magazine, or newspaper article, unpublished paper, or thesis) without proper acknowledgement by footnote or reference within the text of the paper; (c) the submission of any part of another's work without proper use of the quotation marks.
 - **Patchwork plagiarism.** This consists of piecing together of unacknowledged phrases and sentences quoted verbatim (or nearly verbatim) from a variety of sources. The mere reshuffling of other people's words does not constitute "original" work.
 - **Unacknowledged paraphrase.** It is perfectly legitimate to set forth another author's facts or ideas in one's own words, but if one is genuinely indebted to the other author for these facts or ideas, the debt must be acknowledged by footnote or reference within the text of the paper.
- Unauthorized Assistance:
 - Using books, notes, calculators and technological devices in an unauthorized manner to assist with quizzes, exams or lab work.
 - Copying answers to an exam.
 - Giving or receiving answers to a scheduled exam.
 - Submitting work done by another individual and portraying it as one's own.
- Providing false information:
 - Giving false reasons (in advance or after the fact) for failure to complete academic work. This includes, for example, giving false excuses for failure to attend an exam or attend the clinical practicum.

- Falsifying the results of any laboratory or clinical work or fabricating any data or information, including patient related information.
- Giving false information or testimony in connection with any investigation or hearing under this policy.
- Presenting previously submitted academic work and portraying it as new material.
- Multiple Submissions: Submitting for credit, when a student has not been given permission to do so, any work that is the same or substantially the same as work that has been submitted for credit in another course. Many professors allow reworking or building on prior work; however, multiple submissions are permitted only with the prior permission of the instructor(s), and only when the student acknowledges the multiple submission in the work itself.
- Theft:
 - Procuring unauthorized materials related to academic work such as exams, grade books, and class files.

Faculty and students share the responsibility for upholding the Academic Honesty Policy. Students are expected to report instances of academic dishonesty to the faculty. A faculty member is responsible for confronting a student who violates the code and determining the appropriate action to be taken with respect to the class. As noted in the Rhode Island College Handbook of Policies, Practices, and Regulations (3.9.1[b]), a faculty member may take action up to and including failing a student accused of academic dishonesty. In all cases, a report describing the nature of the dishonesty and subsequent action taken by the faculty member shall be filled with the Vice President for Academic Affairs. Additionally, the faculty member may recommend that the Academic Integrity Board recommend further action. In the case of graduate students, the faculty member will also inform the Director of the Master's or DNP program of the nature of the dishonesty and the subsequent action taken by the faculty member and may recommend that further action be taken.

As per section 3.9.1(c), in the case of graduate students, the director of the Master's or DNP program may convey the recommendations of a penalty of probation or dismissal from the program to the academic dean of the school in which the student is enrolled (revised by vote of the Council (May 3, 2013), and approved by the President (May 24, 2013).

The School of Nursing reserves the right to impose additional penalties when students have been found in violation of the code of Academic Honesty, including dismissal from the School of Nursing. Such penalties will be imposed by the Dean in consultation with the faculty member. Students have the right to appeal to the academic Integrity Board. The appeals procedure is outlined in the Rhode Island College Handbook of Policies, Practices, and Regulations, section 3.9.1.d.ii (p. 35).

All graduate students will be asked to sign an attestation stating they have read the Academic Honesty statement and attest to maintaining academic honesty in all academic assignments, clinical documentation and to maintain professional integrity.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

ACADEMIC GRADING POLICY

POLICY/PROCEDURE 41:

Grading will be conducted in accordance with the grading and retention policies as described in the RIC Handbook for BSN-DNP (with specialization in nurse anesthesia) as well as the Academic Standing Policy written in the Rhode Island College Graduate Studies Policies and Procedures Manual. For academic retention please see the ACADEMIC RETENTION policy written in this handbook.

The Academic Standing Policy is stated as follows:

A. Grading System

1. To qualify for continuation in degree, for candidate status and for graduation a GPA of 3.0 or higher is required.
2. Programs may have specific additional retention and grade requirements. Students should refer to the program descriptions for these requirements.

Academic standing is based on grade points, which are related to letter grades as indicated below.

