NURS 450 Clinical Skills III: Acute Medical-Surgical Nursing

Abilene Christian University

Fall 2014

NURS 450	Tuesday: 8 – 11 or 1-4 pm (Lab)
	Monday: 630 – 630 pm (Clinical)
4 credit hours	Classroom: Simulation Lab

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ACU Mission

To educate students for Christian service and leadership throughout the world.

School of Nursing Mission

To inspire and educate students for excellence in professional practice in preparation for Christian leadership and service as registered nurses throughout the world.

Course Description

Clinical Skills III: Medical-Surgical facilitates the student competencies needed to understand and apply the evidence-based clinical reasoning, assessment, planning, implementation, and evaluation within the nursing scope of practice to patients in simulation and direct acute care settings.

Prerequisites

Completion of Level II

Co-requisites

NURS 430, NURS 431, NURS 453, NURS 464

Course Purpose and Audience

This course is required in senior Level 3 after students are admitted to the school of nursing. This course facilitates understanding and application of nursing skills in the care of patients with acute

problems within complex health care systems, and allows practice and validation of acute cognitive and psychomotor skills and the affective characteristics required of professional nurses.

Professional Behavior Expectations

Baccalaureate educated nurses are prepared to function within an interdisciplinary team to lead and serve diverse patients (individuals, families, groups, communities, populations) across the life span in a variety of settings along the continuum of care. Since nurses' assume the responsibility of the care of others, professional attitudes, behaviors, judgments and skills must be learned and applied in all communication and interactions to provide safe and quality practice. The faculty at the SON believe that the classroom, simulation labs, and clinical experiences all provide settings for professional learning. Students are asked to engage actively in all settings as preparation for professional expectations encountered in their careers. Active engagement assumes attention to the topics, activities, speakers, faculty, peers, and patients involved in any given setting. Distractions should be for emergencies only, and faculty notified if potential phone or other issues are anticipated.

Teaching Philosophy and Christian Perspective

Faculty are responsible to facilitate the learning of students in preparation for professional careers in nursing. The faculty are responsible for modeling Christian character, authenticity, service, and leadership in nursing education and practice, and want to engage students by discussion in the faculty successes and failure of this responsibility. The faculty at the SON believe that nursing curriculum should reflect the current practice environment in compliance with evidence-based professional standards and rules of regulatory organizations. The curriculum integrates the mission of the university. Concepts will reflect the knowledge, judgment, behaviors, skills, attitudes, and values required of a professional nurse. The faculty believe that active participatory student-centered learning is required in baccalaureate generalist education to develop the professional competencies required of the graduate.

Faith and learning resources as a background for this course. The faculty invite the students to bring further resources in the semester discussion of faith in nursing practice.

Course Content

This course provides fundamental understanding and application of nursing science in the care of adult patients in acute settings within complex health care systems. Content covered in the course will be grouped in the categories of Provider of Patient-Centered Care, Patient Safety Advocate, Member of Health Care Team, and Member of the Profession. Specific content includes medication calculation, safe medication administration, infection control strategies, fall prevention, continuous quality improvement, support surfaces, special beds, fire, electrical, radiation, and chemical safety, restraints, seizure precautions, patient controlled analgesia, epidural analgesia, IV therapy (peripheral and central lines), incentive spirometry, peak flow meter, care of patients with mechanical ventilation, chest physiotherapy, suctioning –

oropharyngeal, endotracheal, tracheostomy care, close chest drainage, parenteral nutrition, perioperative care, nursing implications with diagnostic procedures.

Student Goals

After successful completion of this course, as a novice to advanced beginner, the student will:

Provider of Patient-Centered Care

1. As a novice to advanced beginner, adapts clinical reasoning, and distinguishes evidence-based nursing competencies (KBJSA) to holistically address and prioritize multiple simple to complex patient (IFG) preferences, values, and needs in acute settings.

Member of Health Care Team

2. As a novice to advanced beginner, collaborates with multiple patients (IFG) and the interdisciplinary health care team with effective communication skills and shared decision making for the achievement of the highest potential and safe patient health outcomes in acute health care settings.

Patient Safety Advocate

3. As an advanced beginner, demonstrates accountability for professional, legal, ethical, and regulatory standards for individual performance and system effectiveness for safe nursing competencies (KBJSA), planning and evaluating the delegation of patient (IFG) care to others, and the efficient use and allocation of health care resources in acute settings.

