

NURS 475 Clinical Skills IV: Advanced Nursing Care**Abilene Christian University****Spring 2015**

NURS 475

Clinical: Variable days and hours

6 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 IV: Advanced Nursing Care facilitates student competencies needed to apply the evidence-based leadership/management skills, and the nursing process for safety and quality care in high acuity simulation and complex care settings.

Prerequisites

Completion of Level III requirements

Co-requisites

NURS 476, NURS 498

Course Purpose and Audience

This course is required in the final semester in the school of nursing. This course facilitates understanding and application of evidence-based leadership/management skills and nursing competencies in the care of patients with high acuity and complex problems within a variety of settings. The course will allow practice and validation of multiple cognitive and psychomotor

skills required of professional nurses. Professional affective characteristics of the practice will be evaluated.

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 application of nursing science in the care of patients in high acuity and complex settings within health care systems.

Topical Outline

1. Member of the Profession
 - a. Nursing Practice Act, Standards, Unprofessional Conduct
 - b. Professional standards/organizations, Rules, Regulations, and Law
 - c. Differentiated Entry Level Competencies for BSN Graduates

- d. The Essentials of Nursing Education
 - e. Quality and Safety in Nursing Education
 - f. Confidentiality, HIPAA, Informatics
 - g. Professional Values, Scriptural perspectives
 - h. Evidence-based practice
 - i. Advocacy
 - j. Self-care and professional development
2. Member of the Health Care Team
- a. Effective communication skills
 - b. Functions of interprofessional team
 - c. Knowledge of health care policy, finance, and regulatory environments
3. Patient Safety Advocate
- a. Safe medication administration
 - b. Legal and ethical decision making
 - c. Identify elements of system effectiveness for safe nursing competencies
 - d. Delegation of care
4. Provider of Patient-Centered Care
- a. Clinical reasoning with application of the nursing process to multiple complex patient/families/groups/communities/populations needs, preferences, and cultural values
 - b. Knowledge and skills (Health promotion, assessment, nursing process, supporting the patient through the health care system, infection control, activity and mobility, safety and comfort, hygiene, medications, oxygenation, fluid balance, elimination, dressings and wound care)

Student Goals

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

Provider of Patient-Centered Care

1. As an advanced beginner, applies and evaluates clinical reasoning , and evidence-based nursing competencies (KBJSA) to holistically address and prioritize multiple simple to complex patient (IFGCP) preferences, values, and needs.

Patient Safety Advocate

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

Member of Health Care Team

3. As an advanced beginner, collaborate with patients (IFGCP) 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.
4. As an advanced beginner, apply an understanding of health care policy, finance, and regulatory environments by the coordination, evaluation, and modification of care of multiple patients (IFGCP) 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 health care systems.

Member of the Profession

5. As an advanced beginner, integrate 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 an advanced beginner, promotes the profession of nursing through leadership activities in the implementation of evidence-based practice standards, safety and quality care improvement, legal and patient (IFGCP) advocacy, and participation in professional student nursing organizations.
7. As an advanced beginner, engages in self care and reflection to prepare for clinical demands, envisions 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

Carlson, K. K., Ed. (2009). *AACN advanced critical care nursing*. St. Louis: Saunders Elsevier.

Evolve. (2009). *Student resources*. Retrieved at <http://evolve.elsevier.com/AACN/advanced>

Evolve. (2010). *Student resources*. Retrieved at <http://evolve.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 270 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 patients, culturally sensitive competencies, and evidence-based nursing competences (KBJSa) in complex 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 (IFGCP) issues.	Clinical and Simulation experiences, exams, quizzes, assignments, clinical evaluation tool	Exams and written assignment averages greater than or equal to 80/100.
The student completes comprehensive, evidence-based care plans based on complex patient needs.	Clinical and Simulation Preparation, clinical evaluation tool	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, clinical evaluation tool	Score is greater than or equal to 8/10 or 80/100.
The student conducts learning needs assessments, and develops teaching plans for patients.	Care plan requirements, clinical evaluation tool	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 integrates a personal view of the Scriptural perspectives of service in the comprehensive care of multiple patients in complex health care settings.	Written assignments, post conference assignments, clinical evaluation tool	Score greater than or equal to 8/10 or 80 to 100
The student integrates professional values of caring, altruism, human dignity, advocacy, truth, justice, freedom, ethics, civility, respect, and cultural competency in the comprehensive care of multiple patients in complex health care settings.	Written assignments, post conference assignments, clinical evaluation tool	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, clinical evaluation tool	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
5 care plans (20 points each)	100 points
Case Studies	100 points
Patient Reviews	100 points
Clinical Evaluation Tool Final	100 points
Quality and Safety Project	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 100 on the s 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 the completion of 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 270 total hours. The hours will be spent in the simulation lab, high acuity and critical care settings, and in a variety of settings for leadership experiences. 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 90 is required on two medication exams prior to progression to complete 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 the Problem Solving rubric.**

Care Plans

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

Needs Improvement	Acceptable	Superior
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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 point	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 point	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

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 how 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.				