Cumulative Index Grade Ranges

4.00	A	93-100
3.67	A-	90-92
3.33	B+	87-89
3.00	B	84-86
2.67	B-	80-83
2.33	C+	77-79
2.00	C	74-76
1.67	C-	70-73
1.33	D+	67-69
1.00	D	63-66
.67	D-	60-62
.00	F	0-60

3. Review of academic standing occurs each semester at the program level. Grades below B (3.00) are not indicative of graduate quality work. Students who earn a grade below B (3.00) in any course and/or whose cumulative GPA has fallen below 3.0 will have their status reviewed by the program. Such review may result in the student being placed on probation or dismissed from the program. Probation may also require the retaking of

course, the revocation of graduate assistantship, and the suspension of progress in the program until satisfactory performance is achieved. Students will be informed in writing. Students on probation must achieve grades of B (3.00) or better in graduate-level coursework for the next 9 earned credits. Students on probation will continue to be monitored until satisfactory performance in their graduate program is achieved. Failure to meet the conditions of probation will result in dismissal. Students on probation are not eligible to apply for assistantships and students on probation may not retain assistantships.

4. For a repeated course, the most recent grade will be included in the calculation of the grade point average. (The first grade will remain on the student's transcript).

B. Satisfactory and Unsatisfactory Grade

Graduate courses approved for an S/U grade by the Graduate Committee require students to perform at the B level (3.00) or better to receive a grade of S. These courses shall be so labeled in college catalogs and bulletins. Grades of S or U are not included in calculating grade point average.

C. Incomplete Grade

For all graduate students an Incomplete grade shall be given in place of a grade when substantial work of the semester has been completed satisfactorily but all work has not been completed because of illness or some other reason that, in the opinion of the instructor, justifies such a report. The instructor sets the conditions and time frame required for completion which will not exceed 3 semesters. Graduate students who do not meet the time frame for completion of an Incomplete grade must make a request in writing to their graduate program for permission to complete the course. Unlike policies for undergraduates, incompletes for graduate students do not turn to F's but remain an I on the transcript.

D. Credit / No Credit

Graduate students cannot elect to take graduate courses with credit/no credit option.

E. Audit

1. Audited courses may not be counted for credit toward an advanced degree. The same tuition and fees apply to audited courses as to courses taken for a grade.
2. By auditing a student participates in a course without receiving credit or having the grade point average affected. A course may be audited as long as registration for it has not been closed. Preference must be given to those enrolling for credit.
3. A course must be changed from credit to audit by the end of the add/drop period.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

ACADEMIC RETENTION

POLICY/PROCEDURE 42:

All students are expected to maintain a cumulative average of “B” (3.00) or better in their graduate program. Students who do not maintain a cumulative “B” (3.00) average will have their status reviewed by the DNP Program Administrator. Students who achieve less than a “B” in a required nursing course will be placed on probationary status. Students on probationary status must achieve a “B” or better in each course over the next 9 credits. Two grades below “B” are sufficient cause for consideration of dismissal; the decision regarding students’ status will be made by the DNP Program Director in consultation with the Dean. Students may be required to repeat a course at the discretion of the DNP Program Director. Please also refer to the Handbook for BSN-DNP Students (with specialization in Nurse Anesthesia).

In accordance with this policy, SJHSNA also follows the RIC Handbook for BSN-DNP Students (specialization in Nurse Anesthesia) Retention requirements of post-baccalaureate DNP student policy.

The Retention requirement of post-baccalaureate DNP student policy is stated as follows:

1. All students are expected to maintain a cumulative GPA of 3.00 (grade of B) or greater in their graduate program.
2. Students who earn less than a B, including a grade of U, in a required nursing course will have their status reviewed by the DNP program director.
3. Students who do not achieve a minimum grade of B in Advanced Health Assessment, Advanced Pathophysiology or Advanced Pharmacology must repeat the course and may not progress in clinical courses.
4. Students who earn a grade less than B- in the required science courses, including NURS 535 and NURS 536, will be placed on probationary status.
5. Students on probationary status must achieve a minimum grade of B in all required nursing courses over the next 9 credits.
6. Two grades below a B are sufficient cause for consideration of dismissal. The decision regarding a student's status will be made by the DNP program director in consultation with the dean.
7. Students may be required to repeat a course at the discretion of the DNP program Administrator.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

PROGRAM PLAN OF STUDY AND LENGTH

POLICY/PROCEDURE 43:

Course descriptions may be found on the RIC website.

