Fall 2015

Meeting days: Tuesdays, Wednesdays, Thursdays, Fridays, Saturdays & Sundays	**Faculty name, rank, credentials:** Angelica L.C. Almonte, PhD, RN Christine Sloan, PhD(c), MSN, RN(CS)
Meeting times: As scheduled.	**Office, Phone & Email:** Section 2: Dr. Angelica Almonte, PhD, RN LSCC Room 111 Cell (Preferred) : 619-957-8735 Email : aalmonte@pointloma.edu Office : 619-849-2767 Section 3: Dr. Christine Sloan, PhD, RN (CS) LSCC Room 108 Cell: 619-518-2255 Email: christinesloan@pointloma.edu Office: 619-849-2235 Dr. Tanna Thomason, PhD, CCRN, PCCN tannathomason@pointloma.edu Cell : (858) 775-0978
Meeting location: Clinical Sites.	
Placement: Senior Year	**Office Location and Hours:** Office hours by appointment, please contact professors to make appointments.
Mid-Semester Clinical Evaluation: Week of October 14, 2015 **Final Clinical Evaluations:** Week of December 2, 2015.	**Additional Info:** To schedule an appointment to meet, please contact professors by email and/or via cell.

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 480 & NSG 470.
Note: A minimum grade of "C" must be achieved in all prerequisite courses for course eligibility.

CO-REQUISITES:

Same as NSG 480 & NSG 470.
Note: A minimum grade of "C" must be achieved in all corequisite courses in order to progress in the program.

COURSE DESCRIPTIONS

Application of nursing skills in client care settings with opportunity to provide nursing care to persons with complex health problems. Emphasis is on critical thinking, clinical decision making, and independent judgment in areas of client nursing care as well as management of nursing services. Includes collaboration with health team member and implementation of organizational skills.

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

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.

NSG 481 - Section 1 meets with Clinical Instructor Dr. Tanna Thomason

NSG 481 - Sections 2 meet with Clinical Instructor Dr. Angelica Almonte

PROGRAM VALUES & COURSE LEARNING OUTCOMES

Upon completion of NSG 481, the student will meet the following outcomes (as specified in the *Clinical Assessment & Evaluation Form*):

VALUES	DEFINITION	PROGRAM LEARNING OUTCOMES
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.	• Initiate dialogue regarding current practice to improve healthcare • Demonstrate use of evidence-based practices as an advocate for self and others. • Influence positive outcomes using evidence-based data. • Provides holistic care by considering all of the client needs (e.g. physical, psychosocial, spiritual, environmental) including family in a multicultural setting. • Engages in self-care practices that facilitate optimal care of patients.
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.	• Demonstrate compassionate care to all people while mirroring Christ's love for all. • Partner with the community to establish a trusting relationship. • Demonstrate ethics and values consistent with the practice of professional nursing.
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.	• Engages in active listening to promote therapeutic relationships. • Demonstrates effective verbal and non-verbal communication skills to provide patient care. • Dialogs with members of the healthcare team, including the patient to facilitate positive patient outcomes. • Advocates for patients/families and self. • Implements patient care while honoring the diversity of patients, families and communities.

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.	• Engages in professional practice environment that promotes nursing excellence. • Provides patient care within the boundaries designated by regulatory agencies, professional practices and ethical standards of a Christian nurse. • Avails self of learning opportunities to cultivate the life-long learning process.
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.	• Provides graceful service through compassionate responses to others' needs. • Demonstrate the principles of a servant leader as a reflection of Christ's love. • Exhibits patient advocacy that reflects sensitivity to diversity in a holistic manner.

METHODS OF EVALUATION

You must meet a minimum of 75% of the standards listed on the *Clinical Evaluation Form* to receive "Credit". You must complete a minimum of 144 clinical hours as verified/confirmed by the Clinical Preceptor to receive "Credit".

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.

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 directly with their preceptor regarding arrangements for make-up and they must inform their Clinical Faculty. 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.

REQUIRED TEXTS & RECOMMENDED STUDY RESOURCES

Same as NSG 480.

COURSE-SPECIFIC POLICIES: ROLE OF THE STUDENT

The student must take an active role in the educational process during the preceptorship. The following guidelines are provided in preparing students for clinical experiences. The student will:
- Students are responsible to obtain RN preceptor's signature of clinical shift attendance on day of clinical shift completion as documentation for proof of timely Capstone Preceptorship shift attendance.
- Students are expected to proactively communicate regarding absences and/or tardiness with both the Clinical Faculty and directly with the RN Preceptor.
- Announcements via Canvas and emails will be the primary forms of communication and should be checked daily.
- Identify appropriate learning activities in relation to course learning outcomes and personal learning objectives, in collaboration with the preceptor.
- Develop 3-5 personal objectives based upon the Faithfully Values and program/course learning outcomes.
- Identify and submit to the faculty/advisor in writing a clinical plan/schedule for the meeting course learning outcomes and personal learning objectives. A required 144 clinical hours should be projected on the schedule throughout the semester. The student must obtain documentation of completion of the clinical hours after every shift by getting the preceptor's signature. The preceptor and clinical faculty will approve this plan before the clinical practicum starts.
- Identify strengths and weaknesses and discuss them with the preceptor and clinical faculty, working to improve in the areas of weaknesses.
- Arrange with faculty and preceptor for clinical site visits. Clinical site visits will take place at the clinical location. At a minimum, two clinical site visits will be attended by the student, preceptor, and faculty.
- Maintain a clinical log to document clinical hours, spheres of influence and a reflection of how the course learning outcomes and personal learning objectives were met during the clinical experience.
- Complete the self-assessment and personal learning objectives at the beginning of the semester based upon reflection on strengths and weaknesses and critical reviews of past evaluations.
- Complete the beginning self-assessment, mid-semester assessment and also the end of semester evaluation with the preceptor and return the evaluations to the clinical faculty via Canvas.
- Adhere to the SON Student Handbook: Attire Policy.
- Adhere to the course syllabus.
- Communicate, proactively, with the preceptor. Student will also notify the RN Preceptor and course faculty as soon feasible or prudent should any of potential or actual medication, student,

and/or faculty incidents occur. Please follow the procedures for incident reporting, denoted in course syllabus and attached in appendix I of this document.

- The following is a partial list of expected behaviors that form the basis for awarding a grade of "credit" in the clinical setting. The student will:
  - Accept responsibility for own behavior in the clinical setting
  - Know own limitations and seek assistance as appropriate to the situation
  - Know availability of and use resources that are appropriate to the clinical setting
  - Verify all physician orders with the patient's chart
  - Know the essential information about medications before they are given. (The purpose for the medication, route, dosage, side effects, nursing interventions, and documentation - the rights of drug administration!)
  - **No pagers or cell phone use in the clinical setting for personal business.**
  - **Turn in a journal every 2 shifts upon completion of clinical hours as described in the rubric (unless otherwise approved by faculty) to clinical faculty.**
  - **Act in a professional manner and dress in a professional manner.**
- ***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.**
  - **Failure to complete timely completion of objectives, self-assessment, mid-semester evaluation, and end of year evaluation.**
  - **Failure to communicate every 2 shifts via journal with clinical faculty.**
  - **Failure to contact Clinical Faculty for any potential or actual incident reporting.**

Process Procedures if Student is Ill:
- If a student is ill, contact the RN Preceptor directly (prior to the shift's start) to inform them of the illness and to arrange a make-up clinical shift with the RN Preceptor or approved secondary RN preceptor.
- Prior to the shift's start, the student is to inform their Clinical Faculty of their illness and plan to make up the clinical hours.