4. As a novice to advanced beginner, applies basic principles of health care policy, finance, and regulatory environments by the coordination, evaluation, and modification of care to multiple patients (IFG) to ensure safety and quality, the application of evidence-based leadership and management best practices, and the management of confidential information technology for seamless care and transition in complex acute health care systems.

Member of the Profession

5. As a novice to advanced beginner, applies professional values such as caring, advocacy, altruism, the preservation of human dignity, truth, justice, freedom, equality, ethics, integrity, civility, respect, and cultural competence in the pursuit of excellence of the Christian leadership and service of professional nursing.

6. As novice to advanced beginner, plans the promotion of the profession of nursing through leadership activities in the implementation of evidence-based practice standards, safety and quality care improvement, legal and patient (IFG) advocacy, and participation in professional student nursing organizations.

7. As a novice and an advanced beginner, engages in self care and reflection to prepare for clinical demands, plans growth to professional competence, and understands the need to participate in life long career and professional development.

Texts and Online Learning Resources

Ackley, B.J. & Ladwig, G. B. (2011). *Nursing diagnosis handbook: An evidence-based guide to planning care*. St. Louis: Mosby Elsevier.

Evolve. (2010). *Student resources.* Retrieved at http://evole.elsevier.com/Perry/skills

Evolve. (2012). *Student resources*. Retrieved at http://evolve.elsevier.com/Zerwekh

Evolve. (2012). *Student resources*. Retrieved at http://evolve.elsevier.com/Iggy/

Ignatavicius, D. D. & Workman, M. L. (2010). *Medical-surgical nursing: Clinical decision-making study guide*. St. Louis: Saunders Elsevier.

Ignatavicius, D. D. & Workman, M. L. (2010). *Medical-surgical nursing: Patient-centered collaborative care, 6th ed*. St. Louis: Saunders Elsevier.

Perry, A. G. & Potter, P. A. (2010). *Clinical nursing skills & techniques, 7th ed.* St. Louis: Mosby Elsevier.

Texas Board of Nursing. (September 2009). *Nursing practice act, nursing peer review, nurse licensure compact, and advanced registered nurse compact*. Retrieved from http://www.bon.texas.gov/nursinglaw/pdfs/npa2009.pdf

Texas Board of Nursing. (2010). *Differentiated essential competencies (DECs) of graduates of Texas nursing programs evidenced by knowledge, clinical judgments, and behaviors: Vocational (VN), diploma/associate degree (diploma/ADN), baccalaureate degree (BSN).* Retrieved from http://www.bne.state.tx.us/nursingeducation/info.html

Zerwekh, J. & Garneau, A. Z. (2012). *Nursing today: Transition and trends.* St. Louis: Elsevier Saunders.

Course Activities

This is a clinical course that meets 12 hours weekly or 180 hours over the 15 week semester. The 16th week will be used for final course evaluations.The student will be assigned weekly readings which are

reinforced by written reflective and discussion in clinical post conference. Professional preparation, behavior, and dress is expected in both clinical settings and the simulation laboratory.

Course Competencies

Cognitive Competency Statements	**Measurement Instruments**	**Performance Indicators or Criteria**
The student retains concepts of clinical reasoning, holistic, comprehensive assessment of adults, culturally sensitive competencies, and evidence-based nursing competences (KBJSA) in acute settings.	Exams, quizzes, concept maps, case studies, written reflection, clinical evaluation tool	Exams and written assignments averages greater than or equal to 80/100.
The student applies the understanding the health illness continuum, basic knowledge of professional, legal, ethical, and regulatory standards for individual performance and system effectiveness to nursing practice in acute care settings.	Exams, quizzes, concept maps, case studies, written reflection, clinical evaluation tool	Exams and written assignment averages greater than or equal to 80/100.
Psychomotor Competency Statements		
The student explains and analyzes assessment data, responds to emerging data, and prioritizes care appropriately in simple to complex multiple patient (IFG) issues.	Clinical and Simulation experiences, exams, quizzes, assignments	Exams and written assignment averages greater than or equal to 80/100.
The student completes comprehensive, evidence-based care plans based on acute patient needs.	Clinical and Simulation Preparation	Score is greater than or equal to 8/10 or 80/100.
The student applies basic principles of health care policy, finance, and regulatory environments by coordination, evaluation, and modification of care to ensure safety and quality, apply established evidence-based best practices, and the management of confidential information technology for seamless care and transition.	Clinical and simulation activities	Score is greater than or equal to 8/10 or 80/100.
The student conducts learning needs assessments, and develops teaching plans for adult patients.	Care plan requirements	Score greater than or equal to 8/10 or 80/100
The student validates successfully all evidence-based	Performance of clinical	Score greater than or equal to 8/10 or

