# Appendix R: BSN Course Syllabi

**Collin College RN-to-BSN Program**
**RNSG 3210**

**COURSE INFORMATION**

**Course Number:** RNSG 3210
**Course Title:** Transition to the BSN Role
**Course Description:** Educational and role development opportunities for nurses will be examined. This course focuses on the baccalaureate-prepared nursing role with emphasis on the following Topics: Nursing Theory, Professional Foundations of practice, Critical Abilities of the Baccalaureate Nurse, Quality and safety for Individuals, Families, Aggregates and Society, and selected Professional Nursing Concepts. The roles of the baccalaureate-prepared nurses and standards that define professionalism are explored.

**Course Credit Hours:**

Lecture Hours: 2
Lab Hours: 0
Clinical/Recitation Hours: 0

**Prerequisite:** Admission to the RN-to-BSN program

**Student Learning Outcomes:**

1. Identify the responsibility of the baccalaureate prepared nurse to utilize clinical judgment for patients, families, and populations based upon evidence-based practice and Health Policy.
2. Demonstrate the role of the baccalaureate prepared nurse using communication, in both professional presentations and written forms.
3. Analyze Health Information technology and information systems to support safety in nursing practice and population risk reduction.
4. Apply the concept of health promotion, as professionalism in nurse role modeling.
5. Differentiate professionalism in nursing approaches to patient education.
6. Critique ethics and legal precepts, and health policy in professional nursing practice as a basis for providing patient-centered care.
7. Propose how the baccalaureate prepared nurse uses teamwork and collaboration to achieve safety, provide effective nursing care, and reduce population risk.
8. Use nursing theories as a foundation for professional practice.

**Secretary's Commission on the Acquisition of Necessary Skills (SCANS) -** SCANS skills are a group of foundational skills and workplace competencies that the Secretary's Commission on the Acquisition of Necessary Skills established as vitally important for workplace success in the 21st century. In Collin's workforce programs, the SCANS skills are developed and reinforced

throughout the curriculum to provide students with an opportunity to hone these skills/competencies in the context of their education. Over the course of an entire degree program, the successful student is expected to demonstrate all of the SCANS skills and competencies as part of their education. The SCANS Foundation Skills and Workplace Competencies are described at:
http://www.collin.edu/academics/programs/Workforce_SCANS_Skills_Syllabi_Code_Key.pdf
**Withdrawal Policy:** See the current *Collin Registration Guide* for the last day to withdraw.

**WITHDRAWAL PROCEDURE:**
See *Nursing Division Student Handbook* Procedure 10.17, Adding or Dropping Courses, regarding withdrawing procedures, and the current *Collin College Registration Guide* for last day to withdraw.

**Collin College Academic Policies:** See the current *Collin Student Handbook*.

**Americans with Disabilities Act Statement:**
Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin College Student Handbook* for additional information.

Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of *Student Code of Conduct (Code)* violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**Academic Ethics**
The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty. Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty shall involve, but is not limited to, one (1) or more of the following acts: plagiarism, cheating, collusion, use of annotated texts or teacher's editions, use of information about exams posted on the Internet or in any electronic medium, and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for activities as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course Activity; removing tests or answer sheets from a test site, and allowing a classmate to copy answers.

Refer to *Nursing Division Student Handbook* Procedure 10.41, Scholastic Dishonesty, and *Collin College Student Handbook.*

**INSTRUCTOR INFORMATION**
**Instructor's Name: TBD**
**Office Number:**
**Office Hours:** Hours posted on office door
**Phone Number:**
**Email:**

**Class Information:**
**Section Number: TBD**
**Meeting Times: In-class as scheduled**

**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Course Format:**
Lecture, group activities, role playing, audiovisual materials, independent study: computer lab modules and/or study guides, assigned references, teacher student conferences, visits to community resource facilities, journaling, and other assignments as indicted.

Students may review their exams by making an appointment with their advisor if needed. However, current exams can only be reviewed up to the next scheduled exam.

**Course Requirements:**

1. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Policies 10.10 and 10.11).
2. Complete all course assignments.
3. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 3210 course, the student can continue in all other enrolled nursing courses.
4. You may repeat this course only once after receiving a failing grade.
5. This course will follow all requirements found in the *Collin College Nursing Division Student Handbook.*

**Course Evaluations:** All students completing courses for the Collin College Nursing programs are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon entrance into the Health Care Concepts course final exam for the semester the student is in.

**Minimum Technology Requirement:**
**Computer System Requirements:** The basic computer specifications for Canvas use are available at: https://community.canvaslms.com/docs/DOC-2059
The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284
High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas App or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions.
HESI system requirements for both Mac and Windows users are available at: https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at:
https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx
You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:**
**Netiquette Expectations:** In all communications whether electronic discussion or mail, all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources: See required supplies and textbooks**

**Textbooks & Equipment:**
***Required Textbooks & Equipment:***

American Psychological Association. (2010). *Publication manual of the American Psychological Association.* (6th ed.). Washington, DC: Author.

Kearney-Nunnery, R. (2016*). Advancing your career: Concepts in professional nursing.* (6th ed.). Philadelphia, PA: F.A. Davis Company.

**Attendance Procedure:** See *Nursing Division Student Handbook* Procedure 10.10 and 10.11, Class Attendance and Clinical Laboratory Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook*.

**Additional Instructor Student Learning Outcomes: May vary by instructor**
**Method of Evaluation**:

Lecture
Collegial discussion
Module assignments
Presentations

**Course Calendar**: See calendar posted in Canvas

**Discussion Board Guidelines:**
All students are expected to actively participate in online class discussions. The aim is to encourage thoughtful interaction among students and faculty, not simply to present information. Student responses to discussion questions must be substantive and demonstrate an awareness of comments previously posted and discussed. Repetition, or mere statements of concurrence (e.g. I

agree with what was said.) are not a substantive comment. If you agree or disagree with another student's comment, explain why. The student is held to academic standards of writing style and the use of proper grammar, punctuation and spelling, as well as the expectation of documenting sources in APA format when citing the work or opinions of others.

Students are expected to participate in the online discussions in the following manner:

1. The academic work week begins at 0600 Central Time (CT) and ends the following Monday at 0559.
2. Enter Discussions and post a minimum of 2 days during the current week, with the initial post to the discussion question(s) by Wednesday (23:59 CT) of the week. Entering early in the week due and often will enhance the learning of all participants.
3. Initial responses may be posted up to 24 hours (Sunday, 0600 CT) prior to the beginning of the week but is not open to replies until Monday, 0600 CT. Replies that occur prior to the beginning of the week (Monday, 0600 CT) will not be accepted as a requirement for rubric and may be deleted.
4. Complete the assigned reading before participating in discussions. Your participation points are derived from the depth of your responses. The discussion should be thoughtful, informative, and respectful.
5. Initial post(s) must be a minimum of 250 words and peer replies must be a minimum of 150 words. Creating the post in a Word document will allow you to see the word count in the bottom left corner.
6. 75% of your posts must be original work. Synthesizing the literature and paraphrasing is acceptable but more than 25% use of quotes is unacceptable.
7. In-text citations are required in all posts.
8. After reading other students' posts, post an in-depth comment/reply, or ask/answer questions about the topic under study. Add any new and current information you may have found in your reading and reference accordingly.
9. Return to the Discussion Forum site later in the week and review questions/further discussion on the topic. Be sure to read and answer any comments/questions that students have about your previous posts.
10. Points for participation in the discussions will be assigned according to the depth and number of postings following the grading rubric.

**COURSE OUTLINE**

| WEEK | TOPIC, CONTENT, CONCEPTS AND ASSIGNMENTS |
|---|---|
| 1 | **Clinical Judgment:**<br>Develop an interpretation or conclusion about a patient's needs, concerns, or health problems, and/or the decision to take or not take action, use of modified standard approaches, or improvise new ones as deemed appropriate by the patient's response.<br><br>**Assignments (20% of course grade):**<br>Case Study evaluating DECs and AACN Essentials<br>Understand how the BSN competencies enhance clinical practice, clinical judgment and patient safety. |

| | |
|---|---|
| | Develop personal philosophy of nursing<br>Explore the theoretical frameworks in nursing and how they support critical thinking and clinical judgment. |
| 2 | **Communication:**<br>A process of interaction between people where symbols are used to create, exchange, and interpret messages about ideas, emotions and mind- states.<br><br>**Assignment (10% of course grade):**<br>Evaluate a presented document for APA errors. Document the errors, then create a corrected APA formatted document. |
| 3 AND 4 | **Health Information Technology and Information Systems for Safe Nursing Practice:**<br>Application of information processing involving both computer hardware and software that deals with storage, retrieval, sharing, and use of health care information, data, and knowledge for communication and decision making.<br><br>**Assignment (10% of course grade):**<br>Explore patient care technology in the healthcare setting that support patient safety. Critique the chosen technology for limitations, beneficial qualities and how the technology supports patient safety and improved outcomes. |
| 5 AND 6 | **Health Promotion:**<br>Exploring any activity undertaken for the purpose of achieving a higher level of health and wellbeing.<br><br>**Assignment (10% of course grade):**<br>Collaborate in an online discussion with one initial and two follow-up posts regarding access to preventative health care and safety issues that relate to preventative care. Discussion should focus on how addressing access and safety facilitates individuals trying to undertake health promotion activities. |
| 7 | **Patient Education:**<br>Encompasses activities designed to produce learning that alters health behaviors or improves health status.<br><br>**Assignment (10% of course grade):**<br>Develop a matrix to demonstrate teaching strategies to a chosen population of patient. Consider how specific patient education strategies can facilitate learning for certain groups. |

| | |
|---|---|
| 8 AND 9 | **Legal, Ethical, and Regulatory Standards for Patient Advocacy:**<br>Assimilate the legal, ethical, and regulatory principles and implications of competent practice.<br><br>**Assignment (10% of course grade):**<br>Investigate a case where legal, ethical and/or regulatory principle of competent practice was breeched. Present case to class, highlighting the root cause of where the standards of practice were not upheld and potential areas of opportunity to close the gap in practice. |
| 10 | **Interdisciplinary Collaboration:**<br>Develop partnerships to achieve best possible outcomes that reflect the particular needs of the patient, family, or community, requiring an understanding of what others have to offer.<br><br>**Assignment (5% of course grade):**<br>Present the role of a selected healthcare professional, and the opportunities to collaborate with nursing to solve patient care challenges. |
| 11AND12 | **Professionalism (15% of course grade)**:<br>Assimilate nursing skills and knowledge integrated with dignity and respect for all human beings, incorporating the assumptions and values of the profession while maintaining accountability and self- awareness.<br><br>**Assignment:**<br>Develop a written 5-year plan for the professional development required in the future role of Baccalaureate prepared nurse. Discuss how the skills and knowledge enhance the profession of nursing. |
| 13 | **Nursing Theory:**<br>Use varied theorists as they apply the conceptual frameworks to professional practice and decision making. |
| 14 | **Final Project (10% of course grade)** |

**Grading Rubric: Case Study**

| Criterion | Unacceptable (0) | Benchmark (5 points) | Exemplary (10 points) |
|---|---|---|---|
| Analysis of the DECs | Unable to connect the DECs to the case. Little or inaccurate understanding of the DECs. (0 points) | Selects and identifies the DECs to the case. (2.5 points possible) | Response shows application and analysis of the DECs to the case, how the care differs between ADN and BSN nurses. (5 points possible) |
| Application of the AACN BSN Essentials | Unable to connect the AACN Essentials to the case. Little or inaccurate understanding of the Essentials. (0 points) | Selects and identifies AACN Essentials to the case. (2.5 points possible) | Response shows application of the AACN Essentials to the case. (5 points possible) |

**Grading Rubric: Nursing Philosophy**

| Criterion | Unacceptable (0 points) | Benchmark (5 points) | Exemplary (10 points) |
|---|---|---|---|
| Perspective on person | Does not address or response shows little or no understanding, or severe lack of interest. (0 points) | Recognizes and identifies perspective on person. (0.5 point possible) | Response shows application and insight. (1.5 points possible) |
| Perspective on environment | Does not address or response shows little or no understanding, or severe lack of interest. (0 points) | Recognizes and identifies perspective on environment. (0.5 point possible) | Response shows application and insight. (1.5 points possible) |
| Perspective on health | Does not address or response shows little or no understanding, or severe lack of interest. (0 points) | Recognizes and identifies perspective on health. (0.5 point possible) | Response shows application and insight. (1.5 points possible) |
| Perspective on nursing | Does not address or response shows little or no understanding, or severe lack of interest. (0 points) | Recognizes and identifies perspective on nursing. (0.5 point possible) | Response shows application and insight. (1.5 points possible) |
| Relation to clinical judgment | Does not relate domains of nursing philosophy to clinical judgment, or no evidence of insight, severe lack of interest. (0 points) | Identifies clinical practice issues but little insight into own clinical judgment. (1 point possible) | Response shows relationship of nursing philosophy to clinical judgment; insight into patient care and own clinical practice. (2 points possible) |
| Citations and References | No citations or references from required module readings. (0 points) | Sources of facts and ideas cited and referenced from required module readings. (2 points possible) | |

**Grading Rubric: Case Study**

| | Weight | Student Score |
|---|---|---|
| **1. Title Page** | | |
| • Identified errors | | |
| • Corrected identified errors | | |
| • Cited 6th Edition APA Manual supporting correct formatting | | |
| **2. Headings, Paragraph indentation and Typeface** | | |
| • Identified errors | | |
| • Corrected identified errors | | |
| • Cited 6th Edition APA Manual supporting correct formatting | | |
| **3. Grammar Structure** | | |
| • Identified errors | | |
| • Corrected errors | | |
| • Cited 6th Edition APA Manual supporting correct formatting | | |
| **4. Citations** | | |
| • Identified errors | | |
| • Corrected identified errors | | |
| • Cited 6th Edition APA Manual supporting correct formatting | | |
| **5. Reference Page** | | |
| • Identified errors | | |
| • Corrected errors | | |
| • Cited 6th Edition APA Manual supporting correct formatting | | |
| **Score out of___** | | |

**Grading Rubric: Technology Critique Worksheet**

| Question | Student Response | Points Possible |
|---|---|---|
| What is the name of the selected patient care technology? | | |
| Describe the selected technology, including its purpose and use. | | |
| What are the training requirements to use the technology? Include an assessment of nursing use of technology and comment on whether or not nurses are autonomous or interdependent with the technology. | | |
| What research supports the safety of the technology? | | |
| Are there any indications that nurses were involved in the design and testing of the technology? If so, what? If not, what would have been appropriate input or involvement of nurses? | | |
| What are the limitations of the selected technology? How can the limits affect safety? | | |
| Thoroughly describe how the technology supports achievement of SAFETY with patient outcomes. Justify your response with citations. Give examples. | | |

Grading Rubric: Health Promotion Discussion Board

| 15 Points | 10 Points | 5 Points | 0 Points | Points Earned |
|---|---|---|---|---|
| Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains at least 2 references<br>*Initial post must be a minimum of 250 words | Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains less than 2 references<br>*Initial post is a minimum of 250 words | Fully answers the question by the end of the week assigned or no references included<br>*Initial post is less than minimum of 250 words | Does not fully answer the question during the current week | /15 |
| Demonstrates synthesis of knowledge and includes practice (real-world) examples to support posting | Demonstrates synthesis of knowledge in initial posts but does not relate knowledge to practice (real-world) examples to support posting | Posts indicate minimal knowledge of subject matter | Posts are not relevant or no subject matter knowledge is evident | /15 |
| **15 Points** | **10 Points** | **5 Points** | **0 Points** | **Points Earned** |
| Provides a minimum of two substantive replies per question with reference(s) by the end of the week (Monday 0559 CT). A minimum of one (1) reference is required per peer reply<br>*Each peer reply must be a minimum of 150 words | Provides less than the two (2) replies per question by the end of the week (Monday 0559 CT). A minimum of one (1) reference is required for each peer reply<br>*Each peer reply must be a minimum of 150 words | Provides replies to each question with simple comments and/or reference(s) not provided<br>*Each peer reply is less than minimum of 150 words | Does not reply to each question by the end of the week | /10 |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |
| Participates in discussion a minimum of 2 separate days of the current week, excluding the Sunday before the week begins | Participates in discussion 2 separate days of the week, including the Sunday before the week begins | Participates in discussion less than 2 days of the week | Does not reply to each question by the end of the week | /2 |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |

| | | | | |
|---|---|---|---|---|
| Organization is logical, ideas are clearly presented, and transitions are smooth between topics | Organization adequate, ideas usually clear and transitions mostly smooth | Organization is minimally effective; problems with clarity and/or transitions | Organization does not meet requirements | /2 |
| Spelling, grammar, punctuation, mechanics and word usage are correct and consistent with Standard American English | Spelling, grammar, punctuation, mechanics, and word usage are adequate and consistent with Standard American English; errors do not interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics, and word usage are distracting and could interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics and/or word usage interfere with understanding and do not reflect scholarly writing | /2 |
| All references are relevant, scholarly and contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet two requirements of relevant, scholarly or contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet one requirement of relevant, scholarly or contemporary | No use of references | /2 |
| Correct APA format of in-text citations and references | Less than 2 APA errors | 3-4 APA errors | No use of APA format or 5+ errors | /2 |
| | | | **Total Points** | /50 |

Student Name_____

COMMENTS

Faculty Name_____

Date_____

**Grading Rubric: Patient Education Strategy**

| **Teaching Matrix: Group Instruction** | | |
|---|---|---|
| **Cognitive Learning – Knowledge (__ points)** | | |
| Level | Illustrative Nurse Behavior | Illustrative Client Behavior |
| Remember | | |
| Understand | | |
| Apply | | |
| Analyze | | |
| Evaluate | | |
| Create | | |
| **Affective Learning – Attitude (__ points)** | | |
| Level | Illustrative Nurse Behavior | Illustrative Client Behavior |
| Receiving Phenomena | | |
| Responding to Phenomena | | |
| Valuing | | |
| Organization | | |
| Internalizing Value | | |
| **Psychomotor Learning – Skill (__ points)** | | |
| Level | Illustrative Nurse Behavior | Illustrative Client Behavior |
| Perception | | |
| Readiness | | |
| Guided Response | | |
| Basic Proficiency | | |
| Expert Response | | |
| Adaptation | | |
| Origination | | |

**Collaborative Practice Group Presentation Grading Criteria**

**Purpose:** Students will demonstrate professional communication, use of presentation technology, effective group process, and presentation skills.

| **Professional Presentation** | **Points** | **Score** |
|---|---|---|
| • Introduce presentation topic(s) and objectives | | |
| • Cover required Group Presentation Objectives<br>○ Focused presentation on required objectives<br>○ Provided accurate information<br>○ Presented easy to understand material | | |
| • Utilize effective professional presentation skills<br>○ Maximum of 5-6 bullets per PowerPoint slide<br>○ Used professional PowerPoint template<br>○ Used one PowerPoint template for presentation<br>○ PowerPoint template color scheme easy to read<br>○ Font size readable at back of classroom | | |
| • Demonstrate effective communication skills<br>○ Used PowerPoint bullet points to guide presentation: Did not read slides<br>○ Spoke loudly enough to hear at back of classroom<br>○ Spoke to audience and made eye contact<br>○ Presentation flowed despite multiple speakers<br>○ Used professional language with no slang or colloquialisms | | |
| • Complete presentation within allotted time (15 minutes) | | |
| **Group Participation** | | |
| • Each group member presents | | |
| • Submit evaluation form for each group member <u>at beginning</u> of presentation* | | |
| • Submit evidence of group dynamics <u>at beginning</u> of presentation including summary of individual contributions and group communications | | |
| TOTAL | | |

***Faculty reserve the right to grade group members individually based on group participation feedback.**

**Evaluation of Participation in Group Presentation**

**Group Member Evaluated**_____ **Evaluator** _____

Thirty percent (30%) of your group presentation grade depends on your meeting the criteria of group participation. Peer input is needed to help evaluate the group efforts in order for the instructor to fairly evaluate the student's achievement of these criteria.

Directions

1. Read each item carefully and answer as objectively as you can.
2. Rate each group member (excluding yourself). Make any supporting comments you believe to be pertinent in the space provided.
3. Complete this form and return it to faculty at the beginning of the class on the day of your group's presentation.

| Group member | Never Almost Always | Comments |
|---|---|---|
| Met target dates for completing assignments | Never Almost Always | |
| Attended all group meetings | Never Almost Always | |
| Shared relevant professional literature articles with group prior to presentation | Never Almost Always | |
| Adequately analyzed the topic | Never Almost Always | |
| Contributed to but did not dominate group discussion | Never Almost Always | |
| Respected the rights of classmates/encouraged member participation | Never Almost Always | |
| Met the assigned tasks | Never Almost Always | |
| Demonstrated skill to encourage group interaction | Never Almost Always | |
| Fostered a sense of belonging within the group | Never Almost Always | |

Additional Comments:

**Grading Rubric: Professional Role Development Plan**

| Content Grading Criteria | Points | Score |
|---|---|---|
| • Introduce the focus of paper | | |
| • Briefly describe the roles of the baccalaureate-prepared nurse in professional nursing practice. | | |
| • Develop a professional development plan for incorporating the Texas Board of Nursing Differentiated Essential Competencies and the AACN Essentials of Baccalaureate Education into your BSN nursing practice in the year following graduation. | | |
| • Provide evidence from the nursing literature to support your professional development plan | | |
| • Conclude by summarizing key points of paper | | |
| **Professional Writing Grading Criteria** | | |
| ○ Style and Format<br>○ Follow APA 6th ed. style and format<br>○ Paper must be a minimum of 4 pages and maximum of 6 pages, not including title page and reference page | | |
| ○ Scholarship<br>○ References are relevant for topic<br>○ References include:<br>▪ A minimum of 5 scholarly sources from professional nursing journals published within the last 5 years with working URL or DOI<br>▪ Course text book<br>▪ AACN Baccalaureate Essentials<br>▪ Texas Board of Nursing DECs | | |
| **TOTAL** | | |

**Collin College RN-to-BSN Program**
**RNSG 3220**

**COURSE INFORMATION**

**Course Number:** RNSG 3220

**Course Title:** Health Promotion Across the Lifespan

**Course Description:**
The role of the nurse in promoting health and reducing risk behaviors of individuals and families across the lifespan is the focus of this course. Exemplars of nutrition, physical activity and stress management will be examined with an emphasis on the impact of genetics, values, lifestyle, and cultural influences. Client teaching as an essential function of the nurse is emphasized. In the clinical practicum, the student will facilitate his/ her understanding of factors that enhance health promotion and risk reduction through the development of a long-term relationship with a client and family.

**Course Credit Hours:** 2
Lecture Hours: 2

**Prerequisite:** Admission in RN-to-BSN program

**Student Learning Outcomes:**
Upon completion of this course the student will:

1. Explore determinants of health, including nutrition, physical activity & stress management, in individuals, families & communities across the lifespan.
2. Evaluate health beliefs, values, attitudes and practices of individuals, families and communities.
3. Examine the role of genetics and environmental influences on the health of individuals and families.
4. Compare how a nurse's understanding of health may differ from the understanding of individuals, families, and communities.
5. Explore how cultural beliefs influence the understanding of health.
6. Examine the impact of health literacy and health numeracy on health promotion and risk reduction.
7. Analyze models of health promotion and behavior change techniques within each model.
8. Utilize health promotion models when collaborating with clients, families and other team members in application of health promotion and risk reduction interventions for client- centered care.
9. Demonstrate the ability to design, implement, and evaluate a health promotion teaching plan for an individual or group.
10. Demonstrate the use of appropriate communication techniques in interactions with clients, families, professional team members, faculty and peers.

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**Collin College Academic Policies:** See the current *Collin Student Handbook.*

**Americans with Disabilities Act Statement:**
Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin College Student Handbook* for additional information.

**Strategies of Behavioral Intervention (SOBI):**
Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of *Student Code of Conduct (Code)* violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**ACADEMIC ETHICS:**

The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty.
Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty may involve, but is not limited to, one (1) or more of the following acts: cheating, plagiarism, collusion, use of annotated texts or teacher's editions and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for assignments as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course assignment; removing tests or answer sheets from a test site, and allowing a classmate to copy answers.

Refer to *Nursing Division Student Handbook* Policy 10.41 and *Collin College Student Handbook*

**INSTRUCTOR INFORMATION**

See Canvas for Nursing Faculty Contact Expert Information
**Instructor's Name: TBD**
**Office Number:**
**Office Hours:** Hours posted on office door
**Phone Number:**
**Email:**
**Class Information:**

**Section Number: TBD**
**Meeting Times: In-class as scheduled**
**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Course Format:**
Lecture, group activities, role playing, audiovisual materials, independent study: computer lab modules and/or study guides, assigned references, teacher student conferences, visits to community resource facilities, journaling, and other assignments as indicted.

Students may review their exams by making an appointment with their advisor if needed. However, current exams can only be reviewed up to the next scheduled exam.

**Course Requirements:**

6. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Policies 10.10 and 10.11).
7. Complete all course assignments.
8. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 3220 course, the student can continue in all other enrolled nursing courses.
9. You may repeat this course only once after receiving a failing grade.
10. This course will follow all requirements found in the *Collin College Nursing Division Student Handbook.*

**Course Evaluations**: All students completing courses for the Collin College RN to BSN program are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon the last day of class the student is in.

**Minimum Technology Requirement:**
Computer System Requirements: The basic computer specifications for Canvas use are available at: https://community.canvaslms.com/docs/DOC-2059
The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284
High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas Ap. or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions. HESI system requirements for both Mac and Windows users are available at: https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at:
https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx
You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:**
**Netiquette Expectations:** In all communications whether electronic discussion or mail, all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources: See required supplies and textbooks**
**Textbooks & Equipment:**
***Required Textbooks & Equipment***

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.
Grodner, M., Escott-Stump, S., & Dorner, S. (2016). Nutritional foundations and clinical applications (6th ed.). St. Louis: Elsevier.
Potter, P. A., Perry, A. G., Stockert, P. A., & Hall, A. M. (2017). *Fundamentals of nursing* (9th ed.). St. Louis, MO: Elsevier.
Theory at a Glance: A Guide for Health Promotion, 2nd Edition, 2005. Available at: http://sbccimplementationkits.org/demandrmnch/ikitresources/theory-at-a-glance-a-guide-for-health-promotionpractice-second-edition/
Semester syllabus *(Available on-line)*
Baccalaureate Degree Nursing Program Student Handbook *(Available on-line)*

**Attendance Policy: See below**
**Attendance Procedure:** See *Baccalaureate Degree Nursing Student Handbook* Procedure 10.10 and 10.11, Class Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook.*

**Additional Instructor Student Learning Outcomes:** May vary by instructor

**Method of Evaluation**: The course grade will be determined as follows:
The maximum score in this class is 400 points and weighed as follows.

| Assignment | Points | Weighed |
|---|---|---|
| Discussion Board 1 (Due Week 2) | 50 | 50% |
| Discussion Board 2 (Due Week 3) | 50 | |
| Discussion Board 3 (Due Week 4) | 50 | |

| | | |
|---|---|---|
| Discussion Board 4 (Due Week 5) | 50 | |
| Discussion Board 5 (Due Week 7) | 50 | |
| PRECEDE/PROCEED Project (Due Week 6) | 150 | 50% |
| Total Points | 400 | 100% |

360-400 points = A 320-359 points = B 280-319 points = C 279 and below points = F

Your grades will be available in the My Grades Tab of Canvas.

**Criteria Used to Evaluate Participation in Online Activities**: See Rubric Delivery Method of Feedback and/or Graded Material: See Method of Evaluation

**Standards for Instructor Response and Availability**: Each instructor will have his/her own expected response time, but the instructor will endeavor to respond within 48 hours during the work week.

**Course Calendar**: See Canvas

**Discussion Board Guidelines:**
All students are expected to actively participate in online class discussions. The aim is to encourage thoughtful interaction among students and faculty, not simply to present information. Student responses to discussion questions must be substantive and demonstrate an awareness of comments previously posted and discussed. Repetition, or mere statements of concurrence (e.g. I agree with what was said.) are not a substantive comment. If you agree or disagree with another student's comment, explain why. The student is held to academic standards of writing style and the use of proper grammar, punctuation and spelling, as well as the expectation of documenting sources in APA format when citing the work or opinions of others.

Students are expected to participate in the online discussions in the following manner:

1. The academic work week begins at 0600 Central Time (CT) and ends the following Monday at 0559.
2. Enter Discussions and post a minimum of 2 days during the current week, with the initial post to the discussion question(s) by Wednesday (23:59 CT) of the week. Entering early in the week due and often will enhance the learning of all participants.
3. Initial responses may be posted up to 24 hours (Sunday, 0600 CT) prior to the beginning of the week but is not open to replies until Monday, 0600 CT. Replies that occur prior to the beginning of the week (Monday, 0600 CT) will not be accepted as a requirement for rubric and may be deleted.
4. Complete the assigned reading before participating in discussions. Your participation points are derived from the depth of your responses. The discussion should be thoughtful, informative, and respectful.
5. Initial post(s) must be a minimum of 250 words and peer replies must be a minimum of 150 words. Creating the post in a Word document will allow you to see the word count in the bottom left corner.
6. 75% of your posts must be original work. Synthesizing the literature and paraphrasing is acceptable but more than 25% use of quotes is unacceptable.
7. In-text citations are required in all posts.

8. After reading other students' posts, post an in-depth comment/reply, or ask/answer questions about the topic under study. Add any new and current information you may have found in your reading and reference accordingly.
9. Return to the Discussion Forum site later in the week and review questions/further discussion on the topic. Be sure to read and answer any comments/questions that students have about your previous posts.
10. Points for participation in the discussions will be assigned according to the depth and number of postings following the grading rubric.

**PRECEDE-PROCEED Health Promotion Project** (due Week 6)
A major project for the course will be the design and evaluation of a community-based health promotion strategy utilizing the PRECEDE-PROCEED planning model. The project will make use of health promotion principles and information presented during the course. Progress on the project should be continued throughout the course and submitted on week 6 of the semester. Students will select a topic for the project based on a community health promotion need. Some examples to consider include: childhood obesity; weight loss; diabetes education; school nutrition; youth fitness; health priorities.

Review a community health promotion strategy project at
Howat, P., Jones, S., Hall, M., Cross, D., & Stevenson, M. (1997). The PRECEDE-PROCEED Model: Application to Planning a Child Pedestrian Injury Prevention Program, *Injury Prevention 3*(4), 282-287.

**COURSE OUTLINE**
**Week 1: Determinates of Health**
**Health Promotion Models: Health Beliefs and Transtheoretical Model**
**Promotion Models: Theories of Reasoned Action and Planned Behavior**
Concept: Health Promotion
Exemplars
- Health Promotion
- Health Behavior Practice
- Explanatory Theory
- Change Theory

**Prior to Class Assignment**
1. Review Explanatory Theories: The Health Belief Model; the Theory of Planned Behavior, the Precaution Adoption Process Model
2. Review Change Theories: Community Organization and Diffusion of Innovations

**Readings/Viewings**
Theory at a Glance Part 1 & 2;
Grodner, Roth, & Walkingshaw Chapter 1 Wellness Nutrition

**Learning Activities**
Working in groups of 2 students, develop an education care plan for the following scenario. Present findings to the class.

The patient needs to reduce his dietary fat intake because he is at risk of coronary artery disease. He lives in a suburban community and takes a train into New York City, where he works. Although it is only a half mile to the train station, he usually drives his car there to save time. Breakfast is often coffee, with a mid-morning break that consists of a Danish and more coffee. Lunch is obtained from street vendors who sell hot dogs and sausage sandwiches. Dinner is usually eaten with his family but often features meat and potatoes. Because he leaves early in the morning and returns tired in the evening, he says he doesn't know how to change his behavior.
What strategies of knowledge, techniques, and community support can you provide this patient toward a nutrition plan?

**Week 2: Health Education and Teaching**
Concept: Health Promotion
Exemplars
- Role in Wellness
- Personal Nutrition
- Community Nutrition
- Health Claims

**Prior to Class Assignment**
1. Review nutrition health at U.S. Department of Health and Human Services, Public Health Service: Executive summary Phase 1 report: Recommendations for the framework and format of Healthy People 2020 www.healthypeople.gov/HP2020.

**Readings/Viewings**
Grodner, Roth, & Walkingshaw Chapter 2 Personal and Community Nutrition;
Potter, Perry, Stockart, & Hall Chapter 6 Health and Wellness

**Discussion Board 1:** Discuss how health beliefs, practices, and illness behaviors are influenced by internal and external variables.
**Refer to the Discussion Board Guidelines found previously in the syllabus**

**Learning Activities**
1. In groups of 2-3 students, develop an appropriate teaching tool for elementary children, high-school students, and elder adults related to daily nutrition requirements. Present findings to the class.
2. In groups of 2-3 students, demonstrate an assessment and teaching plan for a patient who repeatedly visits her primary health care provider with complaints of a 'stomach virus'. What assessment questions and nutritional teaching plan would be developed based on the possibility that the recurring symptoms are due to foodborne illness?

**Week 3: Cultural Beliefs and Values**
**Vulnerable Populations**
**Family Dynamics and Social Support for Health**
Concept: Health Promotion
- Core Measures

- Cultural assessment
- Culturally congruent care
- Health care disparities
- Transcultural nursing

**Prior to Class Assignment**

1. Review The Joint Commission (TJC) and Centers for Medicare and Medicaid Services CMS) regulations on cultural perspectives for providing safe and quality care at www.jointcommission.org and www.cms.gov , respectively
2. Review health disparities for vulnerable and at-risk populations at http://www.cdc.gov/omhd
3. Review cultural competency in health care at www.thinkculturehealth.hhs.gov/

**Readings/Viewings**

Grodner, Roth, & Walkingshaw *Cultural Considerations* in Chapter 2 and Chapter 22 Nutrition in Cancer, AIDS, and Other Special Problems;
Potter, Perry, Stockart, & Hall Chapter 9 Cultural Awareness; Chapter 12 Conception Through Adolescence; Chapter 13 Young and Middle Adults; and Chapter 14 Older Adults

**Discussion Board 2:** Discuss how addressing cultural differences reduce medical errors and improve adherence, patient-provider-family communication, and outcomes of care.
**Refer to the Discussion Board Guidelines found previously in the syllabus**

**Learning Activities**

1. Discuss the following questions/answers in class, including rationales for the answers:
    a. Which are considered social determinants of health? Select all that apply
        i. Lack of primary health care providers in a zip code
        ii. Poor-quality public-school education that prevents a person from developing adequate reading skills
        iii. Lack of affordable health insurance
        iv. Employment opportunities that do not provide paid vacation or sick leave
        v. The number of times a person exercises during a week
        vi. Neighborhood safety that prevents a person from walking around the block or socializing with neighbors outside of his or her home
    b. Which of the following changes can help create a more inclusive environment for lesbian, gay, bisexual, and transgender (LGBT) patients? Select all that apply
        i. Explicitly including sexual orientation and gender identity into nondiscrimination policies
        ii. Displaying art that reflects LGBT community
        iii. Modifying health care forms to provide opportunities for gender identity and sexual orientation disclosure
        iv. Not asking patients about their gender identity and sexual orientation to avoid making them uncomfortable
        v. Ensuring access to unisex or single-stall bathrooms

**Week 4: Basics of Nutrition for Nurses**

Concepts: Health Promotion
Exemplars
- Nutrition during pregnancy
- Nutrition during infancy
- Nutrition during childhood
- Nutrition during adolescence
- Nutrition during adulthood
- Aging and nutrition

**Prior to Class Assignment**

1. Review the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) food and nutritional information at www.fns.usda.gov/wic
2. Review health information for girls (ages 10-16) at www.girlshealth.gov
3. Review health information for children, teens, and parents at www.kidshealth.org
4. Review federal and private sector sources on women's health issues at http://www.womenshealth.gov/

**Readings/Viewings**
Grodner, Roth, & Walkingshaw Chapter 11 Life Span Health Promotion: Pregnancy, Lactation, and Infancy; Chapter 12 Life Span Health Promotion: Childhood and Adolescence; Chapter 13 Life Span Health Promotion: Adulthood

**Discussion Board 3:** Discuss how a health promotion nutritional plan differs for pregnant patients, infants, children, adults, and the elderly.
**Refer to the Discussion Board Guidelines found previously in the syllabus**

**Learning Activities**

1. Develop a dietary plan for each of the following scenarios:
    a. An 18-year-old female is beginning her third trimester of pregnancy. The patient has not been gaining sufficient weight to support her pregnancy but is otherwise healthy.
    b. A mom is upset about the way her young children eat. They grab foods from the time they get home from school until they go to sleep. When mom was asked about her eating style, she responded that die to her crazy work schedule, there is no time for regular meals. There is often only time for fast food or leftovers.
    c. A couple is in their late 40s'. Recently the man was diagnosed with high blood cholesterol levels and his HCP instructed him to lower the fats and cholesterol in his diet. He is confused about what to order at the daily business lunches he must attend. His wife has started putting on weight and wonders if it due to perimenopause. In addition, the wife's mother just moved in with the couple and the mother seems to eat little during the day.