Process Procedures if Preceptor is Ill:
- If a preceptor is ill, the student will work directly with the unit/ward Shift Charge Nurse to be assigned to the approved secondary RN preceptor (must complete the administrative paperwork for clearance).
- If the secondary preceptor is not available, the student will go home and reschedule that shift.
- The student is to inform their Clinical Faculty of the situation and proposed plan for the clinical hours.

Process Procedures to Schedule Make-Up Hours:
- The student will keep an ongoing tally of clinical hours and inform the RN Preceptor and Clinical Faculty of any potential short-falls and proactive plans to meet the 144 clinical hour requirement for this clinical preceptorship.

Evaluation of Preceptor by Student
- Students are expected to evaluate their clinical preceptor experiences at the end of each completed clinical course. Students will find the Evaluation of Preceptor Form in the Course Syllabus.

Evaluation of Clinical Facility by Student
- Students are expected to evaluate their clinical facility at the end of each completed clinical course. Students will find the Evaluation of Clinical Facility Form in the Course Syllabus.

Professional Conduct
- The nursing profession insists that its members be responsible, accountable, self-directed and professional in behavior. Nursing has earned the public's trust by holding firm to these behaviors. The process of becoming a professional begins with you entering Point Loma as a freshman in PLNU's nursing program (we hold them accountable for issues in this first year). Students demonstrate professionalism by attending and being punctual for classes and clinical experiences, by exhibiting courteous behavior, and by being prepared for class/clinical assignments.

PLNU Student Conduct Policies
- Point Loma Nazarene University wishes to assist students in leading congruent lives that are based on integrity and truth. The student conduct policies are based on a set of shared and biblical values, and establish the expectations for PLNU students regardless of where and when their behaviors occur. Therefore, students engaging in inappropriate conduct will be held accountable to these standards, regardless if the behavior is on or off campus. Students will also be held accountable for statements and publications that they make, whether in printed or any electronic form, that are inconsistent with the student conduct policies. The Student Handbook is maintained by the Office of Student Development. Questions or comments may be directed to the Vice President for Student Development, Caye Smith, Psy.D.
- All behaviors inconsistent with those articulated in this policy will be documented and such documentation will remain a part of the student's record through the nursing program. Any occurrence that potentially places the client, self or others in actual or potential danger will result in a full review of the student's record.
- During their time at PLNU, nursing students are engaged in a number of professional relationships and therefore have obligations to different individuals and groups. These groups include patients and their families, other health professionals, the profession itself, fellow students, community partners, clinical facility staff and university personnel.

PROFESSIONAL BEHAVIORS
- Nondiscrimination: nursing students shall provide respectful care to patients/clients without discrimination
- Confidentiality: nursing students shall be educated about and adhere to HIPAA policies. Health records or copies of electronic records may not be removed from a health care institution. Students may extract information from the record to direct care and will be instructed by faculty how to handle de-identified information.

- Representation: Students will identify themselves by the appropriate wearing of the PLNU badge when in uniform or in professional dress situations as student nurses.

- Personal Responsibility: Student nurses must use sound judgment in not coming to clinical ill, which may put others at risk of exposure. Students will call their clinical instructor to assess and make a plan for making up clinical experience.
- Professional attitude: nursing students are representatives of the PLNU SON. Nursing students are expected to be thoughtful and professional when interacting with faculty and staff, patients/clients and their families, other students, the public, and all members of the health care team at all times.

EXPECTED STUDENT BEHAVIORS
- Using critical thinking skills in determining one's actions in the clinical setting
- Demonstrating professional behavior at all times
- Accepting responsibility for one's own actions, including preparing sufficiently for class and clinical
- Adhering to the School's dress code and having a neat, clean appearance. This includes responding promptly when feedback is given by a faculty member that dress, jewelry or hygiene is outside the bounds of the dress code as defined in the student handbook
- Attending orientations, class and clinical, arriving and leaving as scheduled
- Taking exams as scheduled and completing assignments on time, including patient/client care
- Responding appropriately and in a timely fashion to constructive criticism and feedback from faculty, clinical site staff, and peers
- Giving prior notification in writing or as directed by the faculty member if unable to meet commitments and following up with faculty regarding potential make up requirements
- Dealing with others (peers, faculty, staff, patients/clients and their families) in an honest, respectful, sensitive and nonjudgmental manner that communicates respect for individual differences
- Nonuse of inappropriate language, gestures or remarks
- Nonuse of intimidation, coercion or deception in working with patients/clients, families, staff, other students and faculty and staff
- Demonstrating teamwork and helping behavior for colleagues that exemplifies an assertive, rather than aggressive approach
- Respecting others' space and time through the demonstration of such actions as turning off cell phones, avoiding disruptive sidebar conversations, and refraining from texting others in class and clinical settings.

SOCIAL MEDIA POLICY
- The PLNU School of Nursing supports the use of social media to reach audiences important to the University such as students, prospective students, faculty and staff. The University presence or participation on social media sites is guided by university policy. This policy applies to School of Nursing students who engage in Internet conversations for school-related purposes or school-related activities such as interactions in or about clinical and didactic course activities. Distribution of sensitive and confidential information is protected under HIPAA and FERPA whether discussed through traditional communication channels or through social media.
- Social media is defined as web-based and mobile platforms for user generated content that is public and accessible. As student nurses it is imperative to maintain the awareness that you are representing the nursing profession through intended or unintended outcomes of social media usage both school and clinical settings at any time. The student nurse may face potentially serious consequences including dismissal for inappropriate use of social media. In addition, the "Nurse's Guide to Use of Social Media" provides recommendations about social media use https://www.ncsbn.org/NCSBN_SocialMedia.pdf.

- When publishing information on social media sites remain aware that information may be public for anyone to see and can be traced back to you as an individual. Since social media typically enables two-way communications with your audience, you have less control about how materials you post will be used by others. If you are about to publish something that makes you the slightest bit uncertain, review the suggestions and policy, and seek guidance before you post. ***Please note that social media accounts with a "private" status are not a defense to privacy violations.
- Policy:
  - Protect confidential, sensitive, and exclusively owned information: Do not post confidential or proprietary information about the university, staff, students, clinical facilities, patients/clients, or others with whom one has contact in the role of a PLNU School of Nursing student.
  - Do not use PLNU School of Nursing marks, such as logos and graphics, on personal social media sites. Do not use PLNU's name to promote a product, cause, or political party or candidate.
  - No student shall videotape professors or fellow students for personal or social media use without the express written permission of the faculty or fellow student. At NO time shall patients/clients be videotaped or photographed without written permission of the patient/client and of the facility in advance and submitted to the course instructor in writing.
  - Be aware of your association with PLNU in online social networks. If you identify yourself as a student, ensure your profile and related content is consistent with how you wish to present yourself to colleagues, clients, and potential employers. Identify your views as your own.
  - HIPAA guidelines must be followed at all times. Identifiable information concerning clients/clinical rotations must not be posted in any online forum or webpage.

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. The portfolio rubric will be used for review with your Clinical Faculty, see Appendix A. For this course, the following assignment(s) are **required** to be submitted in LiveText®.
- Guided Reflective Journal Assignments on Humility, Courage, Discernment, and Forgiveness.
- Items as listed in NSG 470 Course Syllabus.

Students are strongly encouraged to submit additional coursework into LiveText® to demonstrate personal and professional growth.
- Guided Reflective Journal Assignments.
- Course Clinical Assessment & Evaluation Form.

