

UNIVERSITY FACULTY SENATE FORMS

Academic Program Approval

This form is a routing document for the approval of new and revised academic programs. Proposing department should complete this form. For more information, call the Faculty Senate Office at 831-2921.

Submitted by: Larry Purnell phone number 831-4585

Department: Nursing email address Lpurnell@udel.edu

Action: Request for Graduate Policy Change

(Example: add major/minor/concentration, delete major/minor/concentration, revise major/minor/concentration, academic unit name change, request for permanent status, policy change, etc.)

Effective term 08S

(use format 04F, 05W)

Current

degree MSN

(Example: BA, BACH, BACJ, HBA, EDD, MA, MBA, etc.)

Proposed change leads to the degree of: no
change

(Example: BA, BACH, BACJ, HBA, EDD, MA, MBA, etc.)

Proposed name: _____

Proposed new name for revised or new major / minor / concentration / academic unit
(if applicable)

Revising or Deleting:

Undergraduate major / Concentration: _____

(Example: Applied Music – Instrumental degree BMAS)

Undergraduate minor: _____

(Example: African Studies, Business Administration, English, Leadership, etc.)

Graduate Program Policy statement change: Graduate students do not need liability insurance unless they are already licensed advanced practice nurses or the agency where the clinical practicum is taken requires it.

(Must attach your Graduate Program Policy Statement)

Graduate Program of Study: Masters of Science Nursing

(Example: Animal Science: MS Animal Science: PHD Economics: MA Economics: PHD)

Graduate minor / concentration: Nurse practitioner and clinical nurse specialist concentrations

Note: all graduate studies proposals must include an electronic copy of the Graduate Program Policy Document, highlighting the changes made to the original policy document. Attached is a second document containing the School of Nursing graduate program policy.

List new courses required for the new or revised curriculum. How do they support the overall program objectives of the major/minor/concentrations)? Not applicable

(Be aware that approval of the curriculum is dependent upon these courses successfully passing through the Course Challenge list. If there are no new courses enter "None")

Explain, when appropriate, how this new/revised curriculum supports the 10 goals of undergraduate education: <http://www.ugs.udel.edu/gened/>

Not applicable

Identify other units affected by the proposed changes:

(Attach permission from the affected units. If no other unit is affected, enter "None")

No other departments are affected

Describe the rationale for the proposed program change(s):

(Explain your reasons for creating, revising, or deleting the curriculum or program.)

Gary Stokes, University Attorney has reiterated that graduate students are covered by the University for liability issues and so not need their own liability insurance.

Program Requirements:

(Show the new or revised curriculum as it should appear in the Course Catalog. If this is a revision, be sure to indicate the changes being made to the current curriculum and **include a side-by-side comparison** of the credit distribution before and after the proposed change.)

ROUTING AND AUTHORIZATION: (Please do not remove supporting documentation.)

Department Chairperson Kenneth Miller _____ Date _____

Dean of College Betty Paulanka _____ Date _____

Chairperson, College Curriculum Committee Paula Klemm _____ Date _____

Chairperson, Senate Com. on UG or GR Studies _____ Date _____

Chairperson, Senate Coordinating Com. _____ Date _____

Secretary, Faculty Senate _____ Date _____

Date of Senate Resolution _____ Date to be Effective _____

Registrar _____ Program Code _____ Date _____

Vice Provost for Academic Programs & Planning _____ Date _____

Provost _____ Date _____

Board of Trustee Notification _____ Date _____

Revised 5/02/06 /khs

REQUIREMENTS FOR CLINICAL/PRACTICUM COURSES

The School of Nursing has a policy change that needs approval. The following document from **page 19 in the Nursing Graduate Program Policy Manual** ><http://www.udel.edu/nursing/handbook/LIPPENCO.doc>> shows the required change.

REQUIREMENTS FOR CLINICAL/PRACTICUM COURSES

All Nurse Practitioner (NP) and Clinical Nurse Specialist (CNS) students are required to provide the following prior to beginning clinical courses: (Requirements for Health Services Administration students will be determined by the agency/state/country where practicum is scheduled.)

1. Photocopy of current Delaware nursing license, license from a compact state, or state in which clinical will be arranged.
2. Photocopy of current CPR certification
3. ***Photocopy of professional liability insurance policy facesheet. This statement will be changed as follows: NP and CNS students do not need to carry professional liability insurance unless it is required by the agency in which clinical takes place. Post Masters CNS and NP students must provide a photocopy of their professional liability insurance policy facesheet. (See page 19 of attached policy document)***
4. Proof of immunization status for:
 - Hepatitis B
 - Measles (Rubeola) - if born after 1957
 - German measles (Rubella) - if born after 1957
 - Tetanus (good for ten years)
5. Evidence of current TB status (PPD) or chest X-Ray
6. Evidence of varicella status (by titer or documentation of having had chicken pox)
7. Proof of Bloodborne Pathogens Safety Training
8. Other requirements (e.g., drug testing, criminal background check) as mandated by the clinical facility.
9. These requirements are subject to change at any time.