Curriculum (91 Credits)

CR	Year 1 - Summer	CR	Year 1 - Fall	CR	Year 1 - Spring
3	NURS 503 Professional Role Development*	3	NURS 505 Advanced Pharmacology	3	NURS 704 Clinical Research/Analytical Methods
3	NURS 524 Healthcare Statistics*	3	NURS 703 Advanced Epidemiology and Biostatistics	1	NURS 791 Directed Readings II
3	NURS 702 Systems Leadership/Quality Improvement**	4	NURS 535 Advanced Physiology I	3	NURS 706 Economics, Finance, Business Management
3	NURS 708 Interprofessional Collaborative Practice**	3	NURS 701 Scientific Underpinning for Clinical Scholarship	4	NURS 536 Advanced Physiology II
				3	NURS 504 Advanced Pathophysiology
12	Total Semester Credits	13	Total Semester Credits	14	Total Semester Credits

CR	Year 2 - Summer	CR	Year 2 - Fall	CR	Year 2 - Spring
3	NURS 506 Advanced Health Assessment	3	NURS 709 Population Health	3	NURS 705 Health Care Policy and Advocacy
3	NURS 517 Foundational Principles of Nurse Anesthesia	1	NURS 792 Directed Readings II	3	NURS 616 Advanced Principles of Nurse Anesthesia Practice II
4	NURS 514 Advanced Pharmacology of Nurse Anesthesia	3	NURS 516 Advanced Principles of Nurse Anesthesia Practice I	2	NURS 630 NA Clinical Practicum II
		2	NURS 570 NA Clinical Practicum I	1	NURS 720 DNP Project Planning Seminar
10	Total Semester Credits	9	Total Semester Credits	9	Total Semester Credits

CR	Year 3 - Summer	CR	Year 3 - Fall	CR	Year 3 - Spring
3	NURS 626 Advanced Principles of Nurse Anesthesia Practice III	3	NURS 707 Information Technology/Decision Support	3	NURS 636 Transition to Nurse Anesthesia Practice
3	NURS 640 NA Clinical Practicum III	3	NURS 670 NA Clinical Practicum IV	3	NURS 691 NA Clinical Practicum V
3	NURS 730 DNP Proposal Development	2	NURS 740 DNP Project Implementation	1	NURS 750 DNP Project Evaluation and Dissemination
9	Total Semester Credits	8	Total Semester Credits	7	Total Semester Credits

*Summer I - first semester

**Summer II – second semester

Length of study:

The DNP NA Program length of study is 36 consecutive Month – Full Time. Changes made to the current curriculum and length of study are approved by governing entities and published before implementation. Any changes made to the curriculum or length of study must be approved by the COA of Nurse Anesthetist Educational Programs and the following Entities:

1. Commission on Collegiate Nursing Education (CCNE)
2. SJHSNA DNP NA Program Administrators
3. RIC Zvart Onanian SON

Any student who needs to take a medical or personal leave must obtain approval from Rhode Island College. If a student is unable to complete the Program in 36 months, the student must follow the LEAVE OF ABSENCE policy/procedure in this manual as well as the Leave of Absence Policy found in the Handbook of BSN-DNP (with specialization in nurse anesthesia).

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

STUDENTS WITH DISABILITIES

POLICY/PROCEDURE 44:

SJHSNA and Rhode Island College are committed to making reasonable efforts to assist individuals with documented disabilities. If you are a student seeking reasonable classroom accommodations under the American with Disabilities Act, and/or Section 504 of the Rehabilitation Act of 1973, you **MUST** meet with a member of the Disabilities Services Office staff. To make an appointment, please call 401-456-2776 or TTT (via RI Relay) 711 or send a message to dsc@ric.edu. The office is located in Fogarty Life Science, Rm 137. To receive academic accommodations for class, please obtain the proper Disabilities Services Office forms and meet with your course faculty at the beginning of the semester.

Students who may require accommodations under the American with Disabilities Act, please seek more information on the Handbook for BSN-DNP (with specialization in nurse anesthesia) under Additional Resources Include.

SJHSNA complies with the nondiscriminatory practice set forth by the Council on Accreditation (COA) of Nurse Anesthesia Educational Program. The following is the nondiscriminatory practice statement - Nondiscriminatory practice is the practice of treating all individuals, including applicants, without regard to race, color, national origin, gender, marital status, sexual orientation, religion, age or disability, consistent with law. Although an applicant should not be required to provide information regarding any protected characteristics, he or she can provide such information on a voluntary basis. An applicant may be asked if he or she can perform the essential tasks or functions of a nurse anesthetist.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DNP – NA LOCKSTEP PROGRAM

POLICY/PROCEDURE 45:

The SJHSNA DNP NA Program is a Lockstep program. Students must take courses in sequence, as each semester is a pre-requisite for ensuing semesters. The Program is designed to integrate didactic and clinical learning experiences to optimize competency as an anesthesia provider. Therefore, successful completion of each course is necessary to progress through the Program. Students are allowed to retake one course over the entire matriculation in the Program if academic performance in all other courses is justified, and with approval by the Program Administrator. However, they must return in a year when the course is offered due to the lockstep sequence program. Students are only allowed to retake a course one time.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

NONDISCRIMINATION

POLICY/PROCEDURE 46:

It is the policy of SJHSNA DNP NA Program to obey to the principle of nondiscrimination in compliance with all applicable laws and Rhode Island College policies.