Leadership in Quality and Safety in Patient Care Project

Students will participate in a leadership initiative to promote quality and safety in patient care during the leadership/management portion of clinical. An essential portion of the project is involvement with the inter professional team for the highest potential patient outcomes. The faculty will assist the student in the planning, implementation, and evaluation of the project. **See Appendix F for the Problem Solving Rubric.**

Course Calendar

Date	Pre Class Preparation	In Class Assignment	Assignment Due Dates
Week 1	Review of all skills, Perry & Potter for reference	Course/Syllabus/ Clinical Evaluation Orientation Post conference: Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules DEC's, Essentials, QSEN Scripture and Value Exploration Hendrick and ARMC Orientations TBA	Simulation Activities: Practice of all skills Validation of randomly selected skills
Week 2	References as needed	Lab: Integrated simulation Clinical: Critical Care clinical Medication calculation Post conference: Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation	Simulation Activities: Evolve Case Study, Pt Review 1 Care Plan 1

		Rules 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	References as needed	Lab: Integrated simulation Clinical: Critical Care Clinical 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	Care plan 2 (10 pts) Evolve Case Study, Patient Review 2
Week 4	References as needed	Lab: Integrated simulation Clinical:	Evolve Case Study, Patient Review 3 Care plan 3

		Critical Care Clinical 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	References as needed	Lab: Integrated simulation Clinical: Critical Care Clinical Post Conference: Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Interdisciplinary communication Confidentiality Organizational policy and procedure	Medication Calculation Exam I Care Plan 4 Evolve Case Study 4

		Scripture and values exploration	
Week 6	References as needed	Lab: Integrated simulation Clinical: Critical Care Clinical 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	Evolve Case Study, Patient Review 5 Care Plan 5
Date	Pre Class Preparation	In Class Assignment	Assignment Due Dates
Week 7	References as needed	Lab: Integrated Simulation Clinical: Critical Care Clinical Post conference: Nursing Practice Act, Standards of Nursing Practice, Unprofessional	Clinical Evaluation Mid Term

		Conduct Rules, Delegation Rules Unit policy and procedures Grand rounds of day Confidentiality Reporting Scripture and values exploration	
Week 8	References as needed	Lab: Integrated simulation Clinical: Critical Care Clinical Post conference: Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation Rules Grand rounds of day Teaching patients in diverse settings Scripture and values exploration	Care Plan 6 Evolve Case Study, Patient Reviews 6
Week 9	References as needed	Lab: Integrated simulation Clinical: Critical Care Clinical Post conference: Nursing Practice Act,	Medication Calculation Exam II Evolve Case Study, Patient Reviews 7 Care Plan 7

		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 10	References as needed	Lab: Integrated simulation Clinical: Critical Care 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	Evolve Case Study, Patient Reviews 8 Care Plan 8

		exploration	
Date	Pre Class Preparation	In Class Assignment	Assignment Due Dates
Week 11	References as needed	Lab: Integrated simulation Clinical: Leadership 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, Patient Reviews 9 Care Plan 9
Week 12	References as needed	Lab: Integrated simulation Clinical: Leadership Clinical Post conference: Nursing Practice Act, Standards of Nursing Practice, Unprofessional	Medication Calculation III

		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 13	References as needed	Lab: Simulation testing Clinical: Leadership 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, Patient Reviews 10 Care Plan 10

Week 14	References as needed	Lab: Integrated simulation Simulation testing Clinical: Leadership 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	Make up assignments
Week 15	References as needed	Lab: Integrated simulation Simulation testing Clinical: Leadership Clinical Post conference: Nursing Practice Act, Standards of Nursing Practice, Unprofessional Conduct Rules, Delegation	Make up assignments

		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 16		Schedule Final Clinical Evaluation with Faculty	