REQUIRED LEARNING ACTIVITIES

All the items below are required to pass this course. They include: Attendance at Clinical Orientation; Attendance at Unit Orientation; Personal Learning Objectives; Student Assessment & Evaluation Form Reviewed with Preceptor and Faculty; Clinical Schedule (Proposed, Confirmed, Completed); Student Evaluation of Preceptor; Student Evaluation of Preceptorship Clinical Site; Clinical Faculty Review of

Student's Completed Live Text ePortfolio. Note that Clinical Journals are assigned points in the NSG 480 and NSG 470A courses.

		Due Date	Method of Evaluation	REQUIRED
Assignments: Capstone Preceptorship		Due: 9/2/15	1A) Attendance at NSG 481 Clinical Orientation or Equivalent (preapproved by Clinical Faculty)	**LEARNING ACTIVITY #1A: Clinical Orientation Attendance - Required to Pass** Attendance at NSG 481 Clinical Orientation as approved by Clinical Faculty. Upon receipt of your preceptor's contact information, email your preceptor to set up your first meeting and inform your Clinical Faculty of your meeting date and time.
		Due: Paperwork Due Within 2 weeks of clinical preceptorship start but hospital specific training completed prior to hospital entry & unit orientation completed on 1st day on unit	1B) Hospital Unit Orientation to be completed on 1st day on the hospital unit; Hospital specific student training to be completed per requirements of SD Consortium	**LEARNING ACTIVITY #1B: Hospital Unit Orientation & Hospital Specific Training**
		Due: Within 2 weeks of clinical preceptorship start (Week of September 14 or earlier)	2) 3-5 Personal Learning Objectives (Based on Strengths, Weaknesses, Previous Evaluations). Must also be reviewed with Preceptor & approved by Faculty	**LEARNING ACTIVITY #2: Personal Learning Objectives - Required to Pass. Due: Within 2 weeks of clinical preceptorship start.** Personal Learning Objectives (Based on Strengths, Weaknesses, Previous Evaluations) in the format using specific, measureable, actionable, realistic, and timed verbiage. These objectives are to be linked to the NSG 481 Values and Program Learning Objectives. Reflect upon your past clinical rotations and your identified areas of strength and areas for improvement. Then identify your personal learning objectives (as related to the values of Inquiring Faithfully, Caring Faithfully, Communicating Faithfully, Following Faithfully, and Leading Faithfully and program learning outcomes) for this course. List your objectives using specific, measurable, actionable/achievable, realistic, and timely verbiage. Identify 3-5 of your personal learning objectives. Select personal learning objectives/learning activities that you would like to meet by the completion of the semester in the clinical setting. The objectives must relate to the bedside RN role. **Please review with your preceptor and obtain faculty approval. Provide both preceptor and faculty a copy of your personal learning objectives.** Example: Personal Learning Objective #1) By the end of the semester, I will be confident in initiating dialogs

		with members of the healthcare team (specifically physicians), to facilitate positive patient outcomes. My current confidence/comfort level using the SBAR communication format and providing patient report is 3/10, goal is 9/10. See Appendix B.
Due: Within 2 weeks of clinical preceptorship start and ongoing. Faculty to review as needed and minimally mid-semester (week of 9/14/15 and end of semester week of 10/14/15).	3) Clinical Schedule (Proposed, Confirmed - 144 Clinical Hours- to be completed between 9/3/15 to 12/11/15)	**LEARNING ACTIVITY #3: Clinical Schedule (Proposed, Confirmed, Completed) – Required to Pass. Due: Within 2 weeks of clinical preceptorship start .** Purpose: Proactive and continuous communication of projected and completed 12 hour shifts. The student is responsible for informing the Clinical Faculty of their clinical preceptorship hours at all times. Clinical hours must be projected, tracked, and confirmed by preceptor's signature on the completion of the shift. Please keep current information on Canvas. See Appendix C.
Due: Within 2 weeks of clinical preceptorship start	4) Completed Preceptor Data Sheet	**LEARNING ACTIVITY #4: Preceptor Data Sheet – Required to Pass. Due: Within 2 weeks of clinical preceptorship start.** Please have the RN Preceptor complete the Preceptor Data Sheet and return completed copy to Faculty. See Appendix D.
Due: Within 2 weeks of clinical preceptorship start	5) Completed Preceptor Orientation Post-Test	**LEARNING ACTIVITY #5: Preceptor Post-Test-Required to Pass. Due: Within 2 weeks of clinical preceptorship start.** Please have the RN Preceptor review the Preceptor Handbook, online Southwestern College Preceptor training, and complete the Post-Test . Preceptor is to complete the Southwestern College "Preceptor Orientation" modules located on the San Diego Nursing Education and Allied Health Consortium website-sdnsec.org/preceptor.asp prior to the first clinical day. Upload the preceptor's post-test onto Canvas for the faculty to grade and provide feedback. If the preceptor has already received preceptor training, please obtain documentation of this and submit via Canvas and to course faculty. This will be submitted to the SON. See Appendix E.
Due: Within 2 weeks of clinical preceptorship start	6) Self-Assessment & Preceptor Review & Faculty Review (Start of the semester)	**LEARNING ACTIVITY #6: Self-Assessment & Preceptor Review & Faculty Review (Beginning of Semester)– Required to Pass. Due: Within 2 weeks of clinical preceptorship start.** See Appendix F.
Due: Every 2 Shifts via Canvas to Clinical Faculty	7) Six Guided Reflective Assignments/ Journals, as described in NSG 481 Syllabus	Points assigned in NSG 480. See grading rubric following this table. **LEARNING ACTIVITY #7: EVERY 2 SHIFTS JOURNALS**
Due: Mid-term	8) Self-Evaluation &	**LEARNING ACTIVITY #8: Self-Evaluation &**

(week of 10/14/15 - approximately after completion of 5-7 clinical shifts)	Preceptor Evaluation & Faculty Acknowledgement (Working towards meeting 75% of clinical requirements, with plans to improve and meet.) (Mid-Term)	**Preceptor Evaluation & Faculty Evaluation (Working towards 75% with plan to improve and meet clinical requirements) (Mid-Term)– Required to Pass.** See Appendix F.
Due: Week of 12/2/15	9) Self-Evaluation & Preceptor Evaluation & Faculty Acknowledgement (Achieved minimum meeting of 75% of clinical requirements.) (End of Semester)	**LEARNING ACTIVITY #9: Self-Evaluation & Preceptor Evaluation & Faculty Evaluation (Achieved minimum 75% Proficiency) (End of Semester) – Required to Pass.** See Appendix F.
Due: Week of 12/2/15 or earlier	10) Clinical Evaluations with Clinical Faculty & Review of updated ePortfolios- Uploaded on Livetext	**LEARNING ACTIVITY #10: Clinical Evaluations with Clinical Faculty & Review of ePortfolios- Uploaded on Livetext – Required to Pass.** See Appendices A & F.
Due: Week of 12/2/15	10 & 11 & 12) Students' Evaluations of Preceptor, Clinical Site, Facility Requirement	**LEARNING ACTIVITIES #10, 11, & 12: Students' Evaluations of Preceptor, Clinical Site, Facility Requirement – Required to Pass. Due: Week of December 2, 2015 to Clinical Faculty** See Appendices G, H & online Consortium Requirements for Facility Evaluations (www.sdnsec.org).
Final Course Grade	Pass if all required items are completed.	

