
Spring 2015



School of Nursing
NSG311: Nursing of Families
Child/Adolescent Practicum

3 Semester Units

PLNU *forward*

Meeting days/times: Section 1 – Thursday AM (0630-1500) Section 2 – Tuesday AM (0630-1500) Section 3 – Tuesday AM (1200-2100) Section 4 – Thursday AM (0630-1500)	Instructor: Emily Rapkin, RN, BSN, CPN Elaine Arguilla, RN, MSN, CNS, CPN Heather Garcia, MSN, RN, CNS, CPN Annie Gerhart, RN, MSN, FNP, CEN
Meeting times: see above	Phone: Emily Rapkin Cell: (503)999-9156 Elaine Arguilla Cell: (619)948-4049 Heather Garcia Cell: (858)829-3915 Annie Gerhart Cell: (619)405-8919
Meeting location: Rady Children's Hospital and Health Center 3020 Children's Way San Diego, CA 92123-4282 Phone: 858-576-1700	E-mail: Elaine Arguilla: earguilla@pointloma.edu Chris Sloan: csloan100@pointloma.edu Heather Garcia: hgarcia1001@pointloma.edu Annie Gerhart: agerhar1@pointloma.edu
Placement: Junior status	Office location and hours: N/A
Final Exam: N/A	Additional info: Co-requisite is NSG310

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

PRE-REQUISITES:

Same as NSG 310 (Theory).

Note: A minimum grade of "C" must be achieved in all prerequisite courses for course eligibility.

CO-REQUISITES:

Same as NSG 310 (Theory).

Note: A minimum grade of "C" must be achieved in all corequisite courses in order to progress in the program.

COURSE DESCRIPTIONS

This practicum course consists of opportunities for application of nursing theory and child development as it relates to adaptation of child and adolescent clients and their families. Graded Credit/No Credit.

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 3 unit class delivered over 15 weeks.

PROGRAM VALUES & COURSE LEARNING OUTCOMES

Upon completion of NSG 311, the student will meet the following outcomes (as specified in the *Clinical Assessment & Evaluation Form*):

INQUIRING FAITHFULLY:

The 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 in the nursing process.

1. Implement individualized evidence-based plan of care for pediatric patients within the context of both the community and the acute-care setting.
2. Apply skills of inquiry, analysis and information literacy to the design and implementation of family-centered care practices
3. Adapts approach to provide holistic, family-centered care to the specific needs of the patient and family
4. Examine own personal self care practices for the provision of sustained quality care (PLO1.5; BSN Essen VIII-14).

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.

1. Exemplify Christ's love through compassionate care for children and their families (PLO 2.1, BSN essential IX-21)
2. Investigate community resources to support the health and well-being of patients, families and communities (PLO 2.2; BSN essential IX-10)
3. Incorporate family's health beliefs, culture and health literacy into plan of nursing care (PLO 2.1; BSN essential IX-7; QSEN patient-centered care)
4. Reflect on personal beliefs and values as related to professional nursing practice among this population (PLO 2.3; BSN essential VIII-6, ¾; QSEN___)

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 which conveys information, thoughts, actions and feelings through the use of verbal and nonverbal skills.

1. Engage with information technologies to document and monitor patient care.
2. Formulate developmentally-appropriate, evidence-based health education to enhance patient/family understanding of healthcare practices
3. Apply therapeutic communication skills to deliver patient/family-centered care (PLO 3.2 & PLO3.3; BSN Essential I-4, IV-2; QSEN Informatics)
4. Evaluate inter- and intra-professional communication to optimize patient outcomes (PLO 3.3; BSN essential VI-4)

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 for all actions and treating others with respect and dignity.

1. Applies professional standards of care according to ethical, legal and Christian principles (PLO 4.2; BSN essential VIII-1,2;)
2. Implement developmentally appropriate, best practice recommendations to promote health and well beings of patients/families (PLO 4.2; BSN essential ___; QSEN___)

3. Commit to life-long learning and continued professional development for nursing excellence (PLO 4.3; BSN essential VIII-13; BSN essential 1-9)

FOLLOWING 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, and discernment.