nursing competencies (KJBSA) required in the course.	skill checklists.	80/100
Affective Competency Statements		
The student applies a personal view of the Scriptural perspectives of work to patients in acute health care settings.	Written assignments, post conference assignments	Score greater than or equal to 8/10 or 80 to 100
The student applies professional values of caring, altruism, human dignity, advocacy, truth, justice, freedom, ethics, civility, respect, and cultural competency to in the care of patients in acute care settings.	Written assignments, post conference assignments	Score greater than or equal to 8/10 or 80 to 100
The student engages in self care in preparation for clinical demands, recognizes the importance of growth to professional competence within the program, and understands the need to participate in life long career and professional development.	Written assignments, post conference assignments	Score greater than or equal to 8/10 or 80 to 100

Final Course Grading Scale

900 to 1000 points = A

800 to 899 points = B

700 to 799 points = C

600 to 699 points = D

Below 600 points = F

Graded Course Elements

3 Medication Knowledge/Calculation Exams	300 points
10 simulation activities (10 points each)	100 points
10 care plans (20 points each)	200 points
Medical-Surgical Case Studies	50 points
Performance of Skills Checklists (10 points each)	50 points
Interprofessional Communication Paper	100 points
Clinical Evaluation Tool Final	100 points
Simulation Final	100 points

Total **1,000 points**

Policies

Progression

There are 3 requirements for successful completion of this course. A grade of 90 on 2 medication calculation exams, a Clinical Evaluation Tool Final grade must be 80 or higher, and a minimum final course grade of 800 points or a B is required for progression to Level IV in the program.

Attendance and Participation

Attendance is expected and required. Absences will be excused for illness with a doctor's note, death in the family, school sanctioned trips, or other reasons approved by the faculty. See the university policy for school sanctioned absences. Clinical hours are required for successful completion of the course. Excused absences may be made up at the discretion of the faculty. If the student misses more than 2 weeks of clinical, an incomplete or withdrawal will be necessary. The faculty will decide and advise regarding the appropriate course of action. The student is at risk of failure with any unexcused clinical absence. Three tardies greater than 10 minutes will count as one unexcused absence. Professional behaviors described in the previous section are expected. If a student is disrupting the atmosphere of the learning setting, the faculty will ask the student to leave the group, and make an individual appointment with the faculty to correct the issues.

The clinical requirements of the course are 135 total hours. The first 2 weeks of the semester, the students will spend all the time in the simulation laboratory. Through the remaining semester, the students will spend weekly time in the simulation laboratory and the remaining hours in assigned clinical settings. During week 16 of the semester, faculty and students will engage in summative clinical evaluation meetings.

Academic Integrity

Violations of academic integrity and other forms of cheating, as defined in ACU's Academic Integrity Policy, involve the intention to deceive, mislead, or misrepresent, and therefore are a form of lying, and represent actions contrary to the behavioral norms that flow from the nature of God. Violations will be addressed as described in the policy. While the university enforces the policy, the most powerful motive for integrity and truthfulness comes from one's desire to imitate God's nature in our lives. Every member of the faculty, staff, and student body is responsible for protecting the integrity of learning, scholarship, and research. The full policy is available for review at the Provost's office web site http://www.acu.edu/campusoffices/provost and the following offices: provost, college deans, dean of campus life, director of student judicial affairs, director of residential life education, and academic departments.

The first instance of cheating will result in a 0 for the assignment. A second incident will result in an F in the course.

Dress Code

Students are expected to conform to the dress code as outlined in the ACU Student Handbook. Students wearing inappropriate attire will be asked to leave class.

Special Needs

Abilene Christian University is dedicated to removing barriers and opening access for students with disabilities in compliance with ADA and Section 504 of the Rehabilitation Act. The Alpha Scholars Program facilitates disability accommodations in cooperation with instructors. In order to receive accommodations, you must be registered with Alpha Scholars Program, and you must complete a specific request for each class in which you need accommodations. If you have a documented disability and wish to discuss academic accommodations, please call our office directly at (325) 674-2667.

