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**POINT**<sup>19</sup>  **LOMA**<sup>02</sup>  
**NAZARENE UNIVERSITY**

**School of Nursing**

**Nursing 310: Nursing of Families –  
 Child & Adolescent Focus**

**2 Semester Units**



**Fall 2018**

<b>Meeting days:</b> Monday	<b>Instructor:</b> Christine Sloan, PhD, RN, CNS, CPN Associate Professor christinesloan@pointloma.edu Cell: (619)518-2255
<b>Meeting times:</b> 0725-0920	
<b>Meeting location:</b> Liberty Station, Room 202	<b>Office location and hours:</b> Liberty Station – Room 208 Office hours only by appointment
<b>Placement:</b> Traditional BSN Junior Year	
<b>Final Exam:</b> Wednesday, 12/12 0730 – 10:00AM LSCC202	

**PLNU Mission**

**To Teach ~ To Shape ~ To Send**

Point Loma Nazarene University exists to provide higher education in a vital Christian community where minds are engaged and challenged, character is modeled and formed, and service becomes an expression of faith. Being of Wesleyan heritage, we aspire to be a learning community where grace is foundational, truth is pursued, and holiness is a way of life.

**SON Vision Statement**

The School of Nursing at Point Loma Nazarene University embraces, as a covenant, the commitment to excellence within a dynamic Christian environment in which each one will engage in the sacred work of nursing. This sacred work involves symbolically removing one's shoes in service of others.

*Take off your sandals for the place you are standing is holy ground. Exodus 3:5 NIV*

### **SON Mission Statement**

The School of Nursing at Point Loma Nazarene University exists to support the university Wesleyan mission and to provide an interdisciplinary learning program of excellence. Graduates of the SON are distinctly identified by grace, truth and holiness, serving others after the example of Christ, as they are sent to fulfill their calling as professional nurses.

*So He got up from the meal, took off His outer clothing, and wrapped a towel around His waist. After that, He poured water into a basin and began to wash His disciple's feet, drying them with a towel that was wrapped around Him. John 13: 4-5 NIV*

*Now that I, your Lord and Teacher, have washed your feet, you also should wash one another's feet. I have set you an example that you should do as I have done for you. John 13: 14-15 NIV*

**Faculty reserves the right to make necessary schedule changes to this syllabus as the semester progresses.**

Every attempt is made to minimize the inconvenience to the student in the event of a change to the syllabus. Students are notified of changes via Canvas announcement section, with accompanying email notification, in a timely manner.

### **COURSE DESCRIPTION**

This course focuses on nursing theory as it relates to families with children who have alterations in their health status.

Course Number: NSG310

Course Name: Nursing of Families: Child/Adolescent Focus

Pre-requisite: Successful completion (C or better) in FCS150 or equivalent

Co-requisite: NSG311

Note: A minimum grade of "C" must be achieved in all co-requisite courses in order to progress in the program. A grade of "credit" must also be achieved in NSG311 in order to progress in the program.

**PROGRAM VALUES & COURSE LEARNING OUTCOMES**

Upon completion of NSG310 the student will meet the following outcomes:

- Program Learning Outcomes (blue)
- Theory Course Learning Outcomes (apricot)
- 2008 American Association of Colleges of Nursing: The Essentials of Baccalaureate Education for Professional Nursing Practice (BSN Essentials)
- Public Health California Code of Regulations: Qualifications and Requirements (PHCCR)

School of Nursing Program Values & PLOs	NSG310 Nursing Care of Families: Child & Adolescent Focus CLO's
<p><b>I. INQUIRING Faithfully: Student will demonstrate knowledge, skill and behavior of the evidence-based practice of nursing which integrates growth in reasoning, analysis, decision-making and the application of theory with the goal of advocating for others and/or self. This includes holistic nursing skills and the nursing process.</b></p> <p>A. Initiate dialogue regarding current practice to improve healthcare BSN Essentials II, III, IV, VI, IX</p> <p>B. Demonstrate use of evidence-based practices as an advocate for self and others BSN Essentials III, IV, VI, IX</p> <p>C. Promotes positive client outcomes using evidence-based data BSN Essentials II, III, IV, VI, IX</p> <p>D. Provide holistic care by considering all of the client needs (e.g. physical, psychosocial, spiritual, environmental) including family in a multicultural community BSN Essentials I, III, IV, VI, VII, VIII, IX</p> <p>E. Engage in self-care practices that facilitates optimal care of clients BSN Essentials I, V, VI, IX</p>	
<p>1. Investigate evidence-based nursing care practices for both health promotion and the management of acute and chronic illness in the pediatric population. PLO's I.B, I.C, III.B, III.C, IV.B, V.A PHCCR 1491-4: A-L</p>	
<p>2. Formulate holistic nursing actions focusing on the needs of the pediatric patient and their family within the context of the community PLO's I.D, II.A, III.A-D, IV.B, V.C PHCCR 1491-4: A-L</p>	
<p>3. Acknowledge own personal beliefs and experiences related to family-centered care. PLO's I.E, III.D, IV.C PHCCR 1491-4: A-L</p>	
<p><b>II. CARING Faithfully: The student will embrace a calling to the ministry of compassionate care for all people in response to God's grace, which aims to foster optimal health and bring comfort in suffering and death.</b></p> <p>A. Demonstrate compassionate care to all people while mirroring Christ's love for all BSN Essentials IV, VI, VII, IX</p> <p>B. Partner with the community to establish a trusting relationship BSN Essentials II.VI, VII, IX</p>	

<p>C. Demonstrate ethics and values consistent with the practice of professional nursing BSN Essentials V, VI, VII, VIII, IX</p>
<p>1. Integrate multiple dimensions of patient centered care  <a href="#">PLO's II.A, III.A, III.D, III.E, IV.B, V.C</a>  <a href="#">PHCCR 1491-4: A-L</a></p>
<p><b>III. COMMUNICATING Faithfully: The student will actively engage in the dynamic interactive process that is intrapersonal and interpersonal with the goal of advocating for others and/or self. This includes effective, culturally appropriate communication conveys information, thoughts, actions and feelings through the use of verbal and nonverbal skills.</b></p> <p>A. Engage in active listening to promote therapeutic relationships BSN Essentials II, III, IV, VI, VII, IX</p> <p>B. Demonstrate effective verbal and nonverbal communication skills to provide patient care BSN Essentials II, III, IV, VI, VII, IX</p> <p>C. Dialogues with members of the healthcare team, including the patient to facilitate positive patient outcomes BSN Essentials II, III, IV, VI, VII, IX</p> <p>D. Advocate for patients/families and self BSN Essentials V, VI, VII</p> <p>E. Implements patient care while revering the diversity of patients, families and Communities BSN Essentials II, III, V, VI, VII, IX</p>
<p>1. Foster open communication among the healthcare team to improve patient health outcomes  <a href="#">PLO's I.A, II.A, III.A-C</a>  <a href="#">PHCCR 1491-4: A-L</a></p>
<p>2. Engage information technologies to provide effective patient care  <a href="#">PLO's III.D</a>  <a href="#">PHCCR 1491-4: A-L</a></p>
<p>3. Identifies the impact of culture, ethnicity and family dynamics on clinical decision making  <a href="#">PLO's II.A, III.E</a>  <a href="#">PHCCR 1491-4: A-L</a></p>
<p><b>IV. FOLLOWING Faithfully: Defined as claiming the challenge from Florence Nightingale that nursing is a “divine imposed duty of ordinary work.” The nursing student will integrate the ordinary work by complying with and adhering to regulatory and professional standards (e.g. ANA Code of Ethics, the California Board of Registered Nursing, Scope of Nursing Practice, SON Handbook). This includes taking responsibility, being accountable for all actions and treating others with respect and dignity.</b></p> <p>A. Engage in a professional practice environment that promotes nursing excellence BSN Essentials I, III, IV, V, VI, VII, VIII, IX</p> <p>B. Provides patient care within the boundaries designated by regulatory agencies, professional practices and ethical standards of a Christian nurse BSN Essentials II, VI, VI, VII, VIII, IX</p> <p>C. Avail self of learning opportunities to initiate the life-long learning process</p>