LEARNING ACTIVITY #7: EVERY 2 SHIFTS JOURNAL REPORTS – Required to pass NSG 480 or NSG 470A. REQUIRED LEARNING ACTIVITIES, LEARNING ACTIVITY: Guided Reflective Assignment (240 points) Purpose: Maintain a guided reflective assignment of weekly clinical activities, personal evaluation, and lessons learned in clinical experiences. Please journal about a significant clinical situation or critical incident that you experience during the clinical shift. Address each of the sections listed below. The bulleted prompts are there to guide you through each section of your journal paper. All HIPAA requirements must be upheld; therefore, pseudonyms must be used when referring to patients, family members, staff members, faculty, students, etc. **There are six required journals, 20 points each. Four of the journals should focus on prescribed themes while the remaining two may focus on the student's chosen themes. The required themes are:**

- Humility
- Courage
- Discernment
- Forgiveness

Your Choice (i.e., Any of the above topics or a new one such as: Delegations, Conflict Management, Advocacy, Customer Service, Leadership & Management Theories, Change Theories, Communication Issues, Time Management/Prioritization/Organization, Handling of Adversity, Coordination of Care, etc.)

DUE: The Guided Reflective Assignments are due 7 days following the beginning of every 2 clinical shifts by via NSG 481 Canvas.

Criteria for Guided Reflective Assignments	Possible Points	Earned Points
Cover Page: Student Name, Journal Number, Journal Theme, 2 Dates of Clinical Experience, Preceptor Name, DUE Date for Journal (7 days after the beginning of the start of the 2nd Clinical Experience)	1	
Description of the Clinical Context, Clinical Experiences & Identification of Journal Theme: Describe the following: **Clinical Context** • What clinical day/night is this? • What theme will you address in this journal? • Describe the context of the unit (e.g. calm unit due to low census; short staff; post code blue, preceptor change etc.). **Clinical Experiences (2 Shifts Included)** • Provide an overview of your patient assignment. • What happened on this clinical shift? • What specific actions took place during the event? (Your actions, others' actions, etc.) • Were there any specific or unique conditions related to the event?	4	
Personal Reactions & Evaluation of the Situation: Description of what you were thinking and feeling. Use the following questions to guide your description, as applicable: • What were your <u>thoughts</u> during the event? • What were your <u>feelings</u> related to the event? • Were your <u>actions</u> the most appropriate for this particular incident? Why or why not? • What were the positive and negative aspects and <u>outcomes</u> of the incident? • Were there <u>aspects or influences that interfered</u> with doing a better job? What were they?	5	
Analysis of the Situation: • What personal clinical objectives did you meet today and how? • Incorporate/Integrate two text/ATI/journal theory/references into body of written clinical experience. Ensure references are course textbooks and pertinent topical research articles from peer reviewed journals. **Additionally, you may use the following questions to guide deeper analysis, as applicable:** • How can you make sense of what happened? • At the time of the event, what guided your actions? • What should you have used to guide your actions? • How did you use your knowledge in this situation? Did you possess the knowledge and skill level needed for the	6	

event? • What did you learn that surprises you?		
Conclusion. Identify your lessons learned, how you will incorporate what you have learned today into your nursing practice. Use the following questions to guide your conclusion, as applicable: • What did you learn as a result of this event? What were your lessons learned today? • Do you need to modify your beliefs, assumptions, and attitudes? If this event were to occur again, how will you act similarly/differently? • How has this situation influenced your practice?	3	
Professional writing: • Correct grammar/spelling • APA (6th edition) format: Title page, page numbers, running head, headers, citations, references • Clearly understood.	1	
Total: Two points will be deducted per day for late journals. DUE: The Guided Reflective Assignments are due 7 days following the beginning of the clinical shift via NSG 481 Canvas.	20	

REQUIRED REPORTING

Please notify your RN Preceptor and Clinical Faculty as soon as possible should any of potential or actual medication, student, and/or faculty incidents occur. Please follow the procedures for incident reporting, see Appendices I.

POINT LOMA NAZARENE UNIVERSITY
School of Nursing
NSG 481 – CLINICAL ORIENTATION
NSG 481 FALL 2015
SEPTEMBER 2, 2015
Thursday, Main Campus,
SMEE Room 100
0900-1500

TOPIC: NSG 481 Course Orientation

Student Learning Outcomes: Upon completion of the class session and discussion, you will be able to:

1. Introduce self to professor and peers
2. Describe course format and requirements

RELATED STUDENT ACTIVITIES: (i.e. readings or videos, etc.)

1. Review & Discuss Course Syllabus
2. Review, Discuss & Sync hronize/Collate Course Calendar & Daily Planners

	Appendix A: ePortfolio on LiveText Review Rubric 1 Incomplete (1 pt)	2 Partially Proficient (2 pts)	3 Proficient (3 pts)	4 Exemplary (4 pts)	N/A
Element 1 Timeiness (1.000, 14%)	All Artifacts Presented Past Due Date	! or more artifacts not in on time	All Artifacts in on Due Date	All Artifacts in before Due Date	
Element 2 Reflections (1.000, 14%) AACN-CCNE-2009.III.B AACN-CCNE-2009.III.C	No reflections describe why artifacts in the e-portfolio demonstrate achievement of each standard or goal and do not include goals for future learning. No reflections illustrate the ability to effectively critique work or provide suggestions for constructive practical alternatives.	A few reflections describe why artifacts in the e-portfolio demonstrate achievement of each standard or goal and include goals for future learning. A few reflections illustrate the ability to effectively critique work and provide suggestions for constructive practical alternatives.	Most of the reflections describe why artifacts in the e-portfolio demonstrate achievement of each standard or goal and include goals for future learning. Most of the reflections illustrate the ability to effectively critique work and provide suggestions for constructive practical alternatives.	All reflections clearly describe why artifacts in the e-portfolio demonstrate achievement of each standard or goal and include goals for continued learning. All reflections illustrate the ability to effectively critique work and provide suggestions for constructive practical alternatives.	
Element 3 Use of Multimedia (1.000, 14%) AACN-CCNE-2009.III.C.E AACN-CCNE-2009.III.F.E	The photographs, graphics, sounds, and/or videos are inappropriate, do not enhance reflective statements, and are inappropriate examples of one or more standards or are distracting decorations that detract from the content. No information is included concerning the size of files when providing links to images, sounds, movies, or other files	A few of the photographs, graphics, sound and/or video are inappropriate and do not enhance reflective statements or create interest, and are inappropriate examples of one or more standards. Information is included concerning the size of a few of the files when providing links to images, sounds, movies, or other files.	Most of the photographs, graphics, sound and/or video enhance reflective statements, create interest, and are appropriate examples of one or more standards. Information is included concerning the size of most of the files when providing links to images, sounds, movies, or other files.	All of the photographs, graphics, sound and/or video enhance reflective statements, create interest, and are appropriate examples of one or more standards. Information is included concerning the size of the files when providing links to images, sounds, movies, or other files	
Element 4 Creativity (1.000, 14%) AACN-CCNE-2009.III.F.E	No use of creativity or original ideas is evident that enhances the content of the e-portfolio.	Some use of creativity or original ideas is evident that enhances the content of the e-portfolio.	Most of the files show use of creativity and original ideas to enhance the content of the e-portfolio.	Creativity and original ideas enhance the content of the e-portfolio in an innovative way	
Element 5 Layout and Text Elements (1.000, 14%) AACN-CCNE-2009.III.D AACN-CCNE-2009.III.D.E	The e-portfolio is difficult to read due to inappropriate use of fonts, point size, bullets, italics, bold, and indentations for headings and sub-headings. The layout uses horizontal and vertical white space inappropriately and the content appears cluttered. The background and colors are distracting and decrease the readability of the text.	The e-portfolio is often difficult to read due to inappropriate use of fonts, point size, bullets, italics, bold, and indentations for headings and sub-headings. The layout uses horizontal and vertical white space inappropriately in some places. The background and colors are distracting in some places and decrease the readability of the text.	The e-portfolio is generally easy to read with appropriate use of fonts, point size, bullets, italics, bold, and indentations for headings and sub-headings. The layout uses horizontal and vertical white space appropriately in most places. The background and colors enhance the readability of the text in most places.	The e-portfolio is easy to read with appropriate use of fonts, point size, bullets, italics, bold, and indentations for headings and sub-headings. The layout uses horizontal and vertical white space appropriately. The background and colors enhance the readability of the text.	
Element 6 Annotations (1.000, 14%) AACN-CCNE-2009.III.E AACN-CCNE-2009.III.E.E	None of the artifacts are accompanied by a caption that articulately explains the importance of that particular work including title, author, date, and description of the importance of the artifact.	Some of the artifacts are accompanied by a caption that articulately explains the importance of that particular work including title, author, date, and description of the importance of the artifact.	Most of the artifacts are accompanied by a caption that articulately explains the importance of that particular work including title, author, date, and description of the importance of the artifact.	Each artifact is accompanied by a caption that articulately explains the importance of that particular work including title, author, date, and description of the importance of the artifact.	
Element 7 Writing Mechanics (1.000, 14%) AACN-CCNE-2009.III.F	The text has many errors in grammar, capitalization, punctuation, and spelling requiring major editing and revision. (more than 6 errors)	The text has errors in grammar, capitalization, punctuation, and spelling requiring editing and revision. (4 or more errors)	The text has a few errors in grammar, capitalization, punctuation, and spelling. These require minor editing and revision.	The text has no errors in grammar, capitalization, punctuation, and spelling.	