SJHSNA is committed to ensure that each member of the Program including but not limited to administrators, faculty, staff, and students are committed to the creation and maintenance of inclusive learning spaces. All members of the program shall be permitted to work or study in an environment that is free from any form of illegal discrimination including race/ethnicity, gender identities, gender expressions, sexual orientation, socio-economic status, age, disabilities, religion, regional background, Veteran status, citizenship status, nationality, and other diverse identities that we each bring to class.

Learning spaces include classrooms, labs, and other places of learning where you will be treated with respect and dignity, and where all individuals are provided equitable opportunity to participate, contribute, and succeed. In our courses, all students are welcome regardless of race/ethnicity, gender identities, gender expressions, sexual orientation, socio-economic status, age, disabilities, religion, regional background, Veteran status, citizenship status, nationality, and other diverse identities that we each bring. The success of an inclusive classroom relies on the participation, support, and understanding of you and your peers. We encourage you to speak up and share your views, but also understand that you are doing so in a learning environment in which we all are expected to engage respectfully and with regard to the dignity of all others.

The Program recognizes its obligation to work toward a community in which diversity is valued and opportunity is equalized. The program and Rhode Island College have procedures in place to file a complaint regarding discrimination, harassment, and Title IX issues.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

STUDENT PROFESSIONAL DEVELOPMENT

POLICY/PROCEDURE 47:

Students are required to complete 45 conference hours in accordance with the Council on Accreditation of Nurse Anesthesia Educational Programs while matriculated in the DNP NA Program.

Attendance and participation are required at:

- All in-house departmental meetings and in-services.
- Conferences and meetings at the clinical site rotation to which they are assigned. For an early morning conference, students should allow sufficient time to prepare for the day's cases prior to the meeting.
- All conferences must be documented in the Typhon clinical conference log and time log.

Special permission for an excused absence from any of the above must be granted prior to the required commitment from the administrator or designee.

Attendance of at least one (1) State association business meeting **per year** is required during the program. Attendance at any AANA meeting is not deemed a replacement of any State meeting. All 45 conference hours must be completed by the time of graduation from the program.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

STUDENT DISCIPLINARY ACTIONS

POLICY/PROCEDURE 48:

Student violation of the related policies and procedures of the Program, School, College, affiliated facilities and clinical sites, anesthesia departments and infringements related to Federal and State institutes may result in disciplinary actions upheld by the Program Administration.

Students should contact and inform their faculty advisor of any obstacles sustained within the program that may be impacting their success.

Clinical and Academic Warning

Students may be issued a formal clinical or academic warning letter from the Program Administrator at any time performance or behavior is unacceptable for the program or problems are noted that require immediate attention. The Program Administrator and the student will meet to discuss the clinical warning. If problems or behaviors persist, the student may be placed on clinical or academic probation.

Guidelines for Clinical Probation

Consideration for clinical progress will be based on a review of written student evaluations obtained in the clinical area. When students are having difficulty in the clinical area they are counseled by program instructors and advisors. Goals and objectives are identified and a mutual plan is formulated. If at any time it is determined that the student is consistently not meeting clinical objectives, a probationary status will be considered. Dependent on circumstances, clinical warning may not precede clinical probation. Emphasis will be on the student's performance in relation to clinical objectives for that NA Clinical Practicum level.

A clinical probationary status may be assigned for, but not limited to the following:

- It is determined that a student is failing to make satisfactory progress toward meeting clinical objectives set forth for a given NA Clinical Practicum.
- Unexcused or excessive absenteeism from clinical experience or required educational activities.
- Demonstrates a disregard for patient safety.
- Belligerent or unprofessional attitudes or behaviors in the performance of program related activities and/or clinical setting. Unprofessional behavior includes, but not limited to:
 - Noncompliance with or failure to follow direct instructions from faculty/preceptor.
 - Arrogance, disrespect, use of inappropriate tone of voice, insolence, dishonesty/falsification of any documentation with relation to program activities including clinical rotations.
- Unsatisfactory performance of clinical objectives or poor performance necessitating changes in clinical assignments including rotations.