Assignments

Exams

The medication exams will be given online with faculty proctors. Attendance is required at exams. The faculty must be notified before the exam if the student is not able to attend. Make-up exams are only given for excused absences (see attendance policy). **Students who score less than 80 on a medication exam will be assigned remedial work/testing at the decision of the faculty. A grade of 100 is required on 2 of the 3 exams, and two attempts offered. The first score earned on each exam will be used in the calculation of the final course grade. A medication exam grade of 100 is required on two medication exams prior to progression to Level IV of the program.**

Simulation Activities

Students will work in pairs on 2 simulation activities assigned each week. Students will be assigned skills to validate, case studies, selection a creative format (concept map, diagram, mnemonic, or role play), or completion of an online module to demonstrate relationships and nursing application of content assigned for simulation time. The scores for 20 activities will contribute to the total course points. **See Appendix A for Problem Solving rubric.**

Care Plans

Students will prepare care plans based on faculty assignments. See Ackley & Ladwig Care Plan Constructor Tool and **Appendix B for Care Analysis/Plan Rubric.**

Needs Improvement	Acceptable	Superior

Content of Data Collection More than 3 areas of documents incomplete; little development of topics; quality of ideas is poor; little analysis **No points**	All areas complete except 1-3;reasonable response to topics: moderately sustained and developed ideas; acceptable analysis of clinical data; has a balance of analysis and reflection **2 points**	As a novice: All areas complete; superior response to topics; fully sustained and developed ideas; outstanding analysis of clinical data; good balance of analysis and reflection **4 points**
Content of Assessment More than 3 areas of documents incomplete; little development of topics; quality of ideas is poor; little analysis **No points**	All areas complete except 1-3;reasonable response to topics: moderately sustained and developed ideas; acceptable analysis of clinical data; has a balance of analysis and reflection **2 points**	All areas complete; superior response to topics; fully sustained and developed ideas; outstanding analysis of clinical data; good balance of analysis and reflection **4 points**
Content of Evidenced-Based Care Plan More than 3 areas of documents incomplete; little development of topics; quality of ideas is poor; little analysis **No points**	All areas complete except 1-3;reasonable response to topics: moderately sustained and developed ideas; acceptable analysis of clinical data; has a balance of analysis and reflection **2 points**	All areas complete; superior response to topics; fully sustained and developed ideas; outstanding analysis of clinical data; good balance of analysis and reflection **4 points**
Prioritization Critical cues are missed, and data clustered inaccurately; Failure to respond to changes in data **No points**	Some cues are clustered correctly; some are missed. Failure to respond to rapidly changing data; Needs prompting beyond level of competency expected **4 points**	All essential data cues are accurately assessed and clustered appropriately for an evidenced-based plan; Responds to changing data **6 points**

Organization One of the elements missing – not on time, illegible, not organized, APA references in accurate or not present, does not incorporate previous feedback as appropriate **No points**		All documents on time, legible, in order. Sentences/phrases understandable; credible references in APA format; Incorporates previous feedback as appropriate **2 points**

Evolve Medical-Surgical Case Studies

There are a total of 12 online Medical-Surgical Case Studies (10 points each) on the Evolve website that will be assigned throughout the semester. The 5 highest scores will be used for final grade calculation.

Inter professional Communication Paper

In a typed, APA 7 page paper, describe all the inter professional members needed for two medical-surgical patients, and the unique contributions of each member. Describe the role of a nurse to promote safe and quality health outcomes by inter professional communication. See Rubric. A minimum of 4 peer-reviewed journal sources are required. **See Appendix C for Inter professional Communication Paper**

Needs Improvement	Acceptable	Superior
Content Inadequate response to topic: little development of topic; quality of ideas is poor; little analysis of image or text; the writer missed opportunities to develop the ideas in the essay. 20 - 30 points	Reasonable response to topic: moderately sustained and developed ideas; adequate analysis of image and text; acceptable pairing of image and text; adequate balance of summary and analysis Maximum 35 points	Superior response to topic: fully sustained and developed ideas; outstanding analysis of image and text; excellent choice of image and literary text; excellent balance of summary and analysis Maximum 40 points
Organization Thesis is absent or unclear; Organization is inadequate; introduction fails to get reader's attention or set up the	Thesis is adequate; introduction attempts to capture reader's attention, gives some background, and sets up the question to be	Thesis is clear, narrowed, focused; thesis is fully supported by body; introduction effectively captures reader's attention, gives background, and sets up the