BSN Essentials III, IV, V, VI, VII, VIII, IX
1. Applies professional standards of care according to ethical, legal and Christian principles PLO's II.3, IV.B PHCCR 1491-4: A-L
<p><b>V. LEADING Faithfully: The student will incorporate a foundational relationship with Christ and others and embrace a willingness to serve others in the midst of life circumstances (e.g., illness, injustice, poverty). The student will role-model the need for “Sabbath Rest” as a means of personal renewal, and true care of the self, so that service to others is optimally achieved. The student will incorporate the characteristics of a servant leader including humility, courage, forgiveness, discernment.</b></p> <p>A. Provide graceful service through compassionate response to others’ needs  BSN Essentials II, IV, VI, VII, VIII, IX</p> <p>B. Demonstrate the principles of a servant leader as a reflection of Christ’s love  BSN Essentials II, IV, V, VI, VII, VIII, IX</p> <p>C. Exhibits patient advocacy that reflects sensitivity to diversity in a holistic manner.  BSN Essentials II, IV, V, VI, VII, VIII, IX</p>
1. Analyze servant leadership concepts and skills for patient safety and high quality care PLO's II.C,III.A,V.B PHCCR 1491-4: A-L

## COURSE CREDIT HOUR INFORMATION

In the interest of providing sufficient time to accomplish the stated Course Learning Outcomes, this class meets the PLNU credit hour policy for a 2-unit class delivered over 15 weeks. Specific details about how the class meets the credit hour requirement can be provided upon request.

## COURSE CONTENT OUTLINE (TOPIC OUTLINE) – Course Calendar

Date (Class: 0725 – 0920) All classes are Face to Face	Module	EXAM/Quiz?	Preparation/Assignment (see individual class assignments by date)
Tuesday – August 30 (Following Mon Schedule)	<b>Class 1</b> Introduction to Pediatric & OB Nursing	No	<ul style="list-style-type: none"> <li>Look at Canvas for Clinical Orientation Assignments</li> </ul>
Thursday – August 30	<b>Clin Orientation: Day 1 - Peds (after OB)</b> (1200 - 1600)	No	<ul style="list-style-type: none"> <li>Bring NSG310 &amp; 311 syllabi</li> <li>Street clothes OK, no uniform required</li> </ul>
<b>Monday, September 3</b>	<b>No Classes – Labor Day Holiday</b>		
Tuesday – September 3	<b>Clinical Orientation: Day 2 - Peds</b> 0700 – 1530 Rady Children’s Hospital	No	Bring both NSG310/311 syllabi, Dress in PLNU uniform!
Monday – September 10	Module 1: Day 1 Respiratory	iRAT/tRAT#1	See SLO’s Review course lecture and other resources prior to class!
Monday – September 17	Module 1: Day 2 Cardiac	No	See SLO’s Review course lecture and other resources prior to class!
Monday – September 24	Module 2: Day 1 GI	iRAT/tRAT#2	See SLO’s Review course lecture and other resources prior to class!

Date (Class: 0725 – 0920)	Module	EXAM/Quiz?	Preparation/Assignment (see individual class assignments by date)
Monday – October 1	Module 2: Day 2 GU	No	See SLO's Review course lecture and other resources prior to class!
Monday – October 8	<b>EXAM 1</b>	YES	Review all in-class case studies! This exam on Modules 1 & 2 and orientation concepts <b>Developmental Assessment DUE</b>
Monday – October 15	Module 3: Day 1 Communicable Disease*, Skin Integrity	iRAT/tRAT#3 (only Comm Disease)	See SLO's Review course lecture and other resources prior to class! <b>Developmental Paper Draft Due</b>
Monday – October 22	Module 4 : Day 1 Oncology	iRAT/tRAT#4	See SLO's Review course lecture and other resources prior to class! <b>Draft Returned</b>
Monday – October 29	Module 4: Day 2 Hematology/ Dying Child	No	See SLO's Review course lecture and other resources prior to class! <b>Developmental Paper &amp; Project due</b>
Monday – November 5	Module 5: Day 1 Intracranial Regulation (Neuro)	iRAT/tRAT#5	See SLO's Review course lecture and other resources prior to class!
Monday – November 12	<b>EXAM 2</b>	Yes!	This Exam only on Modules 3 & 4 Material
Monday – November 19	Module 5: Day 2 Metabolism (Endocrine)	No	See SLO's Review course lecture and other resources prior to class!

Date (Class: 0725 – 0920)	Module	EXAM/Quiz?	Preparation/Assignment (see individual class assignments by date)
Monday – November 26	Module 6: Day 1 Mobility	iRAT/tRAT#6	See SLO's Review course lecture and other resources prior to class!
Monday – December 3	Module 6: Day 2 Immune System Disorders	No	See SLO's Review course lecture and other resources prior to class!
Wednesday – December 12	<b>EXAM 3</b>	Yes	Note: This is same time as our class (0730) and in same room (LSCC 202) but on WED!

**Additional Theory Topics:**

These topics will be incorporated into the readings, video's, and case studies:

- Family Dynamics
- Social/Cultural
- Parenting Styles
- Health Promotion
- Age Specific Issues
- Nutrition by age
- Basic Growth and Development
- Environmental and Community Issues
  - Obesity
  - Lead Poisoning
  - Poverty
  - Pediatric Emergencies

**PLNU ACADEMIC HONESTY POLICY**

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Students should demonstrate academic honesty by doing original work and by giving appropriate credit to the ideas of others. Academic dishonesty is the act of presenting information, ideas, and/or concepts as one's own when in reality they are the results of another person's creativity and effort. A faculty member who believes a situation involving academic dishonesty has been detected may assign a failing grade for that assignment or examination, or, depending on the seriousness of the offense, for the course. Faculty should follow and students may appeal using the procedure in the university Catalog. See [Academic Policies](#) for definitions of kinds of academic dishonesty and for further policy information.

**PLNU ACADEMIC ACCOMMODATIONS POLICY**

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If you have a diagnosed disability, please contact PLNU's Disability Resource Center (DRC) within the first two weeks of class to demonstrate need and to register for accommodation by



phone at 619-849-2486 or by e-mail at [DRC@pointloma.edu](mailto:DRC@pointloma.edu). See [Disability Resource Center](#) for additional information.

## **STATE AUTHORIZATION**

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State authorization is a formal determination by a state that Point Loma Nazarene University is approved to conduct activities regulated by that state. In certain states outside California, Point Loma Nazarene University is not authorized to enroll online (distance education) students. If a student moves to another state after admission to the program and/or enrollment in an online course, continuation within the program and/or course will depend on whether Point Loma Nazarene University is authorized to offer distance education courses in that state. It is the student's responsibility to notify the institution of any change in his or her physical location. Refer to the map using the below link to view which states allow online (distance education) outside of California.

<https://www.pointloma.edu/offices/office-institutional-effectiveness-research/disclosures>

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## **SCHOOL OF NURSING**

### **PROFESSIONAL STANDARDS**

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Students are required to adhere to professional standards while students at PLNU. The nursing department had developed these standards to provide clarification of expected professional behaviors.

1. Presenting yourself professionally in interactions with all persons
2. Behaving with honesty and ethics
3. Respectful communication techniques
4. Being proactive versus reactive
5. Accepting accountability for one's own actions
6. Being prepared and punctual

**Additional guidelines**

Social networking sites are a great way to connect with many others. These sites can be used to your disadvantage and all persons are advised to employ professional standards on these sites. A general rule would be if what you have posted does not enhance your professional image then it probably needs to be reviewed. Absolutely NEVER post anything related to clinical experience as this is a direct HIPAA violation.