- Persistent tardiness or absenteeism or patterned absence, i.e. before exams, weekends, holidays, etc.
- PTO used without approval from the Program Administration.
- Consistently leaving the clinical area without notification of supervising staff/preceptor, clinical coordinator, and/or anesthesia board runner.
- Reporting for duty while under the influence of any substance, which impairs the student's ability to perform his/her/they clinical tasks and requirements.
- Failure to turn in clinical evaluation forms as specified by the appropriate NA clinical practicum syllabus.
- Failure to comply with the CLINICAL EXPERIENCE DOCUMENTATION and STUDENT DOCUMENTATION policy.
- Violation of policies, rules and regulations of the hospital or anesthesia department to which the student is assigned for clinical practice.

If a student is removed from an affiliated clinical site for any reason at all, the student is required to forfeit their clinical site ID badge no later than 24 hours from the time of removal.

Guidelines for Academic Probation

In order to proceed throughout the program, the DNP NA student must:

1. Achieve a grade of "B" or greater in all courses and
2. Maintain a cumulative grade point average of 3.0 or higher

The SJHSNA DNP NA program is a lockstep program. A lockstep program means that a student must be taken in a sequential sequence while no class will be taken out of sequence from the approved plan of study. Due to the "lockstep" nature of the program, any grade less than an 84% (B) in any and all of the DNP courses is grounds for the inability to progress thru to the following course/courses and the student may be placed on academic probation. Please see ACADEMIC GRADING POLICY for information regarding academic probation.

Academic Probation Procedure

In the event a student must be placed on probation the following steps shall be taken.

- The Program Administration meets to evaluate the students' overall performance and achievement in the program. Pertinent discussion and documentation shall be reviewed regarding the reason for placement of the student on probation.
- Minutes of the meeting shall be recorded and kept on file.
- A probation notice shall be issued by the Program administration.
- The probation notice will include the reason for probation.
- The student shall meet with the Program administration at which time he/she/they will be given written notice of his/her/their probationary status.
- The probation notice will be signed by the Program Administrator, the Medical Director, and the student.
- A remediation plan including goals and objectives for the clinical probationary period are identified and discussed.
- The student shall utilize the session to discuss any area of the probationary notice which he/she/they feel needs clarification and/or further explanation.

- The student is required to acknowledge that he/she/they have received the probation notice and has been counseled regarding his/her/their status by signing and dating the notice. The student, if he/she/they so choose, may affix written comment to the notice in addition to his/her/their signature.
- At the end of the probationary period, the student will meet with the Program Administrators and will be re-evaluated. The status of the student will be reviewed again by the Program Administrators and appropriate action will be taken. Appropriate action may include but not be limited to:
 - Removal from probation status.
 - Failure of didactic course
 - Dismissal from the program.

Clinical Probation Procedure

In the event a student must be placed on probation the following steps shall be taken.

- The Program Administration meets to evaluate the students' overall performance and achievement in the program. Pertinent discussion and documentation shall be reviewed regarding the reason for placement of the student on probation.
- Minutes of the meeting shall be recorded and kept on file.
- A probation notice shall be issued by the Program administration.
- The probation notice will include the reason for probation.
- The student shall meet with the Program administration at which time he/she/they will be given written notice of his/her/their probationary status.
- The probation notice will be signed by the Program Administrator, the Medical Director, and the student.
- A remediation plan including goals and objectives for the clinical probationary period are identified and discussed.
- The student shall utilize the session to discuss any area of the probationary notice which he/she/they feel needs clarification and/or further explanation.
- The student is required to acknowledge that he/she/they have received the probation notice and have been counseled regarding his/her/their status by signing and dating the notice. The student, if he/she/they so choose, may affix written comment to the notice in addition to his/her/their signature.
- The length of clinical probation shall not exceed forty-five (45) clinical days at any one time. At the end of the probationary period, the student will be re-evaluated, and his/her/their status will be reviewed again by the Program Administrators and appropriate action taken. Appropriate action may include but not be limited to:
 - Removal from probation status.
 - Additional probationary period of forty-five (45) clinical days.
 - Failure of clinical practicum.
 - Dismissal from the program.

Dismissal of Student

Dismissal from the program may be for academic, clinical, or disciplinary reasons: The following may be grounds for dismissal from the Program without a probationary period:

- Violation of College and/or SJHSNA policies/procedures and regulations.