1. Creates a safe and compassionate caring environment that results in quality patient outcomes.
2. Role model Christian nursing by integrating servant leadership in the care of diverse populations (PLO5.2; BSN essential 1-5; QSEN)
3. Respects the rights and care preferences of patients/families from diverse cultural backgrounds.

METHODS OF EVALUATION

Students must meet a minimum of 75% of the standards listed on the *Clinical Evaluation Form* (Appendix A) to receive “Credit”. Overall course evaluation (both written and in person) will occur at the end of the semester.

All evaluation is based on achievement of stated course objectives. Evaluation tools include observation, concept maps, clinical assessments, clinical write-ups and clinical participation. Ongoing student evaluation of the course is sought throughout the semester. All required clinical assignments must be completed with a passing grade by the time of final evaluation to receive credit for this course.

ACADEMIC POLICIES

Make up for clinical hours is at the discretion of the faculty. All clinical (i.e. on-campus, skills lab, clinical sites) hours must be made up. It is the responsibility of the student to initiate communication regarding arrangements for make-up. Failure to makeup clinical hours will result in a “No Credit” for the clinical practicum and an incomplete for the co-requisite theory course.

COURSE SPECIFIC POLICIES

- **Cell phone use** is **absolutely prohibited in all clinical areas** and may not be carried anywhere on your person. Cell phones may be used in the cafeteria or outside the hospital building. Violation of this hospital-mandated policy will result in immediate dismissal from the clinical area and placement on academic probation or dismissal.
- **Medication administration must be conducted according to the competencies outlined in “Medication Administration in the Clinical Area”**. **Failure to meet these competencies may result in failure of the course and placement on academic probation.**
- **Dress code** is per PLNU policy. The only exception is that students may wear colorful socks, you may add a print or colorful stethoscope cover and may wear a lanyard that is colorful. No jackets or “hoodies” may be worn - only lab coats are an acceptable means of “warming up” your uniform. Please, no colored undershirts, messy hair or jewelry beyond the School of Nursing Policy. You are caring for peoples most prized possession – their child. In order to be taken seriously as a nurse, you must dress and act professionally as well.
- **A student badge** provided by RCHSD must be worn along with your PLNU SON badge per PLNU policy. Students will not be allowed into the RCHSD facility without these two badges. Student’s who forget to wear their badge, will be sent home to retrieve it before attending any clinical time.

ATTENDANCE AND PARTICIPATION

Make up for clinical hours is at the discretion of the faculty. All clinical (i.e. on-campus, skills lab, clinical sites) hours must be made up. It is the responsibility of the student to initiate communication regarding arrangements for make-up. Failure to make up clinical hours will result in a “no credit” for the clinical practicum and an incomplete for the co-requisite theory course. *Since students have 2 clinical practicums during the semester when this course is taken, it is highly recommended that the student miss clinical only for legitimate illness as a make-up will be very difficult to schedule.*

REQUIRED TEXTS & RECOMMENDED STUDY RESOURCES

Same as NSG 310 (Theory)

PORTFOLIO REQUIREMENT

At the conclusion of each course, students are expected to complete/update a LiveText® portfolio including self-evaluation of outcomes using the BSN Growth Portfolio template. The portfolio provides evidence supporting professional development and attainment of PLNU SON BSN graduate outcomes. For this course, the following assignment(s) are **required** to be submitted in LiveText®.

- All Guided Reflective Assignments: *At least 2 Guided Reflective Journals*

Students are strongly encouraged to submit additional coursework into LiveText® to demonstrate personal and professional growth.

REQUIRED LEARNING ACTIVITIES

In this section, list all required assignments (such as journals, care plans/maps, clinical logs, etc.).