**Week 5: Nutrition in Patient Care**
Concept: Health Promotion
Exemplars
- Hospital setting

- Nutritional theory
- Stress response
- Complementary/Alternative medicine
- Supplements
- Medications

**Prior to Class Assignment**

1. Review health status and use of health services by socioeconomic status, region, and ethnicity from the National Center for Health Statistics at www.cdc.gov/nchs/
2. Review information on appropriate use of phytomedicines and medicinal plants at www.herbalgram.org

**Readings/Viewings**

Grodner, Roth, & Walkingshaw Chapter14 Nutrition in Patient Care; Chapter 15 Nutrition and Metabolic Stress; Chapter 16 Interactions: Complementary and Alternative Medicine, Dietary Supplements, and Medicines

Potter, Perry, Stockart, & Hall Chapter 33 Complementary and Alternative Therapies

**Discussion Board 4:** Discuss the importance of dietary supplements for health promotion.
**Refer to the Discussion Board Guidelines found previously in the syllabus**

**Learning Activities**

1. Develop a dietary plan of total parenteral nutrition (TPN), including recommendations for patient monitoring.
2. Develop a dietary plan for a patient who requests a kosher diet and a patient who has pneumonia.

**Week 6: Stress Management and Healthy Behaviors**
**The Nurse and Care of Self**

Concept: Health Promotion

Exemplars

- Body image
- Self-concept
- Stress
- Situational crisis
- Crisis intervention
- Mindfulness

**Prior to Class Assignment**

1. Review information related to managing stress at Diamond, J.W. (2009-2010). Allostatic Medicine: Bringing Stress, Coping, and Chronic Disease into Focus, Part I. *Integrative Medicine Research 8*(6): 40.

**Readings/Viewings**

Potter, Perry, Stockart, & Hall Chapter 34 Self-Concept; Chapter 38 Stress and Coping

**Learning Activities**

1. Develop a plan for patients who are experiencing stress
2. Discuss evidence-based practices applicable for identity confusion, disturbed body image, low self-esteem, and role conflict.

**Week 7: Health Promotion and the Environment**

**Ethics of Health Promotion with Social Marketing**

Concept: Health Promotion

Exemplars

- Planning models
- Social marketing
- PRECEDE- PROCEED

**Prior to Class Assignment**

1. Review

**Readings/Viewings**

Theory at a Glance Part 3

**Discussion Board 5**: Discuss how community-driven approaches can solve health and social problems.

**Refer to the Discussion Board Guidelines found previously in the syllabus**

**Learning Activities**

3. Develop a plan for patients who are experiencing stress
4. Discuss evidence-based practices applicable for identity confusion, disturbed body image, low self-esteem, and role conflict.

**Rubric for Discussion Board**

**Student Name**_____ **Date**_____

| 15 Points | 10 Points | 5 Points | 0 Points | Points Earned |
|---|---|---|---|---|
| Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains at least 2 references<br>*Initial post must be a minimum of 250 words | Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains less than 2 references<br>*Initial post is a minimum of 250 words | Fully answers the question by the end of the week assigned or no references included<br>*Initial post is less than minimum of 250 words | Does not fully answer the question during the current week | /15 |
| Demonstrates synthesis of knowledge and includes practice (real-world) examples to support posting | Demonstrates synthesis of knowledge in initial posts but does not relate knowledge to practice (real-world) examples to support posting | Posts indicate minimal knowledge of subject matter | Posts are not relevant or no subject matter knowledge is evident | /15 |
| **15 Points** | **10 Points** | **5 Points** | **0 Points** | **Points Earned** |
| Provides a minimum of two substantive replies per question with reference(s) by the end of the week (Monday 0559 CT). A minimum of one (1) reference is required per peer reply<br>*Each peer reply must be a minimum of 150 words | Provides less than the two (2) replies per question by the end of the week (Monday 0559 CT). A minimum of one (1) reference is required for each peer reply<br>*Each peer reply must be a minimum of 150 words | Provides replies to each question with simple comments and/or reference(s) not provided<br>*Each peer reply is less than minimum of 150 words | Does not reply to each question by the end of the week | /10 |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |
| Participates in discussion a minimum of 2 separate days of the current week, | Participates in discussion 2 separate days of the week, | Participates in discussion less | Does not reply to each question by | /2 |

| | | | | |
|---|---|---|---|---|
| excluding the Sunday before the week begins | including the Sunday before the week begins | than 2 days of the week | the end of the week | |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |
| Organization is logical, ideas are clearly presented, and transitions are smooth between topics | Organization adequate, ideas usually clear and transitions mostly smooth | Organization is minimally effective; problems with clarity and/or transitions | Organization does not meet requirements | **/2** |
| Spelling, grammar, punctuation, mechanics and word usage are correct and consistent with Standard American English | Spelling, grammar, punctuation, mechanics, and word usage are adequate and consistent with Standard American English; errors do not interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics, and word usage are distracting and could interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics and/or word usage interfere with understanding and do not reflect scholarly writing | **/2** |
| All references are relevant, scholarly and contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet two requirements of relevant, scholarly or contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet one requirement of relevant, scholarly or contemporary | No use of references | **/2** |
| Correct APA format of in-text citations and references | Less than 2 APA errors | 3-4 APA errors | No use of APA format or 5+ errors | **/2** |
| | | | **Total Points** | **/50** |

Student Name_____

COMMENTS

Faculty Name_____

Date_____

**Rubric for PRECEDE-PROCEED Written Project**

Student Name_____ Date _____

| Criteria | 40 Points | 25 Points | 15 Points | 0 Points | Points Earned |
|---|---|---|---|---|---|
| Identify a health promotion topic that pertains to a community problem | Thoroughly discussed the promotion topic and how it pertains to a community problem | Discussed the promotion topic and how it pertains to a community problem, but needs more clarity | Identified the community topic but did not discuss how it pertains to a community problem | Does not identify the promotion topic that pertains to a community problem | /40 |
| **Criteria** | **70 Points** | **45 Points** | **20 Points** | **0 Points** | **Points Earned** |
| Discuss how the topic pertains to the improvement of care and/or services for selected health care entity | Thoroughly discussed how the topic pertains to the improvement of care and/or services for selected health care entity | Discussed how the topic pertains to the improvement of care and/or services for selected health care entity, but needs more clarity | Discussed the topic but did not discuss how it pertained to the improvement of care and/or services for selected health care entity | Did not discuss the topic or how it pertained to the improvement of care and/or services for selected health care entity | /70 |
| **Criteria** | **20 Points** | **14 Points** | **8 Points** | **0 Points** | **Points Earned** |
| Grammar, spelling, and punctuation | There are no errors in grammar, spelling, and punctuation | There are a few minor errors in grammar, spelling, and punctuation that do not detract from the meaning | There are major errors in grammar, spelling, and punctuation that do not detract from the meaning | NA | /20 |
| **Criteria** | **20 Points** | **14 Points** | **8 Point** | **0 Points** | **Points Earned** |
| APA Compliance | The paper meets APA format | There are minor APA format errors | There are significant errors in format | NA | /20 |
| | | | | **TOTAL POINTS** | /150 |

COMMENTS

Faculty Signature _____ Date_____

**Rubric for Group Presentation Grading Criteria**

**Purpose:** Students will demonstrate professional communication, use of presentation technology, effective group process, and presentation skills.

| **Professional Presentation** | **Points** | **Score** |
|---|---|---|
| • Introduce presentation topic(s) and objectives | | |
| • Cover required Group Presentation Objectives<br>○ Focused presentation on required objectives<br>○ Provided accurate information<br>○ Presented easy to understand material | | |
| • Utilize effective professional presentation skills<br>○ Maximum of 5-6 bullets per PowerPoint slide<br>○ Used professional PowerPoint template<br>○ Used one PowerPoint template for presentation<br>○ PowerPoint template color scheme easy to read<br>○ Font size readable at back of classroom | | |
| • Demonstrate effective communication skills<br>○ Used PowerPoint bullet points to guide presentation: Did not read slides<br>○ Spoke loudly enough to hear at back of classroom<br>○ Spoke to audience and made eye contact<br>○ Presentation flowed despite multiple speakers<br>○ Used professional language with no slang or colloquialisms | | |
| • Complete presentation within allotted time (15 minutes) | | |
| **Group Participation** | | |
| • Each group member presents | | |
| • Submit evaluation form for each group member <u>at beginning</u> of presentation* | | |
| • Submit evidence of group dynamics <u>at beginning</u> of presentation including summary of individual contributions and group communications | | |
| **TOTAL** | | |

***Faculty reserve the right to grade group members individually based on group participation feedback.**

**Evaluation of Participation in Group Presentation**

**Group Member Evaluated**_____ **Evaluator** _____

Your group presentation grade depends on your meeting the criteria of group participation. Peer input is needed to help evaluate the group efforts in order for the instructor to fairly evaluate the student's achievement of these criteria.

Directions

1. Read each item carefully and answer as objectively as you can.
4. Rate each group member (excluding yourself). Make any supporting comments you believe to be pertinent in the space provided.
5. Complete this form and return it to faculty at the beginning of the class on the day of your group's presentation.

| Group member | Never Almost Always | Comments |
|---|---|---|
| Met target dates for completing assignments | Never Almost Always | |
| Attended all group meetings | Never Almost Always | |
| Shared relevant professional literature articles with group prior to presentation | Never Almost Always | |
| Adequately analyzed the topic | Never Almost Always | |
| Contributed to but did not dominate group discussion | Never Almost Always | |
| Respected the rights of classmates/encouraged member participation | Never Almost Always | |
| Met the assigned tasks | Never Almost Always | |
| Demonstrated skill to encourage group interaction | Never Almost Always | |
| Fostered a sense of belonging within the group | Never Almost Always | |

Additional Comments:

**Collin College RN-to-BSN Program**
**RNSG 3330**

**COURSE INFORMATION**

**Course Number:** RNSG 3330
**Course Title:** Ethics in Health Care
**Course Description:** This course builds on the ethical and legal foundations for professional nursing practice and health care services. Ethical, legal, and moral/social principles along with the ANA Code for Nurses are applied to selected common and complex health care related situations. The role of ethics in the development of professionalism and professional values is explored.

**Course Credit Hours:** 3
Lecture Hours: 3
Lab Hours: 0
Clinical Hours: none

**Prerequisite:** Admission to the RN-to-BSN Program

**Student Learning Outcomes:**
Upon completion of this course the student will:
1. Analyze the ethical theories in relation to morality, laws, and social practices and policies.
2. Synthesize the principles of autonomy, beneficence, non-maleficence, veracity, justice, and fidelity to common and complex health care and professional related situations including economics, access to care, and personal rights.
3. Evaluate the process of ethical decision-making as it relates to nursing practice and the nurse: person/patient/family/community relationship.
4. Compare law and ethics related to health care services including end of life issues.
5. Apply the ANA Code for Nurses to professional situations.
6. Analyze engagement in communications/crucial conversations related to complex and controversial ethics, law, and professional practice issues.
7. Synthesize the values of altruism, autonomy, human dignity, integrity, and social justice in the process of ethical decision making.

**Withdrawal Policy:** See the current Collin Registration Guide for the last day to withdraw.

**Withdrawal Procedure:**
See *Nursing Division Student Handbook* Procedure, Adding or Dropping Courses, regarding withdrawal procedures, and the current Collin College Registration Guide for last day to withdraw.

**Collin College Academic Policies:** See the current *Collin Student Handbook.*

**Academic Ethics:**

The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty. Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty shall involve, but is not limited to, one (1) or more of the following acts: plagiarism, cheating, collusion, use of annotated texts or teacher's editions, use of information about exams posted on the Internet or in any electronic medium, and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for activities as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course Activity; removing tests or answer sheets from a test site, and allowing a classmate to copy answers. Refer to *Nursing Division Student Handbook* Procedure 10.41, Scholastic Dishonesty, and *Collin College Student Handbook.*

**Americans with Disabilities Act:**

Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required to afford equal opportunity. It is the student's responsibility to contact the ACCESS office, SCC-D140 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin Student Handbook* for additional information.

**Strategies of Behavioral Intervention (SOBI):**

Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning

behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of Student Code of Conduct (Code) violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**INSTRUCTOR INFORMATION**
**Instructor's Name: TBD**
**Office Number:**
**Office Hours***:* Hours posted on office door
**Phone Number:**
**Email:**

**Standards for Instructor Response and Availability:** Each instructor will have their own expected response time, but generally speaking the instructor will endeavor to respond within 48 hours during the work week. Office Hours are as posted by each Level faculty.

**Class Information:**
**Section Number: TBD**
**Meeting Times: In-class as scheduled**
**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Course Format:** Lecture-discussion, small group discussion, oral/written class project, AV materials, learning activities, computer assisted technology, discussion boards, self-directed and peer assisted learning, teacher-student conferences, case studies, and assigned readings. This component of the course requires the student apply course concepts to clinical situations and use the cognitive skills of application, analysis, synthesis and evaluation.

**Course Requirements:**

1. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Policies 10.10 and 10.11).
2. Complete all course assignments.
3. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 3330 course, the student can continue in all other enrolled nursing courses.
4. You may repeat this course only once after receiving a failing grade.
5. This course will follow all requirements found in the *Collin College Nursing Division Student Handbook.*

**Course Evaluations:** All students completing courses for the Collin College BSN program are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon entrance into the Health Care Concepts course final exam for the semester the student is in.

**Minimum Technology Requirement:**
**Computer System Requirements:**
The basic computer specifications for Canvas use are available at:
https://community.canvaslms.com/docs/DOC-2059
The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284
High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas App or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions.
HESI system requirements for both Mac and Windows users are available at:
https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at:
https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx
You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:** See Student Handbook procedures.

**Netiquette Expectations:** In all communications whether electronic discussion or mail, all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources**
**Supplies:** Computer and internet availability that meets minimum expectations
**Textbooks and Equipment**:
***Required Textbooks & Equipment***
Doherty. (2015) Ethical dimensions in the health professions. St. Louis, MO: Elsevier.

American Nurses Association (2015). American Nurses Association Code of Ethics with interpretive statements. Available at www.nursingworld.org.

American Nurses Association. ANA Position Statements on Ethics and Human Rights. Available at www.nursingworld.org.

Medical dictionary of your choosing

**Attendance Procedure:** See *Nursing Division Student Handbook* Procedure 10.11 Class Attendance and Clinical Laboratory Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook.*

**Method of Evaluation**:
The course grade will be determined through the following process:

| | |
|---|---|
| Ethics Case Studies (4) | 80 points |
| Professional Paper | 25 points |
| Team Professional Presentation | 25 points |
| Total | 130 points |

117-130 points = A 104-116 points = B 91-103 points = C Below 91 points = F

**Course Calendar**: See Canvas

**COURSE OUTLINE**

| | |
|---|---|
| Week 1 | Overview of ethical theory and ethical principles and the importance of understanding concepts and principles.<br>Concepts and Exemplars:<br>Societal ethics: Allocation of resources<br>Organizational ethics: Disclosure of medical errors<br>Professional Ethics: Person/patient rights<br>Personal ethics: Conflict of interest<br>Ethical Principles<br>Autonomy:<br>Beneficence:<br>Non-malfeasance:<br>Veracity:<br>Confidentiality: Disclosure without consent<br>Justice:<br>Fidelity:<br>Altruism<br>Autonomy<br>Human Dignity<br>Integrity<br>Social Justice |
| Week 2 | Self -assessment concerning one's ethical values and perceptions. Consider implications of the ANA Code of Ethics for Nurses.<br>Personal values: Personal situations<br>Professional values: Person/patient situations subject to nursing care<br>Professional Code: Professional situations requiring ethical decision-making<br>Duty to Report |
| Week 3 | Review of the ethical decision-making process and application. Consider interpretation and application of the ANA Code for Nurses and implications of enforcing the ANA Code in complex situations.<br>Professional Accountability: Decision making in clinical situations<br>Decision-making process: Use of ethical questions<br>Moral distress: Moral conflicts in the practice setting |
| Week 4 | Review legal and ethical issues<br>Legal concepts: Interpretation and application of law (including unintended consequences of law)<br>Review the characteristics and nature of professions and the importance of adherence to a professional Code of Ethics, accountability and measures to be recognized as a profession.<br>Ethics and legal Precepts: Accountability<br>Professionalism: Professional status, Advocacy<br>Collaboration: Interpersonal Relationships |

| | |
|---|---|
| Week 5 | Impact of expanding technology concerning complex medical treatments and access and confidentiality of personal health information.<br>Beneficence: Organ allocation<br>Non-maleficence: Futility situations/Genetics |
| Week 6 | Patient self-determination in health care matters, advance directives, and informed consent.<br>Justice: Pain management/Disclosure of medical errors<br>Autonomy: Patient self-determination v paternalism<br>Beneficence: Cardiopulmonary resuscitation/Life sustaining<br>Texas Advance Directives Act and Texas Mental Health Advance Directive Act: www.dads.state.tx.us/ click on Advance Directives<br>Duty to initiate CPR/ End of Life<br>www.bon.state.tx.us: Practice - FAQ – Initiation of CPR A- Nurse's Duty to Initiate.<br>Scholarship ethical issues in academia and clinical practice.<br>Beneficence: Research involving human subjects/vulnerable populations<br>Justice: Equitable and fair treatment<br>Confidentiality: Privacy |
| Week 7 | Health policies with political, cultural, social, and legal implications.<br>Distributive Justice: vaccinations (right to refuse versus public exposure)<br>Beneficence versus Non-maleficence/ Competing ethical/moral values |
| Week 8 | Professional Paper Discussion |
| Week 9 | Economic issues related to health care access and cost.<br>Distributive Justice: Access to/financing of/entitlement to health care<br>Distributive Justice: Futility care |
| Week 10 | Social issues that impact access to health care for vulnerable populations.<br>Distributive Justice: Vulnerable populations<br>Beneficence and non-maleficence versus Autonomy<br>Advocacy |
| Week 11 | Gender bias as relates to the nursing profession, health care services for women and men, and health care services related to sexual orientation.<br>Justice: Gender bias<br>Non-maleficence: Gender bias<br>Beneficence: Gender bias |
| Week 12 | Cultural and spirituality related to health care effectiveness and complementary and alternative therapies.<br>Justice: Adjusting for cultural and spiritual diversity<br>Beneficence: Meeting individual needs considering diversity<br>Fidelity: Building trust and understanding |

| | |
|---|---|
| Week 13 | Professional nurse empowerment, opportunities and barriers.<br>Empowerment: nurses, persons/patients, and populations<br>Ethics of consequences: Based on outcomes |
| Week 14 | Professional Project Presentation |

| Area | Minimal<br>1 point | Benchmark<br>2 points | Benchmark<br>3 points | Capstone<br>4 points |
|---|---|---|---|---|
| Content | Minimal and superficial content.<br>Issue/problem to be considered critically is stated without clarification or description. | Minimally covers essential elements.<br>Questions some assumptions.<br>Identifies several relevant contexts when presenting a position. May be more aware of others' assumptions than one's own (or vice versa). | Content is thorough and covers essential elements.<br>Identifies own and others' assumptions and several relevant contexts when presenting a position. | Content is deep and rich in thought and demonstrates metacognition applying to a broader scope and population.<br>Thoroughly, systematically and methodically analyzes own and others' assumptions and carefully evaluates the relevance of contexts when presenting a position. |
| Compre-hensive | Minimally covers or misses some required elements | Issue/problem to be considered critically is stated but description leaves some terms undefined, ambiguities unexplored, boundaries undetermined, | Issue/problem to be considered critically is stated, described, and clarified so that understanding is not seriously impeded by omissions. | Issue/problem to be considered critically is stated clearly and described comprehensively, delivering all relevant information necessary for full understanding. |
| Critical Thinking | Specific position is stated but is simplistic and obvious.<br>Conclusion is inconsistently tied to some of the information discussed; related outcomes (consequences and implications) are oversimplified. | Specific position acknowledges different sides of an issue.<br>Conclusion is logically tied to information (because information is chosen to fit the desired conclusion); some related outcomes are identified clearly. | Specific position takes into account the complexities of an issue.<br>Others' points of view are acknowledged within position.<br>Conclusion is logically tied to a range of information, including opposing viewpoints; related outcomes (consequences and implications) are identified clearly. | Specific position takes taking into account the complexities of an issue.<br>Limits of position are acknowledged.<br>Others' points of view are synthesized within position.<br>Conclusions and related outcomes are logical and reflect student's informed evaluation and ability to place evidence and perspectives |

| | | | | |
|---|---|---|---|---|
| | | | | discussed in priority order. |
| Evidence | Information is taken from source(s) without any interpretation/evaluation. Viewpoints of experts are taken as fact, without question. | Information is taken from source(s) with some interpretation/evaluation, but not enough to develop a coherent analysis or synthesis. Viewpoints of experts are taken as mostly fact, with little questioning. | Information is taken from source(s) with enough interpretation/evaluation to develop a coherent analysis or synthesis. Viewpoints of experts are subject to questioning. | Information is taken from source(s) with enough interpretation/evaluation to develop a comprehensive analysis or synthesis. Viewpoints of experts are questioned thoroughly. |
| Form | Many grammatical, spelling or punctuation errors. APA errors in citations are significant | | Some grammar, punctuation and spelling errors, but does not interfere with readers understanding of document. Minimal APA errors | Grammatically correct, spelling accurate, punctuation correct. APA format for all citations |

**Case Studies Grading Rubric (20 points each)**

Professional Paper Guidelines

Objectives: The student will
1. Conduct online searches for professional paper on selected or designated ethics topic.
2. Write and submit paper on the selected or designated topic that demonstrates professional writing skills and the ability to analyze a professional ethical topic using APA.

Activity: The student will conduct an online research on selected or designated topic; submit written report of that research process consistent with the Professional Paper Grading Rubric including the use of APA format. The paper must be submitted on or before the posted due date during Week 12.

Research
You are expected to utilize online search tools and available resources located in the library. There are a number of research databases with resources that will answer your questions. Submit evidence of your research process by including references and resources using APA format and validating that the reference is a peer-reviewed source.

In your research seek answers to the following questions concerning your topic:
1. Why is this topic significant in the community/nation/ world?
2. What ethical principles are involved?
3. What are the issues to be considered in resolving the ethical question?
4. Why is this topic important to the nursing profession and our services?

Paper
Write a professional paper to answer the ethical questions for the topic. Your paper should include an introduction defining and outlining the topic, a body and summary that address questions 1 through 4 above. You should use APA format with a cover sheet (page 1), body of the paper no more than two (2) pages (pages 2 and 3), double-spaced with 12-point font, and a list of references (APA format) that can be on the last page of the body (page 3) or on a separate page (page 4). Attach rubric to paper. Refer to the Professional Paper Grading Rubric for the research assignment and the paper to be submitted. Grade your paper prior to submission to determine that your paper addresses the requirements and expectations.

**Professional Paper Grading Rubric**

Student: _____ Date _____

Paper title: _____
Total Possible points = 100 Student points and letter grade _____/_____

| Category | 10-15 Points | 1-9 Points | 0 Points | Points Earned |
|---|---|---|---|---|
| 1. Introduction | Defines and describes topic/concept | States and defines topic | Topic not defined or described | /15 |
| **Category** | **40-60 Points** | **1-39 Points** | **0 Points** | |
| 2. Body | Responds to the four questions:<br>1. Why is this topic significant in our community/nation/ world?<br>2. What ethical principles are involved?<br>3. What are the issues to be considered in resolving the ethical question?<br>4. Why is this topic important to the nursing profession and our services? | Partially responds to questions | Fails to address questions | /60 |
| **Category** | **10-15 Points** | **1-9 Points** | **0 Points** | |
| 3. Summary | Succinct summary of topic and key current/future issues. | General comments about the subject and some issues | Fails to summarize topic and issues | /15 |
| **Category** | **5-10 Points** | **1-4 Points** | **0 Points** | |
| 4. Format | Adheres to APA format with cover page, body not to | Partially adheres to APA format | Fails to adhere to APA format | /10 |

| | | | | |
|---|---|---|---|---|
| | exceed two (2) pages, double-spaced in 12-point font. References properly formatted by APA. | | | |
| | | | **Total** | **/100** |

Faculty Name Date

**Collaborative Practice Group Presentation Grading Criteria (25 points)**

**Purpose:** Students will demonstrate professional communication, use of presentation technology, effective group process, and presentation skills.

| **Professional Presentation** | **Points** | **Score** |
|---|---|---|
| • Introduce presentation topic(s) and objectives | | |
| • Cover required Group Presentation Objectives<br>○ Focused presentation on required objectives<br>○ Provided accurate information<br>○ Presented easy to understand material | | |
| • Utilize effective professional presentation skills<br>○ Maximum of 5-6 bullets per PowerPoint slide<br>○ Used professional PowerPoint template<br>○ Used one PowerPoint template for presentation<br>○ PowerPoint template color scheme easy to read<br>○ Font size readable at back of classroom | | |
| • Demonstrate effective communication skills<br>○ Used PowerPoint bullet points to guide presentation: Did not read slides<br>○ Spoke loudly enough to hear at back of classroom<br>○ Spoke to audience and made eye contact<br>○ Presentation flowed despite multiple speakers<br>○ Used professional language with no slang or colloquialisms | | |
| • Complete presentation within allotted time (15 minutes) | | |
| **Group Participation** | | |
| • Each group member presents | | |
| • Submit evaluation form for each group member <u>at beginning</u> of presentation* | | |

| | | |
|---|---|---|
| • Submit evidence of group dynamics at beginning of presentation including summary of individual contributions and group communications | | |
| **TOTAL** | | |

***Faculty reserve the right to grade group members individually based on group participation feedback.**

**Evaluation of Participation in Group Presentation**

**Group Member Evaluated**_____ **Evaluator** _____

Your group presentation grade depends on your meeting the criteria of group participation. Peer input is needed to help evaluate the group efforts in order for the instructor to fairly evaluate the student's achievement of these criteria.

Directions

1. Read each item carefully and answer as objectively as you can.
6. Rate each group member (excluding yourself). Make any supporting comments you believe to be pertinent in the space provided.
7. Complete this form and return it to faculty at the beginning of the class on the day of your group's presentation.

| Group member | Never | Almost | Always | Comments |
|---|---|---|---|---|
| Met target dates for completing assignments | Never | Almost | Always | |
| Attended all group meetings | Never | Almost | Always | |
| Shared relevant professional literature articles with group prior to presentation | Never | Almost | Always | |
| Adequately analyzed the topic | Never | Almost | Always | |
| Contributed to but did not dominate group discussion | Never | Almost | Always | |
| Respected the rights of classmates/encouraged member participation | Never | Almost | Always | |
| Met the assigned tasks | Never | Almost | Always | |
| Demonstrated skill to encourage group interaction | Never | Almost | Always | |
| Fostered a sense of belonging within the group | Never | Almost | Always | |

Additional Comments:

**Collin College RN-to-BSN Program**
**RNSG 3340**

**COURSE INFORMATION**

**Course Number:** RNSG 3340

**Course Title:** Population-Focused Community Health I

**Course Description:** Introduces the concept of the community of persons/patients, families, and populations as the adult and geriatric patient in the healthcare system and the roles of the nurse in community services. Nurse roles include public policy, provision of primary care, prevention of disease or health risk, education and health promotion, and restoration.

**Course Credit Hours:** 3

Lecture Hours: 2

Lab Hours: None

Clinical Hours: 1

**Prerequisite:** Admission in RN-to-BSN program

**Student Learning Outcomes:**

Upon completion of this course, the student will:

Objectives: Didactic

1. Analyze local, state, and national public health system components, policies, missions, goals, and programs.
2. Compare population-specific (adult and geriatric) community populations with differing needs and resources and match with available services or identify needed services/resources.
3. Differentiate the roles of nurses in community-based practice for population-specific (adult and geriatric health) persons/patients, families and populations within culturally diverse communities.
4. Explain epidemiologic, social, political, economic, and cultural trends that affect the health status of individuals, families, populations, and communities.
5. Analyze and propose culturally sensitive and developmentally appropriate health services and education programs to maintain or restore health status.
6. Use introspection and conscious examination of personal beliefs and value systems to increase sensitivity, respect, and caring for diverse populations.

Objectives: Clinical

1. Research local, state, and federal databases to conduct a population-specific (adult and geriatric) community health assessment and proposal for addressing needs.
2. Integrate concepts of health disparities, health literacy, and cultural belief systems in the population-specific (adult and geriatric) community assessment.
3. Develop an evidence-based health education program/class based on data from the population-specific (adult and geriatric) community assessment.
4. Apply relevant local, state, and national regulations and policies that affect addressing the health needs of the population-specific (adult and geriatric) community assessed.

**Secretary's Commission on the Acquisition of Necessary Skills (SCANS)** - SCANS skills are a group of foundational skills and workplace competencies that the Secretary's Commission on the Acquisition of Necessary Skills established as vitally important for workplace success in the 21st century. In Collin's workforce programs, the SCANS skills are developed and reinforced throughout the curriculum to provide students with an opportunity to hone these skills/competencies in the context of their education. Over the course of an entire degree program, the successful student is expected to demonstrate all of the SCANS skills and competencies as part of their education. The SCANS Foundation Skills and Workplace Competencies are described at:
http://www.collin.edu/academics/programs/Workforce_SCANS_Skills_Syllabi_Code_Key.pdf

**Withdrawal Policy:** See the current *Collin Registration Guide* for the last day to withdraw.

**WITHDRAWAL PROCEDURE:**

See *Nursing Division Student Handbook* Procedure 10.17, Adding or Dropping Courses, regarding withdrawing procedures, and the current *Collin College Registration Guide* for last day to withdraw.

**Collin College Academic Policies:** See the current *Collin College Student Handbook.*

**Americans with Disabilities Act Statement:**

Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin College Student Handbook* for additional information.

**Strategies of Behavioral Intervention (SOBI)**

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Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of *Student Code of Conduct (Code)* violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**ACADEMIC ETHICS:**
The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty.
Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty may involve, but is not limited to, one (1) or more of the following acts: cheating, plagiarism, collusion, use of annotated texts or teacher's editions and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for assignments as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course assignment; removing tests or answer sheets from a test site, and allowing a classmate to copy answers.

Refer to *Nursing Division Student Handbook* Policy 10.41 and *Collin College Student Handbook*

**Faculty Contact Information:**
See Nursing Faculty Contact List in Canvas

**INSTRUCTOR INFORMATION**
**Instructor's Name: TBD**
**Office Number:**
**Office Hours:** Hours posted on office door
**Phone Number:**
**Email:**

**Class Information**
**Section Number: TBD**
**Meeting Times: In-class as scheduled**
**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Course Format:**
Lecture, group activities, role playing, audiovisual materials, independent study: computer lab modules and/or study guides, assigned references, teacher student conferences, visits to community resource facilities, journaling, and other assignments as indicted.

Students may review their exams by making an appointment with their advisor if needed. However, current exams can only be reviewed up to the next scheduled exam.

**Course Requirements:**

1. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Procedures 10.10 and 10.11).
2. Complete all course assignments.
3. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 3340 course, the student can continue in all other enrolled nursing courses.
4. You may repeat this course only once after receiving a failing grade.
5. This course will follow all requirements found in the *Collin College Nursing Division Student Handbook.*

**Course Evaluations:** All students completing courses for the Collin College RN-to-BSN program are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon entrance into the course final exam, if applicable, for the semester the student is in.

**Minimum Technology Requirement:**

**Computer System Requirements:** The basic computer specifications for Canvas use are available at: https://community.canvaslms.com/docs/DOC-2059

The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284

High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas App or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions.

HESI system requirements for both Mac and Windows users are available at: https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at:
https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx
You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:**
**Netiquette Expectations:** In all communications whether electronic discussion or mail all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your

communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources: See required supplies and textbooks**

**Textbooks & Equipment:**

***Required Textbooks & Equipment***

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

Stanhope, M. & Lancaster, J. (2014). *Foundations of nursing in the community, Community oriented practice.* (5th ed.). New York City: Elsevier.

*Nursing Division Student Handbook (Available on-line)*

**Attendance Procedure:** See *Nursing Division Student Handbook* Procedure 10.10 and 10.11, Class Attendance and Clinical Laboratory Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook.*

**Additional Instructor Student Learning Outcomes:** May vary by instructor

**Method of Evaluation**: The course grade will be determined as follows:
The maximum score in this class is 400 points and weighed as follows.

| **Assignment** | **Points** | **Weighed** |
|---|---|---|
| Research assignment 1 Healthy People 2020 | 60 | 30% |
| Research assignment 2 Vulnerable Populations | 60 | |
| Family assessment (Friedman) with Genogram (Individual) | 60 | 15% |
| Community Assessment (group) Presentation/paper | 120 | 30% |
| Reflection journal | 100 | 25% |
| Clinical Experience | Pass/Fail | |
| Total Points | 400 | 100% |

360-400 points = A 320-359 points = B 280-319 points = C 279 and below points = F

Your grades will be available in the My Grades Tab of Canvas.

**Criteria Used to Evaluate Participation in Online Activities**: See Rubric Delivery Method of Feedback and/or Graded Material: See Method of Evaluation

**Standards for Instructor Response and Availability**: Each instructor will have his/her own expected response time, but generally speaking the instructor will endeavor to respond within 48 hours during the work week.

**Course Calendar**: See Canvas.

**COURSE OUTLINE**

**Week 1: Introduction to Community Health Nursing**

Concept: Healthcare Organizations

Exemplars

- Private and public funding
- Variety of settings
- Regulated by public and private authorities
- Specialized professional workforce
- Unique purpose
- Public trust

**Prior to Class Assignment**
Review Healthy People 2020 at www.healthypeople.gov
Review Medicare Preventive Services Quick Reference Chart at http://www.cms.gov/Medicare/Prevention/PrevntionGenInfo/Downloads/MPS_QuickReferenceChart_1.pdf

**Readings/Viewings**
Institute of Medicine. (2004). Health literacy. National Academies Press. (Executive Summary)
Institute of Medicine. (2010). The future of nursing. National Academies Press.
Institute of Medicine. (2001). Crossing the quality chasm: A new health system for the 21st century. National Academies Press. See Appendix concerning Complexity Science.
The IOM publications can be downloaded free on the web from www.nap.edu.

**Learning Activities**
Working in small groups, develop a health maintenance schedule, including interventions (procedures, history taking, counseling) offered to patients at defined intervals, depending on age, gender, and risk factors for primary and secondary disease prevention. It is important for the group to reach consensus on the content of the health maintenance schedule- the goal is to develop a minimum acceptable protocol, not to develop consensus.
1. Use published guidelines as a starting point, including frequency of interventions and implementation.
2. Outline patient education materials to enhance compliance with the health maintenance schedule.
3. Include patient responsibilities and modifiable lifestyle activities.

**Week 2: Community Health Nursing**
Concept: Healthcare services (health promotion, illness, and wellness care)
Exemplars
- Ambulatory care centers
- Home health agencies
- Primary and specialty clinics
- Provider offices
- Nursing homes
- Organizations
- Long term care facilities

**Prior to Class Assignment**
Review the roles of nurses in 'population focused' care.
Be able to differentiate between 'community health' and 'public health'.

Research the roles of international, federal, state and local health organizations in the promotion of health in populations.

**Readings/Viewings**
Stanhope & Lancaster, Ch. 1, Ch. 2, Ch. 3
**Research Assignment 1**: Healthy People 2020 due

**Learning Activities**
On the Internet, locate job descriptions for public health or community nurses. From these, answer the following:

1. Which concept of public health nursing does the practice reflect?
2. Which concept is emphasized in the job description?
3. Does a correlation exist between the job description and practice?
4. Are the nurses involved in policy formulation that affects client services?
5. In the settings, which concept (in your opinion) is the most effective for implementation? What is your rationale?
6. What is the community health nurse's role in health promotion and disease prevention?

**Research Assignment 1**
Use the college library to identify peer-reviewed articles that address evidence-based practice relative to community health. Each paper counts 15% toward the course grade.

Research Assignment 1 Healthy People 2020 Criteria
1. Download Healthy People 2020 and identify one health issue of interest related to community health (i.e. an issue that affects a population)
2. Conduct a library search for a peer-reviewed article addressing evidence-based nursing or health care practices related to the topic.
3. Write a 500-word summary describing the reason the topic was selected, what aspects the research addressed, and why the peer-reviewed article was chosen.
4. Submit the summary and copy of the peer-reviewed article. Be prepared to discuss the summary in class.

**Week 3: Vulnerable Populations: Disabled**
Concept: Functional Ability
Exemplars

- Malnutrition
- Alzheimer's Disease
- Blindness/deafness
- Brain injury
- Chronic pain
- Post-traumatic stress disorder
- Traumatic Brain Injury

**Prior to Class Assignment**
Research laws that protect disabled members of the community

**Readings/Viewings**

Stanhope & Lancaster chapter Vulnerability and Vulnerable Populations: An Overview

**Learning Activities**
1. What are examples of discrimination concerning persons with disabilities?
2. Research laws enacted to protect vulnerable populations.
3. What are steps the nurse can take to ensure the protection of people with disabilities?