The use of Laptops, cell phones and other electronic devices is at the discretion of the course instructor. Generally, it is considered inappropriate to use any device for alternate uses not related to the class being taught. Cell phones should be kept on vibrate or silent during class times unless arrangements have previously been made.

Speaking negatively, relating stories or presenting a biased viewpoint about any class, instructor or other student that is not supportive of the individual involved and can be perceived as incivility. Disagreements are a part of life- but should be worked through in a private manner. Questioning the integrity of a persons' character is disrespectful. Each person is responsible and accountable for their words and actions.

Plagiarism or cheating in any class (nursing or non-nursing) will have consequences within the School of Nursing. Disciplinary action will be at the discretion of the instructor, the guidance of the Associate Dean of BSN Program and/or Dean of the School of Nursing and may include assignment/class failure and possible dismissal from the program.

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## GRADING POLICIES

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- **Grading Scale** to be used for all exams and final course grades:

93-100%	=	A
90 - 92%	=	A-
87 – 89%	=	B+
84 – 86%	=	B
81 – 83%	=	B-
78 – 80%	=	C+
<u>75 – 77%</u>	=	<u>C</u> Must have minimum of 75% to progress in the program
73 – 74%	=	C-
71 – 72%	=	D+
68 – 70%	=	D
Below 68%	=	F

- All assigned course work must be completed to receive a final course grade and progress in the program
- All assignments are to be submitted as specified by faculty, including assignments posted in *Canvas* or completed in practicum
- In order to receive a passing grade in the course, the student must achieve a cumulative average of 75% on tests and quizzes. Per School of Nursing policy, grades/points will not be rounded. For example: 80.5% does not round to 81% resulting in a grade of C+ instead of a B-. A grade of less than a “C” (Below 75%) prohibits the student from continuing in the nursing program until the course is repeated with a satisfactory grade of  $\geq$  C.
- A grade of at least a “C” in each nursing theory, prerequisite, and/or co requisite course is required in order to progress to the next course or level. The nursing theory and related clinical courses must be taken concurrently and the student must receive a passing grade of “Credit” in the clinical course in order to progress to the next course or level.
- Throughout the curriculum (whether pre-nursing or nursing) students may repeat one pre-requisite or nursing course. With the need for a second repeat of any pre-requisite or nursing course the student will be dismissed from the nursing program.

## COURSE SPECIFIC POLICIES

- Assignments and required documentation are due at the beginning of class on the date due. A full 10% will be deducted for each day (0-24 hours) late if not previously discussed with professor.
- Check your PLNU email frequently (daily). This is how I will communicate with you about class and clinical.
- Communicate regularly about your progress/concerns/anything – inform me of problems or issues before things are due (when possible) – this makes it much easier to grant grace.
- Proactively communicate any absence with me or your clinical professor directly (via email, phone call or text) so that you honor the classroom and clinical community that

we are striving to develop. Lack of communication about absences will result in a zero on any iRAT/tRAT without the ability to make up the quiz.

- Unless otherwise specified, ALL assignments for this course are to be submitted via Canvas for NSG310. Assignments that are expected to be submitted on Canvas that are emailed to the professor will not be accepted and will not be considered “turned-in”.
- Students can only make up 1 missed iRAT/tRAT only if this has been discussed in advance with the professor. This involves writing a 3-page paper on the topic for the day. Speak to the professor about the requirements of this paper. This is due on Friday of the week class is missed (48 hours after class). No exceptions.

## **LEARNING STRATEGIES**

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Elements of team-based learning (TBL), reading/viewing content, quizzes (individual and group), mini-lecture, discussion/discussion board, case studies, course-related online learning, exams (individual and group), games, audiovisual and one-on-one assistance as needed.

### **1. INCLASS STUDENT LEARNING ACTIVITIES**

Individual study for each unique module ***should be focused on reviewing materials to meet the Student Learning Outcomes as well as understanding the glossary terms for each topic.*** Unless you have unlimited time, **do not read all parts of the assigned reading.** Diseases in children are not that much different than they are in adults – so as you read – always review A&P (pediatric structures are different than adults – they are growing), pediatric differences in systems or response to treatment and assessment. These are foundational to your understanding of the topics you will discuss in class! Use the text to supplement your learning of topics that are unfamiliar or need more in-depth investigation. Other study materials provided:

- YouTube
- Podcasts
- Medscape/WebMD
- Netflix movies
- Modules by various state and private agencies
- Case studies/questions

## METHODS OF ASSESSMENT & EVALUATION

Testing Grades	Quizzes	Number/Points	Total
	Individual Readiness Assessment Test (iRAT)	6 @ 10 points each	60
	Team Readiness Assessment Test (tRAT)	6 @ 20 points each	120
	Pre-Clinical Medication Quiz	1 @ 20 points	20
	3 Exams (No Cumulative Final)	3 @ 100 points each	300
	ATI Practice Exams & Remediation	40 points	40
<b>OVERALL TESTING TOTAL</b>		<b>540</b>	
Non-Testing Grades	Assignments (Most in clinical)		
	Developmental Paper Prep: 1) Developmental Assessment 2) Peer-Reviewed Draft	1 assessment @ 10 1 draft @ 25	35
	Developmental Paper	1 @ 50 points	50
	Developmental Teaching Project	1 @ 25 points	25
	Oral Case Study	1 @ 15 points	15
	NIP-IT Certificate Completion	1 @ 15 points	15
	Graded Concept Map #3	1 @ 15 points	15
	Updated Live Text – BSN Growth Portfolio	15	15
	<b>OVERALL ASSIGNMENT TOTAL</b>	<b>170</b>	
<b>OVERALL COURSE</b>		<b>710</b>	

## REQUIRED TEXTS & RECOMMENDED STUDY RESOURCES

### Required:

American Psychological Association (2009). *Publication manual of the American Psychological Association* (6th ed.). Washington D.C. ISBN-13: 978-1-4338-0561-5

Current School of Nursing Student Handbook. See SON Resource Page in Canvas for 2017-2018.

## ASSESSMENT OF LEARNING OUTCOMES & STUDENT PORTFOLIO

The School of Nursing (SON) uses LIVETEXT to conduct ongoing program assessment. All required courses in the SON use LIVETEXT to assess and grade the Signature Assignment(s). For this course, **the following documents(s) MUST BE submitted to LIVETEXT™ for assessment and grading:**

- Signature Assignment(s): *(insert name of assignment(s) here)*

Prior to the conclusion of each course, the student is required to update their LIVETEXT Portfolio. The portfolio demonstrates achievement of required program outcomes and supports professional development. For this course, the following document(s) MUST BE attached to the student's Professional Portfolio in the "Body of Work" section in LIVETEXT in order to pass the course.

**Note:** *Simply submitting an assignment into LIVETEXT for assessment/grading is NOT sufficient. The documents listed below must be attached to the LIVETEXT Professional Portfolio in the designated course area in the "Body of Work":*

- Signature Assignment(s): (insert name of assignment here)
- Leadership/Service Requirement (if required this semester)

The student may also create a separate section either within the "Body of Work" or within the general Professional Portfolio to document additional activities that contribute to their professional development (jobs, clubs, awards, volunteer experience, required leadership attendance, etc.). However, these items are not required.

**IMPORTANT:** Failure to update your LIVETEXT Professional Portfolio with the required signature assignments for the course will result in withholding of the final course grade and will affect progression in the program until the LIVETEXT Professional Portfolio is updated appropriately.

- Developmental Paper
  - Developmental Project (or evidence of project + write-up)
  - All Reflective Journals
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Students are strongly encouraged to submit additional coursework into LiveText® to demonstrate personal and professional growth.