See Appendix A

Assignment	Due Date
California Department of Social Services Mandated Reporter Medical Training	Tues, September 9 at hospital orientation
Medication Quiz	Successful completion prior to administration of medications (Clinical Orientation – Day 2)
Concept Maps (3)	Due every week until complete Pass/Fail on first 2, last con map is graded!
Float Experience Write-Ups (2)	Due the week following that clinical exper. Pass/Fail
Critical Thinking Tool (1)	Due by end of semester Pass/Fail
Reflective Journals(5)	Due by end of semester

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NSG311-Fall 2014

REQUIRED LEARNING ACTIVITY:

Child Abuse Mandated Reporter Training – Online Modules

- **General Training**
- **Medical Provider Training**

COMPETENCIES - The student will learn:

- How the law defines child abuse and neglect
- What the law requires of you as a mandated reporter
- What protections the law provides for a mandated reporter
- How to spot evidence of child abuse
- How to report child abuse
- What happens after a report is filed
- Definitions of some of the terms used in this program

GUIDELINES AND INSTRUCTIONS:

1. Go to the following website:
<http://mandatedreporterca.com/training/generaltraining.htm> to complete the general training.
2. Once you have completed general training, complete the medical training module at
<http://medical.mandatedreporterca.com/intro/intro.htm>
3. Complete both modules prior to your hospital orientation day. Bring certificates of completion with you to orientation.

GRADING: This is a non-graded required clinical training. Students may not begin clinical without successful completion of these modules.

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REQUIRED LEARNING ACTIVITY:

Medication Administration in the Clinical Area/Medication Quiz

COMPETENCIES - The student will be able to:

1. Apply previously learned pharmacologic principles when administering medications as appropriate.
2. Calculate fractional dosages and conversions, to determine if dosage is safe as evidenced by passing the Medication Math Quiz with score of 100%.
3. Implement a developmental approach during medication administration.
4. Understand the reasons for parental fluid administration
5. Identify the routes and methods of medication admin utilized in children.
6. Calculate the fluid needs of all patients assigned.
7. Identify safety measures used for administering medications to the pediatric patient.

GUIDELINES AND INSTRUCTIONS:

1. All students will take a medication math quiz at the beginning of the semester. Medications will be administered **only** under the direct supervision of your clinical instructor. Under **NO** circumstance may you give medication without your clinical instructor present (not with your nurse or senior student either). This is a RCHSD policy!!
2. Medications are to be reviewed in depth using a pediatric drug reference prior to administration. Use of a non-pediatric focused drug book may result in medication errors!
3. Prior to passing medications the student must be able to discuss with the instructor the following information:
 - Name and class of drug
 - Expected action of drug
 - Reason the drug was ordered for your patient
 - The safe prescribed dose ranges and frequencies as found in a pediatric drug book, with citation listed. Calculate out the dosages and amounts to be given.
 - Route of administration
 - Potential side effects & toxic effects
 - Patient/Family teaching required
 - Contraindications, & special instructions including specific monitoring parameters for the nurse.
4. Review the policies for Administration of medications including IV Medication Guidelines.
5. **Failure to meet these competencies may result in failure in the course.**

GRADING: 10 points (must take as many times as necessary to achieve 100%) – the initial attempt will be the grade recorded.

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REQUIRED LEARNING ACTIVITY:

Clinical Concept Map

Number Due: 3 – due the week after you have cared for that child.

STUDENT LEARNING OUTCOMES:

The student will...

1. Assess and integrate clinical information relevant to patient into a plan of care
2. Understand the relationship between pathophysiology and the patient's condition/assessment findings.
3. Identify meaningful connections between the patient's signs/symptoms and diagnostics and the pathophysiology and treatment of the disease/problem.
4. Utilize the nursing process to design and prioritize a relevant plan of care for the shift.
5. Develop a plan for evaluating the effectiveness and outcomes of plan.
6. Consistently demonstrate improvement in care planning skills.

GUIDELINES:

1. 3 concept maps due during the semester:
 - 1 of the concept maps should be done on your Oral Case Study patient
2. Each Completed Concept map must include:
 - Patient Assessment (done weekly in clinical) – separate sheet (on Canvas)
 - Included in the body of the concept map
 - Pathophysiology of the disease/problem
 - Main physiologic problem(s) including all relevant diagnostic findings (X-rays, labs, physical assessment findings, etc.)
 - Main psychosocial problem (or potential problem)
 - Outcomes/Goals – at least 2 per intervention
 - Nursing interventions for (at least 3) and evaluation method
3. Concept Maps will be reviewed weekly as turned in and returned to student with feedback.
 - First two (2) concept maps – reviewed and graded as pass/fail. Those concept maps that do not meet minimum standards or lack demonstration of learned knowledge will be returned for rewrite and resubmission.
 - Final concept map (1) will be graded for a maximum of 15 points toward NSG 310 non-testing grade.