**Week 4: Caregiver and Respite Care**
Concepts: Human Development and End-of-Life
Exemplars
- Aging family members
- Caregiver role for family member
- Change in socio-economic status of family
- Death of family member
- Dissolution of family
- End-of-life care
- Traumatic injury of family member

**Prior to Class Assignment**
**Readings/Viewings**
Stanhope & Lancaster chapter Elderly

**Learning Activities**
1. Compare respite care and long-term residential services. Identify pros and cons of each
2. Explore resources for caregivers

**Week 5: Homelessness and Poverty**
Concept: Coping
Exemplars
- Teenage runaway
- Child abuse
- Intimate partner violence
- Substance abuse

**Prior to Class Assignment**
Review Healthy People 2020 initiatives related to family health and homelessness.
Research homeless shelters in this area. What services are offered? What needed services can you identify that are absent?

**Readings/Viewings**
Stanhope & Lancaster chapter Homelessness and Poverty
**Research Assignment 2**: Vulnerable Populations due

**Learning Activities**
1. Identify resources for people who have no health insurance and who are homeless in your local area
2. Research local agencies to obtain information on their programs. Evaluate the information
3. How will you use this information in a health-promoting manner?

**Research 2 Assignment**
Research Assignment 2 Vulnerable Populations Criteria
1. Refer to Stanhope and Lancaster Part VI Vulnerability: Predisposing Factors and select a vulnerable population.
2. Conduct a library search for a peer-reviewed article addressing evidence-based nursing or health care practices related to the vulnerable population.
3. Write a 500-word summary describing the reason the topic was selected, what aspects the research addressed, and why the peer-reviewed article was chosen.
4. Submit the summary and copy of the peer-reviewed article. Be prepared to discuss the summary in class.

**Week 6: Vulnerable populations: Hispanic and migrant**
Concept: Coping
Exemplars
- Casual beliefs
- Diet/nutrition
- Religious healing practices
- Alternative/complementary medicine
- Treatment preferences
- Birthrights
- Child-rearing practices
- Gender roles
- Rites of passage
- Eye contact
- Touch

**Prior to Class Assignment**
Review Understanding the Work of Nurse Theorists: M. Leininger's Culture Care: Diversity and Universality Theory at http://nursing.jbpub.com/sitzman/CH15PDF.pdf

**Readings/Viewings**
Stanhope & Lancaster chapter Cultural Influences in Nursing in Community Health
Stanhope & Lancaster chapter Rural Health and Migrant Health
**Family Assessment, Genogram, and Ecomap** due

**Learning Activities**
Research Hispanic and migrant health services and resources available in this area. What services are offered? What needed services can you identify that are absent?

**Family Assessment, Genogram and Ecomap Assignment**
1. Complete the Friedman Family Assessment, using the Friedman Family Assessment Model found in your Stanhope and Lancaster text.
2. Draw a three-generation genogram and ecomap representing the family on which you conducted your Friedman Family Assessment. Include a genogram, and ecomap, reflecting the family concepts in the Family Development and Family Nursing Assessment using APA format 6th edition.
3. Use Rubric for Family Assessment to evaluate your paper before submission.

4. Submit your completed assignment.

A genogram is a graphical representation of family structure. In its more complex forms, it can include representations of emotional relationships. Many family therapists, social workers, medical personnel and other professionals are trained to develop genograms to record family structure and to take note of family systems issues, including patterns of behavior, tension, or dysfunction. Clergy can often make good use of simple genograms when interviewing new members, wedding couples, or bereaved family members.
In a standard genogram, each generation is portrayed on different level, from oldest at the top to youngest at the bottom. Males are represented by squares, females by circles. Marriages are represented by horizontal lines. A single slash through a horizontal line represents a separation; a double slash, a divorce; and an X indicates the person is deceased.
Parenting is represented by vertical lines. There are three different kinds of vertical lines: solid for biological parentage, dotted for adoption, and thinner dots for foster parenting. The vertical lines for twins or multiple births come from the same point on the horizontal. Pregnancies are indicated by triangles. Stillbirths, miscarriages and abortions can be represented by half-size triangles cancelled.
Colored, wavy, curved, choppy and other forms of lines are can be used between figures on the genogram to indicate nature of interpersonal relationships, including abuse, manipulation, or other troubled relationships and emotional cut-offs. (You need not learn these symbols; their use is varied among different authors and practitioners. You may even wish to develop your own. Some can be found at http://www.genopro.com/genogram/emotional-relationships/
Standard rules for a genogram can be found at http://www.genopro.com/genogram/rules/

Read "Environmental Risk Assessment" and example in your Stanhope and Lancaster text.

**Week 7: Occupational Health Nursing**
Concept: Health Promotion
Exemplars
- Area agencies on aging
- Disability-related services
- School-based services
- Self-management programs
- Disease management
- Patient navigation services

**Prior to Class Assignment**
Review the Occupational Health History in the Stanhope & Lancaster text
Review:
OSHA.gov
CDC.gov/NIOSH
Application of the epidemiologic model in the Stanhope & Lancaster text

**Readings/Viewings**
Stanhope & Lancaster chapter The Nurse in Occupational Health

**Learning Activities**

1. In a group research and explain examples of biological, chemical, environmental/ mechanical, physical, and psychosocial workplace hazards.
2. Obtain a proposed standard for OSHA, critique it, and share your comments.

**Week 8: Emergency Preparedness**
Concept: Professionalism
Exemplars:

- Influential leadership
- Knowledgeable
- Skilled
- Therapeutic
- Accurate
- Focused
- Respectful
- Truthful
- Honorable

**Prior to Class Assignment**
Review:
Nursing Curriculum for Emergency Preparedness at
http://webapps.nursing.vanderbilt.edu/incmcemodules2/main.html

**Readings/Viewings**
Stanhope & Lancaster chapter Accidents and Injuries

**Learning Activities**
Research CDC website for emergency preparedness and planning. In small groups, discuss the nurse's role in emergency situations.

**Week 9: Natural and Man-made Disaster Management**
Concept: Professionalism
Exemplars:

- Influential leadership
- Knowledgeable
- Skilled
- Therapeutic
- Accurate
- Focused
- Respectful
- Truthful
- Honorable

**Prior to Class Assignment**
**Readings/Viewings**
Stanhope & Lancaster chapter Disaster management
**Community Assessment Group Paper** due

**Learning Activities**

Review American Red Cross Disaster Response
http://www.redcross.org/prepare/

**Guidelines for Community Assessment and Report**

A. Determine the team members and roles.
B. Plan how to accomplish the project, share the work and findings, and produce the formal report and presentation.

1. Review the Stanhope & Lancaster chapter Community Assessment and Evaluation.
2. Determine a community to assess. Identify the geographic parameters; describe the assigned community; and discuss the type of community (e.g. geographic, environmental, rural, or urban) to be assessed.
3. As part of the assignment, the group is expected to provide service to the community. Identify a need within the community, develop a plan to meet the need, and implement the plan as a service project for the community. The service project must be completed prior to the due date of the assignment.
4. Conduct a windshield survey of the community. Refer to the windshield survey guide: "How to Perform a Windshield Survey" at the end of the syllabus. Additionally, review the Stanhope & Lancaster windshield survey components as a guide.
5. Gather primary and secondary community assessment data on the identified community.
6. Assess for potential environmental hazards (air, water, soil, etc.) through an internet search on the community.
7. Identify the community needs, strengths, weaknesses, liabilities, and assets.
8. Relate the identified community needs, strengths, weaknesses, liabilities, and assets to Healthy People 2020 and Texas Health Care Report (www.texashealthcarereport.org).
9. Provide recommendations for community level interventions based on the identified needs, strengths, weaknesses, liabilities, and assets.
10. Identify two (2) wellness diagnoses for the community assessed.
11. Prepare a formal paper with references using APA format 6th edition and submit one group paper from the team.
12. Prepare a 15- to 20-minute presentation to be delivered to the class. (Refer to the course calendar.) Please do not exceed this time frame. Practice your presentation before the due date as you may not cover all the required material if your time runs out. If this occurs, it will be reflected in your presentation grade.
13. Complete a reflection journal for the community assessed. See Guidelines for Reflection Journal and due date for journal at Week 11.

**How to Perform a Windshield Survey**
Erica Roth

A windshield survey relies on observations for data and other information instead of directing questions to participants. Windshield surveys are named because the project is completed while the observers are riding in a car or walking through the targeted area.
Instructions and Needed Supplies:

- Maps
- Team of survey takers
- Survey questions
- Pens

- Clipboards
- Cameras, if applicable
- Snacks and water

Step 1
Develop survey questions that fit the definition and capabilities of a windshield survey. For example, if assessing the recycling program in your town, write down questions related to the number of recycling bins each house puts out and the types of material seen--and not seen--in the bins.
Step 2
Gather maps of the areas to be surveyed. Map out the route that will be taken through the area to be surveyed, along with an alternate route. Determine what time the survey will be taken and how many survey takers will be needed.
Step 3
Create a team who will perform the windshield survey. One person will drive the car as one to two other team members gather the data needed. Consider adding an additional person to the team to operate audio-visual equipment if still or video pictures are part of the survey.
Step 4
Equip the survey team with supplies, such as pens, clipboards and paper on which to take notes in addition to the survey questions. Water and snacks are suggested if the team will be on the road for long periods of time.
Step 5
Be sure each team member understands his/her job at the start of the windshield survey. The driver should drive as slowly as possible, without delaying traffic, to allow survey takers sufficient time to make their observations. Survey takers should take as many notes and pictures/videos as possible about what is seen in the area, even if the observations do not appear important or seem to answer the survey questions.
Step 6
Discuss the findings only after the windshield survey is complete, to allow all team members time to process all observations and pictures/videos seen.

**Week 10: Roles nurses in the community**
Concept: Health Promotion
Exemplars:

- Vaccinations
- Nutrition counseling
- Genetic counseling
- Injury prevention
- Environmental exposures
- Developmental screening
- Blood pressure screening
- Substance abuse screening

**Prior to Class Assignment**
Review the Health Insurance Portability and Accountability Act (HIPAA): What does it mean for public health nurses?

**Readings/Viewings**

Stanhope & Lancaster chapter Nursing Practice at the Local, State, and National Levels in Public Health Stanhope & Lancaster chapter The Nurse in the Schools

**Learning Activities**
1. Working in a group, determine the most pressing public health issue in your community and suggestions for improvement.
2. Imagine that you are a nurse in public health for a day. What would you like to accomplish?

**Week 11: Presentation of Community Assessments**
**Prior to Class Assignment**
**Reflection Journal on Community Assessment** due

**Learning Activities**
As a group, students present community assessments according to presentation rubric

**Guidelines for Reflection Journal**
The main purpose of the reflection paper is to enhance your experiential learning by prompting you to critically assess your experiences in relation to your larger educational path. A secondary purpose of the reflection paper is to promote experiential learning to members of the broader community.

Reflection papers should be typewritten and approximately 500 words in length.

The content of the reflection paper will vary depending on each student's project. In general, however, the paper should include the following components:

1. A brief overview of your project and your goals.
2. A detailed description of some aspect of your project or experience that you felt was particularly meaningful for you.
3. A reflective analysis of why this aspect of your project was particularly meaningful for you. This might include an assessment of your knowledge and/or attitudes before starting the project and how these have changed.
4. An overall assessment of what you have learned by doing this assignment, and how it relates to your current academic study and/or future aspirations.
5. A discussion of the results of the evaluation of the event/activity/initiative, if applicable.

**Writing a Reflection Paper**

THREE KEY QUESTIONS – WHAT? SO WHAT? NOW WHAT?

- What? Start by describing and examining what happened during your experience. This includes observations about your own and other people's thoughts, feelings, and behaviors.
- So what? Make meaning of 'what' happened. Move your thinking from description to analysis and interpretation. Explore how the academic concepts you are learning in your lectures and readings relate to your experiences. Explore and critique academic concepts by examining how theory both fits well with your experience and where there are gaps.
- Now what? Identify how what you have learned can be used in the real world. Explore how one's understanding of a social issue affects the solutions that are found. Explore how theory can be used to improve practice. Explore how practice can be used to improve theory.

References

Bringle, R.G. and Hatcher, J.A (2005). Reflection in service learning: Making meaning of experience. *Introduction to service-learning toolkit: Readings and resources for faculty*, (2nd ed.). Providence, RI: Campus Compact.

Scriven, M. and Paul, R. (n.d). *Defining critical thinking*. Retrieved January 4, 2008 from http://www.criticalthinking.org/aboutCT/define_critical_thinking.cfm

**Week 12: Presentation of Community Assessments**
**Learning Activities**
As a group, students present community assessments according to presentation rubric

**Week 13: Presentation of Community Assessments**
**Learning Activities**
As a group, students present community assessments according to presentation rubric

**Week 14: Presentation of Community Assessments**
**Learning Activities**
As a group, students present community assessments according to presentation rubric

**Rubric for Research Assignment**

Student Name_____ Date_____

| Criteria | 11 -15 Points | 6 -10 Points | 0-5 Points |
|---|---|---|---|
| Support from Literature | Support from the literature is present and includes a minimum of one scholarly in-text citation and matching reference | Support from literature is present (in-text citation and reference) but is not scholarly | No support from the literature |
| Application of Course Knowledge | Contributes unique perspectives or insights gleaned from personal experience or examples from the healthcare field | Limited application of course knowledge and demonstration of perspectives | Does not reflect application of course knowledge and personal insights or examples from healthcare |
| Organization | Presents information in logical, meaningful, and understandable sequence, clearly relevant to the assignment | Information is sometimes unclear and difficult to follow | Is not relevant to assignment |
| Grammar, Syntax, APA format | APA format, grammar, spelling, and/or punctuation are accurate, or with zero to three errors | Four to six errors in APA format, grammar, spelling, and syntax noted | Contains greater than six errors in APA format, grammar, spelling, and/or punctuation or repeatedly makes the same errors after faculty feedback |
| | 0 Points Lost | | -5 Points |
| Submission | Submitted by due date | | Did not submit by due date |
| | | **Total Points Earned** | |

COMMENTS

Faculty Signature_____Date_____

**Rubric for Family Assessment**

Student Name_____ Date _____

| Criteria | Possible Points | Earned Points |
|---|---|---|
| Genogram includes codes and lines to reflect composition by persons and relationships for three generations (as noted in Stanhope and Lancaster text) | 15 | |
| Ecomap context of family, including environmental data is shown (as noted in Stanhope and Lancaster text) | 6 | |
| Relationships are defined/identified, including identifying data, developmental stage and history of family (as noted in Stanhope and Lancaster text) | 8 | |
| Family characteristics are included (as noted in Stanhope and Lancaster text) | 8 | |
| Family structural and functional assessment, including stress and coping is complete (as noted in Stanhope and Lancaster text) | 8 | |
| Friedman Family health assessment is used (as noted in Stanhope and Lancaster text) | 10 | |
| Written in APA 6th edition format | 5 | |
| **Total Points** | **60** | |

COMMENTS

Faculty Signature _____ Date_____

**Collaborative Practice Group Presentation Grading Criteria**

**Purpose:** Students will demonstrate professional communication, use of presentation technology, effective group process, and presentation skills.

| **Professional Presentation** | **Points** | **Score** |
|---|---|---|
| • Introduce presentation topic(s) and objectives | | |
| • Cover required Group Presentation Objectives<br>○ Focused presentation on required objectives<br>○ Provided accurate information<br>○ Presented easy to understand material | | |
| • Utilize effective professional presentation skills<br>○ Maximum of 5-6 bullets per PowerPoint slide<br>○ Used professional PowerPoint template<br>○ Used one PowerPoint template for presentation<br>○ PowerPoint template color scheme easy to read<br>○ Font size readable at back of classroom | | |
| • Demonstrate effective communication skills<br>○ Used PowerPoint bullet points to guide presentation: Did not read slides<br>○ Spoke loudly enough to hear at back of classroom<br>○ Spoke to audience and made eye contact<br>○ Presentation flowed despite multiple speakers<br>○ Used professional language with no slang or colloquialisms | | |
| • Complete presentation within allotted time (15 minutes) | | |
| **Group Participation** | | |
| • Each group member presents | | |
| • Submit evaluation form for each group member <u>at beginning</u> of presentation* | | |
| • Submit evidence of group dynamics <u>at beginning</u> of presentation including summary of individual contributions and group communications | | |
| **TOTAL** | | |

***Faculty reserve the right to grade group members individually based on group participation feedback.**

**Evaluation of Participation in Group Presentation**

**Group Member Evaluated**_____ **Evaluator** _____

Your group presentation grade depends on your meeting the criteria of group participation. Peer input is needed to help evaluate the group efforts in order for the instructor to fairly evaluate the student's achievement of these criteria.

Directions

1. Read each item carefully and answer as objectively as you can.
8. Rate each group member (excluding yourself). Make any supporting comments you believe to be pertinent in the space provided.
9. Complete this form and return it to faculty at the beginning of the class on the day of your group's presentation.

| Group member | Never Almost Always | Comments |
|---|---|---|
| Met target dates for completing assignments | Never Almost Always | |
| Attended all group meetings | Never Almost Always | |
| Shared relevant professional literature articles with group prior to presentation | Never Almost Always | |
| Adequately analyzed the topic | Never Almost Always | |
| Contributed to but did not dominate group discussion | Never Almost Always | |
| Respected the rights of classmates/encouraged member participation | Never Almost Always | |
| Met the assigned tasks | Never Almost Always | |
| Demonstrated skill to encourage group interaction | Never Almost Always | |
| Fostered a sense of belonging within the group | Never Almost Always | |

Additional Comments:

Collin College

RN-to-BSN Program

Preceptor Guide

RNSG 3340 Population-Focused Community Health I/Clinical

This course introduces the concept of the community of persons/patients, families, and populations as the adult and geriatric patient in the healthcare system and the roles of the nurse in community services. Nurse roles include public policy, provision of primary care, prevention of disease or health risk, education and health promotion, and restoration.

RNSG 3450 Advanced Health Assessment/Clinical

This course is an in-depth coverage of a comprehensive health assessment with an emphasis on health promotion and how this concept is applied within nursing practice. The course focuses on the techniques of data collection and physical assessment and applying these across the lifespan and in a variety of diverse population groups and populations. This course lends itself to a concept-based approach.

RNSG 4345 Population-focused Community Health II/Clinical

This course introduces the concept of the community of persons/patients, families, and populations as the maternal and pediatric patient in the healthcare system and the roles of the nurse in community services. Nurse roles include public policy, provision of primary care, prevention of disease or health risk, education and health promotion, and restoration.

RNSG 4465 Leadership and Management/Clinical

This course emphasizes leadership and management theories in communication and conflict resolution, budgeting, human resource management, quality and safety, risk management, change, deletion, decision-making, and current issues and trends. Clinical experiences focus on management of issues and interactive observation of leaders and managers in a variety of settings.

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RN-to-BSN Program

Student Learning Outcomes

1. Use clinical reasoning and knowledge based on the nursing program of study, evidence-based practice outcomes, and research studies as the bases for decision-making and comprehensive, safe patient and population care
2. Demonstrate inquiry and analysis in applying patient care technologies and information systems to support safe nursing practice and population risk reduction.
3. Lead safety and quality improvement activities as part of the interdisciplinary team and as an advocate and manager of nursing care.
4. Manage care transitions and promote population risk reduction with diverse communities in collaboration with members of the interdisciplinary health care team.
5. Participates in monitoring institutional, professional, and public policy to maintain adherence to standards of practice within legal, ethical, and regulatory frameworks of the professional nurse.
6. Demonstrates leadership skills related to financial, human resource, clinical, and professional issues in providing and evaluating care
7. Demonstrate leadership and advocacy that reflects the values and ethics of the nursing profession.

Basis of Clinical

Overview

Students in the RN-to-BSN Program are required to take the following four (4) clinical courses as part of their nursing curriculum:

- RNSG 3340 Population-Focused Community Health I/Clinical
- RNSG 3450 Advanced Health Assessment/Clinical
- RNSG 4345 Population-Focused Community Health II/Clinical
- RNSG 4465 Leadership and Management/Clinical

Students are required to spend 64 hours (32 hours on site / 32 hours on project/paper) per course during the semester focused on clinical learning integral to the respective courses. Students spend their clinical hours at various community-based health or nursing sites relevant to each course. Designated preceptors provide supervision. **Clinical hours are fulfilled through an onsite clinical experience and through an offsite clinical related project and paper.**

Preceptors are clinically expert nurses who have preferable earned, at a minimum, the BSN degree and have two years of experience, as health care and community-based resources, preceptors contribute significantly to the BSN students' learning and professional socialization. Preceptors and faculty work collaboratively to maximize potential for student learning. *Students have the ability to contribute in choosing their own preceptor in the clinical courses.* If the student is unsure of possible preceptors or sites, a list of available sites will be supplied to the student. The student can also identify others who may be suitable. In any event, the student must notify the course faculty and/or clinical coordinator to ensure the preceptor and facility meets the guidelines of the RN-to-BSN Program. The clinical coordinator will ensure the site is suitable and will initiate a contract.

In consultation with their preceptors and faculty, students will determine the clinical activities consistent with the course objectives developed by the faculty. Students will work with their preceptor to define two (2) specific objectives they would like to achieve for the course. Students will be required to track their on-site clinical hours using the form provided within this guide. Students will also be required to have a minimum of one clinical site visit from their clinical coordinator during the semester.

Students can distribute their clinical hours across the semester to meet the course objectives or complete the hours in a more concentrated fashion. The student will work with the preceptor based on the student and preceptor needs. ***Ideally, no student will stay within his/her employing institution for the clinical experience. No student may be assigned to a unit or direct reporting department where he/she is employed.*** Clinical time for which students receive financial or other compensation may not be counted as clinical hours.

Students are responsible for meeting all requirements mandated in respective course syllabi, handbook, and the Preceptor Guide.

Process for Beginning Clinical

Course Faculty

- Provides student with a clinical course syllabus
- Provides student a clinical orientation

Student

- Attends orientation prior to start of clinical semester (in class)
- Completes pre-clinical requirements
    - Active, unencumbered Texas RN license
    - Health requirements
    - Criminal background check
    - Mandatory drug screening
    - Professional liability and health insurance
    - Cardio-pulmonary resuscitation (CPR) certification
    - Health Insurance Portability and Accountability Act (HIPPA) training
    - Identification badges and dress code requirements
- Provides preceptor with **Letter of Introduction**, **Preceptor Guide**, and **applicable syllabus** by electronic means prior to the start of clinical

Clinical Coordinator

- Approves clinical site
- Ensures student documentation completion and start date of clinical by second week of semester
- Completes a minimum of one clinical site visit per student per semester

Preceptor

- Completes Preceptor Contract and Preceptor Information and returns to Collin College RN-to-BSN Program Clinical Coordinator by the second week of clinical
- Collaborates schedule with student for clinical hours (32 hours on site)

Responsibilities for Students' Schedules and Reports

Faculty

- Works with student during the semester to develop clinical objectives and clarification on project expectations
- Ensures students have developed two (2) clinical learning objectives by the second week of the semester as part of their evaluation
- Ensures that all completed documentation from the Preceptor Guide has been collected and submitted by the preceptor and student by the assigned dates

Student

- Develops working relationship with agency and preceptor
- Coordinates scheduling or clinical hours with preceptor and agency
- Schedules one (1) visit with clinical coordinator and preceptor
- Develops Student Objectives by second week of the semester. (*Please write the objectives on the Preceptor Evaluation of Student Form.)* These are two main goals/learning objectives students want to accomplish through this experience
- Prepares for specific clinical agency experience by reading and orienting to site
- Participates in clinical as agreed upon with preceptor/faculty
- Develops proposal for project with preceptor/faculty by mid semester per course requirements
- Completes all clinical requirements by last week of the semester
- Submits final copy of project/paper by stated date on syllabus

Preceptor Forms and Instructions

**Preceptors are required to complete the following forms:**

- **Preceptor Information**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  *Due by week 2 of clinical*
  The information on this form is required by Collin College RN-to-BSN Program for accreditation purposes. Please ensure the student has completed his/her information at the top of the form.

- **RN-to-BSN Completion Program Institutional Placement Agreement:**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  This form **may** be required by your immediate supervisor to ensure they are aware of your participation and willingness to assist as a preceptor. **The form is not mandated by Collin College RN-to-BSN Program.** If required, provide to the assigned student.

- **Preceptor Contract:**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  *Due by week 2 of clinical*
  This form indicates your acceptance of the role as a preceptor with the assigned student

- **Preceptor's Evaluation of Student Performance: Clinical Evaluation Tool**
  *Email to the RN-to-BSN Program Course Faculty*
  *Due within a week of completing clinical hours*
  This form is to be completed by the preceptor. The preceptor can determine the most appropriate time to assess. However, the form must be completed and submitted no later than the last week of the semester for the student to be awarded a grade.

- **Preceptor's Interaction Regarding Faculty:**
  *Email to the RN-to-BSN Program Director*
  *Due within a week of completing clinical hours*
  This form should be completed by the preceptor at end of the clinical experience. The information you provide will assist us in determining how best the faculty can assist you in the future. We appreciate your time in providing your feedback.

Preceptor Information

*Please email to the RN-to-BSN Program Clinical Coordinator | Due by week 2 of clinical*

Course:

- ☐ RNSG 3340 Population-Focused Community Health I/Clinical
- ☐ RNSG 3450 Advanced Health Assessment/Clinical
- ☐ RNSG 4345 Population-Focused Community Health II/Clinical
- ☐ RNSG 4465 Leadership and Management/Clinical

Student_____

Work Phone_____ Home Phone_____

Cell Phone_____ E-mail_____

**Preceptor Information**

Preceptor Name and Credentials_____

Certifications_____

Official Title_____ E-mail_____

Address_____

Hospital/Agency Name_____

Hospital/Agency Mailing Address_____

Work Phone_____ Home Phone_____

Number of Years in Clinical Practice_____

RN License Number Validated (Done at Collin College)_____

Unencumbered: Yes_____ No_____

Educational Background (Required by ACEN accreditation)

| Name of School | Degree | Year Received |
|---|---|---|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

**To the Preceptor: Please copy the above information, keep a copy for yourself, and email to RN-to-BSN Program Clinical Coordinator**

Preceptor Contract

*Please email to the RN-to-BSN Program Clinical Coordinator | Due by week 2 of clinical*

I, _____ agree to serve as a preceptor for _____

Preceptor Name and Credentials Student Name

for course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

**Beginning Date**_____ **Completion Date**_____

I accept the following as responsibilities for the duration of the preceptorship, I will:

1. Serve as a resource person, role model, and consultant to the assigned student.
2. Coordinate the clinical experience with the student.
3. Recommend patient/client, family, and community assignments which will help the student integrate classroom theory.
4. Supervise the RN student as appropriate in the clinical settings.
5. Verify the presence of student at agreed upon clinical dates and times.
6. Assist in determining the degree to which the student has met the learning objectives during clinical.
7. Notify the school and student, if possible, at least two weeks in advance if unable to complete this contract.
8. Notify the faculty and clinical coordinator, as well as participating agencies, of any client incident requiring a formal report.
9. Notify the appropriate person in the clinical setting of the times the student will be in attendance.

I attest to the fact that the proposed student is not related to me, is not my immediate supervisor, and is not my employee or subordinate.

Preceptor Name and Title (type or print)_____

Preceptor Signature_____ Date_____

To Preceptors: Please return by the second week of the semester to the clinical coordinator

**Collin College RN-to-BSN Program course faculty is responsible for monitoring and evaluating clinical experience. These responsibilities include the following:**

1. Orient the preceptor to the goals and objectives of the curriculum and the course via the Preceptor Guide, course syllabus, and letter of introduction.
2. Provide appropriate resources for course content.
3. Provide supervision through telephone, e-mail, or conferences with students and preceptors.
4. Notify the preceptor if a decision is made to terminate the contract.

Institutional Placement Agreement

Faculty Signature_____ Date_____

**This form only needs to be completed if a supervisor requires permission prior to you serving as a preceptor in your facility.**

To: Preceptor and/or Supervisor

From: Director of Nursing

Please complete this form and return it to the Collin College RN-to-BSN Program.

I understand that _____ (preceptor's name), has agreed to serve as preceptor for _____ (student's name). I understand the time commitment and the possible need for accessibility to agency resources for completion of this clinical. This project has been approved by our agency and I support the preceptorship.

Administrator/Supervisor's name_____ Date_____

Name of agency_____

Preceptor Evaluation of Student Performance Instructions

*Please email to the RN-to-BSN Program Course Faculty.*

**Ongoing Assessment**

Your assessment of the RN-to-BSN completion student is important on an ongoing basis throughout the semester. If at any time you would like to request a meeting with the course faculty of Program Director, we encourage you to contact us.

When assessing adult learners, it may be helpful to review coaching information available in the addendum.

**When to assess**

We recommend that you meet with the student at:

- The beginning of the clinical to review the student's learning objectives and how best the student can meet these objectives
- During the semester to monitor the student's progress on an ongoing basis
- Final evaluation to determine the student's performance and verify completion of the clinical requirements

Preceptor's Interaction Regarding Faculty

*Please email to the RN-to-BSN Program Director*

To improve the RN-to-BSN Program for our students, clinical agencies, and preceptors, we welcome any feedback that you feel is valuable in assisting us with this mission.

**Collin College Course Faculty's Name**_____

| **Survey** | **Yes** | **No** |
|---|---|---|
| 1. Did you receive information from the RN-to-BSN Nursing Program in a timely manner prior to the start of the quarter? | | |
| 2. Did the course faculty provide his/her contact information to you? | | |
| 3. Did the course faculty provide you with adequate information to facilitate the student in the clinical component of this course? | | |
| 4. Would you recommend being a preceptor to others? | | |
| 5. Would you recommend this program to others? | | |
| 6. Is the one clinical visit enough to assist you in the role as a preceptor? | | |
| a. If the visit was not enough would you like more or less? Please circle | **More** | **Less** |

**Other comments?** _____

Preceptor Name_____

If you would like to be contacted about your comments, please provide a contact number.

Phone_____

Thank you!

**Students are responsible for completing and/or maintaining the following tasks and forms:**

- **Scheduling of Clinical Site Visits by telephone or electronic means**
  You must schedule one clinical site visit during the semester between the preceptor, yourself, and clinical coordinator

  Please adhere as closely to the following timelines for visits as possible

  - **The first site must be within the first half of the course start date**
  - **If the timeline above does not meet he needs of the preceptor, please contact your clinical coordinator**

- **Documentation of On-Site Clinical Experience**

  This form is to be maintained by the student on a weekly basis. The student is required to have the preceptor sign the form to verify completion of on-site clinical time. The completed document is to be given to your course faculty at the end of the semester.

- **Documentation of Project Hours Clinical Experience**

  This form is to be maintained by the student on a weekly basis. The student is required to have the preceptor sign the form to verify completion of project hours for clinical time. The completed document is to be given to your course faculty at the end of the semester.

- **Student's Assessment of Experience with Preceptor**

  This form is to be completed by the student and to be turned in to his/her course faculty at the end of the semester.

Documentation of On-Site Clinical Experience

*Please submit this form to the RN-to-BSN Program Course Faculty.*

Student: Fill out the information for your preceptor to sign

Preceptor: Your signature verifies the accuracy of the student's information

Student_____ Preceptor/Agency_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

| Date/Hours | Activity (Brief description) | Subtotal Hours |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Total Hours | |

Student Signature_____ Date_____

Preceptor Signature_____ Date_____

*Please submit this form to the RN-to-BSN Program Course Faculty prior to the end of the semester.*

Student: Fill out the information for your course faculty to sign

Student_____ Preceptor/Agency_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

| Date/Hours | Activity (Brief description) | Subtotal Hours |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Total Hours | |

Student Signature_____ Date_____

Preceptor Signature_____ Date_____

Student's Assessment of Experience with Preceptor

*Please submit this form to the RN-to-BSN Program Course Faculty prior to the end of the semester.*

Student_____

Preceptor_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

Please use the following rating scale when evaluating the statements about your preceptor

1= Satisfactory 2= Needs Improvement 3= Unsatisfactory

| | | | |
|---|---|---|---|
| Preceptor as a Role Model | | | |
| 1. The preceptor met with me at the agreed upon times. | 1 | 2 | 3 |
| 2. The preceptor provided for open communication and trust during my experience. | 1 | 2 | 2 |
| 3. The preceptor was supportive of my efforts. | 1 | 2 | 3 |
| Preceptor as a Resource | | | |
| 4. The preceptor assisted me with needed resources. | 1 | 2 | 3 |
| 5. The preceptor provided constructive feedback. | 1 | 2 | 3 |
| Preceptor as a Designer of Instruction | | | |
| 6. The preceptor provided me with and adequate orientation to the facility and role. | 1 | 2 | 3 |
| 7. The experiences I participated in were meaningful and met the course and my objectives. | 1 | 2 | 3 |
| 8. My time was optimized wisely when I was with the preceptor. | 1 | 2 | 3 |
| Preceptor as a Supervisor | | | |
| 9. My preceptor provided adequate time for evaluation. | 1 | 2 | 3 |
| 10. I would recommend this preceptor experience for other students. | 1 | 2 | 3 |

Comments_____

_____

_____

Addendum

**A Word About Coaching**

The role of the preceptor includes coaching as well as teaching. Using the five-step coaching process, you can effectively guide your preceptee toward achieving specified learning goals.

**Step 1: Clarify the work activities**

At the beginning of the shift, collaborate with the preceptee to define unpredictable work activities and plan a time line indicating how, when, and by whom each activity is to be done (Ulrich & Haffer, 2001).

**Step 2: Review process and potential or real problems**

Take five (5) minutes at the end of each shift (and PRN) to analyze the progress towards goal attainment. The dialogue should be mutually determined. Offer positive and critical feedback using neutral communication (Ulrich & Haffer, 2001).

**Step 3: Set priorities**

Collaborate with the preceptee to prioritize problems, working at meeting the challenges of the most important ones first (Ulrich & Haffer, 2001).

**Step 4: Set objectives for goal attainment**

Mutually define a specific goal for the preceptee to work on and develop interventions for attaining the goal. Include time frames and deadline dates (Ulrich & Haffer, 2001).

**Step 5: Review and evaluate the results**

Together, review the preceptee's accomplishments (Ulrich & Haffer, 2001).

Reference

Ulrich, S. & Haffer, A. (2001). *Preceptor: A nurse's guide to mentoring.* Philadelphia; F.A. Davis Company.

**Collin College**
**RN-to-BSN Program**
**Clinical Evaluation Tool**

Student: _____ Date_____ Clinical Faculty:_____

Course Number: Semester_____
Year_____

Preceptor's Name and Initials: _____

Clinical Site/Hospital and Unit:_____

Date of Evaluation & Preceptor Initial: **Midterm: _____ Final:_____**

**Instructions:**

This evaluation will be completed and reviewed by faculty after the first clinical week, midterm, and the end of the clinical. Additional evaluations may be initiated by preceptor, student, or faculty at any time during the clinical experience. Weekly reviews are encouraged. Preceptor, student, and/or faculty may include additional objectives as deemed appropriate. Comments are to be written at the end of each evaluation with date and signatures. Extra comments pages may be included.

The signature page will be signed by the preceptor, student and faculty at the end of each evaluation session: First Week, Midterm, Final, and others as needed.

**Rating Criteria of Students performance of TX BON Competencies:**

Clinical grades are Pass/Fail. **Students MUST maintain and provide safe practice standards AT ALL TIMES.** Any behaviors of omission or commission of an act that may endanger a client's physical or emotional safety or wellbeing, or any evidence of impaired judgment due to substance use constitutes unsafe practice. **Students that demonstrate unsafe practice will be removed from the clinical setting and will either complete mandatory remediation and/or fail the course. *Any unsafe act will be reported to the faculty immediately and the student will not be allowed to continue the clinical rotation. *

A student must be truthful in all documentation, maintain patient confidentiality, respect patient rights and adhere to the grooming and dress code of the School of Nursing and the clinical agency.

All competencies stated are MINIMAL clinical performance standards. Students MUST meet this criteria-AT ALL TIMES. Failure to meet the MINIMAL criteria AT ANY TIME constitutes automatic failure of the course. In the event that the student fails to meet the minimal criteria, the student will be removed from patient care and the faculty should be contacted immediately. Behaviors should be documented in the comments sections and signed by the preceptor. ***If there is a limited opportunity regarding the minimal criteria, a No Opportunity (NO) should be documented for that evaluation and comments to why this opportunity was not available.***

****Pass-Achieving and maintain minimal competency in every area of clinical performance at all times.**

****Fail-non-achievement of minimal competency in any one or more areas of clinical performance at any time.**

The nursing clinical evaluation is based on the Board of Nursing (BON) Baccalaureate competencies in the areas of Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team.