POINT LOMA NAZARENE UNIVERSITY SCHOOL OF NURSING
NSG 481, NURSING CAPSTONE PRACTICUM, FALL 2015
Personal Learning Objectives

Utilizing (a) your completed self-assessment data on needs improvement categories; (b) sophomore and junior clinical evaluations/feedback; and (c) your clinical unit/environment – **write 3-5 personal learning objectives.** Objectives should be based on the Faithfully Values categories and should be measurable (provide a baseline measure and end-of-semester target goal).

Example:
#1 PERSONAL LEARNING OBJECTIVE:
By the end of the semester, I will demonstrate effective communication by proving a comprehensive shift-to-shift RN hand-off report on at least one patient. My baseline competence and comfort is a "2"; end of semester goal "7". (Using a 1-10 scale). I will accomplish this goal by observing others and practicing with my preceptor.
VALUE: Communicating Faithfully
PROGRAM LEARNING OUTCOMES: Dialogs with members of the healthcare team, including the patient to facilitate positive patient outcomes.

Use table below to list your Personal Learning Objectives and upload into Canvas assignments.

NSG481 FA14 Preceptorship NAME: DATE: LOCATION: PERSONAL LEARNING OBJECTIVES	VALUE	PROGRAM LEARNING OUTCOME
#1 PERSONAL LEARNING OBJECTIVE:		
#2 PERSONAL LEARNING OBJECTIVE:		
#3 PERSONAL LEARNING OBJECTIVE:		
#4 PERSONAL LEARNING OBJECTIVE:		
#5 PERSONAL LEARNING OBJECTIVE:		

APPENDIX C
POINT LOMA NAZARENE UNIVERSITY
School of Nursing
NURSING CAPSTONE PRACTICUM
NSG 481 – FALL 2015
Capstone Preceptorship Clinical Schedule & Hours Completed

Student Name: _____

Preceptor Name: _____

Agency: _____

Unit: _____

Students must complete a minimum of all 144 clinical hours in order to earn three semester units. The major portion of these hours will be spent with the clinical preceptor primarily through 12-hour shifts.
Consult with your primary preceptor regarding your tentative schedule. Write the days and hours in the spaces provided below that you will actually be in the clinical setting. Make copies for yourself, the Clinical Faculty, and the preceptor. Any missed clinical hours must be made up by the end of the semester. The instructor must be informed of any alternate dates used. Clinical schedules must be proposed, confirmed, and completed. Ensure the preceptor provides a signature to confirm completion of the clinical hours as scheduled/on specific date of completion. Provide current copies on Canvas.

Week of School	Proposed Date & Shift Hours	Clinical Completed Date & Shift Hours	Number of Hours Completed This Week/ Total Number of Hours Completed	Confirmation of Completed Hours Preceptor Signature and Date
Week 1: 9/2/15	Clinical Orientation & Hospital Specific Training		N/A	
Week 2:	Hospital Unit Orientation			
Week 3:	Due to Clinical Faculty: Clinical Schedule, Personal Learning Objectives, Preceptor Data Sheet, Preceptor Post-Test, Baseline Self-Assessment			

	Reviewed by Preceptor			
Week 4:			i.e., 12/12	
Week 5:			i.e., 12/24	
Week 6: Completion of Mid-Semester Assessment & Evaluation	Due to Clinical Faculty: Completed Mid-Term Assessment Completed by Self & Preceptor			
Week 7:				
Week 8:				
Week 9:				
Week 10:				
Week 11:				
Week 12:				
Week 13: Completion of End of Semester Evaluation Completed by Self & Preceptor; Completion of Preceptor & Site Evaluation				
Week 14: By 4/25/15	Due to Clinical Faculty: Completed Self & Preceptor Clinical Evaluation; Evaluation of Preceptor & Clinical Site			
Week 15: 12/7/15 or earlier	Meet with Clinical Faculty for End of Semester Clinical Faculty Evaluation			
Total Required: 144 hours between 9/3/14 and 12/6 /14 (no later than 12/11/15)				

POINT LOMA NAZARENE UNIVERSITY SCHOOL OF NURSING
NSG 481, NURSING CAPSTONE PRACTICUM, FALL 2015
PRECEPTOR DATA SHEET

Personal Data:
_____

Name of Preceptor

_____

Preferred Contact Info (Email, Phone Number)

_____   _____

Current Position (Title)   Amount of Time in Position (Must be >1 year)

_____   _____

Hospital Unit & Location   Unit Contact Info

University Education: (Highest level of College on top row)

School	Attended	Major	Degree	Graduation

Recent (last 5 years) RN Work Experience:

Agency	Position	Dates of Employment	Area of Nursing Acute Care. Progressive Care, ED., Home Health, etc.

I have received the PLNU Orientation and Preceptor Handbook. I agree to contact the PLNU course instructor if I have any questions or concerns.

Preceptor Signature: _____   Date:_____

Student Name: _____   Fall_____   Year _____

Preceptor RN License State & #: _____ to be verified by PLNU
School of Nursing administrative staff (Verified by Initials: _____/Date: _____)

Southwestern College Preceptor Course Post-Test
Used with permission and obtained from http://www.sdnsec.org/forms/SWCPreceptorCourse.pdf

Preceptor Name: _____

Preceptor Student: _____

Hospital & Unit: _____

Date: _____

Scored & Feedback Provided to 100% Correct Review: _____

Instructions:
- Go to website: http://www.sdnsec.org/preceptor.asp
- Scroll down to Southwestern CE Preceptor Module
- Double click onto SWC Preceptor Course. Please note that we are unable to provide continuing education units for this module at this time.
- Review the course handbook.
- Complete the posttest prior to the first clinical day (Appendix C) and provide it to the student. The faculty will grade and provide feedback on the 100% correct answers.