- Unprofessional, unethical, or illegal conduct related to professional practice.
- Unsuccessful completion of the clinical probationary status.
- Unsatisfactory performance in the academic area as defined in the College and program of anesthesia catalogs, syllabi and handbooks.
- Violation of academic integrity code i.e. cheating.
- Falsification of documents including but not limited to the patient medical record, narcotic administration records, and clinical evaluation forms, anesthesia management plans, preoperative assessments, postoperative clinical evaluations.
- Refusal to submit to a random drug test.
- Anesthetic induction with placement of LMA or ETT or extubation without expressed authorization and preceptor supervision of a CRNA and/or Anesthesiologist.
- Tampering with, destroying, disabling, or theft of Program, College, or affiliate property.
- Unexplained absences in the didactic, clinical and/or academic related events.
- Violation of policies, rules and regulations of the hospital or anesthesia department to which the student is assigned for clinical practice.
- Any action or omission which would constitute a breach of duty of a registered professional nurse defined by the state of Rhode Island, the state of Massachusetts, or would constitute a violation of the standards of practice or ethical conduct of nurse anesthetists as defined by the American Association of Nurse Anesthesiology.
- Level of incompetency representing a threat to patient or personnel safety
- Unethical or unprofessional conduct associated with clinical assignments including, but not limited to:
 - Dishonesty.
 - Inappropriate behavior or language in the clinical setting.
 - Student employment as a nurse anesthetist by title or function while in the educational program.
 - False or misleading information on application.
 - Failure to report a critical incident to the immediate supervisor.

Final decision of dismissal rests with the Program Administrator with documentation of reasons for dismissal. The student has the right to appeal through due process. Once the student is dismissed, they must turn in any hospital property to the Program Administrator. A summarization of the student's performance to date and a description of the circumstances of dismissal will be placed in the student's file. Notification of dismissal from the nurse anesthesia program will be given to Rhode Island College Zvart Onanian School of Nursing Doctor of Nursing Practice Director.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

PROBATION NOTICE

This is a formal notice that as of _____, _____
(Date) (Student Name)

will be placed on probation for _____
(Reason)

The length of probation will not exceed forty-five (45) clinical days before a re-evaluation is complete by the Program Administrators. If the conditions for which you were placed on probationary status are not met at the end of the forty-five days, appropriate action may include but not limited to:

1. An additional probationary period of forty-five (45) clinical days.
2. Failure of clinical practicum.
3. Dismissal from the Program.

If it is decided that you are to be dismissed from the Program, then you have a right to appeal this action through due process.

Please sign this to verify that you have been counseled regarding this probation and that you understand the provisions of this notice.

Date _____

Student Signature _____

Program Administrator Signature _____

Medical Director _____

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

LEAVE OF ABSENCE

POLICY/PROCEDURE 49:

A leave of absence will be granted to a student upon the approval of the Program Administrator and DNP Program Director after careful consideration of the student's needs.

Leave of absence may be requested by the student for medical, disability, military, maternity/paternal or personal reasons.

A leave of absence will result in deferral of the official graduation date, certification exam eligibility, and advanced licensure eligibility until the conclusion of the semester in which all graduation requirements are fulfilled. Students must follow the leave of absence procedure in accordance with the Rhode Island College Handbook for BSN-DNP Students (with specialization in Nurse Anesthesia). Leave of Absence may be granted due to the following reasons:

- Medical Leave of Absence
 - The student must request in writing a medical leave and submitted to the Program Administrator. This request must be accompanied by a physician's letter. If approved, the student will be given a medical Leave of Absence for a specific period of time.
- Personal Leave
 - A written request stating the reason for leave must be submitted to the Program Administrator. Personal leave is not renewable. If approved, the student will be given a Leave of Absence for a specific period of time.
- Maternal Leave of Absence
 - All students are advised of the possible teratogenic effects on the unborn fetus, which might occur following exposure to certain anesthetic agents, x-ray and chemicals utilized in the operating room.
 - Any student becoming pregnant during the program should notify the Program Administrator immediately. The student shall then decide whether to take a leave of absence, which would result in the deferral of her graduation date.
- Military Leave
 - Students who are members of the armed forces of the U.S. who are called to active duty or required to meet reserve training obligations will be granted leave for those purposes. A written request for leave, accompanied by a copy of the student's orders must be submitted to the Program Administrator.
 - Students should notify the Program Administrator of their military status after enrollment in the program.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

STUDENT RESIGNATION AND TRANSFER/WITHDRAWAL

POLICY/PROCEDURE 50:

SJHSNA complies with the Rhode Island College Graduate Studies Policies and Procedures Manual as it pertains to Student Resignation, Transfer, and/or Withdrawal policies.

Student Resignation

Students contemplating resignation from the program are encouraged to consult with the Program Administration prior to finalizing the decision and submitting a written resignation. At the time of resignation, the student must state their intentions in writing and turn in all hospital property. A student may resign at any time during an academic or clinical probationary period. However, the resignation must be made prior to the point where the program has made a final recommendation to dismiss the student. RIC Zvart Onanian SON and the Council on Accreditation (COA) of Nurse anesthesia Educational Programs will also be notified.