Preceptor will score each section using NO, S, or U:

- NO = No opportunity (comments must be given)
- NI = Needs Improvement **(ONLY TO BE USED AT MIDTERM);**

  demonstrates minimum clinical performance standards
- S = satisfactory progress; demonstrates expected behaviors consistently
- U = unsatisfactory; Does not demonstrates expected behaviors consistently**; fail;**

  **comments must be given**

| **MEMBER OF THE PROFESSION** | | |
|---|---|---|
| **Competency A: Function within the nurse's legal scope of practice and in accordance with the policies and procedures of the employing health care institution.**<br>**Course Objective #1:** Analyze local, state, and national public health system components, policies, missions, goals, and programs.<br>**Clinical Objective #4:** Apply relevant local, state, and national regulations and policies that affect addressing the health needs of the specific-population community assessed. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| **1)** *Performs within the scope and limitation of ability. Respects patient autonomy in health care decisions.* | | |
| ***2)*** *Practices according to Collin College nursing program and clinical agency policies and procedures.* | | |
| ***3)*** *Respects patient confidentiality in accordance with HIPPA regulations at all times. Follows agency guidelines and policies related to patient care.* | | |
| ***4)*** *Provides holistic care that addresses the needs of diverse individuals across the lifespan.* | | |
| ***5)*** *Provides culturally sensitive health care to patients and families.* | | |

| | | |
|---|---|---|
| ***6)*** *Practices nursing in a caring, nonjudgmental, non-discriminatory manner.* | | |
| ***7)*** *Applies knowledge of facility regulations when accessing client records.* | | |
| **Competency B: Assume responsibility and accountability for the quality of nursing care provided to patients, families, populations and communities.**<br>**Course Objective #3:** Differentiate the roles of nurses in community-based practice for population-specific persons/patients, families and populations within culturally diverse communities.<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Complies with professional appearance requirements according to Collin College nursing program standards and policies. Uniform is clean and non-wrinkled; shoes are clean; Hair is clean, trimmed and off the shoulders; Tattoos and body piercings are not visible.* | | |
| ***2)*** *Is prepared for patient care with knowledge and required paperwork.* | | |
| ***3)*** *Reports to unit on time and notifies faculty/staff regarding absence or lateness for clinical experience.* | | |
| ***4)*** *Proactively manages priorities in patient care and reports changes in patient status to staff and instructor in a timely manner.* | | |
| ***5)*** *Participates in post conference.* | | |
| ***6)*** *Is receptive to constructive criticism.* | | |
| ***7)*** *Evaluates self and uses feedback from instructor to modify and improve practice.* | | |
| ***8)*** *Documents patient care with accuracy and thoroughness and in accordance with agency policy or as designated by faculty.* | | |
| **Competency C: Promote the practice of professional nursing through leadership activities and advocacy**<br>**Clinical Objective #6:** Use introspection and conscious examination of personal beliefs and value systems to increase sensitivity, respect, and caring for diverse populations. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Promotes positive image of nursing and Collin College.* | | |
| **2)** *Demonstrates ability to negotiate roles between fellow students and nurse technicians in order to impact positive outcomes for patient.* | | |
| ***3)*** *Serves as a positive role model for students, peers, and members of the interdisciplinary health care team.* | | |

| **Competency D: Demonstrate responsibility for continued competence in nursing practice and develop insight through reflection, self-analysis, self-care, and lifelong learning.**<br>**Clinical Objective #1:** Research local, state, and federal databases to conduct a population-specific community health assessment and proposal for addressing needs.<br>**Course Objective #4:** Explain epidemiologic, social, political, economic, and cultural trends that affect the health status of individuals, families, populations, and communities. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Seeks appropriate learning experiences.* | | |
| ***2)*** *Applies research findings and principles of research to patient care.* | | |
| ***3)*** *Uses performance and self-evaluation processes to improve own practice and professional growth.* | | |

**PROVIDER OF PATIENT-CENTERED CARE**

| **Competency A: Use systematic critical thinking to integrate knowledge from a liberal arts, sciences, and nursing education, nursing science, evidence-based practice guidelines, and research studies as the basis for clinical decision making and comprehensive patient care.**<br>**Course Objective #4:** Explain epidemiologic, social, political, economic, and cultural trends that affect the health status of individuals, families, populations, and communities.<br>**Clinical Objective #5:** Analyze and propose culturally sensitive and developmentally appropriate health services and education programs to maintain or restore health status. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Uses critical thinking by separating relevant from irrelevant data and reaches logical conclusions.* | | |
| ***2)*** *Prioritizes needs and interventions when caring for multiple patients.* | | |
| ***3)*** *Applies problem solving techniques while providing care for multiple patients.* | | |
| ***4)*** *Use clinical judgment to identify patient needs/nursing diagnoses.* | | |
| **Competency B: Determine the physical and mental health status and health needs and preferences of culturally, ethnically, and socially diverse patients, families, populations and communities based upon interpretation of comprehensive health assessment findings compared with evidence-based health data and a synthesis of knowledge derived from a liberal arts, sciences, and nursing education.**<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |

| **Course Objective #6:** Use introspection and conscious examination of personal beliefs and value systems to increase sensitivity, respect, and caring for diverse populations. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Collects patient data from appropriate sources, i.e. patient record, health team members, patient/family interviews, and physical assessment.* | | |
| ***2)*** *Assesses and relates pertinent lab values to patient assessment. Relates lab trends to patient's conditions and follows through with appropriate action.* | | |
| ***3)*** *Assesses co-morbidities of patient and relates to current conditions.* | | |
| ***4)*** *Patient assessments reflect knowledge of bio-psychosocial-cultural and spiritual dimensions of patient care.* | | |
| ***5)*** *Validates assessment data against criteria.* | | |
| ***6)*** *Documents assessment data in correct format.* | | |
| **Competency C: Synthesize comprehensive assessment data to identify problems, formulate goals/outcomes and develop plans of care for patients, families, populations, and communities using evidence-based practice in collaboration with patients and the interdisciplinary health care team.**<br>**Course Objective #1:** Analyze local, state, and national public health system components, policies, missions, goals, and programs.<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Establishes priority diagnoses based on assessment findings.* | | |
| ***2)*** *Develops short term goals (outcome criteria) that are individualized, realistic, specific, measurable, time oriented and support the nursing diagnoses.* | | |
| **Competency D: Provide safe, compassionate, comprehensive nursing care to patients, families, populations, and communities, through a broad array of health care services.**<br>**Clinical Objective #2:** Integrate concepts of health disparities, health literacy, and cultural belief systems in the population-specific community assessment.<br>**Course Objective #6:** Use introspection and conscious examination of personal beliefs and value systems to increase sensitivity, respect, and caring for diverse populations. | | |
| **CRITERIA** | Preceptor's Evaluation | Preceptor's Evaluation |

| | Mid Rotation | End of Rotation |
|---|---|---|
| ***1)*** *Assumes a leadership role on behalf of the patient with other members of the interdisciplinary team to procure resources for patient care.* | | |
| ***2)*** *Advocates for policies to support health care access and quality for vulnerable populations.* | | |
| **Competency E: Implement plan of care within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles for patients, families, populations, and communities.**<br>**Course Objective #1:** Analyze local, state, and national public health system components, policies, missions, goals, and programs.<br>**Clinical Objective #4:** Apply relevant local, state, and national regulations and policies that affect addressing the health needs of the population-specific community assessed. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Nursing interventions are patient specific and include assessment, monitoring, acting and teaching actions.* | | |
| ***2)*** *Verbalizes rationale for interventions using evidence-based findings.* | | |
| ***3)*** *Administers medications using the 6 rights.* | | |
| **Competency F: Evaluate patient, family, population, and community outcomes in response to interventions compared to evidence-based practice, benchmarks, and research findings, and plan follow-up nursing care.**<br>**Course Objective #2***:* Compare maternal and pediatric community populations with differing needs and resources and match with available services or identify needed services/resources.<br>**Clinical Objective #2:** Integrate concepts of health disparities, health literacy, and cultural belief systems in the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Applies research findings and principles of research to patient care.* | | |
| ***2)*** *Accurately interprets efficacy of interventions for positive patient outcomes.* | | |
| ***3)*** *Determines if short term goals (patient outcomes) were met.* | | |
| ***4)*** *Interprets efficacy of interventions for positive patient outcomes.* | | |
| ***5)*** *Modifies goals based on evaluation.* | | |
| ***6)*** *Revises interventions based on outcome findings.* | | |
| **Competency G: Develop, implement, and evaluate teaching plans for patients, families, populations and communities to address health promotion, maintenance and restoration, and population risk reduction.** | | |

| **Clinical Objective #3**: Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Communicates reasons and rationale for deviation from plan of care.* | | |
| ***2)*** *Assesses and responds to the learning needs of the patient by providing information needed to make health choices.* | | |
| **Competency H: Coordinate human and material management resources for patients, families, populations and communities.**<br>**Course Objective #2:** Compare population-specific community populations with differing needs and resources and match with available services or identify needed services/resources.<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Assembles, prepares and organizes equipment prior to performing procedures.* | | |
| ***2)*** *Prioritizes assignments and completes tasks in expected time.* | | |
| ***3)*** *Identifies providers and resources to meet the needs of patients.* | | |
| ***4)*** *Works with family and community resources to develop and/or strengthen support systems for patient.* | | |

**PATIENT SAFETY ADVOCATE**

| **Competency A: Demonstrate knowledge of the Texas Nursing Practice Act and Texas Board of Nursing rules that emphasize safety as well as all federal, state, and local government and accreditation organization safety requirements and standards.**<br>**Course Objective #1:** Analyze local, state, and national public health system components, policies, missions, goals, and programs.<br>**Clinical Objective #4:** Apply relevant local, state, and national regulations and policies that affect addressing the health needs of the population-specific community assessed. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Uses standards of nursing practice to provide care.* | | |
| ***2)*** *Reports changes in patient condition to staff and instructor in a timely manner.* | | |
| **Competency B: Implement measures to promote quality and a safe environment for patients and others.** | | |

| **Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment.<br>**Course Objective #5:** Analyze and propose culturally sensitive and developmentally appropriate health services and education programs to maintain or restore health status. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Supports the patient's right of self-determination.* | | |
| ***2)*** *Informs patients regarding their plan of care.* | | |
| ***3)*** *Safely performs procedures and nursing measures.* | | |
| ***4)*** *Implements evidence-based findings to prevent risk of patient harm.* | | |
| ***5)*** *Seeks assistance when behavior or judgment is outside of individual knowledge and/or expertise.* | | |
| ***6)*** *Implements measures to prevent exposure to infectious pathogens and communicable conditions.* | | |
| ***7)*** *Uses universal precautions in all patient care settings.* | | |
| ***8)*** *Accurately identifies patients by using two identifiers.* | | |
| ***9)*** *Requests coverage for patient care during breaks and lunch.* | | |
| ***10)*** *Documents and reports reactions to medications, treatments and procedures.* | | |

| **Competency C: Formulate goals and outcomes using an evidence-based and theoretical analysis of available data to reduce patient and community risks.**<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Implements evidence-based findings to prevent risk of patient harm.* | | |
| ***2)*** *Clarifies any order or treatment regime believed to be inaccurate, non-efficacious or potentially harmful.* | | |
| ***3)*** *Uses standard references to compare expected and achieved outcomes of nursing care.* | | |
| **Competency D: Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.** | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Seeks assistance as needed.* | | |
| ***2)*** *Follows up on instructor questions, comments and/or suggestions.* | | |

| **Competency E: Comply with mandatory reporting requirements of the Texas Nursing Practice Act.** | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| *1) Reports unsafe practices of health care delivery using appropriate channels of communication.* | | |
| *2) Reports safety incidents in a timely manner and follows with detailed documentation.* | | |
| **Competency F: Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.** | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| *1) Makes assignments and delegates tasks, ensuring clear communication regarding other caregivers' levels of knowledge, skills, and abilities.* | | |

| **MEMBER OF THE HEALTH CARE TEAM** | | |
|---|---|---|
| **Competency A: Cooperate, collaborate, and communicate with patients, families, populations, communities, and the interdisciplinary health care team to plan, deliver, and evaluate care.**<br>**Course Objective #2***:* Analyze and propose culturally sensitive and developmentally appropriate health services and education programs to maintain or restore health status.<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Validates priority concerns with patient and family.* | | |
| *2) Uses therapeutic communication techniques and management.* | | |
| *3) Involves patient, families and other health care professionals for planning health care.* | | |
| *4) Acknowledges patient and family coping needs during alterations in health status.* | | |
| **Competency B: Serve as health care advocate in monitoring and promoting quality and access to health care for patients, families, populations, and communities.**<br>**Clinical Objective #2:** Integrate concepts of health disparities, health literacy, and cultural belief systems in the population-specific community assessment.<br>**Course Objective #3:** Differentiate the roles of nurses in community-based practice for population-specific persons/patients, families and populations within culturally diverse communities. | | |

| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
|---|---|---|
| ***1)*** *Uses organizational and management skills when using resources to meet goals/outcomes and enhance quality of nursing care and level of patient satisfaction.* | | |
| **Competency C: Use multiple referral resources for patients, families, populations, and communities, considering cost, confidentiality, effectiveness and efficiency of care, continuity and continuum of care, and health promotion, maintenance, and restoration.** **Course Objective #2:** Compare population-specific community populations with differing needs and resources and match with available services or identify needed services/resources. **Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Assesses adequacy of the support system of patients.* | | |
| ***2)*** *Identifies providers and resources in the community to meet the needs of patients.* | | |

| **Competency D: Communicate and collaborate in a timely manner with members of the interdisciplinary health care team to promote and maintain the patient's optimal health status.** | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Seeks opportunities to offer help to staff and fellow students.* | | |
| ***2)*** *Uses organizational and management skills when using resources to meet goals/outcomes and enhance quality of nursing care and level of patient satisfaction.* | | |
| **Competency E: Communicate and manage information using technology to support decision making to improve patient care and delivery systems.** | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Collaborates with health care team to use human and material resources for optimal legal and cost-efficient care.* | | |
| **Competency F: Assign and/or delegate nursing care to other members of the health care team based on an analysis of patient or organizational need.** | | |
| **CRITERIA** | Preceptor's Evaluation | Preceptor's Evaluation |

| | Mid Rotation | End of Rotation |
|---|---|---|
| ***1)*** *Begins delegating and supervising appropriate care to non-licensed personnel.* | | |
| **Competency G: Supervise nursing care provided by others for whom the nurse is responsible by using best practices of management, leadership, and evaluation.** | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ******Non-applicable for this course****** | | |

| **Midterm Comments:** | |
|---|---|
| Students:<br>Identify 3 specific strengths:<br><br>Identify 3 areas for growth: | Preceptor: |

Student Signature & Date: _____

Preceptor Signature & Date: _____

| **Final Comments:** | |
|---|---|
| Students:<br>State what the community rotation has taught you about nursing care:<br><br>What areas of community will you take with you to practice after graduation: | Preceptor:<br><br>Pass ☐<br>Fail ☐ |

Student Signature & Date: _____

Preceptor Signature & Date: _____

| **Clinical Faculty Comments:** |
|---|
| Clinical Faculty<br>Comments:<br><br>Pass ☐<br>Fail ☐ |

Clinical Faculty Signature & Date: _____

Intentionally left blank

Student Name_____ Date_____

**Rubric for Community Assessment Report**

| OVERVIEW | Possible Points | Earned Points |
|---|---|---|
| Description of the community<br>a. History<br>b. Type of community (geographic, environmental, rural, or urban) | 6 | |
| Community as a place<br>a. Description, Identifying data<br>b. Location<br>c. Topography<br>d. Climate | 6 | |
| Boundaries<br>a. Area in square miles | 6 | |
| Environment<br>a. Sanitation, water supply, sewage, garbage, trash<br>b. Pollutants: toxic substances, animal reservoirs or vectors, flora and fauna<br>c. Air quality, color, odor, particulates<br>d. Food supply, sources, preparation | 6 | |
| Housing | 10 | |

| | | |
|---|---|---|
| a. Types of Housing, public, private<br>b. Condition of housing<br>c. Percent owned, rented<br>d. House for special populations:<br>e. Near Homeless<br>f. Homeless<br>g. Frail Elders | | |
| Leading industries and occupations | 5 | |
| People of the community<br>a. Population profile<br>b. Total population<br>c. Population density<br>d. Population changes last 10 years<br>e. Population per square mile<br>1. Mobility<br>2. Types of families<br>Vital and demographic population characteristics | 10 | |

| | | |
|---|---|---|
| a. Age distribution<br>b. Sex distribution<br>c. Race distribution<br>d. Ethnic group compositions and distribution<br>e. Socioeconomic status<br>1. Family income<br>2. Major occupations<br>3. Estimated level of unemployment<br>4. Percent below the poverty level<br>5. Percent retired<br>f. Educational level<br>g. Religious distribution<br>h. Marriage and divorce rates<br>i. Birth and death rates<br>Leading causes of morbidity<br>a. Incidence rates (specific diseases)<br>b. Prevalence rates (specific diseases) | | |

| | | |
|---|---|---|
| Mortality Characteristics<br>a. Crude death rate<br>b. Age-specific death rate<br>c. Infant mortality rate<br>d. Maternal mortality rate<br>e. Leading cause of death | | |
| Community as a Social System<br>a. Government and leadership<br>1. Type of government (mayor, city manager, board of supervisors)<br>2. City offices (location, hours services, access)<br>b. Education<br>1. Public education<br>2. Private education<br>3. Libraries<br>4. Services for special populations<br>i. Pregnant teens<br>ii. Adults with special problems | 10 | |

| | | |
|---|---|---|
| iii. Children and adults developmentally disabled<br>iv. Children and adults blind or deaf<br>c. Transportation<br>1. Transport systems, bus, suburban train, private auto, air, streetcar, other<br>2. Transportation provisions for special populations<br>i. Elders<br>ii. Homeless or near homeless<br>iii. Adults with disabilities<br>d. Communication resources<br>1. Newspapers<br>2. Radio stations<br>3. Television<br>4. Key community leaders and/or decision makers<br>5. Internet web sites<br>6. Other<br>e. Religious resources | | |

| | | |
|---|---|---|
| 1. Churches and other religious facilities<br>2. Community programs and services (health ministries, parish nursing)<br>3. Major religious leaders | | |
| f. Recreation resources<br>1. Public and private facilities<br>2. Programs for special populations groups<br>i. People with disabilities<br>ii. Elders<br>iii. Blind and deaf<br>iv. Other | 6 | |
| g. Community safety (protection)<br>1. Fire protection (describe)<br>2. Police protection, including county detention facilities (describe)<br>3. Disaster preparation | 10 | |
| h. Stores and shops<br>1. Types and location | 6 | |

| | | |
|---|---|---|
| 2. Access | | |
| Community Health Facilities and resources (access, availability, eligibility)<br>a. Health systems<br>1. Hospitals (type and services, acute care facilities<br>2. Rehabilitation health care facilities: physical conditions, alcoholism, and substance abuse<br>3. Home health services, hospice and home health agencies<br>4. Long-term care facilities<br>5. Respite care for special populations<br>6. Ambulatory services<br>i. Hospital ambulatory clinics<br>ii. Public health service clinics<br>iii. Nursing centers<br>iv. Community mental health centers<br>7. Special health services for targeted populations<br>i. Pre-school<br>ii. School age<br>iii. Adult or young adult | 30 | |

| | | |
|---|---|---|
| iv. Adults and children with handicaps | | |
| 8. Other | | |
| i. School health services | | |
| ii. Occupational health services | | |
| b. Public Health and Social services | | |
| 1. Health Department programs | | |
| 2. Social services | | |
| i. Department of Social Services (county) | | |
| ii. Social Security location, availability, eligibility | | |
| iii. Official public and social programs (provide list) | | |
| c. Voluntary Health Organizations | | |
| 1. Cancer Society | | |
| 2. Heart association | | |
| 3. Red Cross | | |
| 4. Women's shelter | | |
| 5. Suicide prevention | | |

| | | |
|---|---|---|
| 6. Rape crisis<br>7. Family Services<br>8. Catholic Charities<br>9. Alzheimer's Association<br>10. Lung Association<br>11. Diabetes Association<br>d. Health-related Planning Groups<br>1. Area Agency on Aging<br>2. Senior Coordinating Councils<br>3. High-risk infant coordinating councils<br>4. Healthy Communities Coordinating teams<br>5. Multi-purpose agencies<br>6. Teen violence prevention planning teams | | |
| SUMMARY<br>a. What are the major assets of the community and from whose perspective (healthcare providers, community members, etc.)<br>1. Place | 9 | |

| | | |
|---|---|---|
| 2. People<br>3. Resources<br>4. Accessibility<br>5. Acceptability<br>6. Public and private<br>b. What are the major health problems or needs?<br>1. Place<br>2. People<br>3. Resources<br>c. Identify and propose the contributions of nurses and other health care providers, community leaders, residents to the solutions<br>d. Which of the problems or needs have priority? | | |
| **Total Points** | **120** | |

Faculty Signature_____ Date_____

COMMENTS

**Rubric for Reflection Journal**

Student Name _____ Date _____

| Criteria | Exemplary | Proficient | Satisfactory | Unsatisfactory-Beginning | Total |
|---|---|---|---|---|---|
| Content Reflection | 45-50 points | 40-44 points | 35-39 points | 0-34 points | /50 |
| | Reflection demonstrates a high degree of critical thinking in applying, analyzing, and evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments. Insightful and relevant connections made through contextual explanations, inferences, and examples. | Reflection demonstrates some degree of critical thinking in applying, analyzing, and/or evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments. Connections made through explanations, inferences, and/or examples. | Reflection demonstrates limited critical thinking in applying, analyzing, and/or evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments Minimal connections made through explanations, inferences, and/or examples. | Reflection lacks critical thinking. Superficial connections are made with key course concepts and course materials, activities, and/or assignments | |
| Personal Growth | 28-30 points | 26-27 points | 24-25 points | 0-23 points | /30 |
| | Conveys strong evidence of reflection on own work with a personal response to the self-assessment questions posed. Demonstrates significant personal growth and awareness of deeper meaning through inferences made, examples, well developed insights, and substantial depth in perceptions and challenges. Synthesizes current experience into future implications. | Conveys evidence of reflection on own work with a personal response to the self-assessment questions posed. Demonstrates satisfactory personal growth and awareness through some inferences made, examples, insights, and challenges. Some thought of the future implications of current experience. | Conveys limited evidence of reflection on own work in response to the self-assessment questions posed. Demonstrates less than adequate personal growth and awareness through few or simplistic inferences made, examples, insights, and/or challenges that are not well developed. Minimal thought of the | Conveys inadequate evidence of reflection on own work in response to the self-assessment questions posed. Personal growth and awareness are not evident and/or demonstrates a neutral experience with negligible personal impact. Lacks enough inferences, examples, personal insights and challenges, and/or future implications are overlooked. | |

| | | | | | |
|---|---|---|---|---|---|
| | | | future implications of current experience. | | |
| Writing Quality | 18-20 points | 16-17 points | 14-15 points | 0-13 points | /20 |
| | Well written and clearly organized using standard English, characterized by elements of a strong writing style and basically free from grammar, punctuation, usage, and spelling errors. | Above average writing style and logically organized using standard English with minor errors in grammar, punctuation, usage, and spelling. | Average and/or casual writing style that is sometimes unclear and/or with some errors in grammar, punctuation, usage, and spelling. | Poor writing style lacking in standard English, clarity, language used, and/or frequent errors in grammar, punctuation, usage, and spelling. Needs work. | |
| Timeliness | 0 points deducted | Deduct 1-5 points | Deduct 6-10 points | Deduct 11 points | /-- |
| | Journal reflection is submitted on or before deadline. | Journal reflection is submitted within 1 day (24 hours) after the deadline. | Journal reflection is submitted 1-2 days (25-48 hours) after the deadline. | Journal reflection is submitted 2-3 days (49-72 hours) after the deadline. | |
| | | | | **Total Points (sum of 4 Criteria)** | **/100** |

Faculty Signature_____

Date_____

COMMENTS

**Collin College RN-to-BSN Program**
**RNSG 3450**

**COURSE INFORMATION**
**Course Number:** RNSG 3450
**Course Title:** Advanced Health Assessment
**Course Description:** An in-depth coverage of a comprehensive health assessment with an emphasis on health promotion and how this concept is applied within nursing practice. This course focuses on the techniques of data collection and physical assessment and applying these across the lifespan and in a variety of diverse population groups and populations. This course lends itself to a concept-based approach.
**Course Credit Hours:** 4
Lecture Hours: 3
Clinical/Lab Hours: 1

**Prerequisite:** Admission in RN-to-BSN program

**Student Learning Outcomes:**
Upon completion of this course the student will:
1. Demonstrate the nurse's role in health assessment for diverse population groups including various age and cultural groups
2. Use evidence based comprehensive assessment techniques as a basis for clinical reasoning and decision making for safe population
3. Use effective communication skills to gather pertinent health data.
4. Use professional assessment skills to demonstrate competence within the nursing scope of practice.

Clinical Objectives
1. Demonstrate the nurse's role in comprehensive health assessment in the management of disease prevention, and special needs for diverse population groups.
2. Participate in the nursing management for a select group of health assessment and health promotion topics as it relates to primary, secondary and tertiary prevention.

**Secretary's Commission on the Acquisition of Necessary Skills (SCANS)** - SCANS skills are a group of foundational skills and workplace competencies that the Secretary's Commission on the Acquisition of Necessary Skills established as vitally important for workplace success in the 21st century. In Collin's workforce programs, the SCANS skills are developed and reinforced throughout the curriculum to provide students with an opportunity to hone these skills/competencies in the context of their education. Over the course of an entire degree

program, the successful student is expected to demonstrate all of the SCANS skills and competencies as part of their education. The SCANS Foundation Skills and Workplace Competencies are described at:
http://www.collin.edu/academics/programs/Workforce_SCANS_Skills_Syllabi_Code_Key.pdf

**Withdrawal Policy:** See the current *Collin Registration Guide* for the last day to withdraw.

**WITHDRAWAL PROCEDURE:**

See *Nursing Division Student Handbook* Procedure 10.17, Adding or Dropping Courses, regarding withdrawing procedures, and the current *Collin College Registration Guide* for last day to withdraw.

**Collin College Academic Policies:** See the current *Collin College Student Handbook.*

**Americans with Disabilities Act Statement:**
Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin College Student Handbook* for additional information.

Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of *Student Code of Conduct (Code)* violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**ACADEMIC ETHICS:**

The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty.
Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty may involve, but is not limited to, one (1) or more of the following acts: cheating, plagiarism, collusion, use of annotated texts or teacher's editions and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for assignments as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course assignment; removing tests or answer sheets from a test site, and allowing a classmate to copy answers.

Refer to *Nursing Division Student Handbook* Procedure 10.41 and *Collin College Student Handbook*

**Strategies of Behavioral Intervention (SOBI):**
Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

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You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**INSTRUCTOR INFORMATION**

See Canvas for Nursing Faculty Contact Expert Information
**Instructor's Name: TBD**
**Office Number:**
**Office Hours:** Hours posted on office door
**Phone Number:**
**Email:**
**Class Information:**
**Section Number: TBD**
**Meeting Times: In-class as scheduled**
**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Course Format:** Lecture-discussion, small group discussion, oral/written class project, AV materials, learning activities, computer assisted technology, skills lab self-directed and peer assisted learning, teacher-student conferences, case studies, and assigned readings, laboratory instruction and practice, clinical assignments, clinical participation in acute, community, and long-term Care.

Students may review their exams by making an appointment with their advisor if needed. However, current exams can only be reviewed up to the next scheduled exam.

**Course Requirements:**

1. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Procedures 10.10 and 10.11).
2. Complete all course assignments.
3. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 3450 course, the student can continue in all other enrolled nursing courses.
4. You may repeat this course only once after receiving a failing grade.
5. This course will follow all requirements found in the *Collin College Nursing Division Student Handbook.*

**Course Evaluations**: All students completing courses for the Collin College RN-to-BSN program are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon the last day of class the student is in.

**Minimum Technology Requirement:**
**Computer System Requirements:**
The basic computer specifications for Canvas use are available at:
https://community.canvaslms.com/docs/DOC-2059
The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284
High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas App or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions.
HESI system requirements for both Mac and Windows users are available at:
https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at:
https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx
You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:**
**Netiquette Expectations:** In all communications whether electronic discussion or mail, all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources:**
**Supplies:**
Stethoscope; Watch with second hand; Bandage scissors. Sphygmomanometer in pediatric, adult and obese sizes, penlight, reflex hammer, measuring tape, hemostats

**Textbooks and Equipment**:
***Required Textbooks & Equipment***

Jarvis, C. (2012). *Physical examination & health assessment.* (7th ed.). St. Louis, MO: Saunders-Elsevier.

Jarvis, C. (2016). *Laboratory manual for physical examination & health assessment*. (7th ed.). St. Louis, MO: Saunders-Elsevier.

Laboratory diagnostics book of your choosing
Medical dictionary of your choosing

**Attendance Procedure:** See *Nursing Division Student Handbook* Procedure 10.10 and 10.11, Class Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook.*

**Method of Evaluation**:
The course grade will be determined through the following process:

| | |
|---|---|
| 4 Focused Health Assessment/ Promotion- Clinical Assignments (15 pts each) | 60 points |
| Community Assessment | 85 points |
| Final Comprehensive Clinical Assessment/ Health Promotion Project | 125 points |
| **Total** | **270 points** |

243-270 points = A 216-242 points = B 189-215 points = C Below 189 points = F

**Course Calendar**: See Canvas

**COURSE OUTLINE**

Comprehensive Health History and Interviewing

Techniques and tools of assessment

Conceptual Assessment

- Cognition
- Sensory Perceptual
- Coping
- Gas exchange
- Perfusion
- Mobility
- Nutrition and Elimination
- Immunity
- Reproduction
- IPR and Violence
- Human Development
- Family Assessment

Community Assessment

- Special considerations in assessment of vulnerable populations
- Using assessment data to promote health and manage disease
- Comprehensive Assessment

**Assignments**

**Health Assessment/Promotion Grading Rubric**

Student Name _____ Date _____

| Criteria | Inadequate effort 0 points | Fair 1 points | Good 2 points | Very Good 3 points | Score (N/A) |
|---|---|---|---|---|---|
| **Part I-Biographical Data and Reason for Seeking Care** Includes all pertinent objective data Provides clearly written explanation for patient appointment | Student provides no biographical information. Fails to provide a focused written statement for reason/feelings about seeking care. | Student provides less than 5 items of biographical data. Provides a vaguely written statement for reason/feelings about seeking care. | Student provides 5 to 7 items of biographical data. Provides a clearly written statement for reason/feelings for and about seeking care. | Student includes all elements of biographical data. Provides a focused clearly written statement regarding the patient reason/feelings for and about seeking care. Uses patient words and quotations. | Score |
| **History of Present Health Concern** Includes comprehensive subjective data | Documentation is inadequate with gross deficiencies in grammar, spelling and/or formatting (word usage). | Documentation fails to address all elements in detail or has significant grammatical, spelling, and /or word usage errors. | Documentation addresses all elements with minor grammatical, spelling, or word usage errors. | Documentation correctly addresses every element of the assessment having the proper format with no grammatical, spelling, or word usage errors. | Score |
| **Medical/Family Health History and Lifestyle** Includes comprehensive health history data | Documentation is inadequate with gross deficiencies in grammar, spelling, and/or word usage. Documentation is inadequate with | Documentation fails to address all elements in details or has significant grammatical, spelling, and or word usage errors. | Documentation addresses all key elements with minor grammatical errors, spelling, or word usage errors. | Documentation correctly addresses every key element of the assessment having the proper format with no grammatical, spelling or word usage errors. Documentation correctly addresses every key element having the proper format with no grammatical, spelling or word usage errors. | Score |

| | | | | | |
|---|---|---|---|---|---|
| Includes comprehensive lifestyle data | gross deficiencies in grammar, spelling, and or word usage. | Documentation fails to address all elements in details or has significant grammatical, spelling, and /or word usage errors. | Documentation addresses all key elements with minor grammatical errors, spelling, and/or word usage errors. | | |
| **Part II-Prevention and Maintenance** Lists learning needs based on health history/identified needs. Prioritizes list. | Student provides no recommendations. | Student provides one recommendation. | Student provides at least 2 prioritized recommendations. | Student provides at least 3 prioritized recommendations. | Score |
| **Part III-Physical Assessment (ROS)** Assess all systems appropriately using inspection, palpation and auscultation as indicated. Appropriately assess all negative findings. Document all findings concisely using appropriate terminology. | Student provides no physical examination documentation. | Student provides minimal physical examination documentation with numerous grammatical, spelling or word usage errors. No evidence of further assessment of negative findings. | Student provides adequate physical examination documentation that covers majority of systems with minimal grammatical or spelling. Evidence of assessment of negative findings. | Student provides adequate physical examination documentation that covers all systems using inspection, palpation, auscultation as appropriate with no grammatical, spelling or word usage errors. Evidence of appropriate assessment of negative findings documented. | Score |
| | | | | **Total** | |

Faculty Name: Date:

Comments:

**Community Assessment Grading Rubric (85 points)**

Student Name_____ Date_____

| Community Assessment Grading Criteria | | |
|---|---|---|
| Perform a community assessment incorporating, but not limited to the following: demographical data, health care services, mental health services, safety profile, history of community, spiritual aspects, educational aspects, unique cultural aspects, community events, water source/waste disposal, and government official's interviews. Compile your data and submit a written community assessment. Grading criteria for each section of the assignment are as follows: | | |
| 1 | Demographic, epidemiologic and vital statistics | 6 points |
| 2 | Literature review of healthy communities | 6 points |
| 3 | Assessment of Health resources and availability | 6 points |
| 4 | Assessment of community education and health literacy | 6 points |
| 5 | Assessment of the community communication systems | 6 points |
| 6 | Assessment of socio-economic, political/legal, cultural, & religious factors | 6 points |
| 7 | Interview with professionals, community members and leaders | 6 points |
| 8 | Analysis of the aggregate community health nursing problems | 19 points |
| 9 | Implications of results and suggested policy changes | 18 points |
| 10 | Logical presentation, spelling, grammar, APA format | 6 points |
| | **Total** | **85 points** |

Faculty Signature_____ Date_____

COMMENTS

Collin College

RN-to-BSN Program

Preceptor Guide

RNSG 3340 Population-Focused Community Health I/Clinical

This course introduces the concept of the community of persons/patients, families, and populations as the adult and geriatric patient in the healthcare system and the roles of the nurse in community services. Nurse roles include public policy, provision of primary care, prevention of disease or health risk, education and health promotion, and restoration.

RNSG 3450 Advanced Health Assessment/Clinical

This course is an in-depth coverage of a comprehensive health assessment with an emphasis on health promotion and how this concept is applied within nursing practice. The course focuses on the techniques of data collection and physical assessment and applying these across the lifespan and in a variety of diverse population groups and populations. This course lends itself to a concept-based approach.

RNSG 4345 Population-Focused Community Health II/Clinical

This course introduces the concept of the community of persons/patients, families, and populations as the maternal and pediatric patient in the healthcare system and the roles of the nurse in community services. Nurse roles include public policy, provision of primary care, prevention of disease or health risk, education and health promotion, and restoration.

RNSG 4465 Leadership and Management/Clinical

This course emphasizes leadership and management theories in communication and conflict resolution, budgeting, human resource management, quality and safety, risk management, change, deletion, decision-making, and current issues and trends. Clinical experiences focus on management of issues and interactive observation of leaders and managers in a variety of settings.

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RN-to-BSN Program

Student Learning Outcomes

1. Use clinical reasoning and knowledge based on the nursing program of study, evidence-based practice outcomes, and research studies as the bases for decision-making and comprehensive, safe patient and population care
2. Demonstrate inquiry and analysis in applying patient care technologies and information systems to support safe nursing practice and population risk reduction.
3. Lead safety and quality improvement activities as part of the interdisciplinary team and as an advocate and manager of nursing care.
4. Manage care transitions and promote population risk reduction with diverse communities in collaboration with members of the interdisciplinary health care team.
5. Participates in monitoring institutional, professional, and public policy to maintain adherence to standards of practice within legal, ethical, and regulatory frameworks of the professional nurse.
6. Demonstrates leadership skills related to financial, human resource, clinical, and professional issues in providing and evaluating care
7. Demonstrate leadership and advocacy that reflects the values and ethics of the nursing profession.