DUE DATE: One week following the experience on which you've chosen to do the concept map. Turn all clinical assignments in using course folders provided by the clinical instructor.

RESOURCES: See Canvas to obtain required forms and helpful guidelines for completing concept maps.

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REQUIRED LEARNING ACTIVITY:

Float Experience Write-Up

Number Due: 2 write – ups - submitted over the course of the semester (these are done on any experience/unit other than our base-unit).

STUDENT LEARNING OUTCOMES:

The student will...

1. Reflect upon differences in the nursing role throughout various areas of the hospital.
2. Evaluate the meaning of the clinical experience against their own personal definition and view of nursing.
3. Determine specific needs/stressors for this population, including the teaching and learning needs of patients and/or families.

GUIDELINES:

1. Write-ups are generally 1.5 -2 pages type-written. APA format is not necessary. Be sure to include your name, the unit visited and the date of the experience.
2. Each write-up should address each of the competencies listed.
3. Write-ups that reflect a poor effort will be returned to the student for revision or the student may be required to complete additional write-up(s) to demonstrate outcomes.

GRADING: Pass/fail

RESOURCES: See Unit Specific Expectations in Canvas

DUE DATE: One week following the FLOAT experience

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REQUIRED LEARNING ACTIVITY:

Critical Thinking Tool

Number Due: 1 during the semester

STUDENT LEARNING OUTCOMES:

The student will...

1. Demonstrate the ability to locate and discern key information regarding signs and symptoms and general treatment by reviewing the electronic medical record.
2. Apply previous and new knowledge in evaluating the course of care for the patient
3. Determine pertinent teaching needs for the patient/family and create a teaching plan.

GUIDELINES:

1. A minimum of one Critical Thinking Tool will be completed during the course of the semester.
2. Choose a patient that you are not currently caring for (unknown to you).
Hint: choose someone who has been in the hospital for >24 hours but less than 10 days.
3. Answer the questions asked on the tool. Provide information that is comprehensive and provides details. Do not use one word answers (e.g. "fever"). Be comprehensive in your descriptions. Tools that show a lack of detail will not be reviewed and must be redone.
4. Clinical instructors may require students to complete more than one tool based on clinical understanding and performance.

GRADING: Pass/Fail

DUE DATE: Due the week after completion.

RESOURCES: See Canvas for signs and symptoms Critical Thinking Tool form

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REQUIRED LEARNING ACTIVITY:
Reflective Journaling

Number Due: 5 during semester

STUDENT LEARNING OUTCOMES:

The student will:

1. Submit a one-page (minimum) type-written, double-spaced reflection of the day's experience (submitted on Canvas).
2. Reflect on clinical experience as it related to their growth and development as a nurse and document this reflection.
3. Evaluate their own clinical performance to determine weaknesses and strengths.
4. Maintain a record of age(s) and diagnosis(es) of patient(s) cared for during the semester.
5. Evaluate their achievement of SON core competencies for the day.
6. Set goals for future clinical experiences.

GUIDELINES:

1. The student will complete 1 reflective journal on each of the following topics (total of 5 journals during the semester):
 - Responsibility
 - Accountability
 - Respect/Dignity for others
 - Humility
 - Courage
2. There is no specified length for the journal but journal entry must be at least 300 words in length. Journal entries will be posted on Canvas in the Journals section of Nursing 310.

RESOURCES:

Clinical Journal Guidelines – found on Canvas

DUE DATE: Journals must be turned in one week after the experience written about. All journals should be complete by the students last clinical. You may not turn all journals in on the same day!