Student Transfer/ Withdrawal

Student transfer is not encouraged except in extenuating circumstances.

- **In:** The program does not accept transfer students from other institutions.
- **Out:** Students requesting a transfer from SJHSNA must fulfill the following requirements:
 - The student shall notify the Program Administrator in writing of the reason for transfer.
 - The student is responsible for forwarding all transcripts and recommendations for the ensuing Program.
 - Students must fulfill all financial obligations necessary, including but limited to student loans, books, etc.
 - Students must return any outstanding library books borrowed during the program.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DEFERRAL OF GRADUATION

POLICY/PROCEDURE 51:

At the discretion of the SJHSNA Program Administrator and the Dean of the RIC Zvart Onanian SON, graduation may be deferred, and the course of study may be extended in order for the student to complete graduation requirements. Any repeated enrollment in a course as well as additional tuition costs and charges will result from a deferral of graduation.

RIC Zvart Onanian/SJHSNA reserves the right to defer a student's graduation until all graduation requirements have been met. Including, but not limited to attendance and financial obligations.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DUE PROCESS and GRIEVENCE PROCEDURE

POLICY/PROCEDURE 52:

Students have the right to Due Process and/or to grieve/appeal academic grading/controversies/course complaints as well as program advancement and dismissal decisions. In the event of dismissal of a student from the Program, the student shall have the right to appeal to the Grievance Committee for review of his/her/their position. A student who has a particular problem/complaint; he/she/they should discuss the matter with the instructor involved and attempt to resolve the problem. If an acceptable solution to the problem is not reached at Level 1, the student may then proceed to seek resolution of the problem through the remaining levels of the grievance procedure.

- Level 1: Instructor
- Level 2: SJHSNA DNP NA Program Administrator
- Level 3: Grievance Committee

Purpose

The primary purpose of this procedure is to secure at the lowest level possible, an equitable solution to the problem presented by any student having a dispute within the educational DNP NA Program.

Definitions

A “complaint” may be any point at issue between an instructor and a student in which the student feels that an abridgment of personal rights or benefits has occurred. A complaint may, but need not constitute a grievance.

A “grievance” means a difference presented in writing that may arise between an instructor and a student with respect to, but not necessarily limited to:

- Violation of established academic policies (e.g. examination policies, grading practices)
- Disputed clinical evaluation
- Deferral of Graduation
- Dismissal from the program

A “Grievant” shall mean either (a) an individual student or (b) a group of students having the same grievances.

A “working day” means any day on which there is a clinical schedule booked. Weekends and Holidays shall not be used to compute the time limitations contained in this procedure unless mutually agreeable to the parties involved.

The “Grievance statement” shall consist of a summary of not more than one typewritten page in which the exact nature of the grievance is stated, the specific actions upon which it is based and the remedy being sought. (Supplementary materials may be presented to support the grievance).

Process Levels

Complaint procedure: If a student has a complaint, it should be discussed with the instructor involved, and such presentation and discussion shall be entirely informal. Settlement,

withdrawal, or disposition of a complaint at this informal stage shall not constitute a binding precedent on the settlement of similar complaints.

Grievance Procedure

Level 1: Instructor

- The student shall present his/her/their grievance statement, in person, to the instructor involved as soon as possible after the grievant feels that an abridgment of his/her/their rights has occurred, but in no case shall it be later than five (5) working days following the grievant knowledge of the act, event or commencement of the condition which is the basis for the grievance.
- The grievant shall discuss the grievance with the instructor involved, who shall attempt to resolve the grievance and shall render a written decision to the grievant with a copy to the DNP NA Program Administrator within five (5) working days of the instructor's receipt of the grievance. Should either of the above parties be on vacation and/or sick leave, an extended period of time may be allocated by the Program Administrator.

Level 2: Program Administrator

- If the grievance is not resolved at level 1 the grievant may submit the grievance in writing to the DNP NA Program Administrator within five (5) working days of the receipt of the response to Level 1.
- The Medical Director and/or the DNP NA Program Administrator shall meet with the grievant and the instructor (either jointly or separately) to discuss the grievance.
- The Medical Director and/or the DNP NA Program Administrator shall issue a decision setting forth the reasons in writing to the grievant and the instructor involved within fifteen (15) working days of receipt of the grievance. (Should any parties involved in the grievance and/or decision-making process be on vacation and/or sick leave, an extension of time will be required).