Basis of Clinical

Overview

Students in the RN-to-BSN Program are required to take the following four (4) clinical courses as part of their nursing curriculum:

- RNSG 3340 Population-Focused Community Health I/Clinical
- RNSG 3450 Advanced Health Assessment/Clinical
- RNSG 4345 Population-Focused Community Health II/Clinical
- RNSG 4465 Leadership and Management/Clinical

Students are required to spend 64 hours (32 hours on site / 32 hours on project/paper) per course during the semester focused on clinical learning integral to the respective courses. Students spend their clinical hours at various community-based health or nursing sites relevant to each course. Designated preceptors provide supervision. **Clinical hours are fulfilled through an onsite clinical experience and through an offsite clinical related project and paper.**

Preceptors are clinically expert nurses who have preferable earned, at a minimum, the BSN degree and have two years of experience, as health care and community-based resources, preceptors contribute significantly to the BSN students' learning and professional socialization. Preceptors and faculty work collaboratively to maximize potential for student learning. *Students have the ability to contribute in choosing their own preceptor in the clinical courses.* If the student is unsure of possible preceptors or sites, a list of available sites will be supplied to the student. The student can also identify others who may be suitable. In any event, the student must notify the course faculty and/or clinical coordinator to ensure the preceptor and facility meets the guidelines of the RN-to-BSN Program. The clinical coordinator will ensure the site is suitable and will initiate a contract.

In consultation with their preceptors and faculty, students will determine the clinical activities consistent with the course objectives developed by the faculty. Students will work with their preceptor to define two (2) specific objectives they would like to achieve for the course. Students will be required to track their on-site clinical hours using the form provided within this guide. Students will also be required to have a minimum of one clinical site visit from their clinical coordinator during the semester.

Students can distribute their clinical hours across the semester to meet the course objectives or complete the hours in a more concentrated fashion. The student will work with the preceptor based on the student and preceptor needs. ***Ideally, no student will stay within his/her employing institution for the clinical experience. No student may be assigned to a unit or direct reporting department where he/she is employed.*** Clinical time for which students receive financial or other compensation may not be counted as clinical hours.

Students are responsible for meeting all requirements mandated in respective course syllabi, handbook, and the Preceptor Guide.

Process for Beginning Clinical

Course Faculty

- Provides student with a clinical course syllabus
- Provides student a clinical orientation

Student

- Attends orientation prior to start of clinical semester (in class)
- Completes pre-clinical requirements
    - Active, unencumbered Texas RN license
    - Health requirements
    - Criminal background check
    - Mandatory drug screening
    - Professional liability and health insurance
    - Cardio-pulmonary resuscitation (CPR) certification
    - Health Insurance Portability and Accountability Act (HIPPA) training
    - Identification badges and dress code requirements
- Provides preceptor with **Letter of Introduction**, **Preceptor Guide**, and **applicable syllabus** by electronic means prior to the start of clinical

Clinical Coordinator

- Approves clinical site
- Ensures student documentation completion and start date of clinical by second week of semester
- Completes a minimum of one clinical site visit per student per semester

Preceptor

- Completes Preceptor Contract and Preceptor Information and returns to Collin College RN-to-BSN Program Clinical Coordinator by the second week of clinical
- Collaborates schedule with student for clinical hours (32 hours on site)

Responsibilities for Students' Schedules and Reports

Faculty

- Works with student during the semester to develop clinical objectives and clarification on project expectations
- Ensures students have developed two (2) clinical learning objectives by the second week of the semester as part of their evaluation
- Ensures that all completed documentation from the Preceptor Guide has been collected and submitted by the preceptor and student by the assigned dates

Student

- Develops working relationship with agency and preceptor
- Coordinates scheduling or clinical hours with preceptor and agency
- Schedules one (1) visit with clinical coordinator and preceptor
- Develops Student Objectives by second week of the semester. (*Please write the objectives on the Preceptor Evaluation of Student Form.)* These are two main goals/learning objectives students want to accomplish through this experience
- Prepares for specific clinical agency experience by reading and orienting to site
- Participates in clinical as agreed upon with preceptor/faculty
- Develops proposal for project with preceptor/faculty by mid semester per course requirements
- Completes all clinical requirements by last week of the semester
- Submits final copy of project/paper by stated date on syllabus

Preceptor Forms and Instructions

**Preceptors are required to complete the following forms:**

- **Preceptor Information**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  *Due by week 2 of clinical*
  The information on this form is required by Collin College RN-to-BSN Program for accreditation purposes. Please ensure the student has completed his/her information at the top of the form.

- **RN-to-BSN Completion Program Institutional Placement Agreement:**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  This form **may** be required by your immediate supervisor to ensure they are aware of your participation and willingness to assist as a preceptor. **The form is not mandated by Collin College RN-to-BSN Program.** If required, provide to the assigned student.

- **Preceptor Contract:**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  *Due by week 2 of clinical*
  This form indicates your acceptance of the role as a preceptor with the assigned student

- **Preceptor's Evaluation of Student Performance: Clinical Evaluation Tool**
  *Email to the RN-to-BSN Program Course Faculty*
  *Due within a week of completing clinical hours*
  This form is to be completed by the preceptor. The preceptor can determine the most appropriate time to assess. However, the form must be completed and submitted no later than the last week of the semester for the student to be awarded a grade.

- **Preceptor's Interaction Regarding Faculty:**
  *Email to the RN-to-BSN Program Director*
  *Due within a week of completing clinical hours*
  This form should be completed by the preceptor at end of the clinical experience. The information you provide will assist us in determining how best the faculty can assist you in the future. We appreciate your time in providing your feedback.

Preceptor Information

*Please email to the RN-to-BSN Program Clinical Coordinator | Due by week 2 of clinical*

Course:

- ☐ RNSG 3340 Population-Focused Community Health I/Clinical
- ☐ RNSG 3450 Advanced Health Assessment/Clinical
- ☐ RNSG 4345 Population-Focused Community Health II/Clinical
- ☐ RNSG 4465 Leadership and Management/Clinical

Student_____

Work Phone_____ Home Phone_____

Cell Phone_____ E-mail_____

**Preceptor Information**

Preceptor Name and Credentials_____

Certifications_____

Official Title_____ E-mail_____

Address_____

Hospital/Agency Name_____

Hospital/Agency Mailing Address_____

Work Phone_____ Home Phone_____

Number of Years in Clinical Practice_____

RN License Number Validated (Done at Collin College)_____

Unencumbered: Yes_____ No_____

Educational Background (Required by ACEN accreditation)

| Name of School | Degree | Year Received |
|---|---|---|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

**To the Preceptor: Please copy the above information, keep a copy for yourself, and email to RN-to-BSN Program Clinical Coordinator**

Preceptor Contract

*Please email to the RN-to-BSN Program Clinical Coordinator | Due by week 2 of clinical*

I, _____ agree to serve as a preceptor for _____

Preceptor Name and Credentials Student Name

for course: ☐ RNSG 3373 Population-focused Community Health I/Clinical
☐ RNSG 3471 Advanced Health Assessment/Clinical
☐ RNSG 4373 Population-focused Community Health II/Clinical
☐ RNSG 4472 Leadership and Management/Clinical

**Beginning Date**_____ **Completion Date**_____

I accept the following as responsibilities for the duration of the preceptorship, I will:

1. Serve as a resource person, role model, and consultant to the assigned student.
2. Coordinate the clinical experience with the student.
3. Recommend patient/client, family, and community assignments which will help the student integrate classroom theory.
4. Supervise the RN student as appropriate in the clinical settings.
5. Verify the presence of student at agreed upon clinical dates and times.
6. Assist in determining the degree to which the student has met the learning objectives during clinical.
7. Notify the school and student, if possible, at least two weeks in advance if unable to complete this contract.
8. Notify the faculty and clinical coordinator, as well as participating agencies, of any client incident requiring a formal report.
9. Notify the appropriate person in the clinical setting of the times the student will be in attendance.

I attest to the fact that the proposed student is not related to me, is not my immediate supervisor, and is not my employee or subordinate.

Preceptor Name and Title (type or print)_____

Preceptor Signature_____ Date_____

To Preceptors: Please return by the second week of the semester to the clinical coordinator

**Collin College RN-to-BSN Program course faculty is responsible for monitoring and evaluating clinical experience. These responsibilities include the following:**

5. Orient the preceptor to the goals and objectives of the curriculum and the course via the Preceptor Guide, course syllabus, and letter of introduction.
6. Provide appropriate resources for course content.
7. Provide supervision through telephone, e-mail, or conferences with students and preceptors.
8. Notify the preceptor if a decision is made to terminate the contract.

Faculty Signature_____ Date_____

Institutional Placement Agreement

*Please provide to assigned student, if applicable.*

**This form only needs to be completed if a supervisor requires permission prior to you serving as a preceptor in your facility.**

To: Preceptor and/or Supervisor

From: Director of Nursing

Please complete this form and return it to the Collin College RN-to-BSN Program.

I understand that _____ (preceptor's name), has agreed to serve as preceptor for _____ (student's name). I understand the time commitment and the possible need for accessibility to agency resources for completion of this clinical. This project has been approved by our agency and I support the preceptorship.

Administrator/Supervisor's name_____ Date_____

Name of agency_____

Preceptor Evaluation of Student Performance Instructions

*Please email to the RN-to-BSN Program Course Faculty.*

**Ongoing Assessment**

Your assessment of the RN-to-BSN completion student is important on an ongoing basis throughout the semester. If at any time you would like to request a meeting with the course faculty of Program Director, we encourage you to contact us.

When assessing adult learners, it may be helpful to review coaching information available in the addendum.

**When to assess**

We recommend that you meet with the student at:

- The beginning of the clinical to review the student's learning objectives and how best the student can meet these objectives
- During the semester to monitor the student's progress on an ongoing basis
- Final evaluation to determine the student's performance and verify completion of the clinical requirements

Preceptor's Interaction Regarding Faculty

*Please email to the RN-to-BSN Program Director*

To improve the RN-to-BSN Program for our students, clinical agencies, and preceptors, we welcome any feedback that you feel is valuable in assisting us with this mission.

**Collin College Course Faculty's Name**_____

| **Survey** | **Yes** | **No** |
|---|---|---|
| 1. Did you receive information from the RN-to-BSN Nursing Program in a timely manner prior to the start of the quarter? | | |
| 2. Did the course faculty provide his/her contact information to you? | | |
| 3. Did the course faculty provide you with adequate information to facilitate the student in the clinical component of this course? | | |
| 4. Would you recommend being a preceptor to others? | | |
| 5. Would you recommend this program to others? | | |
| 6. Is the one clinical visit enough to assist you in the role as a preceptor? | | |
| a. If the visit was not enough would you like more or less? Please circle | **More** | **Less** |

**Other comments?** _____

Preceptor Name_____

If you would like to be contacted about your comments, please provide a contact number.

Phone_____

Thank you!

**Students are responsible for completing and/or maintaining the following tasks and forms:**

- **Scheduling of Clinical Site Visits by telephone or electronic means**
  You must schedule one clinical site visit during the semester between the preceptor, yourself, and clinical coordinator

  Please adhere as closely to the following timelines for visits as possible

  - **The first site must be within the first half of the course start date**
  - **If the timeline above does not meet he needs of the preceptor, please contact your clinical coordinator**

- **Documentation of On-Site Clinical Experience**

  This form is to be maintained by the student on a weekly basis. The student is required to have the preceptor sign the form to verify completion of on-site clinical time. The completed document is to be given to your course faculty at the end of the semester.

- **Documentation of Project Hours Clinical Experience**

  This form is to be maintained by the student on a weekly basis. The student is required to have the preceptor sign the form to verify completion of project hours for clinical time. The completed document is to be given to your course faculty at the end of the semester.

- **Student's Assessment of Experience with Preceptor**

  This form is to be completed by the student and to be turned in to his/her course faculty at the end of the semester.

Documentation of On-Site Clinical Experience

*Please submit this form to the RN-to-BSN Program Course Faculty.*

Student: Fill out the information for your preceptor to sign

Preceptor: Your signature verifies the accuracy of the student's information

Student_____ Preceptor/Agency_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

| Date/Hours | Activity (Brief description) | Subtotal Hours |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Total Hours | |

Student Signature_____ Date_____

Preceptor Signature_____ Date_____

*Please submit this form to the RN-to-BSN Program Course Faculty prior to the end of the semester.*

Student: Fill out the information for your course faculty to sign

Student_____ Preceptor/Agency_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

| Date/Hours | Activity (Brief description) | Subtotal Hours |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Total Hours | |

Student Signature_____ Date_____

Preceptor Signature_____ Date_____

Student's Assessment of Experience with Preceptor

*Please submit this form to the RN-to-BSN Program Course Faculty prior to the end of the semester.*

Student_____

Preceptor_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

Please use the following rating scale when evaluating the statements about your preceptor

1= Satisfactory 2= Needs Improvement 3= Unsatisfactory

| Preceptor as a Role Model | | | |
|---|---|---|---|
| 1. The preceptor met with me at the agreed upon times. | 1 | 2 | 3 |
| 2. The preceptor provided for open communication and trust during my experience. | 1 | 2 | 2 |
| 3. The preceptor was supportive of my efforts. | 1 | 2 | 3 |
| Preceptor as a Resource | | | |
| 4. The preceptor assisted me with needed resources. | 1 | 2 | 3 |
| 5. The preceptor provided constructive feedback. | 1 | 2 | 3 |
| Preceptor as a Designer of Instruction | | | |
| 6. The preceptor provided me with and adequate orientation to the facility and role. | 1 | 2 | 3 |
| 7. The experiences I participated in were meaningful and met the course and my objectives. | 1 | 2 | 3 |
| 8. My time was optimized wisely when I was with the preceptor. | 1 | 2 | 3 |
| Preceptor as a Supervisor | | | |
| 9. My preceptor provided adequate time for evaluation. | 1 | 2 | 3 |
| 10. I would recommend this preceptor experience for other students. | 1 | 2 | 3 |

Comments_____

_____

_____

Addendum

**A Word About Coaching**

The role of the preceptor includes coaching as well as teaching. Using the five-step coaching process, you can effectively guide your preceptee toward achieving specified learning goals.

**Step 1: Clarify the work activities**

At the beginning of the shift, collaborate with the preceptee to define unpredictable work activities and plan a time line indicating how, when, and by whom each activity is to be done (Ulrich & Haffer, 2001).

**Step 2: Review process and potential or real problems**

Take five (5) minutes at the end of each shift (and PRN) to analyze the progress towards goal attainment. The dialogue should be mutually determined. Offer positive and critical feedback using neutral communication (Ulrich & Haffer, 2001).

**Step 3: Set priorities**

Collaborate with the preceptee to prioritize problems, working at meeting the challenges of the most important ones first (Ulrich & Haffer, 2001).

**Step 4: Set objectives for goal attainment**

Mutually define a specific goal for the preceptee to work on and develop interventions for attaining the goal. Include time frames and deadline dates (Ulrich & Haffer, 2001).

**Step 5: Review and evaluate the results**

Together, review the preceptee's accomplishments (Ulrich & Haffer, 2001).

Reference

Ulrich, S. & Haffer, A. (2001). *Preceptor: A nurse's guide to mentoring.* Philadelphia; F.A. Davis Company.

**Collin College**
**RN-to-BSN Program**
**Clinical Evaluation Tool**

Student: _____ Date_____ Clinical Faculty:_____

Course Number: Semester_____
Year_____

Preceptor's Name and Initials: _____

Clinical Site/Hospital and Unit:_____

Date of Evaluation & Preceptor Initial: **Midterm: _____ Final:_____**

**Instructions:**

This evaluation will be completed and reviewed by faculty after the first clinical week, midterm, and the end of the clinical. Additional evaluations may be initiated by preceptor, student, or faculty at any time during the clinical experience. Weekly reviews are encouraged. Preceptor, student, and/or faculty may include additional objectives as deemed appropriate. Comments are to be written at the end of each evaluation with date and signatures. Extra comments pages may be included.

The signature page will be signed by the preceptor, student and faculty at the end of each evaluation session: First Week, Midterm, Final, and others as needed.

**Rating Criteria of Students performance of TX BON Competencies:**

Clinical grades are Pass/Fail. **Students MUST maintain and provide safe practice standards AT ALL TIMES.** Any behaviors of omission or commission of an act that may endanger a client's physical or emotional safety or wellbeing, or any evidence of impaired judgment due to substance use constitutes unsafe practice. **Students that demonstrate unsafe practice will be removed from the clinical setting and will either complete mandatory remediation and/or fail the course. *Any unsafe act will be reported to the faculty immediately and the student will not be allowed to continue the clinical rotation. *

A student must be truthful in all documentation, maintain patient confidentiality, respect patient rights and adhere to the grooming and dress code of the School of Nursing and the clinical agency.

All competencies stated are MINIMAL clinical performance standards. Students MUST meet this criteria-AT ALL TIMES. Failure to meet the MINIMAL criteria AT ANY TIME constitutes automatic failure of the course. In the event that the student fails to meet the minimal criteria, the student will be removed from patient care and the faculty should be contacted immediately. Behaviors should be documented in the comments sections and signed by the preceptor. ***If there is a limited opportunity regarding the minimal criteria, a No Opportunity (NO) should be documented for that evaluation and comments to why this opportunity was not available.***

****Pass-Achieving and maintain minimal competency in every area of clinical performance at all times.**

****Fail-non-achievement of minimal competency in any one or more areas of clinical performance at any time.**

The nursing clinical evaluation is based on the Board of Nursing (BON) Baccalaureate competencies in the areas of Member of the Profession, Provider of Patient-Centered Care, Patient Safety Advocate, and Member of the Health Care Team.

Preceptor will score each section using NO, S, or U:

- NO = No opportunity (comments must be given)
- NI = Needs Improvement **(ONLY TO BE USED AT MIDTERM);**

  demonstrates minimum clinical performance standards
- S = satisfactory progress; demonstrates expected behaviors consistently
- U = unsatisfactory; Does not demonstrates expected behaviors consistently**; fail;**

  **comments must be given**

| **MEMBER OF THE PROFESSION** | | |
|---|---|---|
| **Competency A: Function within the nurse's legal scope of practice and in accordance with the policies and procedures of the employing health care institution.**<br>**Course Objective #1:** Analyze local, state, and national public health system components, policies, missions, goals, and programs.<br>**Clinical Objective #4:** Apply relevant local, state, and national regulations and policies that affect addressing the health needs of the specific-population community assessed. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| **1)** *Performs within the scope and limitation of ability. Respects patient autonomy in health care decisions.* | | |
| ***2)*** *Practices according to Collin College nursing program and clinical agency policies and procedures.* | | |
| ***3)*** *Respects patient confidentiality in accordance with HIPPA regulations at all times. Follows agency guidelines and policies related to patient care.* | | |
| ***4)*** *Provides holistic care that addresses the needs of diverse individuals across the lifespan.* | | |
| ***5)*** *Provides culturally sensitive health care to patients and families.* | | |

| | | |
|---|---|---|
| ***6)*** *Practices nursing in a caring, nonjudgmental, non-discriminatory manner.* | | |
| ***7)*** *Applies knowledge of facility regulations when accessing client records.* | | |
| **Competency B: Assume responsibility and accountability for the quality of nursing care provided to patients, families, populations and communities.**<br>**Course Objective #3:** Differentiate the roles of nurses in community-based practice for population-specific persons/patients, families and populations within culturally diverse communities.<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Complies with professional appearance requirements according to Collin College nursing program standards and policies. Uniform is clean and non-wrinkled; shoes are clean; Hair is clean, trimmed and off the shoulders; Tattoos and body piercings are not visible.* | | |
| ***2)*** *Is prepared for patient care with knowledge and required paperwork.* | | |
| ***3)*** *Reports to unit on time and notifies faculty/staff regarding absence or lateness for clinical experience.* | | |
| ***4)*** *Proactively manages priorities in patient care and reports changes in patient status to staff and instructor in a timely manner.* | | |
| ***5)*** *Participates in post conference.* | | |
| ***6)*** *Is receptive to constructive criticism.* | | |
| ***7)*** *Evaluates self and uses feedback from instructor to modify and improve practice.* | | |
| ***8)*** *Documents patient care with accuracy and thoroughness and in accordance with agency policy or as designated by faculty.* | | |
| **Competency C: Promote the practice of professional nursing through leadership activities and advocacy**<br>**Clinical Objective #6:** Use introspection and conscious examination of personal beliefs and value systems to increase sensitivity, respect, and caring for diverse populations. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Promotes positive image of nursing and Collin College.* | | |
| **2)** *Demonstrates ability to negotiate roles between fellow students and nurse technicians in order to impact positive outcomes for patient.* | | |
| ***3)*** *Serves as a positive role model for students, peers, and members of the interdisciplinary health care team.* | | |

| **Competency D: Demonstrate responsibility for continued competence in nursing practice and develop insight through reflection, self-analysis, self-care, and lifelong learning.**<br>**Clinical Objective #1:** Research local, state, and federal databases to conduct a population-specific community health assessment and proposal for addressing needs.<br>**Course Objective #4:** Explain epidemiologic, social, political, economic, and cultural trends that affect the health status of individuals, families, populations, and communities. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Seeks appropriate learning experiences.* | | |
| ***2)*** *Applies research findings and principles of research to patient care.* | | |
| ***3)*** *Uses performance and self-evaluation processes to improve own practice and professional growth.* | | |

**PROVIDER OF PATIENT-CENTERED CARE**

| **Competency A: Use systematic critical thinking to integrate knowledge from a liberal arts, sciences, and nursing education, nursing science, evidence-based practice guidelines, and research studies as the basis for clinical decision making and comprehensive patient care.**<br>**Course Objective #4:** Explain epidemiologic, social, political, economic, and cultural trends that affect the health status of individuals, families, populations, and communities.<br>**Clinical Objective #5:** Analyze and propose culturally sensitive and developmentally appropriate health services and education programs to maintain or restore health status. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Uses critical thinking by separating relevant from irrelevant data and reaches logical conclusions.* | | |
| ***2)*** *Prioritizes needs and interventions when caring for multiple patients.* | | |
| ***3)*** *Applies problem solving techniques while providing care for multiple patients.* | | |
| ***4)*** *Use clinical judgment to identify patient needs/nursing diagnoses.* | | |
| **Competency B: Determine the physical and mental health status and health needs and preferences of culturally, ethnically, and socially diverse patients, families, populations and communities based upon interpretation of comprehensive health assessment findings compared with evidence-based health data and a synthesis of knowledge derived from a liberal arts, sciences, and nursing education.**<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |

| **Course Objective #6:** Use introspection and conscious examination of personal beliefs and value systems to increase sensitivity, respect, and caring for diverse populations. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Collects patient data from appropriate sources, i.e. patient record, health team members, patient/family interviews, and physical assessment.* | | |
| ***2)*** *Assesses and relates pertinent lab values to patient assessment. Relates lab trends to patient's conditions and follows through with appropriate action.* | | |
| ***3)*** *Assesses co-morbidities of patient and relates to current conditions.* | | |
| ***4)*** *Patient assessments reflect knowledge of bio-psychosocial-cultural and spiritual dimensions of patient care.* | | |
| ***5)*** *Validates assessment data against criteria.* | | |
| ***6)*** *Documents assessment data in correct format.* | | |
| **Competency C: Synthesize comprehensive assessment data to identify problems, formulate goals/outcomes and develop plans of care for patients, families, populations, and communities using evidence-based practice in collaboration with patients and the interdisciplinary health care team.**<br>**Course Objective #1:** Analyze local, state, and national public health system components, policies, missions, goals, and programs.<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Establishes priority diagnoses based on assessment findings.* | | |
| ***2)*** *Develops short term goals (outcome criteria) that are individualized, realistic, specific, measurable, time oriented and support the nursing diagnoses.* | | |
| **Competency D: Provide safe, compassionate, comprehensive nursing care to patients, families, populations, and communities, through a broad array of health care services.**<br>**Clinical Objective #2:** Integrate concepts of health disparities, health literacy, and cultural belief systems in the population-specific community assessment.<br>**Course Objective #6:** Use introspection and conscious examination of personal beliefs and value systems to increase sensitivity, respect, and caring for diverse populations. | | |
| **CRITERIA** | Preceptor's Evaluation | Preceptor's Evaluation |

| | Mid Rotation | End of Rotation |
|---|---|---|
| ***1)*** *Assumes a leadership role on behalf of the patient with other members of the interdisciplinary team to procure resources for patient care.* | | |
| ***2)*** *Advocates for policies to support health care access and quality for vulnerable populations.* | | |
| **Competency E: Implement plan of care within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles for patients, families, populations, and communities.**<br>**Course Objective #1:** Analyze local, state, and national public health system components, policies, missions, goals, and programs.<br>**Clinical Objective #4:** Apply relevant local, state, and national regulations and policies that affect addressing the health needs of the population-specific community assessed. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Nursing interventions are patient specific and include assessment, monitoring, acting and teaching actions.* | | |
| ***2)*** *Verbalizes rationale for interventions using evidence-based findings.* | | |
| ***3)*** *Administers medications using the 6 rights.* | | |
| **Competency F: Evaluate patient, family, population, and community outcomes in response to interventions compared to evidence-based practice, benchmarks, and research findings, and plan follow-up nursing care.**<br>**Course Objective #2***:* Compare maternal and pediatric community populations with differing needs and resources and match with available services or identify needed services/resources.<br>**Clinical Objective #2:** Integrate concepts of health disparities, health literacy, and cultural belief systems in the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Applies research findings and principles of research to patient care.* | | |
| ***2)*** *Accurately interprets efficacy of interventions for positive patient outcomes.* | | |
| ***3)*** *Determines if short term goals (patient outcomes) were met.* | | |
| ***4)*** *Interprets efficacy of interventions for positive patient outcomes.* | | |
| ***5)*** *Modifies goals based on evaluation.* | | |
| ***6)*** *Revises interventions based on outcome findings.* | | |
| **Competency G: Develop, implement, and evaluate teaching plans for patients, families, populations and communities to address health promotion, maintenance and restoration, and population risk reduction.** | | |

| **Clinical Objective #3**: Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Communicates reasons and rationale for deviation from plan of care.* | | |
| ***2)*** *Assesses and responds to the learning needs of the patient by providing information needed to make health choices.* | | |
| **Competency H: Coordinate human and material management resources for patients, families, populations and communities.**<br>**Course Objective #2:** Compare population-specific community populations with differing needs and resources and match with available services or identify needed services/resources.<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Assembles, prepares and organizes equipment prior to performing procedures.* | | |
| ***2)*** *Prioritizes assignments and completes tasks in expected time.* | | |
| ***3)*** *Identifies providers and resources to meet the needs of patients.* | | |
| ***4)*** *Works with family and community resources to develop and/or strengthen support systems for patient.* | | |

**PATIENT SAFETY ADVOCATE**

| **Competency A: Demonstrate knowledge of the Texas Nursing Practice Act and Texas Board of Nursing rules that emphasize safety as well as all federal, state, and local government and accreditation organization safety requirements and standards.**<br>**Course Objective #1:** Analyze local, state, and national public health system components, policies, missions, goals, and programs.<br>**Clinical Objective #4:** Apply relevant local, state, and national regulations and policies that affect addressing the health needs of the population-specific community assessed. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Uses standards of nursing practice to provide care.* | | |
| ***2)*** *Reports changes in patient condition to staff and instructor in a timely manner.* | | |
| **Competency B: Implement measures to promote quality and a safe environment for patients and others.** | | |

| **Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment.<br>**Course Objective #5:** Analyze and propose culturally sensitive and developmentally appropriate health services and education programs to maintain or restore health status. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Supports the patient's right of self-determination.* | | |
| ***2)*** *Informs patients regarding their plan of care.* | | |
| ***3)*** *Safely performs procedures and nursing measures.* | | |
| ***4)*** *Implements evidence-based findings to prevent risk of patient harm.* | | |
| ***5)*** *Seeks assistance when behavior or judgment is outside of individual knowledge and/or expertise.* | | |
| ***6)*** *Implements measures to prevent exposure to infectious pathogens and communicable conditions.* | | |
| ***7)*** *Uses universal precautions in all patient care settings.* | | |
| ***8)*** *Accurately identifies patients by using two identifiers.* | | |
| ***9)*** *Requests coverage for patient care during breaks and lunch.* | | |
| ***10)*** *Documents and reports reactions to medications, treatments and procedures.* | | |

| **Competency C: Formulate goals and outcomes using an evidence-based and theoretical analysis of available data to reduce patient and community risks.**<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Implements evidence-based findings to prevent risk of patient harm.* | | |
| ***2)*** *Clarifies any order or treatment regime believed to be inaccurate, non-efficacious or potentially harmful.* | | |
| ***3)*** *Uses standard references to compare expected and achieved outcomes of nursing care.* | | |
| **Competency D: Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.** | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Seeks assistance as needed.* | | |
| ***2)*** *Follows up on instructor questions, comments and/or suggestions.* | | |

| **Competency E: Comply with mandatory reporting requirements of the Texas Nursing Practice Act.** | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| *1) Reports unsafe practices of health care delivery using appropriate channels of communication.* | | |
| *2) Reports safety incidents in a timely manner and follows with detailed documentation.* | | |
| **Competency F: Accept and make assignments and delegate tasks that take into consideration patient safety and organizational policy.** | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| *1) Makes assignments and delegates tasks, ensuring clear communication regarding other caregivers' levels of knowledge, skills, and abilities.* | | |

| **MEMBER OF THE HEALTH CARE TEAM** | | |
|---|---|---|
| **Competency A: Cooperate, collaborate, and communicate with patients, families, populations, communities, and the interdisciplinary health care team to plan, deliver, and evaluate care.**<br>**Course Objective #2***:* Analyze and propose culturally sensitive and developmentally appropriate health services and education programs to maintain or restore health status.<br>**Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Validates priority concerns with patient and family.* | | |
| *2) Uses therapeutic communication techniques and management.* | | |
| *3) Involves patient, families and other health care professionals for planning health care.* | | |
| *4) Acknowledges patient and family coping needs during alterations in health status.* | | |
| **Competency B: Serve as health care advocate in monitoring and promoting quality and access to health care for patients, families, populations, and communities.**<br>**Clinical Objective #2:** Integrate concepts of health disparities, health literacy, and cultural belief systems in the population-specific community assessment.<br>**Course Objective #3:** Differentiate the roles of nurses in community-based practice for population-specific persons/patients, families and populations within culturally diverse communities. | | |

| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
|---|---|---|
| ***1)*** *Uses organizational and management skills when using resources to meet goals/outcomes and enhance quality of nursing care and level of patient satisfaction.* | | |
| **Competency C: Use multiple referral resources for patients, families, populations, and communities, considering cost, confidentiality, effectiveness and efficiency of care, continuity and continuum of care, and health promotion, maintenance, and restoration.** **Course Objective #2:** Compare population-specific community populations with differing needs and resources and match with available services or identify needed services/resources. **Clinical Objective #3:** Develop an evidence-based health education program/class based on data from the population-specific community assessment. | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Assesses adequacy of the support system of patients.* | | |
| ***2)*** *Identifies providers and resources in the community to meet the needs of patients.* | | |

| **Competency D: Communicate and collaborate in a timely manner with members of the interdisciplinary health care team to promote and maintain the patient's optimal health status.** | | |
|---|---|---|
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Seeks opportunities to offer help to staff and fellow students.* | | |
| ***2)*** *Uses organizational and management skills when using resources to meet goals/outcomes and enhance quality of nursing care and level of patient satisfaction.* | | |
| **Competency E: Communicate and manage information using technology to support decision making to improve patient care and delivery systems.** | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ***1)*** *Collaborates with health care team to use human and material resources for optimal legal and cost-efficient care.* | | |
| **Competency F: Assign and/or delegate nursing care to other members of the health care team based on an analysis of patient or organizational need.** | | |
| **CRITERIA** | Preceptor's Evaluation | Preceptor's Evaluation |

| | Mid Rotation | End of Rotation |
|---|---|---|
| ***1)*** *Begins delegating and supervising appropriate care to non-licensed personnel.* | | |
| **Competency G: Supervise nursing care provided by others for whom the nurse is responsible by using best practices of management, leadership, and evaluation.** | | |
| **CRITERIA** | Preceptor's Evaluation Mid Rotation | Preceptor's Evaluation End of Rotation |
| ******Non-applicable for this course****** | | |

| **Midterm Comments:** | |
|---|---|
| Students:<br>Identify 3 specific strengths:<br><br>Identify 3 areas for growth: | Preceptor: |

Student Signature & Date: _____

Preceptor Signature & Date: _____

| **Final Comments:** | |
|---|---|
| Students:<br>State what the community rotation has taught you about nursing care:<br><br>What areas of community will you take with you to practice after graduation: | Preceptor:<br><br>Pass ☐<br>Fail ☐ |

Student Signature & Date: _____

Preceptor Signature & Date: _____

| **Clinical Faculty Comments:** |
|---|
| Clinical Faculty<br>Comments:<br><br>Pass ☐<br>Fail ☐ |

Clinical Faculty Signature & Date: _____

**Collin College RN-to-BSN Program Syllabus**
**RNSG 4115**

**COURSE INFORMATION**

**Course Number:** RNSG 4115

**Course Title:** Healthcare Organizations

**Course Description:**
This course explores the U.S. health care delivery organizations and payment systems. Perspectives of providers, institutions, insurers, and health care workers are described. The role of information in the continuity of care among institutions and inter-disciplinary care teams is articulated. The electronic information infrastructure is examined with implications for nursing practice.

**Course Credit Hours:** 1
Lecture Hours: 1

**Prerequisite:** Admission in RN-to-BSN program

**Student Learning Outcomes:**
Upon completion of this course the student will:

1. Describe the organization of health care delivery in the United States.
2. Identify the different payment mechanisms used to pay for health care in the United States, describing their advantages and disadvantages
3. Distinguish the role of the Professional Registered Nurse in quality of care within the US health care delivery system.
4. Distinguish the role of the Professional Registered Nurse in cost containment within health care.
5. Articulate the features of the Affordable Care Act (ACA) and how they will change current health care delivery.

**Secretary's Commission on the Acquisition of Necessary Skills (SCANS)** - SCANS skills are a group of foundational skills and workplace competencies that the Secretary's Commission on the Acquisition of Necessary Skills established as vitally important for workplace success in the 21st century. In Collin's workforce programs, the SCANS skills are developed and reinforced throughout the curriculum to provide students with an opportunity to hone these skills/competencies in the context of their education. Over the course of an entire degree program, the successful student is expected to demonstrate all of the SCANS skills and competencies as part of their education. The SCANS Foundation Skills and Workplace Competencies are described at:
http://www.collin.edu/academics/programs/Workforce_SCANS_Skills_Syllabi_Code_Key.pdf

**Withdrawal Policy:** See the current *Collin Registration Guide* for the last day to withdraw.
**WITHDRAWAL PROCEDURE:**

See *Nursing Division Student Handbook* Procedure 10.17, Adding or Dropping Courses, regarding withdrawing procedures, and the current *Collin College Registration Guide* for last day to withdraw.

**Collin College Academic Policies:** See the current *Collin College Student Handbook*.

**Americans with Disabilities Act Statement:**
Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin College Student Handbook* for additional information.

Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of *Student Code of Conduct (Code)* violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/) .

**ACADEMIC ETHICS:**

The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty.

Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty may involve, but is not limited to, one (1) or more of the following acts: cheating, plagiarism, collusion, use of annotated texts or teacher's editions and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for assignments as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course assignment; removing tests or answer sheets from a test site, and allowing a classmate to copy answers.

Refer to *Nursing Division Student Handbook* Policy 10.41 and *Collin College Student Handbook.*

**INSTRUCTOR INFORMATION**

See Canvas for Nursing Faculty Contact Expert Information

**Instructor's Name: TBD**
**Office Number:**
**Office Hours:** Hours posted on office door
**Phone Number:**
**Email:**
**Class Information:**
**Section Number: TBD**
**Meeting Times: In-class as scheduled**
**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Standards for Instructor Response and Availability**: Each instructor will have their own expected response time, but generally speaking the instructor will endeavor to respond within 24 hours during the work week. Office Hours are as posted by each level faculty

**Course Format:**

Lecture, group activities, role playing, audiovisual materials, independent study: computer lab modules and/or study guides, assigned references, teacher student conferences, visits to community resource facilities, journaling, and other assignments as indicted.

**Course Requirements:**

1. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Procedures 10.10 and 10.11).
2. Complete all course assignments.

3. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 4115 course, the student can continue in all other enrolled nursing courses.
4. You may repeat this course only once after receiving a failing grade.
5. This course will follow all requirements found in the *Collin College Nursing Division Student Handbook.*

**Course Evaluations**: All students completing courses for the Collin College RN-to-BSN program are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon the last day of class the student is in.

**Minimum Technology Requirement:**
Computer System Requirements: The basic computer specifications for Canvas use are available at: https://community.canvaslms.com/docs/DOC-2059
The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284
High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas Ap. or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions. HESI system requirements for both Mac and Windows users are available at: https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at:
https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx
You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:**
**Netiquette Expectations:** In all communications whether electronic discussion or mail, all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources: See required supplies and textbooks**

**Textbooks & Equipment:**

***Required Textbooks & Equipment***

American Nurses Association. (2008). *Nursing informatics: Scope & standards of practice.* Washington, DC: Author.

Mason, D., Gardner, D. Outlaw, F., & O'Grady, T. (2016). *Policy and politics in nursing and health care (*7th ed.*).* St. Louis, MO: Elsevier.