1. What is the length of time a Registered Nurse must practice in a specific facility on the same unit in order to meet the regulations to become a preceptor?
   - A.   Six months
   - B.   One year
   - C.   Eighteen months
   - D.   Three years

2. Which persons have described roles and responsibilities in the preceptor agreement?
   - A.   The preceptor
   - B.   The student
   - C.   The faculty
   - D.   All of the above

3. What is the maximum number of students a faculty member can supervise in multiple sites?
   - A.   One
   - B.   Six
   - C.   Ten
   - D.   Twelve

4) Which of the following is one of the principles of adult learners by Knowles?
   - A.   Adults mature at different rates
   - B.   Adults become more alike as they age
   - C.   Adults want to have a reason for learning something
   - D.   Adults retain less knowledge than younger students

5) Which words describe the best feedback on performance to motivate students' behaviors in providing patient care?
      A.   Constructive and critical
      B.   Regular and specific
      C.   Rapid
      D.   Written

6) As a preceptor, which of the following will best assist student critical thinking?
      A.   Asking the student about the patients care with a focus on outcomes
      B.   Reviewing the patients chart with the student
      C.   Observing a student completing an assessment
      D.   Directing a student to change a dressing

7) Which of the following is a central activity in coaching students?
      A.   Visualization
      B.   Implementation
      C.   Assessment
      D.   Goal setting

8) Which of the following is one of the five strategies suggested for use to assist a student in clinical to advance their cognitive abilities?
      A.   Modeling
      B.   Directing
      C.   Supervising
      D.   Observing

9) What is step four in the One-Minute Preceptor model?
      A.   Imagine a situation
      B.   Describe a best practice
      C.   Reinforce what was done right
      D.   Apply an educational theory

10) Which step in the One-Minute Preceptor model provides specific reinforcement?
      A.   Step 1
      B.   Step 2
      C.   Step 3
      D.   Step 4

POINT LOMA NAZARENE UNIVERSITY
School of Nursing, Fall 2015
CLINICAL ASSESSMENT & EVALUATION FORM
NSG 481, All Sections

Student Name:_____   Student Initials:_____

Faculty Name:_____   Faculty Initials:_____

Preceptor Name:_____   Preceptor Initials:_____

Clinical Facility:_____   Clinical Unit:_____

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)

Student Self-Assessment & Self-Evaluation: Rate yourself in each category by **placing your initials** in the box where you feel that you are performing. If you rate yourself "Needs Improvement," include narrative on your plan to improve.

Preceptor Assessment & Evaluation: Mid-semester, assess the student's clinical performance for each clinical outcome by **placing your initials** in the box where you feel that they are performing.. If a student "Needs Improvement," include a narrative summary of the clinical plan for improvement after discussion with the student. At the end of the semester, evaluate the student's clinical performance based upon these clinical outcomes. Include a narrative summary of strengths and areas for improvement on the last page of this document. If at any time you have any questions or concerns regarding the student, assessment, or evaluation, please contact the faculty directly as denoted on the front page.

Faculty Assessment & Evaluation: Instructor may elect to document in narrative fashion and attach to the student self-evaluation. Faculty must place their initials in the box appropriate to each outcome to acknowledge the student/preceptor evaluation.

Student MUST meet a minimum of 75% of the outcomes (i.e. 15 of 19 outcomes) to pass the course/clinical.

KEY: Rate in each category by placing your initials in the box that best represents performance at the time of evaluation/assessment.
M = Meets Expected Standards
NI = Needs Improvement to Meet Expected Standards. If you mark "Needs Improvement," include narrative on the plan to improve.
A = Acknowledgment of Assessment/Evaluation (for instructor ONLY).

SERVICE COMPONENT: _____

　　Event: _____
　　Date Served: _____

LEADERSHIP COMPONENT:

　　School of Nursing Committee Attended (i.e., School of Nursing, Team Level Meetings, ASAC, CEC, HPC, CNSA-PL): _____
　　Date Attended: _____

Completed 100% of clinical time	YES	NO
If not, make-up time completed/arranged	YES	NO
Portfolio Reviewed & Signature Assignments for Core Courses Present	YES	NO

NSG 481 Clinical Assessment & Evaluation **Student Initials: _____** **Preceptor Initials: _____** **Faculty Initials: _____** **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.	Initial Assessment				Mid-term Assessment/ Evaluation					FINAL Evaluation				
	Preceptor		Student		Preceptor		Student		Instructor	Preceptor		Student		Instructor
Date of Assessment/Evaluation														
Program & Course Learning Outcomes	M	NI	M	NI	M	NI	M	NI	A	M	NI	M	NI	A
Initiate dialogue regarding current practice to improve healthcare. COMMENTS/Plan to Improve:														
Demonstrate use of evidence-based practices as an advocate for self and others. COMMENTS/Plan to Improve:														
Influence positive outcomes using evidence-based data. COMMENTS/Plan to Improve:														
Provides holistic care by considering all of the client needs (e.g. physical, psychosocial, spiritual, environmental) including family in a multicultural setting. COMMENTS/Plan to Improve:														
Engages in self-care practices that facilitate optimal care of patients. COMMENTS/Plan to Improve:														

(The leftmost column spanning these rows reads vertically: **INQUIRING FAITHFULLY**)

KEY: Rate in each category by placing your initials in the box where you think the performance is. If you mark "Needs Improvement," include narrative on the plan to improve. M = Meets Expected Standards, NI = Needs Improvement to Meet Expected Standards, A = Acknowledgement of Assessment/Evaluation (Instructor only)

NSG 481 Clinical Assessment & Evaluation **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.		Initial Assessment				Mid-term Assessment/ Evaluation					FINAL Evaluation				
		Preceptor		Student		Preceptor		Student		Instructor	Preceptor		Student		Instructor
	Date of Assessment/Evaluation														
	Program & Course Learning Outcomes	M	NI	M	NI	M	NI	M	NI	A	M	NI	M	NI	A
CARING FAITHFULLY	Demonstrate compassionate care to all people while mirroring Christ's love for all. COMMENTS/Plan to Improve:														
	Partner with the community to establish a trusting relationship. COMMENTS/Plan to Improve:														
	Demonstrate ethics and values consistent with the practice of professional nursing. COMMENTS/Plan to Improve:														

KEY: Rate in each category by placing your initials in the box where you think the performance is. If you mark "Needs Improvement," include narrative on the plan to improve. M = Meets Expected Standards, NI = Needs Improvement to Meet Expected Standards, A = Acknowledgement of Assessment/Evaluation (Instructor only)

| NSG 481 Clinical Assessment & Evaluation

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 non-verbal skills.	Initial Assessment				Mid-term Assessment/ Evaluation					FINAL Evaluation				
	Preceptor		Student		Preceptor		Student		Instructor	Preceptor		Student		Instructor
Date of Assessment/Evaluation														
Program & Course Learning Outcomes	M	NI	M	NI	M	NI	M	NI	A	M	NI	M	NI	A
Engages in active listening to promote therapeutic relationships. COMMENTS/Plan to Improve:														
Demonstrates effective verbal and non-verbal communication skills to provide patient care. COMMENTS/Plan to Improve:														
Dialogues with members of the healthcare team, including the patient to facilitate positive patient outcomes. COMMENTS/Plan to Improve:														
Advocates for patients/families and self. COMMENTS/Plan to Improve:														
Implements patient care while honoring the diversity of patients, families and communities. COMMENTS/Plan to Improve:														