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REQUIRED LEARNING ACTIVITY:
CLINICAL PRACTICUM - Medical Unit / Surgical Unit

These units will be our home base for clinical experience. You will be here for the majority of your clinical experiences except for floating/observational experiences to other units.

STUDENT LEARNING OUTCOMES

The student will:

1. Develop a set of personal goals for the day
2. Work with the RN to carry out the plan of care on patients requiring nursing interventions
2. Discuss with the instructor at the beginning of the shift the patient, diagnosis, status, plan of care, developmental considerations and the medications to be given.
3. Communicate clearly with assigned nurse/health care provider to determine how work and tasks will be divided. Critical findings or issues must be communicated immediately to instructor and to the nurse caring for the patient.
3. Be prepared to present and discuss patient cases in post-conference

GUIDELINES AND INSTRUCTIONS:

1. Each student will be given a clinical schedule at the beginning of the semester. This schedule will also be posted on Canvas.
2. Pre-conference begins at 0630 for AM groups. Meet in the location determined by your clinical professor.
3. Students will be assigned to work with a nurse for the day. After hearing report, the student and the nurse will determine which patient(s) the student will care for on their shift.
4. Utilizing the patient work-up sheet, collect information on the selected patient. Research the patient's electronic medical record.
5. Prepare quickly for your day by becoming familiar with the diagnosis, medications, treatment, expected outcomes, developmental, family, and cultural considerations. Students who do not adequately prepare for their clinical experience may be sent home.
6. Prepare medication rationale, side effects, and calculations/information in advance. Not all students will be able to give meds on a given clinical shift. This depends on how many students have medication and how busy the unit is.
7. At 0700/1300, report to your pod/unit and confer with the assigned nurse. Introduce yourself and be present while your nurse is receiving report from the night shift (if AM).
8. Communicate clearly with the assigned nurse your goals for the day. Abnormal or questionable findings are to be discussed with both your nurse and your instructor. Page/call your clinical instructor immediately if there appears to be a problem with your assignment!

8. Coordinate with the instructor regarding interventions to be performed and medications to be given during the shift.
9. **NOTE: As per RCHSD policy, medications will be administered only under the direct supervision of your clinical instructor. No exceptions, EVER.**
10. In the event that you become ill, late or cannot attend clinical, you must make verbal contact with the clinical instructor to declare your absence as early as possible. Emails and/or texts are NOT acceptable unless you receive an immediate response. If you cannot reach your instructor, please call a fellow class-member so that your whereabouts are known and we don't worry! 😊

Base Unit: Medical Unit or Surgical Unit (see guidelines)
Float experience: Varied clinical areas (see Canvas)
Service Project: MOM Christmas Store

Each unit has their own Clinical Practice Guidelines (like a policy and procedure for how things are done on that unit). These must be reviewed the night before clinical as well as for any other unit. All necessary preparatory information can be found in NSG310 Canvas.

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REQUIRED LEARNING ACTIVITY:

CLINICAL PRACTICUM - Floating Clinical Experiences

Students will have multiple opportunities to float to various units for a shadow experience. This experience may be forfeited in the event of an absence or if an absence occurs on a regularly scheduled Medical or Surgical day.

NUMBER DUE: 2 Float Write-Ups (even though you will have more float experiences!)

STUDENT LEARNING OUTCOMES:

The student will:

1. Participate in the care of children with advanced or complex disease processes.
2. Assist with and carry out the plan of care for patients requiring complex nursing interventions under the direct supervision of the assigned nurse.
3. Be prepared to present and discuss the assignment in post conference.