Semester syllabus *(Available on-line)*

*Nursing Division Student Handbook (Available on-line)*

**Attendance Procedure:** See *Nursing Division Student Handbook* Procedure 10.10 and 10.11, Class Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook.*

**Method of Evaluation**:

The course grade will be determined through the following process:

| | |
|---|---|
| Discussions (weeks 1, 2, 3, 4, 7) [50 points each] | 250 points |
| Final Project (week 6) | 100 points |
| Total | 350 points |

315-350 points= A 280-314 points= B 245-279 points = C Below 245= F

**Delivery Method of Feedback and/or Graded Material:**

Your grades will be available in the My Grades Tab of Canvas.

**Standards for Instructor Response and Availability:** Each instructor will have his/her own expected response time, but the instructor will endeavor to respond within 48 hours during the work week.

**Course Calendar**: See calendar posted in Canvas

**Discussion Board Guidelines:**

All students are expected to actively participate in online class discussions. The aim is to encourage thoughtful interaction among students and faculty, not simply to present information. Student responses to discussion questions must be substantive and demonstrate an awareness of comments previously posted and discussed. Repetition, or mere statements of concurrence (e.g. I agree with what was said.) are not a substantive comment. If you agree or disagree with another student's comment, explain why. The student is held to academic standards of writing style and the use of proper grammar, punctuation and spelling, as well as the expectation of documenting sources in APA format when citing the work or opinions of others.

Students are expected to participate in the online discussions in the following manner:

1. The academic work week begins at 0600 Central Time (CT) and ends the following Monday at 0559.
2. Enter Discussions and post a minimum of 2 days during the current week, with the initial post to the discussion question(s) by Wednesday (23:59 CT) of the week. Entering early in the week due and often will enhance the learning of all participants.

3. Initial responses may be posted up to 24 hours (Sunday, 0600 CT) prior to the beginning of the week but is not open to replies until Monday, 0600 CT. Replies that occur prior to the beginning of the week (Monday, 0600 CT) will not be accepted as a requirement for rubric and may be deleted.
4. Complete the assigned reading before participating in discussions. Your participation points are derived from the depth of your responses. The discussion should be thoughtful, informative, and respectful.
5. Initial post(s) must be a minimum of 250 words and peer replies must be a minimum of 150 words. Creating the post in a Word document will allow you to see the word count in the bottom left corner.
6. 75% of your posts must be original work. Synthesizing the literature and paraphrasing is acceptable but more than 25% use of quotes is unacceptable.
7. In-text citations are required in all posts.
8. After reading other students' posts, post an in-depth comment/reply, or ask/answer questions about the topic under study. Add any new and current information you may have found in your reading and reference accordingly.
9. Return to the Discussion Forum site later in the week and review questions/further discussion on the topic. Be sure to read and answer any comments/questions that students have about your previous posts.
10. Points for participation in the discussions will be assigned according to the depth and number of postings following the grading rubric.

**Research Skills**

Students are expected to be self-directed and knowledgeable in searching the Internet and in using the Collin College physical or virtual library to conduct research related to course assignments.

When studying for an assignment, primary sources should be peer-reviewed academic journals such as those found in the university's library. Internet searches directed to non-academic information resources such as Wikipedia, Google, or WebMD are not appropriate databases for scholarly academic assignments.

References for any assignment should be no more than 5 years old. Classic nursing works as primary references are considered appropriate within the profession.

Examples include:

Peplau, H. (1952). Interpersonal relationships in nursing: A conceptual frame of reference for psychodynamic nursing. New York, NY: G. P. Putnam's Sons.

Carper, B. (1978). Fundamental patterns of knowing in nursing. Advances in Nursing Science, 1(1), 13-23. doi: 10.1097/00012272-197810000-00004

**COURSE OUTLINE**

| Week | |
|---|---|

| | |
|---|---|
| 1 | **Summary of content, concepts, exemplars**: How other nations provide health care, US Health care reform, Overview of the challenges<br>**Class Objectives:**<br>1. Describe health care delivery in other countries<br>2. Describe the goals of US health care reform.<br>3. Identify areas where the US faces challenges in reforming health care<br>**Reading assignment:** Mason, Gardner, Outlaw, & O'Grady Ch. 16-21<br>**Class activities (Teaching strategies):** Compare and contrast health care delivery in other countries with that of the US. Discuss how changes in health care from the Affordable Care Act (ACA) have brought about needed reforms in the US health care system. What additional reforms are needed?<br>****Discuss in class and online** |
| 2 | **Summary of content, concepts, exemplars:** Overview of the Health Care Delivery system and Financing<br>**Class Objectives:**<br>1. Identify the different entities that comprise the US Health Care Delivery System<br>2. Examine how these entities help or hinder special populations<br>3. Describe the role of the members of the health care system in ensuring safe and effective patient care.<br>**Reading assignment:** Mason, Gardner, Outlaw, & O'Grady Ch. 16-29<br>**Class activities (Teaching strategies):** Discussion of issues on the different aspects of the health care delivery system and how healthcare is financed.<br>****In class and online discussion** |
| 3 | **Summary of content, concepts, exemplars:** Policy and Politics in Health care organizations<br>**Class Objectives:**<br>1. Examine Health Policy and Politics.<br>2. Identify the policies that you, a nurse leader could work to change.<br>**Reading assignment:** Mason, Gardner, Outlaw, & O'Grady Ch. 1-15<br>**Class activities (Teaching strategies):** Discuss an article identifying and summarizing the policies that could pertain to your organization from the readings. Describe how you as a professional nurse might implement those strategies in their workplaces better the current policy in your workplace.<br>****Discuss online** |

| | |
|---|---|
| 4 | **Summary of content, concepts, exemplars:** Role of the Professional Nurse in Health Policies<br>**Class Objectives:**<br>1. Identify the unique role of the professional nurse in interdisciplinary care provision<br>2. Identify areas where the role of the professional nurses to fulfill a current need in relation to special populations underserved by current health organizations<br>**Reading assignment:** Mason, Gardner, Outlaw, & O'Grady Ch. 28-39<br>**Class activities (Teaching strategies):** Identify a special population from the readings and examine how the professional nurse is taking action to enact change.<br>****Discuss online** |
| 5 | **Summary of content, concepts, exemplars:** Policy and Politics in the Government<br>**Class Objectives:**<br>1. Examine how the government enacts change in health care<br>2. Identify how the professional nurse can take action in legislation and regulation<br>**Reading assignment:** Mason, Gardner, Outlaw, & O'Grady Ch. 40-55<br>**Class activities (Teaching strategies):** Discuss in class governmental policies and procedures and how they regulate your workplace<br>****Discuss in class** |
| 6 | **Summary of content, concepts, exemplars:** Policy and Politics in the Community<br>**Class Objectives:**<br>1. Examine contemporary Policy and Political issue in the community<br>2. Identify the policies that you, a nurse leader could work to change.<br>**Reading assignment:** Mason, Gardner, Outlaw, & O'Grady Ch. 81-89<br>**Class activities (Teaching strategies):** Submit a paper regarding a policy from the readings that you feel called to discuss. Develop a plan of action a nurse leader might take to further the cause.<br>****Submit the paper** |
| 7 | **Summary of content, concepts, exemplars:** Policy and Politics in the Workforce and Workplace<br>**Class Objectives:**<br>1. Describe policy, politics, in health care organizations in the workplace<br>2. Examine how different nurse disciplines advocate for themselves and their patients<br>**Reading assignment:** Mason, Gardner, Outlaw, & O'Grady Ch. 56-71<br>**Class activities (Teaching strategies):** Discuss in class and online incentives and barriers of different nursing disciplines and how they take action to promote change.<br>****Present findings in class and online** |

**Rubric for Discussion Board**

**Student Name**_____ **Date**_____

| 15 Points | 10 Points | 5 Points | 0 Points | Points Earned |
|---|---|---|---|---|
| Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains at least 2 references<br>*Initial post must be a minimum of 250 words | Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains less than 2 references<br>*Initial post is a minimum of 250 words | Fully answers the question by the end of the week assigned or no references included<br>*Initial post is less than minimum of 250 words | Does not fully answer the question during the current week | /15 |
| Demonstrates synthesis of knowledge and includes practice (real-world) examples to support posting | Demonstrates synthesis of knowledge in initial posts but does not relate knowledge to practice (real-world) examples to support posting | Posts indicate minimal knowledge of subject matter | Posts are not relevant, or no subject matter knowledge is evident | /15 |
| **15 Points** | **10 Points** | **5 Points** | **0 Points** | **Points Earned** |
| Provides a minimum of two substantive replies per question with reference(s) by the end of the week (Monday 0559 CT). A minimum of one (1) reference is required per peer reply<br>*Each peer reply must be a minimum of 150 words | Provides less than the two (2) replies per question by the end of the week (Monday 0559 CT). A minimum of one (1) reference is required for each peer reply<br>*Each peer reply must be a minimum of 150 words | Provides replies to each question with simple comments and/or reference(s) not provided<br>*Each peer reply is less than minimum of 150 words | Does not reply to each question by the end of the week | /10 |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |
| Participates in discussion a minimum of 2 separate days of the current week, excluding the Sunday before the week begins | Participates in discussion 2 separate days of the week, including the Sunday before the week begins | Participates in discussion less than 2 days of the week | Does not reply to each question by the end of the week | /2 |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |

| | | | | |
|---|---|---|---|---|
| Organization is logical, ideas are clearly presented, and transitions are smooth between topics | Organization adequate, ideas usually clear and transitions mostly smooth | Organization is minimally effective; problems with clarity and/or transitions | Organization does not meet requirements | /2 |
| Spelling, grammar, punctuation, mechanics and word usage are correct and consistent with Standard American English | Spelling, grammar, punctuation, mechanics, and word usage are adequate and consistent with Standard American English; errors do not interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics, and word usage are distracting and could interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics and/or word usage interfere with understanding and do not reflect scholarly writing | /2 |
| All references are relevant, scholarly and contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet two requirements of relevant, scholarly or contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet one requirement of relevant, scholarly or contemporary | No use of references | /2 |
| Correct APA format of in-text citations and references | Less than 2 APA errors | 3-4 APA errors | No use of APA format or 5+ errors | /2 |
| | | | **Total Points** | **/50** |

Faculty Name Date

**Criteria Used to Evaluate Participation Final Project**

| Competency | 5 Points | 3 Points | 1 Point | 0 Points | Points Earned |
|---|---|---|---|---|---|
| **Identifies a Health Policy initiative that a nursing leader could further the cause** | Thoroughly discussed the background of the Health Policy initiative and its uses to date | Discussed the background of the Health Policy initiative and its uses to date but needs more clarity. | Identified the Health Policy initiative but did not discuss it's uses to date. | Does not identify a Health Policy initiative that can be used in education. | /20 |

| | | | | | |
|---|---|---|---|---|---|
| **Discuss how the Health Policy initiative can be used in the clinical setting through a literature review** | Thoroughly discussed how the Health Policy initiative can be used in the clinical setting through a literature review. | Discussed how the Health Policy initiative can be used in the clinical setting but needs more clarity. | Discussed how Health Policy initiative can be used in the clinical setting but did not do a literature review. | Did not discuss how the Health Policy initiative can be used in the clinical setting. | **/20** |
| **Described the application and how a nurse leader might propose to use it.** | Thoroughly described the application and how a nurse leader might propose to use it. | Described the application and how a nurse leader might propose to use it but needs more clarity. | Did not describe the application, or how a nurse leader might propose to use it. Only discussed one of the two things. | Did not describe the application and how a nurse leader might propose to use it. | **25** |
| **Model the set up** | Thoroughly discussed how the Health Policy initiative can be set up. | Discussed how the Health Policy initiative can be set up but needs more clarity. | Very sketchy discussion of how the Health Policy initiative can be set up. | Did not discuss how the Health Policy initiative can be set up. | **/25** |
| **Competency** | **5 Points** | **3 Points** | **1 Point** | **0 Points** | **Points Earned** |
| **Grammar, spelling, and punctuation** | There are no errors in grammar, spelling, and punctuation | There are a few minor errors in grammar, spelling, and punctuation that do not detract from the meaning | There are major errors in grammar, spelling, and punctuation that do not reflect scholarly writing | NA | **/5** |
| **APA Compliance** | The paper meets APA format guidelines | There are minor APA format errors | There are significant errors in format | NA | **/5** |
| | | | | **Total Points** | **/100** |

**Collin College RN-to-BSN Program**
**RNSG 4225**

**COURSE INFORMATION**

**Course Number:** RNSG 4225

**Course Title:** Nursing Informatics

**Course Description:**
This course explores evidence-based research and practice through health care informatics. Includes informatics theories, networks, skills, technology, system implementation, and management of data bases. The role of information in the continuity of care among institutions and inter-disciplinary care teams is articulated. The electronic information infrastructure, including telehealth and individually-customized health care, is examined with implications for nursing practice.

**Course Credit Hours:** 2
Lecture Hours: 2

**Prerequisite:** Admission in RN-to-BSN program

**Student Learning Outcomes:**
Upon completion of this course the student will:
1. Describe the concepts of information and computer literacy as they relate to patient care.
2. Explain the relationship between information needs of the: clinician, patient, institution, and insurer and the role of the EHR in all of these needs.
3. Interpret the relationship of the EHR to inter-professional communication/collaboration and continuity of care.
4. Articulate the role of information technology in providing safe, quality care.

**Secretary's Commission on the Acquisition of Necessary Skills (SCANS)** - SCANS skills are a group of foundational skills and workplace competencies that the Secretary's Commission on the Acquisition of Necessary Skills established as vitally important for workplace success in the 21st century. In Collin's workforce programs, the SCANS skills are developed and reinforced throughout the curriculum to provide students with an opportunity to hone these skills/competencies in the context of their education. Over the course of an entire degree program, the successful student is expected to demonstrate all of the SCANS skills and competencies as part of their education. The SCANS Foundation Skills and Workplace Competencies are described at:
http://www.collin.edu/academics/programs/Workforce_SCANS_Skills_Syllabi_Code_Key.pdf

**Withdrawal Policy:** See the current *Collin Registration Guide* for the last day to withdraw.

**WITHDRAWAL PROCEDURE:**

See *Nursing Division Student Handbook* Procedure 10.17, Adding or Dropping Courses, regarding withdrawing procedures, and the current *Collin College Registration Guide* for last day to withdraw.

**Collin College Academic Policies:** See the current *Collin College Student Handbook*.

**Americans with Disabilities Act Statement:**
Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin College Student Handbook* for additional information.

Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of *Student Code of Conduct (Code)* violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**ACADEMIC ETHICS:**

The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty.

Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty may involve, but is not limited to, one (1) or more of the following acts: cheating, plagiarism, collusion, use of annotated texts or teacher's editions and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for assignments as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course assignment; removing tests or answer sheets from a test site, and allowing a classmate to copy answers.

Refer to *Nursing Division Student Handbook* Procedure 10.41 and *Collin College Student Handbook.*

**INSTRUCTOR INFORMATION**

See Canvas for Nursing Faculty Contact Expert Information
**Instructor's Name: TBD**
**Office Number:**
**Office Hours:** Hours posted on office door
**Phone Number:**
**Email:**
**Class Information:**
**Section Number: TBD**
**Meeting Times: In-class as scheduled**
**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Course Format:**

Lecture, group activities, role playing, audiovisual materials, independent study: computer lab modules and/or study guides, assigned references, teacher student conferences, visits to community resource facilities, journaling, and other assignments as indicted.

Students may review their exams by making an appointment with their advisor if needed. However, current exams can only be reviewed up to the next scheduled exam.

**Course Requirements:**

1. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Procedures 10.10 and 10.11).
2. Complete all course assignments.
3. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 4225 course, the student can continue in all other enrolled nursing courses.
4. You may repeat this course only once after receiving a failing grade.
5. This course will follow all requirements found in the *Collin College Nursing Division Student Handbook.*

**Course Evaluations**: All students completing courses for the Collin College nursing program are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon the last day of class the student is in.

**Minimum Technology Requirement:**
Computer System Requirements: The basic computer specifications for Canvas use are available at: https://community.canvaslms.com/docs/DOC-2059
The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284
High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas Ap. or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions. HESI system requirements for both Mac and Windows users are available at: https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at:
https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx
You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:**
**Netiquette Expectations:** In all communications whether electronic discussion or mail, all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources: See required supplies and textbooks**
**Textbooks & Equipment:**
***Required Textbooks & Equipment***

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

McGonigle, D., & Mastrian, K. G. (2012). *Nursing informatics and the foundation of knowledge* (4th ed.). Burlington, MA: Jones and Bartlett Learning.

Semester syllabus *(Available on-line)*

*Nursing Division Student Handbook (Available on-line)*

**Recommended**

Appari, Ajit, Johnson, M.E., & Anthony, D. L. (2013). Meaningful use of electronic health record systems and process quality of care: Evidence from a panel data analysis of U.S. acute-care hospitals. *HSR: Health Services Research, 48*(2), Part I, 354-375.

DesRoches, C.M., Miralles, P., Buerhaus, P, Hess, R., & Donelan, K. (2011). Health information technology in the workplace: Findings from a 2010 National Survey of Registered Nurses. *JONA, 41*(9), 357-364.

**Attendance Procedure:** See *Nursing Division Student Handbook* Procedure 10.10 and 10.11, Class Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook.*

**Additional Instructor Student Learning Outcomes:** May vary by instructor

**Method of Evaluation**:

The course grade will be determined through the following process:

| | |
|---|---|
| Discussions (weeks 2, 3, 4, 5, 7) [50 points each] | 250 points |
| Final Project (week 6) | 100 points |
| Total | 350 points |

315-350 points= A 280-314 points= B 245-279 points = C Below 245=

**Delivery Method of Feedback and/or Graded Material:**

Your grades will be available in the My Grades Tab of Canvas.

**Standards for Instructor Response and Availability:** Each instructor will have his/her own expected response time, but the instructor will endeavor to respond within 48 hours during the work week.

**Course Calendar**: See calendar posted in Canvas

**Discussion Board Guidelines:**

All students are expected to actively participate in online class discussions. The aim is to encourage thoughtful interaction among students and faculty, not simply to present information. Student responses to discussion questions must be substantive and demonstrate an awareness of comments previously posted and discussed. Repetition, or mere statements of concurrence (e.g. I agree with what was said.) are not a substantive comment. If you agree or disagree with another student's comment, explain why. The student is held to academic standards of writing style and the use of proper grammar, punctuation and spelling, as well as the expectation of documenting sources in APA format when citing the work or opinions of others.

Students are expected to participate in the online discussions in the following manner:

1. The academic work week begins at 0600 Central Time (CT) and ends the following Monday at 0559.

2. Enter Discussions and post a minimum of 2 days during the current week, with the initial post to the discussion question(s) by Wednesday (23:59 CT) of the week. Entering early in the week due and often will enhance the learning of all participants.
3. Initial responses may be posted up to 24 hours (Sunday, 0600 CT) prior to the beginning of the week but is not open to replies until Monday, 0600 CT. Replies that occur prior to the beginning of the week (Monday, 0600 CT) will not be accepted as a requirement for rubric and may be deleted.
4. Complete the assigned reading before participating in discussions. Your participation points are derived from the depth of your responses. The discussion should be thoughtful, informative, and respectful.
5. Initial post(s) must be a minimum of 250 words and peer replies must be a minimum of 150 words. Creating the post in a Word document will allow you to see the word count in the bottom left corner.
6. 75% of your posts must be original work. Synthesizing the literature and paraphrasing is acceptable but more than 25% use of quotes is unacceptable.
7. In-text citations are required in all posts.
8. After reading other students' posts, post an in-depth comment/reply, or ask/answer questions about the topic under study. Add any new and current information you may have found in your reading and reference accordingly.
9. Return to the Discussion Forum site later in the week and review questions/further discussion on the topic. Be sure to read and answer any comments/questions that students have about your previous posts.
10. Points for participation in the discussions will be assigned according to the depth and number of postings following the grading rubric.

**Research Skills**

Students are expected to be self-directed and knowledgeable in searching the Internet and in using the Collin College physical or virtual library to conduct research related to course assignments.

When studying for an assignment, primary sources should be peer-reviewed academic journals such as those found in the university's library. Internet searches directed to non-academic information resources such as Wikipedia, Google, or WebMD are not appropriate databases for scholarly academic assignments.

References for any assignment should be no more than 5 years old. Classic nursing works as primary references are considered appropriate within the profession.

Examples include:

Peplau, H. (1952). Interpersonal relationships in nursing: A conceptual frame of reference for psychodynamic nursing. New York, NY: G. P. Putnam's Sons.

Carper, B. (1978). Fundamental patterns of knowing in nursing. Advances in Nursing Science, 1(1), 13-23. doi: 10.1097/00012272-197810000-00004

**COURSE OUTLINE:**

| Week | |
|---|---|

| | |
|---|---|
| 1 | **Summary of content, concepts, exemplars**: How is the Foundation of Knowledge model similar to the nursing process? How is nursing science, computer science, information science combined to achieve the Nursing informatics?<br>**Class Objectives:**<br>1. Describe the Foundation of Knowledge model and how it relates to computer science<br>2. Describe Nursing informatics and it role in healthcare.<br>3. Identify prelicensure informatics knowledge, skills, and attitudes<br>4. Describe the role of the nurse as a change agent in nursing informatics to positively impact patient care.<br>**Reading assignment:** McGonigle, D., & Mastrian Ch. 1, 2, & 3<br>**Class activities (Teaching strategies):** Compare and contrast Foundation of Knowledge model to the nursing process in a in class discussion.<br>Discuss in class how nursing informatics has played a role in healthcare<br>****Discuss in class** |
| 2 | **Summary of content, concepts, exemplars:** Overview of Ethical Application of Informatics and how legislative aspects of informatics address these concerns.<br>**Class Objectives:**<br>1. Identify ethical issues in informatics<br>2. Examine how the nurse applies an ethical approach related to informatics<br>**Reading assignment:** McGonigle, D., & Mastrian Ch. 5 & 12<br>**Class activities (Teaching strategies):** Discussion online of ethical issues and how it relates to HIPPA and HITECH<br>****Discuss online** |
| 3 | **Summary of content, concepts, exemplars:** Administrative Information Systems, Informatics Role in Patient Safety<br>**Class Objectives:**<br>1. Describe different types of healthcare information systems<br>2. Apply the knowledge of the information systems to the workplace<br>3. Explore the characteristics of a safety culture.<br>4. Examine strategies for developing a safety culture.<br>5. Recognize how human factors contribute to errors.<br>6. Appreciate the impact of informatics technology on patient safety<br>**Reading assignment:** McGonigle, D., & Mastrian Ch. 15<br>**Class activities (Teaching strategies):** Using the keywords in the text select two journal articles related to patient safety and present a brief discussion online on the findings and the potential for adoption (or your identification that they have been adopted) in your area.<br>****Discuss online** |
| 4 | **Summary of content, concepts, exemplars:** Electronic Health Record (EHR) and Clinical Informatics<br>**Class Objectives:**<br>1. Identify the common components of an electronic health record and identify which ones are "clinical" and which ones are primarily "administrative". Are there components that are definitely both?<br>2. Evaluate the flexibility of the EHR in meeting the needs of clinicians, patients and administrators/payors.<br>**Reading assignment:** McGonigle, D., & Mastrian Ch. 14 |

| | |
|---|---|
| | **Class activities (Teaching strategies):** Discussion online questions. What does the Affordable Care Act say about EHRs? What have been some of the difficulties in universal adoption of EHRs? If you are currently using an EHR, which one is it? What difficulties have you encountered in using it to provide patient care? What benefits have you seen from the EHR in providing patient care? Can you think of one modification/feature you would like to see that would make patient care easier to deliver using the EHR? What are some of the patient safety aspects of the EHR you have used?<br>****Discuss online** |
| 5 | **Summary of content, concepts, exemplars:** The Human-Technology Interface, Improving Workflow and Meaningful Use<br>**Class Objectives:**<br>1. Summarize the Human-Technology Interface<br>2. Apply the Human-Technology Interface to the workplace<br>3. Describe the current state of EHR use by the interdisciplinary health care team in one institution<br>4. Describe one typical and frequent patient care process /procedure such as admission or discharge from care from the perspective of information available in the EHR.<br>5. Evaluate the efficiency and usability of the EHR for this process/procedure, where could changes be made?<br>**Reading assignment:**<br>**Class activities (Teaching strategies):** Present a current Human-Technology Interface you use in the workplace and describe how you would use the three axioms in the human-computer interactions to improve the Human-Technology Interface.<br>****Discuss Online** |
| 6 | **Summary of content, concepts, exemplars:** Telehealth, Consumer Education<br>**Class Objectives:**<br>1. Explore the use of telehealth technology in nursing practice and the role of the telehealth nurse.<br>2. Identify the socio-economic factors likely to increase the use of telehealth interventions.<br>3. Specify and describe the most common telehealth tools used in nursing practice.<br>4. Compare and contrast telehealth pathways and protocols with ones you are familiar with in a similar area<br>5. Identify legal, ethical, and regulatory issues of telehealth practice.<br>6. Distinguish health literacy and e-health from basic literacy.<br>7. Explore various technology-based approaches to consumer health education.<br>8. Identify barriers to use of technology and issues associated with health-related consumer informatics.<br>9. Imagine future approaches to technology-supported consumer education.<br>**Reading assignment:** McGonigle, D., & Mastrian Ch. 18<br>**Class activities (Teaching strategies):** Create a staff teaching plan for a telehealth initiative in student's area to meet a health need identified in week 11. Be sure to include patient teaching aspects as well in addition to electronic health resources to provide to the patients. |

| | |
|---|---|
| | ****Present to class via attachment in discussion board & give feedback on presentation.** |
| 7 | **Summary of content, concepts, exemplars:** Community Health Information<br>**Class Objectives:**<br>1. Provide an overview of community and population health informatics.<br>2. Describe informatics tools for promoting community and population health.<br>3. Define the roles of federal, state, and local public health agencies in the development of public health informatics.<br>**Reading assignment:** McGonigle, D., & Mastrian Ch. 16 & 17<br>Search various cites listed in table 17-1 on important population health informatics<br>**Class activities (Teaching strategies):** Locate population health data for your state and county and assess the areas where your county is "healthier" and "less healthy" than the state and the nation as a whole based on the data. What initiatives can you find to address these health needs? What more needs to be done?<br>****Discuss online** |

**Rubric for Discussion Board**

**Student Name**_____ **Date**_____

| 15 Points | 10 Points | 5 Points | 0 Points | Points Earned |
|---|---|---|---|---|
| Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains at least 2 references<br>*Initial post must be a minimum of 250 words | Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains less than 2 references<br>*Initial post is a minimum of 250 words | Fully answers the question by the end of the week assigned or no references included<br>*Initial post is less than minimum of 250 words | Does not fully answer the question during the current week | /15 |
| Demonstrates synthesis of knowledge and includes practice (real-world) examples to support posting | Demonstrates synthesis of knowledge in initial posts but does not relate knowledge to practice (real-world) examples to support posting | Posts indicate minimal knowledge of subject matter | Posts are not relevant, or no subject matter knowledge is evident | /15 |
| **15 Points** | **10 Points** | **5 Points** | **0 Points** | **Points Earned** |
| Provides a minimum of two substantive replies per question with reference(s) by the end of the week (Monday 0559 CT). A minimum | Provides less than the two (2) replies per question by the end of the week (Monday 0559 CT). A minimum of one (1) reference is | Provides replies to each question with simple comments and/or reference(s) not provided | Does not reply to each question by the end of the week | /10 |

| | | | | |
|---|---|---|---|---|
| of one (1) reference is required per peer reply<br>*Each peer reply must be a minimum of 150 words | required for each peer reply<br>*Each peer reply must be a minimum of 150 words | *Each peer reply is less than minimum of 150 words | | |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |
| Participates in discussion a minimum of 2 separate days of the current week, excluding the Sunday before the week begins | Participates in discussion 2 separate days of the week, including the Sunday before the week begins | Participates in discussion less than 2 days of the week | Does not reply to each question by the end of the week | **/2** |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |
| Organization is logical, ideas are clearly presented, and transitions are smooth between topics | Organization adequate, ideas usually clear and transitions mostly smooth | Organization is minimally effective; problems with clarity and/or transitions | Organization does not meet requirements | **/2** |
| Spelling, grammar, punctuation, mechanics and word usage are correct and consistent with Standard American English | Spelling, grammar, punctuation, mechanics, and word usage are adequate and consistent with Standard American English; errors do not interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics, and word usage are distracting and could interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics and/or word usage interfere with understanding and do not reflect scholarly writing | **/2** |
| All references are relevant, scholarly and contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet two requirements of relevant, scholarly or contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet one requirement of relevant, scholarly or contemporary | No use of references | **/2** |
| Correct APA format of in-text citations and references | Less than 2 APA errors | 3-4 APA errors | No use of APA format or 5+ errors | **/2** |
| | | | **Total Points** | **/50** |

Faculty Name_____ Date_____

**Criteria Used to Evaluate Participation Final Project**

| Competency | 5 Points | 3 Points | 1 Point | 0 Points | Points Earned |
|---|---|---|---|---|---|
| **Identifies a Telehealth initiative that can be used in the teaching plan** | Thoroughly discussed the background of the telehealth initiative and its uses to date | Discussed the background of the telehealth initiative and its uses to date but needs more clarity. | Identified the telehealth initiative but did not discuss it's uses to date. | Does not identify a telehealth initiative that can be used in education. | /5 |
| **Discuss how the telehealth initiative can be used in the clinical setting through a literature review** | Thoroughly discussed how the telehealth initiative can be used in the clinical setting through a literature review. | Discussed how the telehealth initiative can be used in the clinical setting but needs more clarity. | Discussed how telehealth initiative can be used in the clinical setting but did not do a literature review. | Did not discuss how the telehealth initiative can be used in the clinical setting. | /5 |
| **Described the application and how you propose to use it** | Thoroughly described the application and how you propose to use it. | Described the application and how you proposed to use it but needs more clarity. | Did not describe the application, or how you propose to use it. Only discussed one of the two things. | Did not describe the application and how you propose to use it. | /5 |
| **Model the set up** | Thoroughly discussed how the technology can be set up. | Discussed how the technology can be set up but needs more clarity. | Very sketchy discussion of how the technology can be set up. | Did not discuss how the technology can be set up. | /5 |
| **List at least 2 student learning objectives with appropriate Bloom's level** | Listed at least 2 student learning objectives with appropriate Bloom's level. | Listed at least 1 student learning objectives with appropriate Bloom's level. | Listed at least 1 student learning objective but did not use the appropriate Bloom's level. | Did not list student learning objectives | /5 |
| **Described at least 2 learning** | Thoroughly described at | Described 1 learning | Described at least 1 learning | Did not describe | /5 |

| | | | | | |
|---|---|---|---|---|---|
| **experiences appropriate for the listed student learning objectives** | least 2 learning experiences appropriate for the listed student learning objectives. | experiences appropriate for the listed student learning objectives. | experiences but they were not appropriate to the listed student learning objectives. | learning experiences | |
| **Competency** | **30 Points** | **20 Points** | **10 Points** | **0 Points** | **Points Earned** |
| **Provide an evaluation plan that is appropriate to the student learning objectives** | Thoroughly discussed an evaluation plan that is appropriate to the student learning objectives. | Discussed an evaluation plan that is appropriate to the student learning objectives but needs more clarity. | Discussed an evaluation plan that is not appropriate to the student learning objectives. | Did not discuss an evaluation plan that is appropriate to the student learning objectives. | **/20** |
| **Develop a Staff Teaching Plan** | Thoroughly described a Staff Teaching plan. | Described a Staff Teaching plan but needs more clarity. | Described a Staff Teaching plan but omitted vital components. | Did not described a Staff Teaching plan. | **/40** |
| **Competency** | **5 Points** | **3 Points** | **1 Point** | **0 Points** | **Points Earned** |
| **Grammar, spelling, and punctuation** | There are no errors in grammar, spelling, and punctuation | There are a few minor errors in grammar, spelling, and punctuation that do not detract from the meaning | There are major errors in grammar, spelling, and punctuation that do not reflect scholarly writing | NA | **/5** |
| **APA Compliance** | The paper meets APA format guidelines | There are minor APA format errors | There are significant errors in format | NA | **/5** |
| | | | | **Total Points** | **/100** |

**Collin College RN-to-BSN Program**
**RNSG 4235**

**COURSE INFORMATION**

**Course Number:** RNSG 4235

**Course Title:** Health Care Quality

**Course Description:** Provides a multidisciplinary background in the science of healthcare quality management. Students will learn to develop and plan for execution of quality improvement plans, using a quality indicator assessment program, as the framework to develop a paper that identifies quality indicators, their measurements and nursing interventions to improve the quality measurement. Valued-based purchasing will be defined and interventions to assure quality and cost containment will be discussed.

**Course Credit Hours:** 2

Lecture Hours: 2
Lab Hours: None
Clinical Rotation Hours: None

**Prerequisite:** Admission in RN-to-BSN program

**Student Learning Outcomes:**

Upon completion of this course, the student will:

1. Assess healthcare settings to determine existing quality management systems.
2. Develop strategies, using common quality measures, to implement continuous quality improvement in a variety of healthcare settings.
3. Demonstrate professional accountability for competent nursing administrative practices in quality management activities that incorporate professional nursing values.
4. Discuss ethical/ legal factors affecting healthcare quality management.

**Secretary's Commission on the Acquisition of Necessary Skills (SCANS)** - SCANS skills are a group of foundational skills and workplace competencies that the Secretary's Commission on the Acquisition of Necessary Skills established as vitally important for workplace success in the 21st century. In Collin's workforce programs, the SCANS skills are developed and reinforced throughout the curriculum to provide students with an opportunity to hone these skills/competencies in the context of their education. Over the course of an entire degree program, the successful student is expected to demonstrate all of the SCANS skills and competencies as part of their education. The SCANS Foundation Skills and Workplace Competencies are described at:
http://www.collin.edu/academics/programs/Workforce_SCANS_Skills_Syllabi_Code_Key.pdf

**Withdrawal Policy:** See the current *Collin Registration Guide* for the last day to withdraw.

**WITHDRAWAL PROCEDURE:**

See *Nursing Division Student Handbook* Procedure 10.17, Adding or Dropping Courses, regarding withdrawing procedures, and the current *Collin College Registration Guide* for last day to withdraw.

**Collin College Academic Policies:** See the current *Collin College Student Handbook*.

**Americans with Disabilities Act Statement:**

Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin College Student Handbook* for additional information.

**Strategies of Behavioral Intervention (SOBI)**

Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of *Student Code of Conduct (Code)* violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**ACADEMIC ETHICS:**

The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty.

Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty may involve, but is not limited to, one (1) or more of the following acts: cheating, plagiarism, collusion, use of annotated texts or teacher's editions and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for assignments as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course assignment; removing tests or answer sheets from a test site, and allowing a classmate to copy answers.

Refer to *Nursing Division Student Handbook* Procedure 10.41 and *Collin College Student Handbook.*

**Faculty Contact Information:**
See Canvas for Nursing Faculty Contact Expert Information

**INSTRUCTOR INFORMATION**
**Instructor's Name: TBD**
**Office Number:**
**Office Hours:** Hours posted on office door
**Phone Number:**
**Email:**

**Class Information**
**Section Number: TBD**
**Meeting Times: In-class as scheduled**
**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Course Format:**
Lecture, group activities, role playing, audiovisual materials, independent study: computer lab modules and/or study guides, assigned references, teacher student conferences, visits to community resource facilities, journaling, and other assignments as indicted.

Students may review their exams by making an appointment with their advisor if needed. However, current exams can only be reviewed up to the next scheduled exam.

**Course Requirements:**

1. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Procedures 10.10 and 10.11).
2. Complete all course assignments.
3. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 4235 course, the student can continue in all other enrolled nursing courses.
4. You may repeat this course only once after receiving a failing grade.

5. This course will follow all requirements found in *the Collin College Nursing Division Student Handbook.*

**Course Evaluations:** All students completing courses for the Collin College RN-to-BSN program are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon entrance into the course final exam, if applicable, for the semester the student is in.

**Minimum Technology Requirement:**

**Computer System Requirements:** The basic computer specifications for Canvas use are available at: https://community.canvaslms.com/docs/DOC-2059

The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284

High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas App or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions.

HESI system requirements for both Mac and Windows users are available at: https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at:
https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx
You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:**
**Netiquette Expectations:** In all communications whether electronic discussion or mail, all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources: See required supplies and textbooks**

**Textbooks & Equipment:**
***Required Textbooks & Equipment***

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

Dlugacz, Y.D. (2017). *Introduction to health care quality: Theory, methods, and tools.* San Francisco: Jossey-Bass.
Semester syllabus *(Available on-line)*
*Nursing Division Student Handbook (Available on-line)*

**Attendance Procedure:** See *Nursing Division Student Handbook* Procedures 10.10 and 10.11, Class Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook.*

**Additional Instructor Student Learning Outcomes:** May vary by instructor

**Method of Evaluation**: The course grade will be determined as follows:
The maximum score in this class is 430 points and weighed as follows.

| Assignment | Points | Weighted |
|---|---|---|
| Discussion Board 1 | 50 | 30% |
| Discussion Board 2 | 50 | |
| Discussion Board 3 | 50 | |
| Research Assignment 1 | 20 | 15% |
| Research Assignment 2 | 20 | |
| Research Assignment 3 | 20 | |
| Quality Management/Improvement Program Strategy Project | 120 | 30% |
| Reflection Journal | 100 | 25% |
| Total Points | 430 | 100% |

387-430 points = A 344-386 points = B 301-343 points = C Below 301 points = F

Your grades will be available in the My Grades Tab of Canvas.