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- Concept Map
  - Oral Case Study
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## **Assessment Technologies Institute (ATI)**

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### **What does ATI offer?**

- Assessment Technologies Institute (ATI) offers an assessment driven comprehensive review program designed to enhance student NCLEX® success.
- The comprehensive ATI review program offers multiple assessment and remediation activities. These include assessment indicators for academic success, critical thinking, and learning styles. Additionally, online tutorials, online practice tests, and proctored tests are provided and span major content areas in nursing. These ATI tools, in combination with the nursing program content, assist students to prepare effectively, helping to increase their confidence and familiarity with nursing content.

- ATI Orientation resources such as the ATI Plan can be accessed from “My ATI” tab. It is highly recommended that you spend time navigating through these orientation materials.

**Review Modules/eBooks:**

ATI provides Review Modules in eBook formats that include written and video materials in key content areas. Students are encouraged to use these modules to supplement course work and reading. Instructors may assign chapter reading either during a given course and/or as part of active learning/remediation following assessments.

**Tutorials:**

ATI offers unique Tutorials designed to teach nursing students how to think like a nurse, how to take a nursing assessment, and how to make sound clinical decisions. **Nurse Logic** is an excellent way to learn the basics of how nurses think and make decisions. **Learning System** offers practice tests in specific nursing content areas that allow students to apply the valuable learning tools from Nurse Logic. Features such as a Hint Button, a Talking Glossary, and a Critical Thinking Guide embedded throughout the Learning System tests to help students gain an understanding of the content.

**Assessments:**

There are practice assessments available for students as well as standardized proctored assessments that may be scheduled during courses. These assessments will help the student to identify what they know as well as areas requiring remediation called Topics to Review.

**Focused Reviews/Active Learning/Remediation:**

Active Learning/Remediation is a process of reviewing content in an area that was not learned or not fully understood (as determined on an ATI assessment). Remediation tools are intended to help the student review important information to be successful in courses and on the NCLEX®. The student’s individual assessment report will contain a listing of the Topics to Review. It’s highly recommended to remediate using the Focused Review after completion of any practice/proctored tests, which contains links to ATI eBooks, media clips, and active learning templates.

The instructor has online access to detailed information about the timing and duration of time spent in assessments, focused reviews, and tutorials by each student. Students can provide documentation that required ATI work was completed using the “My Transcript” feature under “My Results” of the ATI Student Home Page or by submitting written Remediation Templates as required.

## Content Mastery Series | Grading Rubric

(Using a combination of the CMS practice and proctored assessments to achieve 10% of the test grade)

Practice Assessment	
16 points (8 per practice test)	
<p><b>4 Pts</b> Complete Practice Assessment A  <b>Remediation:</b>  <b>4 Pts</b> • For each topic missed, complete a handwritten active learning template</p>	<p><b>4 Pts</b> Complete Practice Assessment B  <b>Remediation:</b>  <b>4 Pts</b> • For each topic missed, complete a handwritten active learning template</p>



Standardized Proctored Assessment			
Level 3 = 16 pts	Level 2 = 12 pts	Level 1 = 4 pts	Below Level 1 = 0 pts
<p><b>Remediation = 8 pts</b>                      For each topic missed, complete a handwritten active learning template</p>	<p><b>Remediation = 8 pts</b>                      For each topic missed, complete a handwritten active learning template</p>	<p><b>Remediation = 8 pts</b>                      For each topic missed, complete a handwritten active learning template</p>	<p><b>Remediation = 8 pts</b>                      For each topic missed, complete a handwritten active learning template</p>
<b>40/40 points</b>	<b>36/40 points</b>	<b>28/40 points</b>	<b>24/40 points*</b>
Proctored Assessment Retake*			
No Retake Required	No Retake Required	Retake * Recommended <b>4 pts</b> given if Level 2 achieved	Retake * Recommended <b>4 pts</b> given if Level 2 achieved



## **LEADERSHIP REQUIREMENT**

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This is fulfilled during the semester when the student takes NSG340 and is not required during this course.

## **REQUIRED LEARNING ACTIVITIES**

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1. Medication Quiz (see NSG311 syllabus for guidelines)\*
2. Individual Readiness Assessment Tests (iRAT) x 5
3. Team Readiness Assessment Test (tRAT) x 5
4. Exams (3 total) – NO Cumulative Final
5. Oral Case Presentation (completed during clinical post-conference)\*
6. Developmental Paper & Teaching Project\*
7. Graded Concept map (see syllabus for NSG311 for guidelines/rubric)\*
8. 2 Non-proctored and 1 Proctored ATI exams (see below)
9. ATI remediation including Focused Review and Active Learning Templates

*\* completed on NSG311 clinical patients/scenario's but points granted in NSG310 grade*

### **Pre-Clinical Medication Quiz**

All students will be required to take and pass a medication quiz. The grade assigned for this quiz is based on the taker's first attempt.

### **Exam Format – Group Testing**

Students learn best with immediate feedback after a test or exam. Major exams will be given during the first hour of class (0735 – 0835) and will be 50 questions in length and consist of multiple choice, math and essay questions. Students will have a short break after completion of the exam and then return at an assigned time in their pre-assigned team to complete a single group exam. You will work in your teams to complete the exam in a short amount of time (usually 20 minutes). Each team will complete a single exam, once exams are turned in answers to the exam will be reviewed. The entire class period (including the break) is considered part of the testing process, therefore cell phones, notes, and backpacks will need to stay untouched during the entire class time in order to protect the integrity of the test.

*The overall exam score is calculated as follows:*

Your (individual score x .85) + (group exam score x .15) = combined score (total number of points on the exam).

If you happen to perform better than your group and your individual exam score is greater than your combined score, the higher score will be awarded as your grade. Students requiring academic accommodations who cannot make it back in time for the group exam will be given the same group test points as their team. Students who miss the scheduled exam due to an excused absence will also be granted the same points as their team. Students who do not have an excused absence will forfeit the group score points.

**REQUIRED LEARNING ACTIVITY:**  
***Oral Case Presentation – Clinical Post-Conference***

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**Points Possible:** 15

**DUE DATE:** Presented in clinical Post Conference. A sign-up sheet will be completed the first day of clinical orientation to sign up for a date of presentation.

**COMPETENCIES:**

At the completion of this activity, the student will:

1. Demonstrate an ability to synthesize and integrate patient information with evidence-based practice to provide individualized nursing care for the child/adolescent within in the context of the family.
2. Evaluate the nursing process by obtaining assessment data, developing a nursing problem list with expected outcomes, developing and implementing nursing interventions, and evaluating client outcomes (care plan/concept map).
3. Access, appraise and apply relevant evidence-based practice nursing articles and community resources to the case discussed.
4. Make a professional presentation to peers regarding the content covered in this assignment that engages fellow students in learning the topic. This might be accomplished by using a handout, a pre/post quiz, a visual aid, game, etc.
5. Evaluate the effectiveness of your presentation.

**GUIDELINES AND INSTRUCTIONS:**

1. **Select an interesting patient** you have cared for in the clinical setting. Do this early in the semester! The patient used for this oral case study must be different from the patient you use for your developmental paper.
2. **It is highly recommended that you complete one of your required concept maps on this patient** since the information needed for this assignment is also found in the care plan/concept map.
3. **Discuss your choice of patient with your clinical instructor.** This is to evaluate appropriateness of client and avoid duplication of presentations.
4. Identify and **address issues of growth and development.** If present, discuss abnormal or unexpected findings. Include ht, wt, head circumference, and growth percentiles.
5. Student attendee's should be given 3 key "take-away" points to remember about this case/diagnosis.
6. **Presentations should last only 20 minutes.** Time is important to the grade.
7. Evaluate the learning that occurred with your audience. How will you know they understood what you are talking about? This can be accomplished a number of different ways. Please talk to your clinical professor if you have questions!