Level 3: Grievance Committee

- If the grievance is not resolved at level 2, the grievant may resubmit the grievance in writing to the chairperson of the Grievance Committee within ten (10) working days of the grievant receipt of the decision of the Program Administrator. Within fifteen (15) working days of the receipt of the grievance, the chairperson of the Grievance committee shall call a full meeting at which time the grievance shall be reviewed.
- A meeting of the grievance committee shall not convene unless a majority of its members are present. The setting of the meeting shall be within the confines of the program at a time and place agreeable to both parties. The grievant and the instructor(s) shall be present at this meeting for the purposes of clarification of the grievance.
- The grievant may be represented by council of his/her/their own choosing provided the Committee is notified prior to any meeting. Such council shall not be limited to licensed attorneys but shall be whomever the grievant deems appropriate as his/her/their representative.
- The grievant shall retain the right to challenge any member of the grievance committee who the grievant feels may be unable to render an impartial decision regarding the grievance.

- The grievant may request the dismissal/replacement of no more than two (2) members of the Grievance Committee prior to the commencement of a hearing. The Grievance committee shall issue a decision setting forth the reasons in writing to the grievant and the instructor(s) involved, with a copy to the Program Administrator within fifteen (15) working days following a formal hearing. The decision of the Grievance Committee shall be final.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

GRADUATION REQUIREMENTS

POLICY/PROCEDURE 53:

In order for a student to graduate from the Rhode Island College Zvart Onanian School of Nursing/St. Joseph Hospital School of Nursing DNP NA Program, the student must have successfully met all graduation criteria established by the School of Nursing AND:

- Successful completion of all didactic courses with a minimum grade of “B” and maintain a minimum grade point average of 3.00 on a 4.00 scale.
- Successfully achieved satisfactory clinical educational objectives and requirements as well as SJHSNA DNP NA Program Outcomes.
- Achieved a satisfactory grade on all Summative Clinical Evaluations prepared by the Program Administrator and/or Assistant Program Administrator.
- Have successfully completed all student, graduate, curriculum, clinical site, policy, and evaluation standards put forth by the COA of Nurse Anesthesia Educational Programs and by the National Board for Certification and Recertification of Nurse Anesthetists (NBCRNA) standards as well as met all requirement for eligibility to take the National Certification Examination for Nurse Anesthetists.
- Satisfied all Program Debts and financial responsibilities.
- Have maintained all current BLS, ACLS, PALS certifications and RN Licensures.
- Have returned all hospital properties (badges, keys, etc.) as deemed necessary.
- Have finished the exit interview and associated documentation completed.
- Have completion of the Typhon Student Tracking System records.

ST. JOSEPH HOSPITAL SCHOOL OF NURSE ANESTHESIA

DNP Nurse Anesthesia Program

DNP Nurse Anesthesia Student Contract

I verify that I have received the class of 2026 Rhode Island College Zvart Onanian School of Nursing / St. Joseph Hospital School of Nurse Anesthesia DNP Didactic and Clinical Nurse Anesthesia handbook. As a student enrolled in the DNP Nurse Anesthesia Program, I agree to abide by and respect the policies, procedures, regulations, guidelines, and standards outlined in this handbook. I understand that these policies, procedures, regulations, guidelines, and standards may be subject to change as deemed necessary by the Program or the affiliated College throughout the duration of my program of study, and that I will be made aware of these changes and held accountable to these changes. Changes to this handbook will be sent via email with a high-importance notification and by opening the email, I verify that I have been notified of the changes.

At the end of matriculation and prior to graduation, I agree to provide my employer information, geographic location, and personal email address to the DNP Nurse Anesthesia Program. I understand that my employer post-graduation will be sent an evaluation tool to evaluate my performance as a St. Joseph Hospital School of Nurse Anesthesia Certified Registered Nurse Anesthetist (CRNA) graduate. I also agree, as an alumnus of the Program, to evaluate the DNP Nurse Anesthesia Program in order to assist the program in future amendments. I understand that both employer and alumnus evaluations will remain confidential with the submission of the evaluation and will only be used for internal program evaluation and to help improve the overall program for future students.

Upon graduation, I agree to sit for the National Certification Examination (NCE) administered by the National Board of Certification and Recertification of Nurse Anesthetists (NBCRNA) within three (3) months of the completion of the program of study.

This handbook was reviewed with the Program Administrators, and I was allowed an ample amount of time to have the opportunity to discuss and ask questions.

Student Name (Print) _____

Student Signature _____ Date _____

APPENDIX

Council on Accreditation of Nurse Anesthesia Educational Programs

Standards for Accreditation of Nurse Anesthesia Programs

Practice Doctorate

<https://www.coacrna.org/wp-content/uploads/2023/02/Standards-for-Accreditation-of-Nurse-Anesthesia-Programs-Practice-Doctorate-revised-January-2023.pdf>