The left vertical label reads: **COMMUNICATING FAITHFULLY**

NSG 481 Clinical Assessment & Evaluation **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.			**Initial Assessment**			**Mid-term Assessment/ Evaluation**					**FINAL Evaluation**				
			Preceptor		Student		Preceptor		Student		Instructor	Preceptor		Student		Instructor
	Date of Assessment/Evaluation															
	Program & Course Learning Outcomes		M	NI	M	NI	M	NI	M	NI	A	M	NI	M	NI	A
FOLLOWING FAITHFULLY	Engages in professional practice environment that promotes nursing excellence. COMMENTS/Plan to Improve:															
	Provides patient care within the boundaries designated by regulatory agencies, professional practices and ethical standards of a Christian nurse. COMMENTS/Plan to Improve:															
	Avails self of learning opportunities to cultivate the life-long learning process. COMMENTS/Plan to Improve:															

KEY: Rate in each category by placing your initials in the box where you think the performance is. If you mark "Needs Improvement," include narrative on the plan to improve. M = Meets Expected Standards, NI = Needs Improvement to Meet Expected Standards, A = Acknowledgement of Assessment/Evaluation (Instructor only)

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NSG 481 Clinical Assessment & Evaluation **Leading Faithfully:** 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.	Initial Assessment				Mid-term Assessment/ Evaluation					FINAL Evaluation				
	Preceptor		Student		Preceptor		Student		Instructor	Preceptor		Student		Instructor
Date of Assessment/Evaluation														
Program & Course Learning Outcomes	M	NI	M	NI	M	NI	M	NI	A	M	NI	M	NI	A
Provides graceful service through compassionate response to others needs. COMMENTS/Plan to Improve:														
Demonstrates the principles of a servant leader as a reflection of Christ's love. COMMENTS/Plan to Improve:														
Exhibits patient advocacy that reflects sensitivity to diversity in a holistic manner. COMMENTS/Plan to Improve:														

(Row label along left side: **LEADING FAITHFULLY**)

KEY: Rate in each category by placing your initials in the box where you think the performance is. If you mark "Needs Improvement," include narrative on the plan to improve. M = Meets Expected Standards, NI = Needs Improvement to Meet Expected Standards, A = Acknowledgement of Assessment/Evaluation (Instructor only)

MID-TERM ASSESSMENT/EVALUATION Narrative

STUDENT, Initials _____, Date _____	
Strengths	**Area's for growth/future goals**

PRECEPTOR, Initials _____, Date _____	
Strengths	**Area's for growth/future goals**

INSTRUCTOR, Initials _____, Date _____	
Strengths	**Area's for growth/future goals**

FINAL ASSESSMENT/EVALUATION Narrative

STUDENT	
Strengths	**Area's for growth/future goals**

PRECEPTOR	
Strengths	**Area's for growth/future goals**

INSTRUCTOR	
Strengths	**Area's for growth/future goals**

Student Signature: _____ Date: _____

Preceptor Signature: _____ Date: _____

Instructor Signature: _____Date: _____

For instructor use only:

FINAL GRADE: Credit_____   No Credit_____

Incomplete_____ → Reason: _____

APPENDIX G
POINT LOMA NAZARENE UNIVERSITY
School of Nursing
NSG 481, STUDENT EVALUATION OF PRECEPTOR FORM

Preceptor Name_____   FALL 2015
Agency_____
Student Name_____

Place a check mark in the appropriate box to signify your evaluation of your clinical preceptor, using the following rating scale: 1-Strongly Disagree; 2-Disagree; 3-Agree; 4-Strongly Agree

	1	2	3	4
1. Oriented me to the clinical area to information that I needed.				
2. Provided informal feedback on my clinical performance.				
3. Worked directly with me on new learning activities.				
4. Provided accurate information.				
5. Provided me with information that I needed throughout the rotation.				
6. Provided information that was specific and easy to understand.				
7. Helped me to anticipate and to plan my activities.				
8. Delegated activities and permitted me to work out solutions to problems.				
9. Encouraged me to take initiative in seeking greater responsibilities.				
10. Helped me define goals and to develop strategies to meet them.				
11. Increased my self-confidence in skill performance.				
12. Demonstrated genuine interest in me.				

I would rate this preceptor as:
      a.   Not effective.
      b.   Effective.
      c.   Very effective

Comments: _____

_____

_____

_____

Student Signature   Date

APPENDIX H
POINT LOMA NAZARENE UNIVERSITY
SCHOOL OF NURSING, NSG 481, FALL 2015
STUDENT EVALUATION OF CLINICAL SITE FORM

Please evaluate your student experience and share your feedback and observations so that your faculty can share them with the staff at this clinical agency. Thank you for taking the time to answer these questions.

Agency _____

Area (s) assigned for student experience _____

1. Staff in the area was:

    _____ Very interested in teaching and helping students, and looked for opportunities to assist students in learning.

    _____ Were available to teach or help, but only if asked

    _____ Were not interested in teaching or helping students.

2. The patients in the area of assignment were and/or the area of assignment was:

    _____ Very appropriate for practicing the theory and principles learned in class.

    _____ Somewhat appropriate for the theory and principles learned in class.

    _____ Not at all appropriate.

3. If I were interested in this specialty, I :

    _____ Would definitely seek employment at this health care facility.

    _____ Might seek employment at this health care facility

    _____ Would definitely not seek employment at this healthcare facility. If not, please explain.

4. Please list/discuss positive features of this clinical experience:

5. Please list/discuss any problems encountered:

6. Please list suggestions to improve the clinical experience in this facility:

ACTUAL AND POTENTIAL INCIDENT REPORTING

The following procedure is to be followed by the Faculty at the time of any <u>actual</u> or <u>potential</u> critical incidents or medication errors. This is a confidential survey that is intended to be used for patient/student safety and tracking purposes. The following is a list of occasions that may require reporting, including but not limited to:

Medication related incidents such as:
1. Administration of the wrong medication.
2. Administering medication to the wrong patient.
3. Administering the wrong drip rate or dose.
4. Administering the medication at the wrong time or omitting a dose by mistake.
5. Unsafe medication administration.
6. "Near miss" – medication error was stopped prior to administration by RN or Instructor.

Patient related incidents such as:
1. Incomplete, inaccurate or incorrect charting.
2. Inappropriate actions resulting in actual or potential danger to patient well-being.
3. Demonstration of inadequate knowledge base to carry out safe clinical practice (inadequate preparation for clinical).
4. Patient fall or injury.
5. Other behaviors which warrant the concern of the nursing instructor or clinical staff.

Student related incidents such as:

1. Any injury requiring medical treatment that occurs during clinical hours.
2. Fall, with or without loss of consciousness or injury.
3. Needle-stick (please see **Infection Control - Blood and Body Fluid Exposure** policy)
4. Blood or Body fluid exposure (please see **Infection Control - Blood and Body Fluid Exposure** policy)

STUDENT Procedure:

1. The student will complete the incident report as soon as possible after incident or near miss, and after notifying clinical instructor of event requiring report (within 48 hours unless otherwise arranged by clinical instructor).
2. The student will access the **SON Incident Report** form in the SON resource folder and follow the link provided (see below)

(https://Canvas.pointloma.edu/> School of Nursing Resource Site >SON Documents>Misc. Forms)

3. The survey must be completed in one sitting, once started it must be finished. Please be aware that any information pertaining to the event needs to be collected prior to beginning the survey.
4. Once report is complete, student to notify faculty of record for the course in which the incident took place.

Consequences, if any, of such reports shall be determined by the level team faculty in the School of Nursing.