## Oral Case Study Presentation Grading Rubric

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<b>Assessment Data</b>	(.5) Contains 4 or less of the key elements  Missing all elements = 0	(1) Contains 5-6 of the key elements	(1.5) Contains 7-8 of the key elements	(2) Contains all of the following 9 KEY ELEMENTS: <ul style="list-style-type: none"> <li>• Initials</li> <li>• Age</li> <li>• Diagnosis</li> <li>• History (hx) - current &amp; past medical hx – (including prenatal hx)</li> <li>• Prognosis – survival/cure</li> <li>• Social hx,</li> <li>• Family &amp; cultural assessment</li> <li>• Summary of findings of labs and other tests - implications &amp; significance for the patient, normal and abnormal</li> <li>• Medications - dosage, action, classification, nursing considerations, rationale for use in this patient (if many, creating a handout is recommended)</li> </ul>	<b>2</b>	
<b>Review of Disease Process</b>	(1) Contains 2 or less of the key elements No pathophysiology presented = 0	(2) Contains 3 of the key elements	(2.5) Contains 4 of the key elements	(3) Contains all of the following 5 KEY ELEMENTS: <ul style="list-style-type: none"> <li>• Pathophysiology of Main Problem or Disease</li> <li>• Etiology of disease (if known)</li> <li>• Incidence of disease/problem</li> <li>• Complications</li> <li>• Medical Treatment</li> </ul>	<b>3</b>	
<b>Growth &amp; Development</b>	(0) Contains 1 or less of the key elements No Growth & Development Presented = 0	(1) Contains 2 of the key elements	(2) Contains 3 of the key elements	(3) Contains all of the following 4 KEY ELEMENTS: <ul style="list-style-type: none"> <li>• Discusses Erikson Stage</li> <li>• Discusses Piaget Stage</li> <li>• Provides examples of behavior to justify stage</li> <li>• Compares found stage to expected stage</li> </ul>	<b>3</b>	

<b>Nursing Process</b>	(1) Contains 3 or fewer of the key elements  No Concept map is presented = 0	(1.5) Contains 4 of the key elements	(2) Contains 5 of the key elements	(3) Contains all of the following 6 KEY ELEMENTS: <ul style="list-style-type: none"> <li>• Creates a concept map to share with peers that incorporates the nursing process with pathophys</li> <li>• Nursing diagnosis/Problem</li> <li>• Measurable, realistic outcomes</li> <li>• Interventions (at least 3 per dx)</li> <li>• Evaluation – were outcomes met?</li> <li>• <u>Includes at least one evidence-based article or clinical guideline in presentation!</u></li> </ul>	<b>3</b>	
<b>Community Resources</b>	(0) No resource is presented.	(0) Contains less than 2 of the key elements	(.5) Contains 2 of the key elements	(1) Contains all of the following 3 KEY ELEMENTS: <ul style="list-style-type: none"> <li>• Identify at least one community resource or agency that would be helpful to the patient/family with appropriate services to help promote the health and wellbeing of the child</li> <li>• Resource is age/diagnosis appropriate</li> <li>• Resource is relevant to this patient</li> </ul>	<b>1</b>	
<b>Quality of Presentation</b>	(1) Contains 3 or fewer key elements  (0) *No KEY take-away points presented	(2) Contains 4 of the key elements	(2.5) Contains 5-6 of the key elements	(3) Contains all of the following 7 KEY ELEMENTS: <ul style="list-style-type: none"> <li>• Includes adherence to time limit (20 minutes),</li> <li>• Speaks clearly</li> <li>• Presentation organized and flows well</li> <li>• Ability to engage fellow students in learning.</li> <li>• Uses teaching aids to facilitate learning.</li> <li>• <u>*Emphasizes 3 key “take-away” points for future practice with peers/instructor</u></li> <li>• Provides 2 quality sources (other than text) and provide printed bibliography to instructor</li> </ul>	<b>3</b>	

**Comments:**

- Teaching Aid?
- 3 Take-aways?
- Bibliography provided?

## **REQUIRED LEARNING ACTIVITY:**

### **Developmental Assessment of a Hospitalized Child Adapting to a HOME-Focused Plan of Care – Paper (Part 1) & Project (Part 2)**

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**DUE DATES:** See course calendar

#### **Part I (Developmental Paper):**

- Developmental Assessment due 10/8(pick a patient and gather assessment in weeks prior to this date!
- Developmental Paper Draft submitted to Livetext by 10/22 at 11:59pm
  - Peer Review must be complete by 10/26 at 11:59pm – lack of peer review completion = 0 on your own draft grade even if turned in on time!
- Final Paper submitted to Livetext by 10/29 at 11:59pm. Project turned into clinical faculty per their instruction.

#### **Part 2 (Developmental Teaching Project):**

- Physical Project Due to Clinical Professor by:
  - 11/6 – Tuesday Clinical
  - 11/8– Thursday Clinical
- Project Write-Up/Summary due in Livetext by 11:59pm the same day as project turn-in.

## **STUDENT LEARNING OUTCOMES:**

During the completion of this activity, the student will:

1. Assess specified areas of child development
3. Analyze the effect of hospitalization on the normal developmental process
4. Comparing expected norms to actual findings, identify maladaptive behaviors encountered during the hospital experience
5. Determine evidence-based nursing interventions to address identified developmental concerns or areas for reinforcement.
6. Write a SCHOLARLY paper using APA format, 6<sup>th</sup> Edition
7. Design a developmentally appropriate home-based teaching project to promote the child's health AT HOME after discharge.

**Points Possible:** Each assignment has an associated rubric in Canvas to assess the achievement of assignment outcomes. This assignment has 5 individual components.

- Developmental Assessment = 10 points
- Peer-Reviewed Paper Draft = 25 points (dependent on peer's review turned in on time). Please don't turn in poor work – it will make your peers frustrated!
- Final Paper = 50 points
- Final Project & Project Summary = 25 points

## OVERALL DEVELOPMENTAL PAPER/PROJECT GUIDELINES AND INSTRUCTIONS:

1. **Choose a patient early in the semester.** Preferably within the first 4 -5 weeks of clinical.  
***The deadline for having chosen a patient for this paper/project is:***
  - a. **October 2 for Tuesday Clinicals**
  - b. **October 4 Thursday Clinicals**
2. The child selected must be different than the child selected for the Oral Case Presentation. Please discuss the patient with your clinical instructor prior to final selection.
3. It is best to choose a child that is 5 years of age or older and does NOT have a significant developmental delay. Having a parent at the bedside will be extremely helpful!!
4. The focus of this paper/project is to determine what can be done once the child returns “home” to further address developmental needs or risks.
5. YOU DO NOT NEED TO WRITE TO ALL SECTIONS IN THE PAPER RUBRIC! Note that some of the sections are required of all papers and then you will only use the sections that apply to your particular patient (e.g. nutrition and emotional).
6. As Junior level students, I expect you to read and follow the rubric provided as you write. Failure to follow the rubric or write in the prescribed format, (scholarly – first person, use of the 3 paragraph format for your areas of risk) you will result in a poor grade on this paper.

### PART I - DEVELOPMENTAL PAPER – PAPER GUIDELINES:

#### 1. Developmental Assessment:

This is an informal, yet guided way to collect developmental data about your patient and their family. Use the Developmental Assessment tool in Canvas to collect data about your patient/family. The final turned in product must include the patient’s initials, age, a brief History of Present Illness and as much information as you can glean from the patient and family. This must be typed but does not need to be in APA format. Refer to our class Canvas site for more specific guidelines/outline and grading rubric. This will be turned in on Canvas.

#### 2. Peer Reviewed Draft and Final Paper – CAREFULLY READ ALL OF THESE GUIDELINES!

- **Format:** both draft and final paper must be typed using APA, 6<sup>th</sup> ed. guidelines, including a brief introduction and summary/conclusion.
- **This means the paper is written in 3<sup>rd</sup> person (an observer watching from afar). No use of “I”, “we”, “one”, “this student nurse”...**
- **Length:** the paper should be 7 to 8-ish pages of content (not including title page,

references or teaching project summary). Will not read beyond 10 pages.