GUIDELINES & INSTRUCTIONS:

1. Some units require pre-clinical reading/preparation prior to your visit. Please refer to the Clinical Preparation Table for specific instructions. Guidelines found in Appendix B.
2. Review Unit Expectations for the unit or area where you are going. (Canvas)
3. Report to your clinical group's base unit for pre-conference (unless going to HH). You will then be sent to your float unit.
4. Floating experiences are observational and as such, students may not perform skills that have not been previously practiced/performed. Students may not start peripheral IV's or draw blood peripherally. Use of central lines to draw blood is acceptable.
5. After conferring with clinical instructor, report to the unit charge nurse and locate your assigned preceptor for the shift. You may NOT administer any medications during this observational experience!
6. Return to pre-determined area for post conference at 1:00pm.
7. Floating experiences will be forfeited in the event of an absence or if an absence occurs on a regularly scheduled base unit day.
8. **NOTE: As per RCHSD policy, medications will be administered **only** under the direct supervision of your clinical instructor. No exceptions, EVER.**

GRADING: Pass/Fail

ASSIGNMENT: Clinical Float Experience Write-Up or Care Plan (see Appendix A)

DUE DATE: One week following the experience. Turn all clinical assignments in using course folders provided by the instructor.

APPENDICES

Appendix A: Clinical Preparation Guidelines

Appendix B: Junior Clinical Evaluation Form NSG311

All other clinical forms/resources are posted in Canvas include but are not limited to:

- Directions to Rady Children’s Hospital
- Directions to Ronald McDonald House
- Rady Children’s Map
- Medication Administration Policy
- Pain Management Policy
- Unit-Based Clinical Practice Guidelines
 - Med/Surg
 - Ortho/Rehab
 - Home Health
 - Outpatient Clinic
 - Operating Room Student Nurse Orientation Module
- Required Learning Activity Forms
 - Concept Map Guidelines/Exemplars
 - Clinical Journal Guidelines (post journals online in Canvas)
 - Critical Thinking Tool
- Pre-clinical worksheet (optional – for student use only if helpful)
- Medication Preparation Worksheet (complete if doing med admin)
- CDC immunization schedule hyperlink
- RCHSD Nursing Student Expectations

Appendix A

Clinical Preparation & Assignment Guidelines by Unit

Unit	Pre-Clinical Prep	Assignment Opportunity
Bernardy Center (BC)	Standards of Care	Concept Map or write-up
Clinics (CL)	Read Clinical Guidelines on Canvas **Call <u>2</u> days before clinical	Write-up
Emergency Department (ED)	Standards of Care	Write-up
Hematology/Oncology Unit/Clinic (HO-U or HO-C)	Standards of Care	Concept Map <u>or</u> Write-up
Home Health (HH)	Read Clinical Guidelines on Canvas **Call the day before clinical BEFORE 4:00pm	Write-up
Medical Unit (M)	Standards of Care	Concept Map
NICU (NICU)	Standards of Care	Concept Map <u>or</u> Write-up
Critical Care - PICU (PICU)	Standards of Care	Concept Map <u>or</u> Write-up
Operating Room (OR)/PACU	Read Surgical-Services Orientation on Canvas Standards of Care	Write-up

SAMPLE Assignment Schedule

This is just an example of how you could actually get ahead on your assignments so that your last several weeks of clinical are paperwork free!

Week 1	Concept Map #1 Journal 1
Week 2	Float Write Up#1 Journal 2
Week 3	Concept Map #2 – (case study pt) Critical Thinking Tool Journal 3
Week 4	Concept Map #3 (graded) Journal 4
Week 5	Float Write Up#2 Journal 5
You are now technically “done” with your clinical paperwork. You would still need to complete: <ol style="list-style-type: none">1. Oral Case Study2. Denver Developmental Screening Test3. Developmental Paper Draft Sections weekly as due	

Appendix B

**Junior Clinical Evaluation Form
NSG 311- Spring 2015**

Student Name: _____
Instructor Name: _____
Semester/Year: _____
Clinical Facility: Rady Children’s Hospital San Diego

Adheres to ANA Standards of Practice

CRITICAL BEHAVIORS WHICH IMMEDIATELY RESULT IN PROBATION OR POSSIBLE FAILURE OF COURSE:

- Falsifying a client record.
- Blatant disregard of client confidentiality.
- Denying responsibility for one’s own deviation from standard practice.
- Actions which place the client in jeopardy.
- Actions which place student or colleague in jeopardy.
- Abusive behavior toward clients.
- Ignoring the need for essential information before intervening.
- Not maintaining the standards of professional practice (for example: uniform, conduct, communication)

Directions to student/faculty/preceptor (as applicable) must be given:

Student Self-Evaluation: Use blue or black ink.