**Criteria Used to Evaluate Participation in Online Activities**: See Rubric Delivery Method of Feedback and/or Graded Material: See Method of Evaluation

**Standards for Instructor Response and Availability**: Each instructor will have his/her own expected response time, but the instructor will endeavor to respond within 48 hours during the work week.

**Course Calendar**: See Canvas

**Discussion Board Guidelines:**
All students are expected to actively participate in online class discussions. The aim is to encourage thoughtful interaction among students and faculty, not simply to present information. Student responses to discussion questions must be substantive and demonstrate an awareness of comments previously posted and discussed. Repetition, or mere statements of concurrence (e.g. I agree with what was said.) are not a substantive comment. If you agree or disagree with another student's comment, explain why. The student is held to academic standards of writing style and the use of proper grammar, punctuation and spelling, as well as the expectation of documenting sources in APA format when citing the work or opinions of others.

Students are expected to participate in the online discussions in the following manner:

1. The academic work week begins at 0600 Central Time (CT) and ends the following Monday at 0559.
2. Enter Discussions and post a minimum of 2 days during the current week, with the initial post to the discussion question(s) by Wednesday (23:59 CT) of the week. Entering early in the week due and often will enhance the learning of all participants.
3. Initial responses may be posted up to 24 hours (Sunday, 0600 CT) prior to the beginning of the week but is not open to replies until Monday, 0600 CT. Replies that occur prior to the beginning of the week (Monday, 0600 CT) will not be accepted as a requirement for rubric and may be deleted.
4. Complete the assigned reading before participating in discussions. Your participation points are derived from the depth of your responses. The discussion should be thoughtful, informative, and respectful.
5. Initial post(s) must be a minimum of 250 words and peer replies must be a minimum of 150 words. Creating the post in a Word document will allow you to see the word count in the bottom left corner.
6. 75% of your posts must be original work. Synthesizing the literature and paraphrasing is acceptable but more than 25% use of quotes is unacceptable.
7. In-text citations are required in all posts.
8. After reading other students' posts, post an in-depth comment/reply, or ask/answer questions about the topic under study. Add any new and current information you may have found in your reading and reference accordingly.
9. Return to the Discussion Forum site later in the week and review questions/further discussion on the topic. Be sure to read and answer any comments/questions that students have about your previous posts.
10. Points for participation in the discussions will be assigned according to the depth and number of postings following the grading rubric.

**COURSE OUTLINE**

**Week 1: Fundamentals of Quality Management**
Concept: Quality Improvement
Exemplars

- Theorists
- Organizations concerned with quality

**Prior to Class Assignment**

1. Research the evolution of health care quality management with a historic perspective.

**Readings/Viewings**
Dlugacz chapter Foundations of Health Care Quality
**Discussion Board 1**: Review the following scenario, defend your position, and explain what specific steps you would take, with rationales for your action.
The occurrence of never events in a hospital setting is a marker of poor care and processes and will have negative financial repercussions for the organization. As a hospital administrator or nurse manager, how would you react to reports of never events?

a. Would you challenge the data and defend the care as appropriate?

b. Would you implement new programs in the hope of improvement?
c. Would you focus on prevention to avoid the occurrence of never events?
d. Would you punish the offending staff members?
e. Would you hire new staff to combat never events?

**Learning Activities**

1. Review organizations making an impact on quality and safety standards, utilizing the following sites:
   a. Centers of Medicare and Medicaid Services at https://www.cms.gov/
   b. Institute for Healthcare Improvement at www.ihi.org/
   c. Agency for Health Research and Quality at https://www.ahrq.gov/
   d. Institute of Medicine at https://www.ahrq.gov/
   e. The Joint Commission at www.jointcommission.org
   f. National Quality Forum at https://www.qualityforum.org/
   g. The Leapfrog Group at www.leapfroggroup.org/

**Week 2: Accountable Care Act**

Concept: Quality Improvement

Exemplars

- Accountable care organizations
- Bundled payments
- Pay for performance
- Value-based purchasing
- Patient-centered medical home
- Electronic Health Records

**Prior to Class Assignment**

1. Review the Affordable Care Act at http://www.healthcare.gov/news/factsheets/2011/03/accountablecare03312011a.html

**Readings/Viewings**

Dlugacz chapter Understanding the Impact of Health Care Reform

**Research Assignment #1:** Patient-Centered Medical Homes and Affordable Care Act

**Learning Activities**

1. In groups of 2-3 students, discuss the pros and cons of health information technology and present to the class

**Research Assignment #1 Guidelines**

1. Research the Patient-Centered Medical Homes (PCMH) model and the Affordable Care Act (ACA) and discuss how the principles of the two models work in concert.
2. The student will be required to use the following format:
   a. An introduction to address the case or problem presented
   b. Presentation of the ideas in addressing the issue or case using information from the course
   c. Discussion of the case or problem
   d. Conclusion as a summary of thoughts

**Week 3: Safe Quality Care**
Concept: Quality Improvement
Exemplars
- Quality measurement
- Effective leadership
- Multidisciplinary communication
- Health literacy

**Prior to Class Assignment**
1. Review effective communication, lines of communication, and culture change related to communication

**Readings/Viewings**
Dlugacz chapter Making the Case for Change
**Research Assignment #1:** Patient-Centered Medical Homes and Affordable Care Act due

**Learning Activities**
1. Discuss the rationale for changing traditional processes of care delivery and relate changes seen in advanced illness screening and improving quality. Present discussion to the class.
2. In groups of 2-3 students, present a scenario to the class that demonstrates effective communication when providing patient teaching of a difficult intervention to an elderly patient.

**Week 4: Statistical Expectations for Standards of Care**
Concepts: Quality Improvement
Exemplars
- Statistical information
- Quality measurements
- Data and data analysis
- Communication strategies

**Prior to Class Assignment**
1. Review an examination of quality of care in cardiac mortality at http://www.health.ny.gov/statistics/chac/indicators/

**Readings/Viewings**
Dlugacz chapter New Challenges for Health Care Professionals
**Quality Improvement Project** (due Week 11)

**Learning Activities**
1. In groups of 2-4 students, divide the Joint Commission (TJC) seven standardized measures to evaluate the blood utilization process and present the standards to the class. Correlate the standards to the blood administration of area clinical agencies as comparison to TJC standards. Review standards at

http://www.jointcommission.org/patient_blood_management_performance_measures_project/

2. Working in groups of two, describe how analysis of data shows quality improvement in the clinical setting. Discuss how using aggregated data, concurrent data, cross-sectional data, longitudinal data, point-of-care data, prevalence data, retrospective data, or others can measure quality improvement.
3. Discuss interdepartmental coordination of care, identifying all personnel involved in delivering high-quality and safe patient care.

**Quality Improvement Project Guidelines**

A major project will be the development of a Quality Improvement Project pertaining to a health care entity. This project will be assigned during the course and will be completed as part of your final exam. Students will select a topic for the project and discuss with instructor before starting.

Students will form teams and develop a Quality Improvement Project based topic pertaining to improvement of care and/or services for their selected entity. The project will make use of quality improvement principles and information presented during the course. Each student within a team must make specific contributions to the program or project development and discussions.

The projects developed will be presented to the class by all members of each team. Each team member presents their specific contributions to the project.

A. Class Presentation by Team
    a. The score achieved by the team will be applied to each team member
B. Short Project Paper by Each Student
    a. In addition to the presentation, each student's contribution towards the team will be presented in form of a paper comprising the following elements:
        i. 500-word typed paper
        ii. Introduction- importance of the portion being contributed by the student
        iii. Presentation of the ideas and components the student is responsible for developing as part of the team effort
        iv. Discussion on the student's contribution towards the team project using the principles and theories discussed in class as well as pertinent literature reviewed by the student
C. Elements to be included in the Presentation
    a. Outline the research documenting need for healthcare improvement (Background)
    b. Define the system in which you are making improvements (Hospital, HMO, SNF or other entity)
    c. Identify key themes for improvement efforts (Which areas or items of the issue were selected for improvement and why)
    d. Use the improvement processes best suited for your project. (Six Sigma/Lean, PDSA, etc)
    e. Develop and describe the team meeting management skills used to accomplish your project. (Includes Team Dynamics)
    f. Describe basic steps used in managing change as you implemented your improvement plan
    g. Describe the value and context for the tools your team used and implemented in settings you used. Examples include but are not limited to:

i. Fishbones
ii. Process mapping
iii. Flow charting
iv. Run/control charts

D. Final grade for each student includes a combination of the individual student contribution paper and team presentation scores.

**Week 5: Improving Patient Care**
Concept: Quality Improvement
Exemplars
- Metrics and management
- Principles of High Reliability Organizations
- Quality management
- Gaps in care, errors, and monitoring of adverse events

**Prior to Class Assignment**
1. Review the Agency for Healthcare Research and Quality (AHRQ) guidelines for reporting errors of near errors at http://www.ahrq.gov/professionals/quality-patient-safety/patient-safety-resources/resources/advances-in-patient-safety/vol4/Kizer2.pdf
2. Review fall prevention programs at http://innovations.ahrq.gov/profiles/fall-prevention-toolkit-facilitates-customized-risk-assessment-and-prevention-strategies?id=3094#1

**Readings/Viewings**
Dlugacz chapter Improving Patient Safety

**Learning Activities**
1. Discuss the report(s) utilized in the students' clinical places of employment for monitoring falls.
2. Create a dashboard of the falls report data to determine trends in improvement or decline in patient safety.

**Week 6: Quality Tools and Methods to Manage Problems**
Concept: Quality Improvement
Exemplars
- Root cause analysis
- Failure mode
- Effects analysis
- Cause-and-effect diagrams (fishbones)
- Flowcharts
- Plan-Do-Study-Act (PDSA)

**Prior to Class Assignment**
1. Review appropriate steps involved in investigating a problem utilizing the following site:
http://www.ache.org/pubs/Releases/2014/top-issues-confronting-hospitals-2013.cfm
2. Review quality tools utilizing the following sites:
Williams, P.M. 2001. Techniques for Root Cause Analysis. *Baylor University Medical Center Proceedings 14*(2): 154-157.

Wu, A.W., Lipshutz, A.K. M., & Pronovost, P.J.2008. Effectiveness and Efficiency of Root Cause Analysis in Medicine. *JAMA 299*(6): 685-687.

**Readings/Viewings**
Dlugacz chapter Working with Quality Tools and Methods
**Research Assignment #2**: Health Care Quality Practices

**Learning Activities**

a. Divide the class into six teams, with each team assigned a problem in health care. Each team must provide data analysis using a different quality improvement tool. Each team of students determines the interdisciplinary team of stakeholders needed to define the problem. Each team presents the problem, quality tools utilized in data analysis to the class
    i. Examples of problems:
        1. Patient falls; medication errors; care to the wrong patient; missed health care provider orders
    ii. Examples of quality tools:
        1. Cause-and-effect (fishbones) diagrams; flowchart; checklist; run chart; histogram; root cause analysis

**Guidelines for Research #2 Assignment**

1. Conduct a college library search for a peer-reviewed article addressing health care quality practices in health care.
2. Write a 500-word summary describing the reason the topic was selected, what aspects the research addressed, and why the peer-reviewed article was chosen.
3. Submit the summary and copy of the peer-reviewed article. Be prepared to discuss the summary in class.

**Week 7: Data for Regulatory Compliance and Performance Improvement**
Concept: Quality Improvement
Exemplars

- Electronic health record
- Case studies
- Standard of care
- Variance analysis

**Prior to Class Assignment**

1. Review the distinction between collecting measures for compliance and for performance improvement at Bergstrom, N.B., Braden, J., Laguzza, A., & Holman, V. (1987). The Braden Scale for Predicting Pressure Sore Risk. *Nursing Research 36*: 205-210.
2. Review vulnerable populations and patients with chronic disease as they relate to quality

**Readings/Viewings**
Dlugacz chapter Working with Quality Data
**Research Assignment #2**: Health Care Quality Practices due

**Discussion Board 2:** Review the following scenario, defend your position, and explain what specific steps you would take, with rationales for your action. Argue the pros and cons of each of these alternatives, with special emphasis on using arguments to influence physician behavior.
As an administrator of a hospital or health system determined to lower the mortality rate (especially if is publicly reported as high), how would you determine if appropriate care was provided?

a. Would you try to place as many patients as possible in palliative or hospice care because that would lower the rate?
b. Would you demand that intensive care unit (ICU) directors justify each mortality in the ICU?
c. Would you honor the wishes of the patient and family in placing the patient in either the ICU or palliative care?
d. Would you use data, such as APACHE, to understand acuity levels in the ICU and direct care accordingly, with low-acuity patients on other units?

**Learning Activities**

1. Working in groups of 3 students, divide the findings of the Dartmouth Atlas (http://www.darthmouthatlas.org/) related to evidence of variability as to the cost of care around the country. Present findings to the class.

**Week 8: Quality and Safety Measures**
Concept: Quality Improvement
Exemplars:

- Essential measurements of monitoring and improving care
- Gaps in care
- Patient satisfaction

**Prior to Class Assignment**

a. Review monitoring measures as indicators of effective and efficient care at Institute of Medicine of the National Academies. (2013). Rewarding Provider Performance: Aligning Incentives in Medicare. *Pathways to quality health care series*. Washington, DC: National Academies Press.

**Readings/Viewings**
Dlugacz chapter Working with Quality and Safety Measures

**Discussion Board 3:** Review the following scenario, defend your position, and explain what specific steps you would take, with rationales for your action. Explain the advantages and disadvantages of each of these possibilities and articulate a formal plan (with time lines) for success.
Research shows that poor communication results in adverse events and patient harm. Changing channels of communication are occurring in health care settings from handwritten healthcare provider progress notes to electronic health records and from hierarchies to multidisciplinary teams.
As a senior administrator working in this changing environment, how would you encourage acceptance of these new modes of communication?

a. How would you attempt to convince the CEO to introduce educational programs to senior staff about the advantages of new communication styles and techniques?

b. How would you introduce clinical guidelines or care pathways so that multidisciplinary information is communicated?
c. How would you establish a formal communication and accountability structure with monthly reports and multidisciplinary meetings?

**Learning Activities**

1. Discuss how using measures to understand care differ for the consumer, the administrator, and the provider of care.
2. Conduct a class discussion on meeting clinical quality or performance measures utilizing the foundation for pay for performance (P4P) or value-based purchasing payment model. Include discussion on the possibility of this foundation of clinical quality or performance measure may encourage *more* care, and not necessarily *better* care.

**Week 9: Quality Tools for Efficiency**

Concept: Quality Improvement

Exemplars:

- Throughput
- Queuing theory
- APACHE data for Intensive Care Unit (ICU) efficiency

**Prior to Class Assignment**

1. Review the Queueing Theory as it relates to delays on patient care and satisfaction, and organizational and financial efficiency at Palvannan, R.K., and Teow, K.L. (2012). Queueing for Healthcare. *Journal of Medical Systems 36*: 541-547.

**Readings/Viewings**

Dlugacz chapter Translating Information into Action

**Research Assignment 3:** Maximizing Efficiency in Healthcare

**Learning Activities**

1. Divide students into two groups and assign the throughput principle to one group and the bottleneck process to the second group of students. Compare how each method effects maximization of efficiency.

**Guidelines for Research #3 Assignment**

1. Conduct a college library search for a peer-reviewed article addressing maximizing efficiency and quality in health care.
2. Write a 500-word summary describing the reason the topic was selected, what aspects the research addressed, and why the peer-reviewed article was chosen.
3. Submit the summary and copy of the peer-reviewed article. Be prepared to discuss the summary in class.

**Week 10: Challenges in the Future**

Concept: Quality Improvement

Exemplars:

- Quality metrics
- Principles of teamwork
- Performance improvement

**Prior to Class Assignment**

1. Review how culture change is a required component for sustained performance improvement.
2. Review how communication within an organization improves quality and safety.

**Readings/Viewings**
Dlugacz chapter Preparing for the Future
**Research Assignment 3:** Maximizing Efficiency in Healthcare due
**Learning Activities**

1. Conduct a class discussion on providing education of an organization about benchmarks-what they are, what they mean, and how they should be used.
2. Prepare a presentation on barriers that might be encountered when discussing benchmarks and how the barriers would be overcome.

**Week 11: Presentation of Quality Improvement Strategy Project**

**Reflection Journal on Quality Improvement Project** due

**Learning Activities**
As a group, students present community assessments according to presentation rubric

**Guidelines for Reflection Journal**
The main purpose of the reflection paper is to enhance your experiential learning by prompting you to critically assess your experiences in relation to your larger educational path. A secondary purpose of the reflection paper is to promote experiential learning to members of the broader community.

Reflection papers should be typewritten and approximately 500 words in length.

The content of the reflection paper will vary depending on each student's project. In general, however, the paper should include the following components:

1. A brief overview of your project and your goals.
2. A detailed description of some aspect of your project or experience that you felt was particularly meaningful for you.
3. A reflective analysis of why this aspect of your project was particularly meaningful for you. This might include an assessment of your knowledge and/or attitudes before starting the project and how these have changed.
4. An overall assessment of what you have learned by doing this assignment, and how it relates to your current academic study and/or future aspirations.

5. A discussion of the results of the evaluation of the event/activity/initiative, if applicable.

**Writing a Reflection Paper**

THREE KEY QUESTIONS – WHAT? SO WHAT? NOW WHAT?

- What? Start by describing and examining what happened during your experience. This includes observations about your own and other people's thoughts, feelings, and behaviors.
- So what? Make meaning of 'what' happened. Move your thinking from description to analysis and interpretation. Explore how the academic concepts you are learning in your lectures and readings relate to your experiences. Explore and critique academic concepts by examining how theory both fits well with your experience and where there are gaps.
- Now what? Identify how what you have learned can be used in the real world. Explore how one's understanding of an issue affects the solutions that are found. Explore how theory can be used to improve practice. Explore how practice can be used to improve theory.

References

Bringle, R.G. and Hatcher, J.A (2005). Reflection in service learning: Making meaning of experience. In Campus Compact

*Introduction to service-learning toolkit: Readings and resources for faculty*, (2nd ed.). Providence, RI: Campus Compact.

Scriven, M. and Paul, R. (n.d). *Defining critical thinking*. Retrieved January 4, 2008 from http://www.criticalthinking.org/aboutCT/define_critical_thinking.cfm

**Week 12: Presentation of Quality Improvement Project**
**Learning Activities**
As a group, students present community assessments according to presentation rubric

**Week 13: Presentation of Quality Improvement Project**
**Learning Activities**
As a group, students present community assessments according to presentation rubric

**Week 14: Presentation of Quality Improvement Project**
**Learning Activities**
As a group, students present community assessments according to presentation rubric

**Rubric for Research Assignment**

| Criteria | 4-5 Points | 2-3 Points | 0-1 Points | Points Earned |
|---|---|---|---|---|
| Support from Literature | Support from the literature is present and includes a minimum of one scholarly in-text citation and matching reference | Support from literature is present (in-text citation and reference) but is not scholarly | No support from the literature | /5 |
| Application of Course Knowledge | Contributes unique perspectives or insights gleaned from personal experience or examples from the healthcare field | Limited application of course knowledge and demonstration of perspectives | Does not reflect application of course knowledge and personal insights or examples from healthcare | /5 |
| Organization | Presents information in logical, meaningful, and understandable sequence, clearly relevant to the assignment | Information is sometimes unclear and difficult to follow | Is not relevant to assignment | /5 |
| Grammar, Syntax, APA format | APA format, grammar, spelling, and/or punctuation are accurate, or with zero to three errors | Four to six errors in APA format, grammar, spelling, and syntax noted | Contains greater than six errors in APA format, grammar, spelling, and/or punctuation or repeatedly makes the same errors after faculty feedback | /5 |
| | 0 Points Lost | | -2 Points Lost | |
| Submission | Submitted by due date | | Did not submit by due date | /-- |
| | | | **Total** | **/20** |

Student Name_____ Date_____

Faculty Signature_____

COMMENTS

**Rubric for Discussion Board**

**Student Name**_____ **Date**_____

| 15 Points | 10 Points | 5 Points | 0 Points | Points Earned |
|---|---|---|---|---|
| Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains at least 2 references<br>*Initial post must be a minimum of 250 words | Fully answers the question by Wednesday (11:59 p.m. CT) of the week assigned. Initial response contains less than 2 references<br>*Initial post is a minimum of 250 words | Fully answers the question by the end of the week assigned or no references included<br>*Initial post is less than minimum of 250 words | Does not fully answer the question during the current week | /15 |
| Demonstrates synthesis of knowledge and includes practice (real-world) examples to support posting | Demonstrates synthesis of knowledge in initial posts but does not relate knowledge to practice (real-world) examples to support posting | Posts indicate minimal knowledge of subject matter | Posts are not relevant or no subject matter knowledge is evident | /15 |
| **15 Points** | **10 Points** | **5 Points** | **0 Points** | **Points Earned** |
| Provides a minimum of two substantive replies per question with reference(s) by the end of the week (Monday 0559 CT). A minimum of one (1) reference is required per peer reply<br>*Each peer reply must be a minimum of 150 words | Provides less than the two (2) replies per question by the end of the week (Monday 0559 CT). A minimum of one (1) reference is required for each peer reply<br>*Each peer reply must be a minimum of 150 words | Provides replies to each question with simple comments and/or reference(s) not provided<br>*Each peer reply is less than minimum of 150 words | Does not reply to each question by the end of the week | /10 |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |
| Participates in discussion a minimum of 2 separate days of the current week, excluding the Sunday before the week begins | Participates in discussion 2 separate days of the week, including the Sunday before the week begins | Participates in discussion less than 2 days of the week | Does not reply to each question by the end of the week | /2 |
| **2 Points** | **1.5 Points** | **1 Point** | **0 Points** | **Points Earned** |

| | | | | |
|---|---|---|---|---|
| Organization is logical, ideas are clearly presented, and transitions are smooth between topics | Organization adequate, ideas usually clear and transitions mostly smooth | Organization is minimally effective; problems with clarity and/or transitions | Organization does not meet requirements | **/2** |
| Spelling, grammar, punctuation, mechanics and word usage are correct and consistent with Standard American English | Spelling, grammar, punctuation, mechanics, and word usage are adequate and consistent with Standard American English; errors do not interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics, and word usage are distracting and could interfere with meaning or understanding | Spelling, grammar, punctuation, mechanics and/or word usage interfere with understanding and do not reflect scholarly writing | **/2** |
| All references are relevant, scholarly and contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet two requirements of relevant, scholarly or contemporary, up to 10 years. Classic nursing works older than 10 years may be included | References meet one requirement of relevant, scholarly or contemporary | No use of references | **/2** |
| Correct APA format of in-text citations and references | Less than 2 APA errors | 3-4 APA errors | No use of APA format or 5+ errors | **/2** |
| | | | **Total** | **/50** |

Faculty Name_____ Date_____

**Rubric for Quality Improvement Project**

Student Name_____ Date _____
Group
Members_____

| Criteria | 30 Points | 20 Points | 10 Points | 0 Points | Points Earned |
|---|---|---|---|---|---|
| Identify a quality improvement topic that pertains to a health care entity | Thoroughly discussed the improvement topic and how it pertains to a health care entity | Discussed the improvement topic and how it pertains to a health care entity, but needs more clarity | Identified the improvement topic but did not discuss how it pertains to a health care entity | Does not identify the improvement topic that pertains to a health care entity | /30 |
| Discuss how the topic pertains to the improvement of care and/or services for selected health care entity | Thoroughly discussed how the topic pertains to the improvement of care and/or services for selected health care entity | Discussed how the topic pertains to the improvement of care and/or services for selected health care entity, but needs more clarity | Discussed the topic but did not discuss how it pertained to the improvement of care and/or services for selected health care entity | Did not discuss the topic or how it pertained to the improvement of care and/or services for selected health care entity | /50 |
| **Criteria** | **10 Points** | **7 Points** | **4 Points** | **0 Points** | **Points Earned** |
| Grammar, spelling, and punctuation | There are no errors in grammar, spelling, and punctuation | There are a few minor errors in grammar, spelling, and punctuation that do not detract from the meaning | There are major errors in grammar, spelling, and punctuation that do not detract from the meaning | NA | /10 |
| **Criteria** | **10 Points** | **7 Points** | **4 Points** | **0 Points** | **Points Earned** |
| APA Compliance | The paper meets APA format | There are minor APA format errors | There are significant errors in format | NA | /10 |
| | | | | **Total Points** | /40 |

COMMENTS

Faculty Signature _____ Date_____

**Presentation Grading Criteria**

**Purpose:** Students will demonstrate professional communication, use of presentation technology, effective group process, and presentation skills.

| Professional Presentation | Points | Score |
|---|---|---|
| • Introduce presentation topic(s) and objectives | | |
| • Cover required Group Presentation Objectives<br>○ Focused presentation on required objectives<br>○ Provided accurate information<br>○ Presented easy to understand material | | |
| • Utilize effective professional presentation skills<br>○ Maximum of 5-6 bullets per PowerPoint slide<br>○ Used professional PowerPoint template<br>○ Used one PowerPoint template for presentation<br>○ PowerPoint template color scheme easy to read<br>○ Font size readable at back of classroom | | |
| • Demonstrate effective communication skills<br>○ Used PowerPoint bullet points to guide presentation: Did not read slides<br>○ Spoke loudly enough to hear at back of classroom<br>○ Spoke to audience and made eye contact<br>○ Presentation flowed despite multiple speakers<br>○ Used professional language with no slang or colloquialisms | | |
| • Complete presentation within allotted time | | |
| TOTAL | | |

***Faculty reserve the right to grade group members individually based on group participation feedback.**

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**Rubric for Reflection Journal**

Student Name _____ Date_____

| Criteria | Exemplary | Proficient | Satisfactory | Unsatisfactory-Beginning | Total |
|---|---|---|---|---|---|
| Content Reflection | 45-50 points | 40-44 points | 35-39 points | 0-34 points | /50 |
| | Reflection demonstrates a high degree of critical thinking in applying, analyzing, and evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments. Insightful and relevant connections made through contextual explanations, inferences, and examples. | Reflection demonstrates some degree of critical thinking in applying, analyzing, and/or evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments. Connections made through explanations, inferences, and/or examples. | Reflection demonstrates limited critical thinking in applying, analyzing, and/or evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments Minimal connections made through explanations, inferences, and/or examples. | Reflection lacks critical thinking. Superficial connections are made with key course concepts and course materials, activities, and/or assignments | |
| Personal Growth | 28-30 points | 26-27 points | 24-25 points | 0-23 points | /30 |
| | Conveys strong evidence of reflection on own work with a personal response to the self-assessment questions posed. Demonstrates significant personal growth and awareness of deeper meaning through inferences made, examples, well developed insights, and substantial depth in perceptions and challenges. Synthesizes current experience into future implications. | Conveys evidence of reflection on own work with a personal response to the self-assessment questions posed. Demonstrates satisfactory personal growth and awareness through some inferences made, examples, insights, and challenges. Some thought of the future implications of current experience. | Conveys limited evidence of reflection on own work in response to the self-assessment questions posed. Demonstrates less than adequate personal growth and awareness through few or simplistic inferences made, examples, insights, and/or challenges that are not well developed. Minimal thought of the | Conveys inadequate evidence of reflection on own work in response to the self-assessment questions posed. Personal growth and awareness are not evident and/or demonstrates a neutral experience with negligible personal impact. Lacks enough inferences, examples, personal insights and challenges, and/or future implications are overlooked. | |

| | | | | | |
|---|---|---|---|---|---|
| | | | future implications of current experience. | | |
| Writing Quality | 18-20 points | 16-17 points | 14-15 points | 0-13 points | **/20** |
| | Well written and clearly organized using standard English, characterized by elements of a strong writing style and basically free from grammar, punctuation, usage, and spelling errors. | Above average writing style and logically organized using standard English with minor errors in grammar, punctuation, usage, and spelling. | Average and/or casual writing style that is sometimes unclear and/or with some errors in grammar, punctuation, usage, and spelling. | Poor writing style lacking in standard English, clarity, language used, and/or frequent errors in grammar, punctuation, usage, and spelling. Needs work. | |
| Timeliness | 0 points deducted | Deduct 1-5 points | Deduct 6-10 points | Deduct 11 points | /-- |
| | Journal reflection is submitted on or before deadline. | Journal reflection is submitted within 1 day (24 hours) after the deadline. | Journal reflection is submitted 1-2 days (25-48 hours) after the deadline. | Journal reflection is submitted 2-3 days (49-72 hours) after the deadline. | |
| | | | | **Total (sum of 4 Criteria)** | **/100** |

**Collin College RN-to-BSN Program**
**RNSG 4345**

**COURSE INFORMATION**

**Course Number:** RNSG 4345

**Course Title:** Population-Focused Community Health II

**Course Description:** Introduces the concept of the community of persons/patients, families, and populations as the maternal and pediatric patient in the healthcare system and the roles of the nurse in community services. Nurse roles include public policy, provision of primary care, prevention of disease or health risk, education and health promotion, and restoration.

**Course Credit Hours:** 3

Lecture Hours: 2

Lab Hours: None

Clinical Rotation Hours: 1

**Prerequisite:** Admission in RN-to-BSN program

**Student Learning Outcomes:**

Upon completion of this course, the student will:

Objectives: Didactic

1. Analyze local, state, and national public health system components, policies, missions, goals, and programs.
2. Compare population-specific (maternal and pediatric) community populations with differing needs and resources and match with available services or identify needed services/resources.
3. Differentiate the roles of nurses in community-based practice for population-specific (maternal and pediatric) persons/patients, families and populations within culturally diverse communities.
4. Explain epidemiologic, social, political, economic, and cultural trends that affect the health status of individuals, families, populations, and communities.
5. Analyze and propose culturally sensitive and developmentally appropriate health services and education programs to maintain or restore health status.
6. Use introspection and conscious examination of personal beliefs and value systems to increase sensitivity, respect, and caring for diverse populations.

Objectives: Clinical

1. Research local, state, and federal databases to conduct a population-specific (maternal and pediatric) community health assessment and proposal for addressing needs.
2. Integrate concepts of health disparities, health literacy, and cultural belief systems in the population-specific (maternal and pediatric) community assessment.
3. Develop an evidence-based health education program/class based on data from the population-specific (maternal and pediatric) community assessment.

4. Apply relevant local, state, and national regulations and policies that affect addressing the health needs of the population-specific (maternal and pediatric) community assessed.

**Secretary's Commission on the Acquisition of Necessary Skills (SCANS)** - SCANS skills are a group of foundational skills and workplace competencies that the Secretary's Commission on the Acquisition of Necessary Skills established as vitally important for workplace success in the 21st century. In Collin's workforce programs, the SCANS skills are developed and reinforced throughout the curriculum to provide students with an opportunity to hone these skills/competencies in the context of their education. Over the course of an entire degree program, the successful student is expected to demonstrate all of the SCANS skills and competencies as part of their education. The SCANS Foundation Skills and Workplace Competencies are described at:
http://www.collin.edu/academics/programs/Workforce_SCANS_Skills_Syllabi_Code_Key.pdf

**Withdrawal Policy:** See the current *Collin College Registration Guide* for the last day to withdraw.

**WITHDRAWAL PROCEDURE:**

See *Nursing Division Student Handbook* Procedure 10.17, Adding or Dropping Courses, regarding withdrawing procedures, and the current *Collin College Registration Guide* for last day to withdraw.

**Collin College Academic Policies:** See the current *Collin College Student Handbook*.

**Americans with Disabilities Act Statement:**

Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required affording equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin College Student Handbook* for additional information.

**Strategies of Behavioral Intervention (SOBI)**

Collin College's Strategies of Behavioral Intervention (SOBI) team is an interdisciplinary, college-wide team whose mission is to provide support for students, faculty, and staff, and to facilitate a positive and effective learning environment. In order to accomplish this, the SOBI team has designed a process for assisting students who may display various levels of concerning behavior (e.g., strange or unusual behavior; changes in dress, personal hygiene, or physical appearance; threats of harm to self or others; etc.). Any behavior that becomes a concern to you or that negatively affects your ability to succeed as a student at Collin College may be referred to SOBI.

Please note that SOBI is not a disciplinary committee, and SOBI actions are not a substitute for disciplinary procedures. Reports of *Student Code of Conduct (Code)* violations will be referred directly to the Dean of Student Development Office for disciplinary action.

To submit a SOBI referral through CougarWeb, go to the "Student" tab, scroll down to the section entitled, "Safety and Wellness" and then click on "Refer information of concern (SOBI)". Complete the form as fully and as accurately as possible.

You can obtain more information about SOBI (including how to submit a referral from off-campus) on the SOBI website, which can be found here (https://www.collin.edu/studentresources/SOBI/).

**ACADEMIC ETHICS:**
The College may initiate disciplinary proceedings against a student accused of scholastic dishonesty.
Scholastic dishonesty includes, but is not limited to, statements, acts or omissions related to applications for enrollment or the award of a degree and/or the submission as one's own work material that is not one's own. Scholastic dishonesty may involve, but is not limited to, one (1) or more of the following acts: cheating, plagiarism, collusion, use of annotated texts or teacher's editions and/or falsifying academic records.

**Plagiarism** is the use of an author's words or ideas as if they were ones' own without giving credit to the source, including, but not limited to, failure to acknowledge a direct quotation.

**Cheating** is the willful giving or receiving of information in an unauthorized manner during an examination, illicitly obtaining examination questions in advance, copying computer or Internet files, using someone else's work for assignments as if it were one's own or any other dishonest means of attempting to fulfill the requirements of a course.

**Collusion** is intentionally or unintentionally aiding or attempting to aid another in an act of scholastic dishonesty, including but not limited to, failing to secure academic work; providing a paper or project to another student, providing an inappropriate level of assistance; communicating answers to a classmate during an examination or any other course assignment; removing tests or answer sheets from a test site, and allowing a classmate to copy answers.

Refer to *Nursing Division Student Handbook* Procedure 10.41 and *Collin College Student Handbook.*

**Faculty Contact Information:**
See Nursing Clinical Faculty Contact List in Canvas

**INSTRUCTOR INFORMATION**
**Instructor's Name: TBD**
**Office Number:**
**Office Hours:** Hours posted on office door
**Phone Number:**
**Email:**

**Class Information**
**Section Number: TBD**
**Meeting Times: In-class as scheduled**
**Meeting Location: Health Sciences Center, Collin College McKinney Campus**

**Course Format:**
Lecture, group activities, role playing, audiovisual materials, independent study: computer lab modules and/or study guides, assigned references, teacher student conferences, visits to community resource facilities, journaling, and other assignments as indicted.

Students may review their exams by making an appointment with their advisor if needed. However, current exams can only be reviewed up to the next scheduled exam.

**Course Requirements:**

1. Each student must attend class online and participate in learning activities/lab times. (See *Nursing Division Student Handbook* Procedures 10.10 and 10.11).
2. Complete all course assignments.
3. Each course carries its own grade. A grade of less than a C in a course equates to a failure of that course. If a student should withdraw from the RNSG 4345 course, the student can continue in all other enrolled nursing courses.
4. You may repeat this course only once after receiving a failing grade.
5. This course will follow all requirements found in the *Nursing Division Student Handbook*.

**Course Evaluations:** All students completing courses for the Collin College RN-to-BSN program are required to complete course and faculty evaluations at end of each course. Proof of completion must be submitted upon entrance into the course final exam, if applicable, for the semester the student is in.

**Minimum Technology Requirement:**

**Computer System Requirements:** The basic computer specifications for Canvas use are available at: https://community.canvaslms.com/docs/DOC-2059

The Canvas browser requirements and settings information for both desktop and mobile devices are available at: https://community.canvaslms.com/docs/DOC-1284

High speed Internet connection (cable modem or DSL) is recommended. If you are using a mobile Canvas App or Wi-Fi, you may want to get on a direct internet connection to minimize internet interruptions.

HESI system requirements for both Mac and Windows users are available at: https://hesiinet.elsevier.com/

**Computer Skills Needed:** You should know how to access a Web site when given an address (URL) or link, use the features of your Web browser, download files, attach files to emails, and use MS Word processing software. You will also need to use MS Excel.

**Technical Support:** Technical support for Canvas is available 24 hours a day; 7 days a week; 365 days per year. The eCollin Learning Center (eLC) Student Canvas Resources page, including an online student orientation to Canvas, can be found at: https://www.collin.edu/academics/ecollin/studentcanvasresources.aspx

You may contact technical support at 1-972-377-1777. In addition, online support is available through the eCollin Learning Center (eLC): http://online.collin.edu/

**Minimum Student Skills:**
**Netiquette Expectations:** In all communications whether electronic discussion or mail, all students are expected to abide by the Student Civility Contract. All parties: faculty, staff and students will behave in a socially productive manner in any and all interactions. Your communications will demonstrate respect and control toward one another, cause another to feel valued and contributes to mutual respect.

**Course Resources: See required supplies and textbooks**

**Textbooks & Equipment:**
***Required Textbooks & Equipment***

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

Stanhope, M. & Lancaster, J. (2014). *Foundations of nursing in the community, Community oriented practice.* (5th ed.). New York City: Elsevier.

Semester syllabus *(Available on-line)*
RN to BSN Nursing Program Student Handbook *(Available on-line)*

**Attendance Procedure:** See *Nursing Division Student Handbook* Procedures 10.10 and 10.11, Class Attendance and Clinical Laboratory Attendance. Please see class schedule for last day to withdraw. For religious holy days, please refer to the current *Collin College Student Handbook*.

**Additional Instructor Student Learning Outcomes:** May vary by instructor

**Method of Evaluation**: The course grade will be determined as follows:
The maximum score in this class is 400 points and weighted as follows.

| Assignment | Points | Weighted |
|---|---|---|
| Research assignment 1 Preserving Fertility for Women Undergoing Cancer Treatment | 60 | 30% |
| Research assignment 2 Immunizations | 60 | |
| Pediatric Community Assessment Project<br>Written paper = 45 points Oral presentation = 45 points | 90 | 22.5% |
| Maternal-Child Community Assessment Project<br>Written paper = 45 points Oral presentation = 45 points | 90 | 22.5% |
| Reflection journal | 100 | 25% |
| Clinical Experience | Pass/Fail | |
| Total Points | 400 | 100% |

360-400 points = A 320-359 points = B 280-319 points = C 279 and below points = F

Your grades will be available in the My Grades Tab of Canvas.

**Criteria Used to Evaluate Participation in Online Activities**: See Rubric Delivery Method of Feedback and/or Graded Material: See Method of Evaluation

**Standards for Instructor Response and Availability**: Each instructor will have his/her own expected response time, but the instructor will endeavor to respond within 48 hours during the work week.

**Course Calendar**: See Canvas.
**Course Outline**
**Clinical Course Community Projects**
Review criteria for projects at end of syllabus

**Week 1: Child and Adolescent Health**
Concept: Child Development
Exemplars
- Growth
- Changes in body proportions
- Social/Emotional-personality, emotion, behavior
- Relationships
- Sensory reception, processing, use of information
- Communication- speech and language
- Acquisition of skills enabling independence at home and the community

**Prior to Class Assignment**
Review Healthy People 2020 regarding children and adolescents at www.healthypeople.gov
Review Immunization Information in Stanhope and Lancaster text
**Readings/Viewings**
Stanhope & Lancaster chapter Health Risks Across the Lifespan
**Research Assignment 1** Immunizations

**Guidelines for Research Assignment 1**
1. Conduct a college library search for a peer-reviewed article addressing evidence-based nursing or health care practices related to considerations in immunizations.
2. Write a 500-word summary describing the topic, what aspects the research addressed, and why the peer-reviewed article was chosen.
3. Submit the summary and copy of the peer-reviewed article. Be prepared to discuss the summary in class.

**Learning Activities**
1. Identify a child abuse resource center, agency, or person in your area. Using the Internet, obtain information on their program.
2. Assess your community for friendliness to the asthmatic population. Include access to health care, environmental quality, and available support networks.
3. Discuss the issues of intentional injury, weapons use, and violence in children. Design a health promotion plan focused on reduction of injuries associated with these issues.

**Week 2: Woman's Health**
Concept: Reproduction
Exemplars
- Contraception
- Pregnancy
- Infertility

- Gestational conditions
- Hormonal changes
- Menopause

**Prior to Class Assignment**

1. Review Healthy People 2020 regarding health care needs of women and men at www.healthypeople.gov
2. Compare healthcare concerns between men and women
3. Research community resources that are targeted to women's or men's healthcare needs

**Readings/Viewings**

Stanhope & Lancaster chapter Women's Health

**Learning Activities**

1. Analyze county mortality and morbidity data and rank the order of the 10 most prevalent health problems for women. Compare these with men's health problems.

**Week 3: Mental Health Issues of Children and Adolescents**

Concept: Cognition

Exemplars

- Development
- ADHD
- ADHD Medications
- Autism spectrum
- Autism medications

**Prior to Class Assignment**

**Readings/Viewings**

Stanhope & Lancaster chapter Poverty, Homelessness, Mental Illness, w and Teen Pregnancy

**Research Assignment 1:** Immunizations due

**Learning Activities**

In a classroom discussion, correlate how the category of persistent poverty relates to chronic homelessness and mental health issues.

**Week 4: Nursing and Global Health**

Concepts: Immunity

Exemplars

- Communicable diseases
- Epidemiologic triangle
- Surveillance

**Prior to Class Assignment**

1. Review pandemic disease consequences on global health

**Readings/Viewings**

Stanhope & Lancaster chapter Infectious Disease Prevention and Control

**Learning Activities**

1. In groups of 2-3 students, research nationally notifiable infectious diseases in the US and interventions needed to protect the community. Review the following site for reference: http://www.nndss/document/2012-Case%20Definitions.pdf
2. Discuss *who*, *when*, *where*, and *what* elements of conducting surveillance of communicable diseases answers *why* it is important for global health to conduct disease surveillance.

**Week 5: Family Health**

Concept: Health Promotion

Exemplars

- Health risk
- Health risk reduction
- Family crisis

**Prior to Class Assignment**

1. Review the three levels of the systems-oriented concept of family stress.

**Readings/Viewings**

Stanhope & Lancaster chapter Family Health Risks

**Research Assignment 2**: Preserving Fertility for Women Undergoing Cancer Treatment

**Learning Activities**

1. Relate how the health of families impact the health of the nation. Present findings to the class.

**Guidelines for Research 2 Assignment**

1. Conduct a college library search for a peer-reviewed article addressing evidence-based nursing or health care practices related to preserving fertility for women undergoing cancer treatment.
2. Write a 500-word summary describing the reason the topic was selected, what aspects the research addressed, and why the peer-reviewed article was chosen.
3. Submit the summary and copy of the peer-reviewed article. Be prepared to discuss the summary in class.

**Week 6: Communicable Diseases**

Concept: Immunity

Exemplars

- Reporting and surveillance
- Infectious disease
- Levels of prevention

**Prior to Class Assignment**

1. Review examples of epidemiologic objectives in Healthy People 2020 at https://www.healthypeople.gov/

**Readings/Viewings**
Stanhope & Lancaster chapter Epidemiological Applications
**Research Assignment 2**: Preserving Fertility for Women Undergoing Cancer Treatment due

**Learning Activities**

1. Conduct an assessment for health problems in an individual. Include the following components:
    a. Obtain a history of physical and mental health problems.
    b. Ask the individual to identify major health problems. Always start interventions with what the individual views as important.
    c. Obtain a family history of diseases. Identify a possible genetic link based on early age of onset of a disease or multiple family members with a disease.
    d. Do a clinical examination, including laboratory work.
    e. Evaluate health risk based on lifestyle. Include smoking status, dietary patterns of fiber and fat, exercise patterns, stress factors, and risk-taking behaviors.
    f. Identify immediate and long-range safety concerns.
    g. Assess individual's cultural beliefs about health.
    h. Assess social support.
    i. Examine the knowledge and practice of preventive health care.
    Provide appropriate age-based screening (e.g., cancer screening, hypertension screening).

**Week 7: School Nurse**
Concept: Human Development
Exemplars

- Safe Kids Campaign
- School-linked Program
- School-based health Centers (SBHCs)
- School Health Policies and Programs Study 2006 (SHPPS 2006)

**Prior to Class Assignment**

1. Complete a historical review of school nursing

**Readings/Viewings**
Stanhope & Lancaster chapter The Nurse in the Schools

**Learning Activities**

1. In groups of 2 students, divide the eight components of a coordinated school health program, research, and discuss the plan in a presentation to the class.

**Week 8: Home Health Nursing**
Concept: Health Promotion
Exemplars:

- Care coordination
- Accreditation
- Benchmarking

**Prior to Class Assignment**

1. Review practice models in population-focused home health, transitional care in the home, home-based primary care, home health, and hospice.

**Readings/Viewings**

Stanhope & Lancaster chapter The Nurse in Home Health and Hospice

**Learning Activities**

1. Discuss direct and indirect care aspects of home care
2. Discuss how to maintain infection control standards for home care

**Week 9: The Nurse in Occupational Health**

Concept: Health Promotion

Exemplars:

- Hazard Communication Standard
- National Institute for Occupational Safety and Health (NIOSH)
- Occupational Safety and Health Administration (OSHA)
- Worker's Compensation

**Prior to Class Assignment**

1. Review how current trends influence work-health interactions

**Readings/Viewings**

Stanhope & Lancaster chapter The Nurse in Occupational Health

**Pediatric Community Assessment Project** due

**Learning Activities**

1. Discuss how the application of the epidemiologic model triad can relate between work and health.
2. Discuss the categories of work-related hazards of occupational health.

**Week 10: Public Health**

Concept: Health Promotion

Exemplars:

- Community health
- Federal public health agencies
- Outreach workers

**Prior to Class Assignment**

1. Research the interdepartmental team of public health agencies.
2. Review the scope, standards, and roles of nursing in public health

**Readings/Viewings**

Stanhope & Lancaster chapter Nursing Practice at the Local, State, and National Levels in Public Health

**Maternal-Child Community Assessment Project** due

**Learning Activities**

1. Discuss the importance of public health follow-up care for persons with active, untreated tuberculosis, pregnant women who have not kept prenatal visits, and under-immunized children

**Guidelines for Pediatric & Maternal-Child Community Assessment Project**

Family-focused care: Students will have the opportunity to apply the nursing process in a pediatric/maternal-children home and/or community setting. This experience is designed to provide an opportunity to develop knowledge, abilities and skill in evidence-based assessment and teaching of families and their members. Students endeavor to partner with families and assist them to meet an identified health need within the context of their community.

All students will be required to:

A. Complete a Pediatric <u>and</u> Maternal-Child Community project

B. Complete a reflection journal to document your learning

The student will:

1. Select a pediatric member in the community who demonstrates a health need
2. Select a maternal-child family in the community who demonstrates a health need
3. Select a community site among home health, rehabilitation, approved community health clinics, pediatric facilities, and school ISDs agencies identified in the RNSG 4373 course posted to Canvas.
4. Complete a nursing assessment and history for <u>each</u> community member to validate the need for intervention utilizing the components found in the Jarvis, *Physical Examination & Health Assessment* text
    a. Evidence-based Assessment
    b. Cultural Competence
    c. Interview
    d. Complete Health History
    e. Mental Status Assessment

   f. Substance Use Assessment
   g. Domestic Violence Assessment
5. Identify the patient's assets and limitations in meeting the need
6. Develop an evidence-based health promotion teaching plan on any topic related to a pediatric and childbearing patient
7. Support the health teaching plan with current (1-3 years current), peer-reviewed articles from nursing journals
8. Implement the teaching in the format of a presentation and written plan for each patient
   a. Oral plan should be a 10-15-minute presentation to be delivered to the class
   b. Written plan should be at least 500 words and encompass all elements of the nursing assessment, history, and identified health need of the pediatric and maternal-child patient
9. Submit a copy of the presentation, written project, and articles of each patient by the due date identified in the syllabus

**Guidelines for Reflection Journal**

The main purpose of the reflection paper is to enhance your experiential learning by prompting you to critically assess your experiences in relation to your larger educational path. A secondary purpose of the reflection paper is to promote experiential learning to members of the broader community.

Reflection papers should be typewritten and approximately 500 words in length.

The content of the reflection paper will vary depending on each student's project. In general, however, the paper should include the following components:

1. A brief overview of your project and your goals. Reflect on both the maternal-child and pediatric projects.
2. A detailed description of some aspect of your project or experience that you felt was particularly meaningful for you.

3. A reflective analysis of why this aspect of your project was particularly meaningful for you. This might include an assessment of your knowledge and/or attitudes before starting the project and how these have changed.
4. An overall assessment of what you have learned by doing this reflective assignment, and how it relates to your current academic study and/or future aspirations.
5. A discussion of the results of the evaluation of the event/activity/initiative, if applicable.

**Writing a Reflection Paper**

THREE KEY QUESTIONS – WHAT? SO WHAT? NOW WHAT?

- What? Start by describing and examining what happened during your experience. This includes observations about your own and other people's thoughts, feelings, and behaviors.
- So what? Make meaning of 'what' happened. Move your thinking from description to analysis and interpretation. Explore how the academic concepts you are learning in your lectures and readings relate to your experiences. Explore and critique academic concepts by examining how theory both fits well with your experience and where there are gaps.
- Now what? Identify how what you have learned can be used in the real world. Explore how one's understanding of a social issue affects the solutions that are found. Explore how theory can be used to improve practice. Explore how practice can be used to improve theory.

References

Bringle, R.G. and Hatcher, J.A (2005). Reflection in service learning: Making meaning of experience. In Campus Compact

*Introduction to service-learning toolkit: Readings and resources for faculty*, (2nd ed.). Providence, RI: Campus Compact.

Scriven, M. and Paul, R. (n.d). *Defining critical thinking*. Retrieved January 4, 2008 from http://www.criticalthinking.org/aboutCT/define_critical_thinking.cfm

**Week 11: Presentation of Pediatric Community Project**
**Reflection Journal on Pediatric/Maternal-Child Community Projects** due
**Learning Activities**
Students present community project according to presentation rubric

**Week 12: Presentation of Pediatric Community Project**
**Learning Activities**
Students present community project according to presentation rubric

**Week 13: Presentation of Maternal-Child Community Project**
**Learning Activities**
Students present community project according to presentation rubric

**Week 14: Presentation of Maternal-Child Community Project**
**Learning Activities**
Students present community project according to presentation rubric

**Rubric for Research Assignment**

Student Name_____ Date_____

| Criteria | 11 -15 Points | 6 -10 Points | 0-5 Points |
|---|---|---|---|
| Support from Literature | Support from the literature is present and includes a minimum of one scholarly in-text citation and matching reference | Support from literature is present (in-text citation and reference) but is not scholarly | No support from the literature |
| Application of Course Knowledge | Contributes unique perspectives or insights gleaned from personal experience or examples from the healthcare field | Limited application of course knowledge and demonstration of perspectives | Does not reflect application of course knowledge and personal insights or examples from healthcare |
| Organization | Presents information in logical, meaningful, and understandable sequence, clearly relevant to the assignment | Information is sometimes unclear and difficult to follow | Is not relevant to assignment |
| Grammar, Syntax, APA format | APA format, grammar, spelling, and/or punctuation are accurate, or with zero to three errors | Four to six errors in APA format, grammar, spelling, and syntax noted | Contains greater than six errors in APA format, grammar, spelling, and/or punctuation or repeatedly makes the same errors after faculty feedback |
| | 0 Points Lost | | -5 Points |
| Submission | Submitted by due date | | Did not submit by due date |

Faculty Signature_____ Date_____

COMMENTS

**Rubric for Written Pediatric and Maternal-Child Community Assessment Project**

Student Name_____ Date _____

| Criteria | Possible Points | Earned Points |
|---|---|---|
| **Assessment of the Learner**<br>a. Select a pediatric/maternal-child community patient with a health need<br>b. Identify health learning need<br>c. Readiness of the patient to learn<br>d. Complete nursing assessment & history<br>i. Evidence-based Assessment<br>ii. Cultural Competence<br>iii. Interview<br>iv. Complete Health History<br>v. Mental Status Assessment<br>vi. Substance Use Assessment<br>vii. Domestic Violence Assessment | 25 | |
| **Constructs a Health Teaching Plan**<br>a. Develops a written plan for teaching based on an identified learning need of the patient<br>b. Develops an outline of content material<br>c. Utilizes the nursing process to develop the teaching plan<br>d. Uses a holistic approach in teaching plan<br>e. Identifies appropriate resources available in the community<br>f. Develops specific patient-focused learning objectives<br>g. Identifies planned teaching learning activities and time frame for planned activities | 10 | |
| **Convention/Usage/Sentence Structure** | 5 | |

| | | |
|---|---|---|
| a. Sentences are well constructed, vary in form, and show no major examples of nonstandard sentence formation<br>b. Grammar, spelling, and punctuation are free of error, except for minor infractions | | |
| **Format**<br>APA format (6th ed.) used | 5 | |
| **TOTAL POINTS** | 45 | |

Faculty Signature _____ Date_____

COMMENTS

**Presentation Grading Criteria**

**Purpose:** Students will demonstrate professional communication, use of presentation technology, effective group process, and presentation skills.

| Professional Presentation | Points | Score |
|---|---|---|
| • Introduce presentation topic(s) and objectives | | |
| • Cover required Group Presentation Objectives<br>○ Focused presentation on required objectives<br>○ Provided accurate information<br>○ Presented easy to understand material | | |
| • Utilize effective professional presentation skills<br>○ Maximum of 5-6 bullets per PowerPoint slide<br>○ Used professional PowerPoint template<br>○ Used one PowerPoint template for presentation<br>○ PowerPoint template color scheme easy to read<br>○ Font size readable at back of classroom | | |
| • Demonstrate effective communication skills<br>○ Used PowerPoint bullet points to guide presentation: Did not read slides<br>○ Spoke loudly enough to hear at back of classroom<br>○ Spoke to audience and made eye contact<br>○ Presentation flowed despite multiple speakers<br>○ Used professional language with no slang or colloquialisms | | |
| • Complete presentation within allotted time | | |
| TOTAL | | |

***Faculty reserve the right to grade group members individually based on group participation feedback.**

Student name _____ Date_____

**Rubric for Reflection Journal**

| Criteria | Exemplary | Proficient | Satisfactory | Unsatisfactory-Beginning | Total |
|---|---|---|---|---|---|
| Content Reflection | 45-50 points | 40-44 points | 35-39 points | 0-34 points | /50 |
| | Reflection demonstrates a high degree of critical thinking in applying, analyzing, and evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments. Insightful and relevant connections made through contextual explanations, inferences, and examples. | Reflection demonstrates some degree of critical thinking in applying, analyzing, and/or evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments. Connections made through explanations, inferences, and/or examples. | Reflection demonstrates limited critical thinking in applying, analyzing, and/or evaluating key course concepts and theories from readings, lectures, media, activities, and/or assignments Minimal connections made through explanations, inferences, and/or examples. | Reflection lacks critical thinking. Superficial connections are made with key course concepts and course materials, activities, and/or assignments | |
| Personal Growth | 28-30 points | 26-27 points | 24-25 points | 0-23 points | /30 |
| | Conveys strong evidence of reflection on own work with a personal response to the self-assessment questions posed. Demonstrates significant personal growth and awareness of deeper meaning through inferences made, examples, well developed insights, and substantial depth in perceptions and challenges. Synthesizes current experience into future implications. | Conveys evidence of reflection on own work with a personal response to the self-assessment questions posed. Demonstrates satisfactory personal growth and awareness through some inferences made, examples, insights, and challenges. Some thought of the future implications of current experience. | Conveys limited evidence of reflection on own work in response to the self-assessment questions posed. Demonstrates less than adequate personal growth and awareness through few or simplistic inferences made, examples, insights, and/or challenges that are not well developed. Minimal thought of the | Conveys inadequate evidence of reflection on own work in response to the self-assessment questions posed. Personal growth and awareness are not evident and/or demonstrates a neutral experience with negligible personal impact. Lacks enough inferences, examples, personal insights and challenges, and/or future implications are overlooked. | |

| | | | | | |
|---|---|---|---|---|---|
| | | | future implications of current experience. | | |
| Writing Quality | 18-20 points | 16-17 points | 14-15 points | 0-13 points | /20 |
| | Well written and clearly organized using standard English, characterized by elements of a strong writing style and basically free from grammar, punctuation, usage, and spelling errors. | Above average writing style and logically organized using standard English with minor errors in grammar, punctuation, usage, and spelling. | Average and/or casual writing style that is sometimes unclear and/or with some errors in grammar, punctuation, usage, and spelling. | Poor writing style lacking in standard English, clarity, language used, and/or frequent errors in grammar, punctuation, usage, and spelling. Needs work. | |
| Timeliness | 0 points deducted | Deduct 1-5 points | Deduct 6-10 points | Deduct 11 points | /-- |
| | Journal reflection is submitted on or before deadline. | Journal reflection is submitted within 1 day (24 hours) after the deadline. | Journal reflection is submitted 1-2 days (25-48 hours) after the deadline. | Journal reflection is submitted 2-3 days (49-72 hours) after the deadline. | |
| | | | | **Total Points (sum of 4 Criteria)** | **/100** |

Faculty Signature_____ Date_____

COMMENTS

Collin College

RN-to-BSN Program

Preceptor Guide

RNSG 3340 Population-Focused Community Health I/Clinical

This course introduces the concept of the community of persons/patients, families, and populations as the adult and geriatric patient in the healthcare system and the roles of the nurse in community services. Nurse roles include public policy, provision of primary care, prevention of disease or health risk, education and health promotion, and restoration.

RNSG 3450 Advanced Health Assessment/Clinical

This course is an in-depth coverage of a comprehensive health assessment with an emphasis on health promotion and how this concept is applied within nursing practice. The course focuses on the techniques of data collection and physical assessment and applying these across the lifespan and in a variety of diverse population groups and populations. This course lends itself to a concept-based approach.

RNSG 4345 Population-Focused Community Health II/Clinical

This course introduces the concept of the community of persons/patients, families, and populations as the maternal and pediatric patient in the healthcare system and the roles of the nurse in community services. Nurse roles include public policy, provision of primary care, prevention of disease or health risk, education and health promotion, and restoration.

RNSG 4465 Leadership and Management/Clinical

This course emphasizes leadership and management theories in communication and conflict resolution, budgeting, human resource management, quality and safety, risk management, change, deletion, decision-making, and current issues and trends. Clinical experiences focus on management of issues and interactive observation of leaders and managers in a variety of settings.

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RN-to-BSN Program

Student Learning Outcomes

1. Use clinical reasoning and knowledge based on the nursing program of study, evidence-based practice outcomes, and research studies as the bases for decision-making and comprehensive, safe patient and population care
2. Demonstrate inquiry and analysis in applying patient care technologies and information systems to support safe nursing practice and population risk reduction.
3. Lead safety and quality improvement activities as part of the interdisciplinary team and as an advocate and manager of nursing care.
4. Manage care transitions and promote population risk reduction with diverse communities in collaboration with members of the interdisciplinary health care team.
5. Participates in monitoring institutional, professional, and public policy to maintain adherence to standards of practice within legal, ethical, and regulatory frameworks of the professional nurse.
6. Demonstrates leadership skills related to financial, human resource, clinical, and professional issues in providing and evaluating care
7. Demonstrate leadership and advocacy that reflects the values and ethics of the nursing profession.

Basis of Clinical

Overview

Students in the RN-to-BSN Program are required to take the following four (4) clinical courses as part of their nursing curriculum:

- RNSG 3340 Population-Focused Community Health I/Clinical
- RNSG 3450 Advanced Health Assessment/Clinical
- RNSG 4345 Population-Focused Community Health II/Clinical
- RNSG 4465 Leadership and Management/Clinical

Students are required to spend 64 hours (32 hours on site / 32 hours on project/paper) per course during the semester focused on clinical learning integral to the respective courses. Students spend their clinical hours at various community-based health or nursing sites relevant to each course. Designated preceptors provide supervision. **Clinical hours are fulfilled through an onsite clinical experience and through an offsite clinical related project and paper.**

Preceptors are clinically expert nurses who have preferable earned, at a minimum, the BSN degree and have two years of experience, as health care and community-based resources, preceptors contribute significantly to the BSN students' learning and professional socialization. Preceptors and faculty work collaboratively to maximize potential for student learning. *Students have the ability to contribute in choosing their own preceptor in the clinical courses.* If the student is unsure of possible preceptors or sites, a list of available sites will be supplied to the student. The student can also identify others who may be suitable. In any event, the student must notify the course faculty and/or clinical coordinator to ensure the preceptor and facility meets the guidelines of the RN-to-BSN Program. The clinical coordinator will ensure the site is suitable and will initiate a contract.

In consultation with their preceptors and faculty, students will determine the clinical activities consistent with the course objectives developed by the faculty. Students will work with their preceptor to define two (2) specific objectives they would like to achieve for the course. Students will be required to track their on-site clinical hours using the form provided within this guide. Students will also be required to have a minimum of one clinical site visit from their clinical coordinator during the semester.

Students can distribute their clinical hours across the semester to meet the course objectives or complete the hours in a more concentrated fashion. The student will work with the preceptor based on the student and preceptor needs. ***Ideally, no student will stay within his/her employing institution for the clinical experience. No student may be assigned to a unit or direct reporting department where he/she is employed.*** Clinical time for which students receive financial or other compensation may not be counted as clinical hours.

Students are responsible for meeting all requirements mandated in respective course syllabi, handbook, and the Preceptor Guide.

Process for Beginning Clinical

Course Faculty

- Provides student with a clinical course syllabus
- Provides student a clinical orientation

Student

- Attends orientation prior to start of clinical semester (in class)
- Completes pre-clinical requirements
    - Active, unencumbered Texas RN license
    - Health requirements
    - Criminal background check
    - Mandatory drug screening
    - Professional liability and health insurance
    - Cardio-pulmonary resuscitation (CPR) certification
    - Health Insurance Portability and Accountability Act (HIPPA) training
    - Identification badges and dress code requirements
- Provides preceptor with **Letter of Introduction**, **Preceptor Guide**, and **applicable syllabus** by electronic means prior to the start of clinical

Clinical Coordinator

- Approves clinical site
- Ensures student documentation completion and start date of clinical by second week of semester
- Completes a minimum of one clinical site visit per student per semester

Preceptor

- Completes Preceptor Contract and Preceptor Information and returns to Collin College RN-to-BSN Program Clinical Coordinator by the second week of clinical
- Collaborates schedule with student for clinical hours (32 hours on site)

Responsibilities for Students' Schedules and Reports

Faculty

- Works with student during the semester to develop clinical objectives and clarification on project expectations
- Ensures students have developed two (2) clinical learning objectives by the second week of the semester as part of their evaluation
- Ensures that all completed documentation from the Preceptor Guide has been collected and submitted by the preceptor and student by the assigned dates

Student

- Develops working relationship with agency and preceptor
- Coordinates scheduling or clinical hours with preceptor and agency
- Schedules one (1) visit with clinical coordinator and preceptor
- Develops Student Objectives by second week of the semester. (*Please write the objectives on the Preceptor Evaluation of Student Form.)* These are two main goals/learning objectives students want to accomplish through this experience
- Prepares for specific clinical agency experience by reading and orienting to site
- Participates in clinical as agreed upon with preceptor/faculty
- Develops proposal for project with preceptor/faculty by mid semester per course requirements
- Completes all clinical requirements by last week of the semester
- Submits final copy of project/paper by stated date on syllabus

Preceptor Forms and Instructions

**Preceptors are required to complete the following forms:**

- **Preceptor Information**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  *Due by week 2 of clinical*
  The information on this form is required by Collin College RN-to-BSN Program for accreditation purposes. Please ensure the student has completed his/her information at the top of the form.

- **RN-to-BSN Completion Program Institutional Placement Agreement:**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  This form **may** be required by your immediate supervisor to ensure they are aware of your participation and willingness to assist as a preceptor. **The form is not mandated by Collin College RN-to-BSN Program.** If required, provide to the assigned student.

- **Preceptor Contract:**
  *Email to the RN-to-BSN Program Clinical Coordinator*
  *Due by week 2 of clinical*
  This form indicates your acceptance of the role as a preceptor with the assigned student

- **Preceptor's Evaluation of Student Performance: Clinical Evaluation Tool**
  *Email to the RN-to-BSN Program Course Faculty*
  *Due within a week of completing clinical hours*
  This form is to be completed by the preceptor. The preceptor can determine the most appropriate time to assess. However, the form must be completed and submitted no later than the last week of the semester for the student to be awarded a grade.

- **Preceptor's Interaction Regarding Faculty:**
  *Email to the RN-to-BSN Program Director*
  *Due within a week of completing clinical hours*
  This form should be completed by the preceptor at end of the clinical experience. The information you provide will assist us in determining how best the faculty can assist you in the future. We appreciate your time in providing your feedback.

Preceptor Information

*Please email to the RN-to-BSN Program Clinical Coordinator | Due by week 2 of clinical*

Course:

- ☐ RNSG 3340 Population-Focused Community Health I/Clinical
- ☐ RNSG 3450 Advanced Health Assessment/Clinical
- ☐ RNSG 4345 Population-Focused Community Health II/Clinical
- ☐ RNSG 4465 Leadership and Management/Clinical

Student_____

Work Phone_____ Home Phone_____

Cell Phone_____ E-mail_____

**Preceptor Information**

Preceptor Name and Credentials_____

Certifications_____

Official Title_____ E-mail_____

Address_____

Hospital/Agency Name_____

Hospital/Agency Mailing Address_____

Work Phone_____ Home Phone_____

Number of Years in Clinical Practice_____

RN License Number Validated (Done at Collin College)_____

Unencumbered: Yes_____ No_____

Educational Background (Required by ACEN accreditation)

| Name of School | Degree | Year Received |
|---|---|---|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

**To the Preceptor: Please copy the above information, keep a copy for yourself, and email to RN-to-BSN Program Clinical Coordinator**

Preceptor Contract

*Please email to the RN-to-BSN Program Clinical Coordinator | Due by week 2 of clinical*

I, _____ agree to serve as a preceptor for _____

Preceptor Name and Credentials Student Name

for course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

**Beginning Date**_____ **Completion Date**_____

I accept the following as responsibilities for the duration of the preceptorship, I will:

1. Serve as a resource person, role model, and consultant to the assigned student.
2. Coordinate the clinical experience with the student.
3. Recommend patient/client, family, and community assignments which will help the student integrate classroom theory.
4. Supervise the RN student as appropriate in the clinical settings.
5. Verify the presence of student at agreed upon clinical dates and times.
6. Assist in determining the degree to which the student has met the learning objectives during clinical.
7. Notify the school and student, if possible, at least two weeks in advance if unable to complete this contract.
8. Notify the faculty and clinical coordinator, as well as participating agencies, of any client incident requiring a formal report.
9. Notify the appropriate person in the clinical setting of the times the student will be in attendance.

I attest to the fact that the proposed student is not related to me, is not my immediate supervisor, and is not my employee or subordinate.

Preceptor Name and Title (type or print)_____

Preceptor Signature_____ Date_____

To Preceptors: Please return by the second week of the semester to the clinical coordinator

**Collin College RN-to-BSN Program course faculty is responsible for monitoring and evaluating clinical experience. These responsibilities include the following:**

1. Orient the preceptor to the goals and objectives of the curriculum and the course via the Preceptor Guide, course syllabus, and letter of introduction.
2. Provide appropriate resources for course content.
3. Provide supervision through telephone, e-mail, or conferences with students and preceptors.
4. Notify the preceptor if a decision is made to terminate the contract.

Faculty Signature_____ Date_____

Institutional Placement Agreement

*Please provide to assigned student, if applicable.*

**This form only needs to be completed if a supervisor requires permission prior to you serving as a preceptor in your facility.**

To: Preceptor and/or Supervisor

From: Director of Nursing

Please complete this form and return it to the Collin College RN-to-BSN Program.

I understand that _____ (preceptor's name), has agreed to serve as preceptor for _____ (student's name). I understand the time commitment and the possible need for accessibility to agency resources for completion of this clinical. This project has been approved by our agency and I support the preceptorship.

Administrator/Supervisor's name_____ Date_____

Name of agency_____

Preceptor Evaluation of Student Performance Instructions

*Please email to the RN-to-BSN Program Course Faculty.*

**Ongoing Assessment**

Your assessment of the RN-to-BSN completion student is important on an ongoing basis throughout the semester. If at any time you would like to request a meeting with the course faculty of Program Director, we encourage you to contact us.

When assessing adult learners, it may be helpful to review coaching information available in the addendum.

**When to assess**

We recommend that you meet with the student at:

- The beginning of the clinical to review the student's learning objectives and how best the student can meet these objectives
- During the semester to monitor the student's progress on an ongoing basis
- Final evaluation to determine the student's performance and verify completion of the clinical requirements

Preceptor's Interaction Regarding Faculty

*Please email to the RN-to-BSN Program Director*

To improve the RN-to-BSN Program for our students, clinical agencies, and preceptors, we welcome any feedback that you feel is valuable in assisting us with this mission.

**Collin College Course Faculty's Name**_____

| **Survey** | **Yes** | **No** |
|---|---|---|
| 1. Did you receive information from the RN-to-BSN Nursing Program in a timely manner prior to the start of the quarter? | | |
| 2. Did the course faculty provide his/her contact information to you? | | |
| 3. Did the course faculty provide you with adequate information to facilitate the student in the clinical component of this course? | | |
| 4. Would you recommend being a preceptor to others? | | |
| 5. Would you recommend this program to others? | | |
| 6. Is the one clinical visit enough to assist you in the role as a preceptor? | | |
| a. If the visit was not enough would you like more or less? Please circle | **More** | **Less** |

**Other comments?** _____

Preceptor Name_____

If you would like to be contacted about your comments, please provide a contact number.

Phone_____

Thank you!

**Students are responsible for completing and/or maintaining the following tasks and forms:**

- **Scheduling of Clinical Site Visits by telephone or electronic means**
  You must schedule one clinical site visit during the semester between the preceptor, yourself, and clinical coordinator

  Please adhere as closely to the following timelines for visits as possible

  - **The first site must be within the first half of the course start date**
  - **If the timeline above does not meet he needs of the preceptor, please contact your clinical coordinator**

- **Documentation of On-Site Clinical Experience**

  This form is to be maintained by the student on a weekly basis. The student is required to have the preceptor sign the form to verify completion of on-site clinical time. The completed document is to be given to your course faculty at the end of the semester.

- **Documentation of Project Hours Clinical Experience**

  This form is to be maintained by the student on a weekly basis. The student is required to have the preceptor sign the form to verify completion of project hours for clinical time. The completed document is to be given to your course faculty at the end of the semester.

- **Student's Assessment of Experience with Preceptor**

  This form is to be completed by the student and to be turned in to his/her course faculty at the end of the semester.

Documentation of On-Site Clinical Experience

*Please submit this form to the RN-to-BSN Program Course Faculty.*

Student: Fill out the information for your preceptor to sign

Preceptor: Your signature verifies the accuracy of the student's information

Student_____ Preceptor/Agency_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

| Date/Hours | Activity (Brief description) | Subtotal Hours |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Total Hours | |

Student Signature_____ Date_____

Preceptor Signature_____ Date_____

Documentation of Project Hours Clinical Experience

*Please submit this form to the RN-to-BSN Program Course Faculty prior to the end of the semester.*

Student: Fill out the information for your course faculty to sign

Student_____ Preceptor/Agency_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

| Date/Hours | Activity (Brief description) | Subtotal Hours |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Total Hours | |

Student Signature_____ Date_____

Preceptor Signature_____ Date_____

Student's Assessment of Experience with Preceptor

*Please submit this form to the RN-to-BSN Program Course Faculty prior to the end of the semester.*

Student_____

Preceptor_____

Course: ☐ RNSG 3340 Population-Focused Community Health I/Clinical
☐ RNSG 3450 Advanced Health Assessment/Clinical
☐ RNSG 4345 Population-Focused Community Health II/Clinical
☐ RNSG 4465 Leadership and Management/Clinical

Semester_____ Year_____

Please use the following rating scale when evaluating the statements about your preceptor

1= Satisfactory 2= Needs Improvement 3= Unsatisfactory

| Preceptor as a Role Model | | | |
|---|---|---|---|
| 1. The preceptor met with me at the agreed upon times. | 1 | 2 | 3 |
| 2. The preceptor provided for open communication and trust during my experience. | 1 | 2 | 2 |
| 3. The preceptor was supportive of my efforts. | 1 | 2 | 3 |
| Preceptor as a Resource | | | |
| 4. The preceptor assisted me with needed resources. | 1 | 2 | 3 |
| 5. The preceptor provided constructive feedback. | 1 | 2 | 3 |
| Preceptor as a Designer of Instruction | | | |
| 6. The preceptor provided me with and adequate orientation to the facility and role. | 1 | 2 | 3 |
| 7. The experiences I participated in were meaningful and met the course and my objectives. | 1 | 2 | 3 |
| 8. My time was optimized wisely when I was with the preceptor. | 1 | 2 | 3 |
| Preceptor as a Supervisor | | | |
| 9. My preceptor provided adequate time for evaluation. | 1 | 2 | 3 |
| 10. I would recommend this preceptor experience for other students. | 1 | 2 | 3 |

Comments_____

_____

_____