question to be addressed; paragraphs are too long or too short or confusing; conclusion fails to express significance or pull essay to a close. Maximum10 points	addressed; most paragraphs adequately convey main ideas; most paragraphs contain description and analysis; conclusion generally pulls essay together Maximum15 points	question to be addressed; paragraphs have excellence structure; conclusion effectively relates to the purpose, expresses significance, and pulls essay to a close Maximum 20 points
Style Little control over sentences evidenced by incomplete, run-on or awkward sentences; little variety in sentences; poor or repetitive word choice; tone is not appropriate for content; the writer's voice is missing or inconsistent. Maximum 3 points	Reasonable control over sentence structure; sentence structure is adequate; words are adequate to create effect; tone is appropriate; the writer's voice is generally acceptable. Maximum 7 points	Excellent control over sentence structure and style; few or no errors in sentence structure; writer varies sentence patterns writer uses concrete or descriptive words to create effective tone; the tone is well suited for the content; the writer's voice is clear, strong, and distinctive. Maximum10 points
Use of Sources Limited number of sources in References; misses opportunities to use sources to support argument; fails to quote sources exactly or confuses quotations and paraphrases; fails to introduce quotes; many errors in punctuation of parenthetical citations or quotes; many errors on References; many errors in APA format. Maximum 5 points	Adequate research in References; usually quotes sources accurately; usually introduces quotes; contains several errors in punctuation of quotations and citations; contains several errors on References; contains several errors in APA format. Maximum10 points	Significant research in References(minimum of 4 peer reviewed articles); always quotes sources accurately; always introduces quotes; few or no errors in parenthetical citations; few or no errors on References; few or no errors in APA format. Maximum 20 points
Usage Many errors in punctuation, mechanics, grammar, spelling;	Some errors in punctuation, mechanics, grammar, or spelling; errors do not distract reader or limit understanding	Few or no errors in punctuation, mechanics, grammar, and spelling

errors distract reader or limit understanding of essay. *Note: major errors or excessive minor errors in format or language use lower the paper grade one full letter grade or more. Maximum 5 points*	of essay. *Note: minor errors in language use or format lower the paper grade one-third to one-half of a letter grade.* *Maximum 8 points*	Maximum 10 points

Clinical Evaluation Tool

The clinical evaluation tool will be used for assessment of novice to advanced beginner competencies related to the role expectations of professional nursing. The student will self evaluate at mid term for practice reflection. Faculty evaluation at mid term is used for formative correction in semester competencies. A separate grade will be made in a final, summative evaluation and will count towards the final course grade. One course requirement for program progression is a grade of 80/100 on this tool. **See Appendix D for the Clinical Evaluation Tool**

Performance of Skills Checklists

Skills checklists from Perry & Potter will be assigned in the simulation laboratory throughout the semester. Ten of the checklists will be evaluated by faculty in the lab and will count in the total course points.

Simulation Final

During the final 2 weeks of the simulation activities of this clinical course, the students will be graded on comprehensive nursing responses (knowledge, judgments, behaviors, skills, and attitudes) to complex acute adult patient health issues. **See Appendix E for the Lasater Clinical Judgment Rubric**

Lasater Clinical Judgment Rubric				
Dimension	**Exemplary** **10 pts**	**Accomplished** **8 pts**	**Developing** **6 pts**	**Beginning** **2 pts**
Effective noticing involves:				

Focused observation	Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information	Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs	Attempts to monitor a variety of subjective and objective data but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information	Confused by the clinical situation and the amount and kind of data; observation is not organized and important data are missed, and/or assessment errors are made
Recognizing deviations from expected patterns	Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment	Recognizes most obvious patterns and deviations in data and uses these to continually assess	Identifies obvious patterns and deviations, missing some important information; unsure hot to continue the assessment	Focuses on one thing at a time and misses most patterns and deviations from expectations; misses opportunities to refine the assessment
Information Seeking	Assertively seeks information to plan intervention: carefully collects useful subjective data from observing and interacting with the patient and family	Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads	Makes limited efforts to seek additional information from the patient and family; often seems to know what information to seek and/or pursues unrelated information	Is ineffective in seeking information; relies mostly on objective data; has difficulty interacting with the patient and family and fails to collect important subjective data
Effective interpreting involves:				
Prioritizing Data	Focuses on the most relevant and important data useful for explaining the patient's condition	Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data	Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful data	Has difficulty focusing and appears not to know which data are most important to the diagnosis; attempts to attend to all available data