Rate yourself in each category by placing a check in the box where you feel that you are performing. Narrative discussion can follow in each area to further explain the competencies.

Instructor Evaluation: Use PURPLE ink.

Instructor may elect to document in narrative fashion and attach to the student self-evaluation. Faculty must also check the box appropriate to each competency for evaluation.

Student MUST meet standards in a minimum of 75%.

Leadership/Service Component:	<u>Met in Leadership/Management course</u>		
Completed 100% of clinical time	YES	NO	
Make-up time completed/arranged	YES	NO	N/A
Number of hours missed and made-up	_____		
Livetext® Portfolio Reviewed	YES	NO	
Competency List Reviewed	YES	NO	

INQUIRING FAITHFULLY The 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 in the nursing process	Meets Expected Standards	Needs Improvement to Meet Expected Standards
Implement individualized evidence-based plan of care for pediatric patients within the context of both the community and the acute-care setting.		
Apply skills of inquiry, analysis and information literacy to the design and implementation of family-centered care practices		
Adapts approach to provide holistic, family-centered care to the specific needs of the patient and family		
Examine own personal self care practices for the provision of sustained quality care (PLO1.5; BSN Essen VIII-14).		

STUDENT COMMENTS:

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.	Meets Expected Standards	Needs Improvement to Meet Expected Standards
Exemplify Christ's love through compassionate care for children and their families (PLO 2.1, BSN essential IX-21)		
Investigate community resources to support the health and well-being of patients, families and communities (PLO 2.2; BSN essential IX-10)		
Incorporate family's health beliefs, culture and health literacy into plan of nursing care (PLO 2.1; BSN essential IX-7; QSEN patient-centered care)		
Reflect on personal beliefs and values as related to professional nursing practice among this population (PLO 2.3; BSN essential VIII-6, ¾; QSEN__)		

STUDENT COMMENTS:

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 which conveys information, thoughts, actions and feelings through the use of verbal and nonverbal skills.	Meets Expected Standards	Needs Improvement to Meet Expected Standards
Engage with information technologies to document and monitor patient care.		
Formulate developmentally-appropriate, evidence-based health education to enhance patient/family understanding of healthcare practices		
Apply therapeutic communication skills to deliver patient/family-centered care (PLO 3.2 & PLO3.3; BSN Essential I-4, IV-2; QSEN Informatics)		
Evaluate inter- and intra-professional communication to optimize patient outcomes (PLO 3.3; BSN essential VI-4)		

STUDENT COMMENTS:

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 for all actions and treating others with respect and dignity.	Meets Expected Standards	Needs Improvement to Meet Expected Standards
Applies professional standards of care according to ethical, legal and Christian principles (PLO 4.2; BSN essential VIII-1,2;)		
Implement developmentally appropriate, best practice recommendations to promote health and well beings of patients/families (PLO 4.2; BSN essential __; QSEN__)		
Commit to life-long learning and continued professional development for nursing excellence (PLO 4.3; BSN essential VIII-13; BSN essential 1-9)		

STUDENT COMMENTS:

<p>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, and discernment.</p>	<p>Meets Expected Standards</p>	<p>Needs Improvement to Meet Expected Standards</p>
<p>Creates a safe and compassionate caring environment that results in quality patient outcomes.</p>		
<p>Role model Christian nursing by integrating servant leadership in the care of diverse populations (PLO5.2; BSN essential 1-5; QSEN __)</p>		
<p>Respects the rights and care preferences of patients/families from diverse cultural backgrounds.</p>		

STUDENT COMMENTS:

SUMMARY STUDENT COMMENTS:

Strengths:

Areas of growth/future goals:

SUMMARY INSTRUCTOR COMMENTS: (Sometimes done in this format on computer and attached to document)

Strengths:

Areas of growth/future goals:

Final Grade: Credit _____ No Credit _____

Incomplete _____ Reason _____

Student Signature: _____ Date _____

Instructor Signature: _____ Date _____