- **CITATIONS:** The paper must be cited appropriately (credit given to the sources where you obtained information) per the directions above for each paragraph of each main section. **Sections that require citations but have no citations will be graded a zero for that section.** If the problem occurs too frequently, the student may receive a zero on the entire paper. Failing to cite appropriately is a form of plagiarism!
- Use a MINIMUM of 5 current (within last 5 years) sources – **ONLY THE FOLLOWING WEBSITES MAY BE USED: (IF YOU HAVE QUESTIONS, PLEASE CHECK WITH ME!)**
  - Any federal health site (NIH, CDC, etc)
  - Professional or Community Associations (e.g. American Nurses Association, Cystic Fibrosis Foundation, etc.)
  - Medscape, WebMD
- Throughout the paper you will need to **compare** and **contrast** the child you are studying to expected normal behaviors and phases. In **each area of RISK** (labeled as such with a section title – see outline), there must be 3 distinct paragraphs (the 3 paragraph format).
  - Paragraph 1 - Present **normal findings** for a child this age (REQUIRES CITATIONS)
  - Paragraph 2 - Present **YOUR patient assessment** findings as compared to normal for this child. Are they on track? Are there significant differences? Give examples to demonstrate how they compare.
  - Paragraph 3 - Determine **HOME-BASED interventions to address delays or reinforce** continued development (REQUIRES CITATIONS)
- **Recommended interventions** - must be specific and home- focused, they should NOT be hospital-oriented. Try to project into the everyday life experiences, safety, and health promotion of the child in his/her home life. What can you teach this child/family at home that will promote current/future health?
- **MOST IMPORTANT:** Review the “**Most Commonly Made Mistakes**” document in Canvas so that you can avoid them in your paper. If you choose not to review this helpful document – you will be graded accordingly.

**Developmental Paper – Outline** (use for both draft and final versions – see rubric for details to be included!) Your paper must clearly have these sections titled with headers in your paper and they must be in this order.

*Introduction*

Why is assessment of development important in children? What are you going to tell me in your paper?

*Identifying Information (be HIPAA compliant – no dates, no initials!!)*

Expand upon items from assessment, see rubric.

*Erikson/Piaget Assessment*

*Description of expected stage*

*Behaviors that confirm or conflict with expected stage*

*(If not at expected stage, state stage patient is at and how you made that determination)*

*Area for Improvement/Area of Risk #1*

Expected norms for this age – requires citations

Findings for this child – your assessment (no citations needed)

Recommended Intervention – requires citations

*Area for Improvement/Area of Risk #2*

Expected norms for this age – requires citations

Findings for this child – your assessment (no citations needed)

Recommended Intervention – requires citations

*Identified Teaching/Learning Need(s)*

-based on assessment findings

*Conclusion*

Tell me what you told me (summary of your findings)

**Part 2: HOME-FOCUSED DEVELOPMENTAL TEACHING PROJECT**

**STUDENT LEARNING OUTCOMES:**

During the completion of this assignment, the student will:

1. Conduct an assessment of teaching/learning needs specific to this patient/family based on disease process, educational level, current developmental stage and child's interests (if possible).
2. Create a **home-focused** project for teaching that includes identification of who is being taught, the chosen Teaching/Learning process and content to be covered.
3. Apply the elements of the nursing process in determining the teaching needs of the child/family.
4. Create a plan to evaluate the effectiveness of the teaching project.

**GUIDELINES:**

1. For the child evaluated in the developmental paper, design a **home-based** teaching plan and/or project that is creative, age specific and well organized with regard to the disease process/education of family and developmental level of child! Should be practical and relevant.
2. Create a developmentally appropriate project to either teach the patient and/or family to care for the child or to advance the health of the child given their diagnosis and identified teaching needs.
3. The student will apply the elements of the nursing process in determining the teaching needs of the child/family and will state a plan for evaluating the effectiveness of the plan.



- Ideas for possible projects (you are not limited to these): creating games, books, charts, scavenger hunts, posters, education packets, journals, dolls, sticker charts, medical play, resource lists, audio/video tapes/CD's. The sky is the limit – think outside the box!

- **Creativity will be generously rewarded!**

4. Please provide a written 1-2 page summary of why you chose this teaching method for this patient/family. READ THE ATTACHED RUBRIC! Address who, what, and how you teach and why it is appropriate for this patient/family. Explain how it meets their developmental physical and psychosocial needs and how you would evaluate patient/parent learning. **This must also be in APA 6<sup>th</sup> Edition Format.** This will be turned in on Canvas.

# Developmental Paper Grading and Assessment Rubric

## INTRODUCTION & IDENTIFICATION

All papers must have these 2 sections!

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Assess health/illness beliefs, values, attitudes, and practices of individuals, families, groups, communities and populations (BSN Essential VII: 3)</p> <p>NSG310: CLO 1.4 NSG311: CLO 1.1</p>	<ul style="list-style-type: none"> <li>• Includes one or fewer criteria</li> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 2 or fewer criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 3 elements in criteria</li> <li>• May have some grammar, spelling errors</li> </ul>	<p><b>Clear Introduction Paragraph:</b></p> <ul style="list-style-type: none"> <li>• Clear introductory sentence</li> <li>• Purpose of the paper</li> <li>• Relevance of developmental assessment to pediatrics</li> <li>• Topics to be covered in the paper</li> </ul>	5	
<p>Evaluate data from all relevant sources, including technology, to inform the delivery of care. (BSN Essential IV: 6)</p> <p>NSG310: CLO 2.4 NSG311: CLO 1.3</p>	<ul style="list-style-type: none"> <li>• No identifying data OR</li> <li>• less than 3 required items</li> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Between 3 to 4 of the required criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 5-6 criteria</li> <li>• May have some grammar, spelling errors</li> </ul>	<p><b>Identifying Data:</b></p> <ul style="list-style-type: none"> <li>• Provides patient initials and age (years and months). No names!!</li> <li>• Diagnosis</li> <li>• Brief history of present illness</li> <li>• General appearance statement</li> <li>• List height and weight (and FOC if less than 2 years)</li> <li>• List child's present percentile (height and weight)</li> <li>• The expected 50<sup>th</sup> percentile for a child of similar age</li> </ul>	5	

## Developmental Paper Grading and Assessment Rubric: Psychosocial Development

### ERICKSON

**All papers must address Erickson stage for the child being assessed.**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Implement holistic, patient centered care that reflects and understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across the lifespan, and in all healthcare settings. (BSN Essential IX: 3)</p> <p>NSG310: CLO 1.4 NSG311: CLO 2.2</p>	<ul style="list-style-type: none"> <li>• Does not include this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• Provides poor evidence for actual stage or stage incorrect based on evidence given</li> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Includes fewer than 2 criteria for this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• All criteria present but conclusions lack evidence and support</li> <li>• Multiple grammar, spelling errors</li> </ul>	<ul style="list-style-type: none"> <li>• Includes all elements of this section</li> <li>• Lacks sufficient or appropriate evidence to support assessment of child's actual stage</li> <li>• May have some grammar, spelling errors</li> </ul>	<p><b>Psychosocial Tasks – Erikson</b></p> <ul style="list-style-type: none"> <li>• State expected Erickson stage for this age child.</li> <li>• Conducts an assessment of child's actual stage and provides evidence to support assessment findings (behaviors, abilities, interactions, etc.)</li> <li>• If assessment is different from expected, what stage is child actually at – provide rationale.</li> <li>• Well-developed concepts and strong evidence for assessed stage</li> <li>• No grammatical or spelling errors</li> </ul>	<b>8</b>	