Making sense of data	Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient's data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success	In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse	In simple, common, or familiar situations, is able to compare the patient's data patterns with those known and to develop or explain intervention plans; has difficulty, however, with even moderately difficult data or situations that are within the expectations of students; inappropriately requires advice or assistance	Even in simple, common, or familiar situations, has difficulty interpreting or making sense of data; has trouble distinguishing among competing explanations and appropriate interventions, requiring assistance both in diagnosing the problem and developing an intervention
Effective responding involves:				
Calm, confident manner	Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families	Generally displays leadership and confidence and is able to control or calm most situations; may show stress particularly difficult or complex situations	Is tentative in the leader role; reassures patients and families in routine and relatively simple situations, but becomes stressed and disorganized easily	Except in simple and routine situations, is stressed and disorganized, lacks control, makes patients and families anxious or less able to cooperate
Clear Communication	Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding	Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport	Shows some communication ability (e.g., giving directions); communication with patients, families, and team members is only partly successful; displays caring but not competence	Has difficulty communicating; explanations are confusing; directions are unclear or contradictory; patients and families are made confused or anxious and are not reassured

Well-planned intervention/flexibility	Interventions are tailored for the individual patient; monitors patient progress closely and is able to adjust treatment as indicated by patient response	Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments	Develops interventions on the basis of the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient's response	Focuses on developing a single intervention, addressing a likely solution, but it may be vague, confusing, and/or incomplete; some monitoring may occur
Being skillful	Shows mastery of necessary nursing skills	Displays proficiency in the use of most nursing skills; could improve speed or accuracy	Is hesitant or ineffective in using nursing skills	Is unable to select and/or perform nursing skills
Effective reflecting involves:				
Evaluation/self-analysis	Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives	Evaluates and analyzes personal clinical performance with minimal prompting, primarily about major events or decisions; key decision points are identified, and alternatives are considered	Even when prompted, briefly verbalizes the most obvious evaluations; has difficulty imagining alternative choices; is self-protective in evaluating personal choices	Even prompted evaluations are brief, cursory, and not used to improve performance; justifies personal decisions and choices without evaluating them
Commitment to improvement	Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses	Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses	Demonstrates awareness of the need for ongoing improvement and makes some effort to learn from experience and improve performance but tends to state the obvious and needs external evaluation	Appears uninterested in improving performance or is unable to do so; rarely reflects; is uncritical of himself or herself or overly critical (given level of development); is unable to see flaws or need for improvement
Used with permission. Copy Right, 2005, Kathie Lasater, EdD, RN. Developed from Tanner's (2006) Clinical Judgment Model.				

Course Calendar

Date	**Pre Class Preparation**	**In Class Assignment**	**Assignment Due Dates**
Week 1	Read and audio pod casts Iggy, Chapters Perry & Potter (Skills), Chapters 1, Review 7, Procedural guideline 7-1, Skills 8 – 1 to 3. Skills 12 – 1 to 5, Procedural guideline 12-1	Course/Syllabus/ Clinical Evaluation Orientation Infection control Medical asepsis Sterile technique Skills review Support surfaces and special beds **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules DECs, Essentials, QSEN Scripture and Value Exploration Hendrick and ARMC Orientations TBA	Simulation Activities:
Week 2	Read and audio pod casts Iggy, Chapter Perry & Potter, Chapter 20 Review skills 28-1 to 5, add Skill 28-6, Skills 29 – 1, 2, Skills 25 – 1 to 5, Procedural guideline 25-1,	Medication calculation Intravenous therapy Airway management **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules	Simulation Activities: Evolve Case Study 1 Care Plan 1

		ANA Code of Ethics Legal Issues Ethical Decision making Scripture and value exploration	
Date	**Pre Class Preparation**	**In Class Assignment**	**Assignment due dates**
Week 3 12 hours Sim. Lab	Read and audio pod cast Iggy, Chapters Perry & Potter, Chapters Skills 11-1 to 5, Skills 13-2, 4, Skills 15-1 to 5, Review of Chapter 22, Skills 22-1 to 8, Skills 32-1,2	Orthopedic measures Safety Pain assessment and management Parenteral medications Parenteral nutrition **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Evidence-based nursing practice Informatics in health care Patient-Centered Care and rights Cultural Competence Scripture and value exploration	Medication Calculation Exam I Care plan 2 (10 pts) Evolve Case Study 2
Week 4	Read and audio pod cast Iggy, Chapter Perry & Potter, Chapters Skills 23-1 to 5,	Lab: Oxygen therapy Performing chest	Evolve Case Study 3 Care plan 3