FACULTY Procedure:

1. Once notified of an incident requiring the completion of the **SON Incident Report**, direct student to complete report form located in Canvas under the SON resource form (see above for student procedure and possible occasions requiring completion of a report).
2. If possible, assist the student in completing the form while together at the hospital, or arrange for the student to complete the form within 48 hours (unless otherwise unable).
3. Once the student has completed the form, enter Qualtrics via the link provided here to review the students report. https://pointloma.us.qualtrics.com/ControlPanel/
4. If there are any necessary updates or clarifications to be made, type up a Word document with your clarifications indicating the date and time of completion.
5. Contact the ASAC Chairperson, or other designee in the SON, to notify them of the students completion of the Incident Report and give comments or clarifications to them for attachment to the report and placement into the student Shared Folder.

POINT LOMA NAZARENE UNIVERSITY
School of Nursing
NURSING OF COMMUNITIES: NSG 481

INFECTION CONTROL - BLOOD/BODY FLUID EXPOSURE

Purpose: This policy is established because of the particular concern for exposure to Hepatitis B, Hepatitis C, or HIV in the clinical setting.

For: *Any person (faculty or student) exposed* to blood/body fluids by puncture, laceration, bites, contact through eye, nose, or mouth, or contact with pre-existing breaks in the skin. The *source person* is the person whose blood/body fluids have come in contact with the exposed person as previously listed.

I. **Immediate First Aid** (Responsibility of the Exposed Person)
   A. Squeeze the wound/cut to make it bleed and wash with soap and water. *(Please note the CDC does not recommend this)*.
   B. Rinse mouth, eye, or nose with large volumes of clean water or saline.
   C. If sutures are required or other medical intervention, the exposed person should receive immediate attention by the agency's urgent care/emergency services (student or insurance company will be billed for expenses).

II. **Report of Incident** (Responsibility of the Exposed Person)
   A. Contact Instructor and Supervisor/Preceptor/Primary Nurse
   B. Complete Agency Incident Report **AND** School of Nursing Incident Report (via Canvas link) as soon as possible.
   C. Seek professional first-aid follow-up via the urgent care/emergency department **within one hour of the incident.**
   D. Contact personal health care provider.

III. **Instructor's Responsibility**
   A. Assist in completing Agency Incident Form **AND** School of Nursing Incident Report. Place a copy in the student's file.
   B. Notify Employee Health/Quality Assurance Personnel in Agency and Human Resources at Point Loma Nazarene University (619-849-2534).
   C. Notify SON Dean and Human Resources department to initiate Workman's Comp process.

POINT LOMA NAZARENE UNIVERSITY

IN CASE OF WORK RELATED INJURY

DURING REGULAR WORK HOURS:	
Go to or contact: PLNU Wellness Center 1ST floor Nicholson Commons Extension 2574	If the Wellness Center is closed, contact Human Resources Mieras Hall, Top Floor Extension 2203 or 2240

AFTER HOURS & WEEKENDS:	IF INJURY IS SEVERE OR LIFE THREATENING:
Call Shelter Island Medical Group 1370 Rosecrans Street 619-223-2668 (On Call 24 hrs) *notify Human Resources the following work day x2203.	Contact Public Safety Extension 2525

***Please note, for any work related injury you must contact one of these parties immediately.

D. Assure the student's access to professional first-aid treatment.
E. Obtain information on the Agency's policy for Blood/Body/Fluid Exposure treatment.
F. Document events related to the incident. Relevant information that should be included (CDC, 1998a):
    1. date and time of exposure;
    2. details of the procedure being performed, including where and how the exposure occurred, and if the exposure was related to a sharp device, the type of device and how and when in the course of handling the device the exposure occurred;
    3. details of the exposure, including the type and amount of fluid or material and the severity of the exposure, (e.g., for a percutaneous exposure, depth of injury and whether fluid was injected; or for a skin or mucous-membrane exposure, the estimated volume of material and duration of contact and the condition of the skin [e.g., chapped, abraded, or intact]).
G. Initiate follow-up contact with Clinical Agency Health/Quality Assurance personnel within 72 hours.
H. **Urgent Care Protocol:** If there is a clinical agency policy in place for such an incident, adhere to it. Otherwise, if there isn't one, the School of Nursing procedure is to:
    a. Obtain consent from the <u>source</u> person to have blood withdrawn for testing purposes. If the source person refuses to consent to a lab draw, ***<u>an emergency care physician must submit a report within 24 hours</u>*** and provide an evaluation of the source person within 72 hours. Notify the source person's primary physician who ***<u>must</u>*** respond to the urgent care agency/ED, or to the exposed person's primary physician within three weeks. If the source person refuses to consent to a blood draw, any blood that has been drawn for a diagnostic study can be used (if available). Urgent Care/ED personnel are to notify the person who has been exposed as soon as possible of the test results as to whether or not the source person is positive for HIV.
    <u>Note</u>: the CDC recommends an FDA approved test kit that can be used in a situation where enzyme immunoassy (EIA) for HIV, cannot be completed within 24-48 hours.
    b. Obtain consent from the <u>exposed</u> person to have blood drawn for baseline information.
    c. Obtain a history of incident and a report of the examination of exposed areas of the exposed person.
    d. Provide counseling and options of prophylactic procedures to the exposed person.
    e. Obtain follow-up information about the blood/body fluids of the source person from the Employee Health/Quality Assurance Personnel, and the attending physician.

IV. **Treatment** - The recommended procedure for:
A. **Hepatitis B**
    1. Immune Globulin (0.06 ml/kg) within 24 hours if the exposed person has not completed the vaccination series, then follow the accelerated schedule for Hep B vaccine.
    2. If the person has not been vaccinated, give Hep B on an accelerated schedule starting immediately, followed in one, and two months later. Check blood titers one month after 3rd dose of vaccine. Give a booster shot in 12 months.
B. **Hepatitis C**
    1. Draw serum. Give HCV Ab now, then at 3, 6, 12 months.
    2. Refer the exposed person to their primary physician if serum is positive.
C. **HIV** (Clinical Agency)
    1. Determine the extent of the exposure, in conjunction with the CDC guidelines (CDC,

1998b). Follow-up care should be in conjunction with the CDC guidelines for management of exposures for post exposure prophylaxis (CDC, 1998b).

2. In the event that treatment is required:
3. Provide and document counseling for the exposed person.
4. Testing for HIV for the exposed person is as follows: baseline, six weeks, three, six, and twelve months post exposure.
5. ***Treatment should be given within 1-2 hours of exposure.*** Alert the exposed person to the possible side effect from the drugs.
6. A prescription of at least four days of antiretroviral medication should be provided to the exposed person.
7. Document that the exposed person knows personal responsibility for follow-up care.
8. Submit confidential report to OSHA.
9. The recommended protocol should follow the most current Communicable Disease Control recommendations for prophylaxis. Current recommendations may be obtained through a free 24-hour hotline, through San Francisco General Hospital, San Francisco, CA (CDC, 1998c). The National Clinicians' Post Exposure Prophylaxis Hotline (PEPLine) is for clinicians in need of advice on how to best treat healthcare workers accidentally exposed to blood-borne disease — **1-888-448-4911**

References:

Center for Disease Control. (2006). Updated Public health service guidelines for the management of health-care worker exposures to HBV, HCV, and HIV and recommendations for post exposure prophylaxis, June 29, 2001. http://www.thebody.com/cdc/pdfs/rr5011.pdf

Center for Disease Control. (1998b). Public health service guidelines for the management of health-care worker exposures to HIV and recommendations for post exposure prophylaxis, figure 1, May 15, 1998. http://www.thebody.com/cdc/pep/figure1.html.

Center for Disease Control. (1998c). National hotline opens for advice on occupational HIV exposure prophylaxis, November 19, 1997. Http://www.thebody.com/cdc/pepline.html.