## Developmental Paper Grading and Assessment Rubric

### GROSS & FINE MOTOR

**Use this rubric section only IF it applies to one of your 2 Areas for Improvement/Areas of Risk for your patient. Not all sections are required.**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. (BSN Essential IX: 1)</p> <p>NSG310: CLO 2.1 NSG311: CLO 1.2</p>	<ul style="list-style-type: none"> <li>• Does not include this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• Provides poor evidence for assessment</li> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 3 or fewer criteria for this section</li> </ul>	<ul style="list-style-type: none"> <li>• Includes all criteria of this section but, lacks sufficient or appropriate evidence to support assessment of child's gross or fine motor development</li> <li>• May have some minor grammar, spelling errors</li> </ul>	<p><b>Gross and Fine Motor Neuromuscular Development</b></p> <ul style="list-style-type: none"> <li>• Make assessment of present fine motor skills and stage and compare to norms for this age. Does the child meet norms or not?</li> <li>• Provides evidence to support assessment findings (behaviors, abilities, interactions, etc.)</li> <li>• Provides at least 2 specific HOME-BASED interventions to promote completion of fine motor development</li> <li>• Provides a broad plan for HOME-BASED accident prevention measures for this age (consider physical, social, psychological safety issues)Well-developed concepts and strong evidence for assessed stage</li> <li>• No grammatical or spelling errors</li> </ul>	<b>8</b>	

## Developmental Paper Grading and Assessment Rubric

### SOCIAL

Use this rubric section only IF it applies to one your 2 Areas for Improvement/Areas of Risk for your patient. Not all sections are required.

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. (BSN Essential IX: 1)</p> <p>Apply knowledge of social and cultural factors to the care of diverse populations. (BSN Essential I: 5)</p> <p>NSG310: CLO 2.1, CLO 3.5 NSG311: CLO 1.2, 2.2, 2.3, 3.2, 4.2</p>	<ul style="list-style-type: none"> <li>• Does not include this section</li> </ul> <p style="text-align: center; margin: 10px 0;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 2 or fewer criteria for this section</li> </ul>	<ul style="list-style-type: none"> <li>• Includes all 3 criteria of this section</li> <li>• Provides a fair assessment of 6 or fewer aspects of socialization</li> <li>• May have some minor grammar, spelling errors</li> </ul>	<p><b>Social Development</b></p> <ul style="list-style-type: none"> <li>• Make assessment in the area of socialization considering the following:                             <ul style="list-style-type: none"> <li>• Child’s personality and temperament</li> <li>• Communication ability</li> <li>• Stressors in their life, or parents life and how they deal with them</li> <li>• Friends or lack of friends</li> <li>• School or work</li> <li>• Activities</li> <li>• Social support (for the child/family)</li> <li>• Parental involvement</li> <li>• Sexuality (if applicable)</li> </ul> </li> <li>• Provides evidence to support assessment findings</li> <li>• Suggest at least 2 specific HOME-</li> </ul>	8	

				<p>BASED interventions to promote socialization and appropriate social behavior for the child's ageWell-developed concepts and strong evidence for assessments</p> <ul style="list-style-type: none"><li>• Grammar and spelling strong</li></ul>		
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## Developmental Paper Grading and Assessment Rubric

### EMOTIONAL

Use this rubric section only IF it applies to one your 2 Areas for Improvement/Areas of Risk for your patient. Not all sections are required.

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. (BSN Essential IX: 1)</p> <p>NSG310: CLO 2.1, CLO 3.5 NSG311: CLO 1.2, 2.2, 2.3, 3.2, 4.2</p>	<ul style="list-style-type: none"> <li>• Does not include this section</li> </ul> <p style="text-align: center; font-weight: bold;">OR</p> <ul style="list-style-type: none"> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 2 or fewer criteria for this section</li> </ul>	<ul style="list-style-type: none"> <li>• Includes all 3 criteria of this section</li> <li>• Provides brief assessment or lacks evidence to support</li> <li>• May have some minor grammar, spelling errors</li> </ul>	<p><b>Emotional Development</b></p> <ul style="list-style-type: none"> <li>• Assess status of emotional development (fears, stress, control, volatile behavior, regression, attachment to parents)</li> <li>• Provides appropriate evidence to support assessment findings</li> <li>• Suggest at least 2 specific HOME-BASED interventions to promote resilience and healthy emotional behavior</li> <li>• Well-developed concepts and strong evidence for assessments</li> <li>• Grammar and spelling strong</li> </ul>	8	

## Developmental Paper Grading and Assessment Rubric

### FAMILY RELATIONSHIPS

**Use this rubric section only IF it applies to one of your 2 Areas for Improvement/Areas of Risk for your patient. Not all sections are required.**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Assess health/illness beliefs, values, attitudes and practices of individuals, families, groups, communities, and populations. (BSN Essential IIV: 3)</p> <p>NSG310: CLO 1.4, 2.1, 3.5 NSG311: CLO 1.1, 1.2, 1.3, 2.3, 3.3, 4.2</p>	<ul style="list-style-type: none"> <li>Does not include this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>Includes 2 or fewer criteria for this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>Does not use a family theory to assess family dynamics</li> </ul>	<ul style="list-style-type: none"> <li>Includes all criteria of this section</li> <li>Does not use a valid family theory to assess family dynamics or does not use appropriate family theory</li> <li>May have some minor grammar, spelling errors</li> </ul>	<p><b>Family Relationships</b></p> <ul style="list-style-type: none"> <li><u>Use a family theory to assess family dynamics</u>, their relationships</li> <li>Describe how the family's function influences the development of the client</li> <li>Suggest at least 2 specific HOME-BASED interventions to promote healthy family interactions</li> <li>Well -developed concepts and explanations</li> <li>Grammar and spelling strong</li> </ul>	8	



**Developmental Paper Grading and Assessment Rubric**  
**NUTRITIONAL ASSESSMENT**

**Use this rubric section only IF it applies to one of your 2 Areas for Improvement/Areas of Risk for your patient. Not all sections are required.**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Assess health/illness beliefs, values, attitudes and practices of individuals, families, groups, communities, and populations. (BSN Essential IIV: 3)</p> <p>NSG310: CLO 2.1 NSG311: CLO</p>	<ul style="list-style-type: none"> <li>Does not include this section</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>Includes 2 or fewer criteria for this section</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>nutritional assessment addresses 3 or fewer elements</li> </ul>	<ul style="list-style-type: none"> <li>Includes 2 or fewer criteria for this section</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>Does not use a family theory to assess family dynamics</li> <li>May have some minor grammar, spelling errors</li> </ul>	<p><b>Nutritional Needs</b></p> <ul style="list-style-type: none"> <li>Assess the patients present dietary habits or diet regimen</li> <li>Perform an assessment of the child’s nutritional needs taking into consideration:               <ul style="list-style-type: none"> <li>Calories needed</li> <li>Current BMI</li> <li>Specific nutrients needed</li> <li>Eating behaviors</li> <li>Meal times/snacks</li> <li>Source(s) of food</li> <li>Dietary practices (cultural/religious)</li> <li>Growth and Development</li> <li>Likes and Dislikes</li> </ul> </li> <li>Suggest at least 2 specific HOME-BASED interventions to promote nutrition and meet the child’s nutritional needs</li> <li>Well – developed, comprehensive assessment with corresponding interventions</li> <li>Grammar and spelling strong</li> </ul>	8	