	Procedural guideline 23-1, Skills 24-1, Procedural guideline 24-1, 2	physiotherapy Closed chest drainage Clinical: Medical-Surgical Units **Post Conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Safety and Quality Initiatives Infection control Professionalism Medication error prevention, safe medication calculation Scripture and values exploration	
Date	**Pre Class Preparation**	**In Class Assignment**	**Assignment Due Dates**
Week 5	Read and audio pod cast Iggy, Chapters Perry & Potter, Chapter Review skills 31 – 4, Skill 21-2, Review skills 33-1 to 4, add 33-5, Procedural guidelines 33-1 to 3, Skill 34-4	**Lab:** Enteral nutrition Gastrointestinal tubes Gastric decompression Urinary care **Clinical:** Medical-Surgical Units **Post Conference:** Nursing Practice Act,	Care Plan 4 Evolve Case Study 4

		Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Interdisciplinary communication Confidentiality Organizational policy and procedure Scripture and values exploration	
Week 6	Read and audio pod cast Perry & Potter, Chapter Skills 36-1 to 3, 37-1,2,	**Lab:** Preoperative, intraoperative, and postoperative care **Clinical:** Medical-Surgical Units **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Prioritization Responding to emerging priorities Delegation Interdisciplinary communication Scripture and values exploration	Medication Calculation Exam I I Evolve Case Study 5 Care Plan 5
Date	**Pre Class Preparation**	**In Class Assignment**	**Assignment Due**

			Dates
Week 7	Read and audio pod cast Perry & Potter, Review Skills 43-1 to 5 & 9, add Skills 43-6, 7, 8, 10, Procedural guidelines 43-1 to 3, Skills 44 -1 to 6	**Lab:** Specimen collection Diagnostic procedures **Clinical:** Medical-Surgical Unites **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Unit policy and procedures Grand rounds of day Confidentiality Reporting Scripture and values exploration	Clinical Evaluation Mid Term Care Plan 6, 7 Evolve Case Study 6,7
Week 8	Read and audio pod cast Perry & Potter, Review as needed	**Lab:** Integrated simulation **Clinical:** Medical-Surgical Units **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Grand rounds of day	Care Plan 8,9 Evolve Case Study 8,9

		Teaching patients in acute settings Scripture and values exploration	
Week 9	Read and audio pod cast as needed Perry & Potter, Review as needed	**Lab:** Integrated simulation **Clinical:** Medical-Surgical Units **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Grand rounds of the day Provider of patient-centered care Patient safety advocate Member of Health care team Member of profession Scripture and values exploration	Medication Calculation Exam II I
Week 10	Read and audio pod cast Perry & Potter, Review as needed	**Clinical:** Medical Surgical Units	
Date	**Pre Class Preparation**	**In Class Assignment**	**Assignment Due Dates**
Week 11	Read and audio pod cast Perry & Potter, Review as needed	**Clinical:** Medical-Surgical Units	

Week 12	Read and audio pod cast Perry & Potter, Review as needed	**Clinical:** Medical-Surgical Units	
Week 13	Read and audio pod cast Perry & Potter, Review as needed	**Lab:** Integrated simulation Simulation testing **Clinical:** **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Grand rounds of the day Provider of Patient-Centered Care Patient Safety Advocate Member of Health Care Team Member of Profession Scripture and values exploration	Evolve Case Study 10 Care Plan 10
Week 14	Perry & Potter, Review as needed	**Lab:** Integrated simulation Simulation testing **Clinical:**	Make up assignments

		Post conference: Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Grand rounds of the day Provider of Patient-Centered Care Patient Safety Advocate Member of Health Care Team Member of Profession Scripture and values exploration	
Week 15	Perry & Potter, Review as needed	**Lab:** Integrated simulation Simulation testing **Clinical:** **Post conference:** Nursing Practice Act, Standards of Nursing Practice, Delegation Rules, Unprofessional Conduct Rules Grand rounds of the day Provider of Patient-Centered Care Patient Safety Advocate Member of Health Care	Make up assignments

		Team Member of Profession Scripture and values exploration	
Week 16		**Schedule Final Clinical Evaluation with Faculty**	

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