**Developmental Paper Grading and Assessment Rubric**  
CULTURAL/RELIGIOUS ASSESSMENT

**Use this rubric section only IF it applies to one of your 2 Areas for Improvement/Areas of Risk for your patient. Not all sections are required**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Points Possible	Point s Given
<p>Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. (BSN Essential IX: 1)</p> <p>Apply knowledge of social and cultural factors to the care of diverse populations. (BSN Essential I: 5)</p>	<ul style="list-style-type: none"> <li>Does not include this section and/or does not discuss cultural assessment factors that may conflict</li> </ul> <p align="center"><b>OR</b></p> <p>No citations (automatic zero on entire section)</p>	<ul style="list-style-type: none"> <li>Includes 2 elements of this section</li> </ul>	<ul style="list-style-type: none"> <li>Includes all elements of this section including religious and cultural assessment</li> <li>Poor assessment of the role of race, culture and religion as it relates to the healthcare system</li> <li>May have some minor grammar, spelling errors</li> </ul>	<p><b>Cultural/Religious Assessment</b></p> <ul style="list-style-type: none"> <li>Assess and discuss the cultural and religious context of the child and family. Remember race is not culture!</li> <li>Identify possible factors within the family's cultural or religious value system that may conflict with the healthcare system</li> <li>Discuss interventions to minimize conflicts (real or potential)</li> <li>Well developed, thoughtful assessment of the role of race, culture and religion as it relates to the healthcare system</li> <li>Grammar and spelling strong</li> </ul>	5	

**Developmental Paper Grading and Assessment Rubric**  
CULTURAL/RELIGIOUS ASSESSMENT

**All papers must have this section!**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Points Possible	Points Given
<p>Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral, and follow-up throughout the lifespan. (BSN Essentials VII: 5)</p> <p>NSG310: CLO 2.1, 3.5 NSG311: CLO 1.3, 2.3, 3.2, 5.3</p>	<ul style="list-style-type: none"> <li>No need(s) discussed</li> </ul>	<ul style="list-style-type: none"> <li>2 of 4 elements present</li> </ul>	<ul style="list-style-type: none"> <li>3 of 4 elements present</li> </ul>	<ul style="list-style-type: none"> <li><b>Identified Teaching Need(s)</b></li> <li>Explain specific need for patient/family education</li> <li>Identify learners to be taught (patient, parents, both, etc)</li> <li>Describe the value of this education to patient/family development.</li> <li>Grammar and spelling strong</li> </ul>	6	

## Developmental Paper Grading and Assessment Rubric

### Conclusion

All papers must have these 2 sections!

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Points Possible	Points Given
<p>Participate in the process of retrieval, appraisal, and synthesis of evidence in collaboration with other members of the healthcare team to improve patient outcomes. (BSN Essential III: 5)</p> <p>CLO 1.2 CLO 3.5</p>	<ul style="list-style-type: none"> <li>• No conclusion</li> </ul>	<ul style="list-style-type: none"> <li>• Minimal conclusion, does not summarize findings and/or interventions</li> </ul>	<ul style="list-style-type: none"> <li>• Clear concluding paragraph with summary of findings and 2 AREAS identified for intervention or further health promotion</li> <li>• Grammar and spelling acceptable</li> </ul>	<p><b>CONCLUSION</b></p> <ul style="list-style-type: none"> <li>• Clear concluding paragraph with summary of findings and</li> <li>• 2 AREAS identified for intervention or further health promotion</li> <li>• Rationale for choosing those areas</li> <li>• Grammar and spelling strong</li> </ul>	<b>5</b>	
<p>Use written, verbal, non-verbal, and emerging technology methods to communicate effectively. (BSN Essential I: 4)</p>	<p>Zero points for any of the following:</p> <ul style="list-style-type: none"> <li>• No headings</li> <li>• Poor margins</li> <li>• Spelling &amp; grammar poor</li> <li>• Not within page limit &gt; 1 page under or over.</li> <li>• No citations</li> </ul>	<ul style="list-style-type: none"> <li>• May or may not have headings</li> <li>• Margins uneven</li> <li>• Spelling &amp; grammar fair</li> <li>• Not within page limit &gt; 1 page under or over.</li> <li>• Few citations (&lt;5) or mostly old citations</li> </ul>	<ul style="list-style-type: none"> <li>• Margins correct</li> <li>• Headings present for each section</li> <li>• Acceptable grammar and spelling throughout</li> <li>• Within page limit</li> <li>• Adequate Citations present</li> </ul>	<p><b>APA Format</b></p> <ul style="list-style-type: none"> <li>• Margins 1" around</li> <li>• Cover page</li> <li>• Headings present for each section as listed above.</li> <li>• Spelling, grammar &amp; pagination correct</li> <li>• 6-8 pages (not including teaching project)</li> <li>• Strong grammar and spelling throughout</li> <li>• Within page limit</li> <li>• Appropriate Citations present</li> </ul>	<b>5</b>	

**Comments:**

## Home-Focused Developmental Teaching Project Summary

Grading & Assessment Rubric – **ALL STUDENTS MUST USE THIS RUBRIC for PROJECT SUMMARY!**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Points Possibl e	Points Given
<p>Provide appropriate patient teaching that reflects developmental stage, age, culture, spirituality, patient preferences, and health literacy considerations to foster patient (family) engagement in their care. (BSN Essential IX: 7)</p> <p>NSG310: CLO 1.2, 1.4, 2.1 NSG311: CLO5.1.1, 1.3, 3.2, 4.2, 5.3</p>	<ul style="list-style-type: none"> <li>Does not address identified needs of patient/family</li> <li>Not home focused</li> </ul>	<ul style="list-style-type: none"> <li>Project addresses non- identified needs of family</li> <li>Not home-focused</li> </ul>	<ul style="list-style-type: none"> <li>Project addresses physical/psycho social needs but misses most important issues</li> </ul>	<p>Project clearly addresses one of the identified physical/psychosocial learning needs (based on assessment) of the patient or family</p> <ul style="list-style-type: none"> <li>REMEMBER: The project must address HOME-FOCUSED teaching needs</li> </ul>	6	
<p>Provide appropriate patient teaching that reflects developmental stage, age, culture, spirituality, patient preferences, and health literacy considerations to foster patient (family) engagement in their care. (BSN Essential IX: 7)</p> <p>NSG310: CLO 3.5 NSG311: CLO 1.3, 2.4, 3.2, 4.2, 5.3</p>	<ul style="list-style-type: none"> <li>Is NOT developmentally appropriate for patient and or family's needs</li> </ul>	<ul style="list-style-type: none"> <li>Is somewhat developmentally appropriate for patient and or family's needs</li> </ul>	<ul style="list-style-type: none"> <li>Is developmentally appropriate but lacks clear relevance to teaching needs</li> </ul>	<ul style="list-style-type: none"> <li>The project is developmentally appropriate for patient and or family teaching needs</li> </ul>	6	
<p>Integrate evidence, clinical judgement, interprofessional perspectives and patient perspectives in planning, implementing and evaluating outcomes of care. (BSN Essential III: 6)</p> <p>NSG310: CLO 1.4, 3.4 NSG311: 1.1, 1.2, 3, 4, 4.1</p>	No plan included	Plan brief and non-specific	Plan present but method of evaluation weak or inappropriate Project shows effort	<p>Includes a highly specific plan for the evaluation of the effectiveness of this project related to patient/family understanding and knowledge</p>	6	
<p>Assume accountability for personal and professional behaviors. (BSN Essential VIII: 2)</p> <p>NSG310: CLO 1.5 NSG311: CLO 1.1, 1.2</p>	No project provided = <b>zero for entire project</b>	Project is poorly executed, shows little effort or time	Project shows Time and effort	<p>Project is well-executed and demonstrates the investment of thought, creativity and time into product</p>	3	

Evaluate the credibility of sources of information, including but not limited to databases and Internet resources. (BSN Essential III: 4)  NSG310: CLO 1.2	No APA used OR No references No Project Summary = <b>zero for entire project</b>	APA fair OR Missing/inappropriate references	APA present 2 or fewer references Less than 1 pg Not labeled!	<b>Minimum 1-2-page summary is in APA 6<sup>th</sup> edition format with references</b>  <b>Project labeled with student name!</b> APA format 5 or > appropriate references 2 or > pages Labeled clearly with student name	2	
<b><i>Projects turned in without a summary page will not be graded and will be given a zero!</i></b>						
<b>Total Points Possible</b>					<b>25</b>	

Comments: