

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

## School of Nursing

### Nursing 3010: Nursing of Families

#### Child & Adolescent Focus

2 Semester Units



<b>Spring 2020</b>	
<b>Meeting days:</b> Monday	<b>Instructor:</b> Christine Sloan, PhD, RN, CNS, CPN Associate Professor christinesloan@pointloma.edu Cell: (619)518-2255
<b>Meeting times:</b> 0725-0920	
<b>Meeting location:</b> Liberty Station, Room 201	
<b>Placement:</b> Traditional BSN Junior Year	<b>Office location and hours:</b> Liberty Station – Room 208 Office hours by appointment on M-W-F
<b>Final Exam:</b> TBD	

### PLNU Mission To Teach ~ To Shape ~ To Send

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

### SON Vision Statement

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

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

## SON Mission Statement

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

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

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

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

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

## COURSE DESCRIPTION

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

Course Number: NSG3010

Course Name: Nursing of Families: Child/Adolescent Focus

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

Co-requisite: NSG3011

Note: A minimum grade of "C" must be achieved in all co-requisite courses in order to progress in the program. A grade of "credit" must also be achieved in NSG3011 in order to progress in the program.

**PROGRAM VALUES & COURSE LEARNING OUTCOMES**

Upon completion of NSG3010 the student will meet the following outcomes:

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

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

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

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

## COURSE CREDIT HOUR INFORMATION

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

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

Date (Class: 0725 – 0920) All classes are Face to Face	Module	EXAM/Quiz?	Preparation/Assignment (see individual class assignments by date)
Week 1 Tuesday – January 14 (Following Monday Schedule)	Introduction to Pediatric & OB Nursing	No	<ul style="list-style-type: none"> <li>None</li> </ul>
<b>Clinical Orientation: Day 1</b> Thursday – January 16 Cunningham Dining Room PLNU Main Campus	<b>All Clinical Groups (after OB orient)</b> 11:30 to 15:30	No	<ul style="list-style-type: none"> <li>Bring NSG3010 &amp; 3011 syllabi</li> <li>Street clothes OK, no uniform required</li> <li>ATI Modules:</li> </ul>
Week 2 NO CLASS – Monday – January 20	MLK Holiday		
<b>Clinical Orientation: Day 2</b> Tuesday – January 21 RCHSD Campus	<b>All Clinical Groups</b> 0700 – 1430 TBD & Rady Children’s Hospital	No	Bring both NSG3010/3011 syllabi, Dress in PLNU uniform. Must have PLNU Student ID to enter hospital.
Week 2 Sunday – January 26	<b>Mandated Reporter Training Online</b> <a href="https://mandatedreporterca.com/trainin/g/general-training">https://mandatedreporterca.com/trainin/g/general-training</a> <a href="https://mandatedreporterca.com/trainin/g/medical-professionals">https://mandatedreporterca.com/trainin/g/medical-professionals</a>		Post completion certificates by 1/26 11:59pm
Week 3 Monday – January 27	<b>Module 1: Day 1 Respiratory</b>	<b>iRAT/tRAT#1</b> (on cardiac & respiratory)	See SLO’s Review course lecture and other resources prior to class!

Date (Class: 0725 – 0920) All classes are Face to Face	Module	EXAM/Quiz?	Preparation/Assignment (see individual class assignments by date)
Week 4 Monday – February 3rd	Module 1: Day 2 Cardiac	No	See SLO's Review course lecture and other resources prior to class!
Week 5 Monday – February 10th	<b>EXAM 1</b> (On all orientation items and Module 1)		Complete Honorlock Practice Test PRIOR to class!! Bring Computer to class ATI Practice 2016 A due on Friday 2/14 ♥ by 11:59pm
Week 6 Monday – February 17 <sup>th</sup>	Module 2: Day 1 GI	iRAT/tRAT#2 (on GI only)	See SLO's Review course lecture and other resources prior to class!
Week 7 Monday – February 24	Module 2: Day 2 GU	No	See SLO's Review course lecture and other resources prior to class!
Sunday, February 23	NIP-IT Modules – done online <a href="https://nip-it.org/">https://nip-it.org/</a>		Due by 11:59pm Post certificates for all 6 modules in Canvas. Must be .pdf, NO SCREEN SHOTS!
Week 6 Monday – March 2	Module 3: Day 1 Communicable Disease, Skin Integrity, EENT <small>(only 1 day for this module)</small>	iRAT/tRAT#3 on Comm Disease and EENT	See SLO's Review course lecture and other resources prior to class! ATI Practice A Remediation due in class
<b>Spring Break March 9 – 13th Ahhhh!! ♥</b>			
Week 8 Monday – March 16	Module 4 : Day 1 Oncology	iRAT/tRAT#4	See SLO's Review course lecture and other resources prior to class! ATI Practice B due on Friday 10/25 at 11:59pm
Week 9 Monday – March 23	Module 4: Day 2 Hematology/ Dying Child	No	See SLO's Review course lecture and other resources prior to class!

Date (Class: 0725 – 0920) All classes are Face to Face	Module	EXAM/Quiz	Preparation/Assignment (see individual class assignments by date)
Week 10 Monday – March 30	<b>EXAM 2</b> (On Modules 2, 3, & 4 only)		Bring Computer to Class!
Week 11 Monday – April 6	<b>Module 5: Day 1</b>	Intracranial Regulation (Neuro)	<b>iRAT/tRAT#5</b> <b>ATI Practice B Remediation due in class</b>
Week 12 Monday – April 20	<b>Module 5: Day 2</b> Metabolism (Endocrine)	No	See SLO's
<b>Easter Break</b> April 9 - 13			
Week 13 Monday – April 27	Module 6: Day 1 & 2 Musculoskeletal & Autoimmune Disorders	<b>iRAT/tRAT#6</b>	See SLO's Review course lecture and other resources prior to class! <b>Proctored ATI Remediation Due in class</b>
Week 14 – May 4 0730 – 1000 Room 201	<b>EXAM 3</b> (On Modules 5 & 6)		Bring Computer to class!

**Additional Theory Topics:**

These topics will be covered in the readings, video's, and case studies:

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

## **FINAL EXAMINATION POLICY**

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Successful completion of this class requires taking the final examination **on its scheduled day**. The final examination schedule is posted on the [Class Schedules](#) site. No requests for early examinations or alternative days will be approved.

## **PLNU COPYRIGHT POLICY**

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Point Loma Nazarene University, as a non-profit educational institution, is entitled by law to use materials protected by the US Copyright Act for classroom education. Any use of those materials outside the class may violate the law.

## **PLNU ACADEMIC HONESTY POLICY**

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

## **PLNU ACADEMIC ACCOMMODATIONS POLICY**

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If you have a diagnosed disability, please contact PLNU's Disability Resource Center (DRC) within the first two weeks of class to demonstrate need and to register for accommodation by phone at 619-849-2486 or by e-mail at [DRC@pointloma.edu](mailto:DRC@pointloma.edu). See [Disability Resource Center](#) for additional information.

## **PLNU ATTENDANCE AND PARTICIPATION POLICY**

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Regular and punctual attendance at all classes is considered essential to optimum academic achievement. If the student is absent from more than 10 percent of class meetings, the faculty member can file a written report which may result in de-enrollment. If the absences exceed 20 percent, the student may be de-enrolled without notice until the university drop date or, after that date, receive the appropriate grade for their work and participation. See [Academic Policies](#) in the Undergraduate Academic Catalog.

## **SCHOOL OF NURSING**

### **PROFESSIONAL STANDARDS**

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

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

### **Additional guidelines**

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

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

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

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

### **GRADING POLICIES**

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

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

- All assigned course work must be completed to receive a final course grade and progress in the program.
- All assignments will be submitted as specified by faculty, including assignments posted in *Canvas* or completed in practicum.
- In order to receive a passing grade in the course, the student must achieve a cumulative average of 75% on tests and quizzes. Per School of Nursing policy, grades/points will not be rounded. For example: 80.5% does not round to 81% resulting in a grade of C+

instead of a B-. A grade of less than a “C” (Below 75%) prohibits the student from continuing in the nursing program until the course is repeated with a satisfactory grade of  $\geq$  C.

- A grade of at least a “C” in each nursing theory, prerequisite, and/or co requisite course is required in order to progress to the next course or level. The nursing theory and related clinical courses must be taken concurrently and the student must receive a passing grade of “Credit” in the clinical course in order to progress to the next course or level.
- Throughout the curriculum (whether pre-nursing or nursing) students may repeat one pre-requisite or nursing course. With the need for a second repeat of any pre-requisite or nursing course the student will be dismissed from the nursing program.

### **COURSE SPECIFIC POLICIES**

- Assignments and required documentation are due at the beginning of class on the date due. A full 10% will be deducted for each day (0-24 hours) late if not previously discussed with professor.
  - Check your PLNU email frequently (daily). This is how I will communicate with you about class and clinical.
  - Communicate regularly about your progress/concerns/anything – inform me of problems or issues before things are due (when possible) – this makes it much easier to grant grace.
  - Proactively communicate any absence with me or your clinical professor directly (via email, phone call or text) so that you honor the classroom and clinical community that we are striving to develop. Lack of communication about absences will result in a zero on any iRAT/tRAT without the ability to make up the quiz.
  - Unless otherwise specified, ALL assignments for this course are to be submitted via Canvas for NSG3010. Assignments that are expected to be submitted on Canvas that are emailed to the professor will not be accepted and will not be considered “turned- in”. ATI remediation will be turned in during class.
  - There are no make-ups for missed iRAT/tRAT’s. The students lowest score during the semester will be dropped.
  - In order to receive a passing grade in the course, the student must achieve a cumulative average of 75% on their INDIVIDUAL exam and quiz scores. GROUP scores help improve your overall course grade but will NOT help you pass the course.
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## LEARNING STRATEGIES

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

### 1. IN-CLASS STUDENT LEARNING ACTIVITIES

Individual study for each unique module ***should be focused on reviewing materials to meet the Student Learning Outcomes as well as understanding the glossary terms for each topic.*** Unless you have unlimited time, **do not read all parts of the assigned reading.**

Diseases in children are not that much different than they are in adults – so as you read – always review A&P (pediatric structures are different than adults – they are growing), pediatric differences in systems or response to treatment and assessment. These are foundational to your understanding of the topics you will discuss in class! Use the text to supplement your learning of topics that are unfamiliar or need more in-depth investigation.

Other study materials provided:

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

## METHODS OF ASSESSMENT & EVALUATION

Testing Grades	Quizzes & Tests	Number/Points	Total
	Individual Readiness Assessment Test (iRAT)	6 @ 10 points each	60
	*Team Readiness Assessment Test (tRAT)	6 @ 10 points each	60
	Medication Quiz	1 @ 20 points	20
	3 Exams (No Cumulative Final)	3 @ 100 points each	300
	ATI Proctored Exam	45 points	45
<b>OVERALL TESTING TOTAL</b>		<b>485</b>	
Non-Testing Grades	Assignments (Most in clinical)		
	Developmental Paper Prep: Developmental Assessment and Drafts	See RLA description for point distribution	50
	Developmental Paper	1 @ 50 points	50
	Developmental Teaching Project	1 @ 25 points	25
	Oral Case Study	1 @ 15 points	15
	NIP-IT Certificate Completion	1 @ 15 points	15
	Graded Concept Map #3	1 @ 15 points	15
	<b>OVERALL ASSIGNMENT TOTAL</b>		<b>170</b>
<b>OVERALL COURSE</b>		<b>655</b>	

## REQUIRED TEXTS & RECOMMENDED STUDY RESOURCES

### Required:

- American Psychological Association (2009). *Publication manual of the American Psychological Association* (6th ed.). Washington D.C. ISBN-13: 978-1-4338-0561-5
- Current School of Nursing Student Handbook. See SON Resource Page in Canvas for 2019-2020 version.
- Linnard-Palmer, L. (2017). **Pediatric nursing: A concept-based approach**. Jones-Bartlett Learning.

## PLNU School of Nursing ATI Assessment and Review Policy 2019-2020

### What does ATI offer?

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

in combination with the nursing program content, assist students to prepare effectively, helping to increase their confidence and familiarity with nursing content.

- ATI Orientation resources such as the ATI Plan are accessed from the “My ATI” tab. It is highly recommended that you spend time navigating through these orientation materials and familiarizing with all that ATI has to offer. You have paid for this service.

### **Review Modules/eBooks:**

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

### **Tutorials:**

ATI offers unique tutorials designed to teach nursing students how to think like a nurse, how to take a nursing assessment, and how to make sound clinical decisions.

- Achieve provides you with the skills necessary to prepare you for nursing school such as study skills, test-taking, classroom skills and preparation for the clinical experience
- Nurse Logic is an excellent way to learn the basics of how nurses think and make decisions.
- Learning System offers *practice tests* in specific nursing content areas that allow students to apply the valuable learning tools from Nurse Logic. Features such as a Hint Button, a Talking Glossary, and a Critical Thinking Guide are embedded throughout the Learning System tests to help students gain an understanding of the content.

### **Assessments:**

There are practice assessments available for students as well as standardized proctored assessments scheduled during specific courses. These assessments will help the student to identify what they know as well as areas requiring remediation (additional learning) called “Topics to Review”.

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

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

**FYI:** The instructor has online access to detailed information about the timing and duration of time spent in assessments, focused reviews, and tutorials by each student. Students can provide documentation that required ATI work is complete using the “My Transcript” feature

under “My Results” of the ATI Student Home Page or by submitting written Remediation Templates as required.

**SON Policy:**

1. All nursing students will actively use ATI as part of their preparation for class and taking NCLEX upon graduation.
2. ATI is an important contribution to the testing grade for the course. Significant study is required to meet the required benchmark for an A-level grade. See your class grading policies for the value of ATI in the course.
3. Students will complete both Practice A and Practice B Assessments and will complete the prescribed remediation for those assessments.
4. Students will complete a Proctored Assessment toward the end of the semester and will complete prescribed remediation (except Community Health) for that assessment.
5. Students will engage in prescribed remediation for a) each practice assessment and b) the proctored assessment by following these steps:
  - a. The student will print a detailed list of Topics for Review (provided by ATI for the assessment taken). The student’s name must be on the topic report.
  - b. For EACH topic of review, the student will summarize three key points. This can be in a bullet or sentence format. Single word summaries or brief phrases are not sufficient. It should be in such a format such that the student can use this remediation as a meaningful future study tool (e.g. NCLEX preparation). Faculty will determine whether remediation is acceptable to achieve the points associated with its submission.
  - c. In addition to item 5b above, the student will complete EITHER an ATI Active Learning Template OR a detailed concept map for three of the Topics for Review. Here’s an EXAMPLE:

**Remediation EXAMPLE**

Student takes a Practice test and has 25 “Topics for Review” then follows these three steps:

1. The student will summarize three key points for each of the topics missed (25 topics).
2. For deeper learning, the student will choose three of the “Topics for Review” and complete an ATI Active Learning Template OR a detailed concept map for each topic (THREE topics total).
3. Additionally, the student will complete 1 hour of Focused Review in ATI on topic(s) of their choice. The only requirement is the **time** spent in review, not the number of topics covered. An ATI transcript (.pdf format only) will be generated to document this time.

6. **ATI Transcripts** and **Topics for Review** will only be valid if they display the appropriate student identification. These may ONLY be submitted in .PDF format. Documents that do not follow these guidelines will not be considered adequate for submission and will not be graded.

7. Remediation will be turned in hard copy to your **clinical instructor** and MUST include all of the following:
  - i. PLNU SON ATI Cover sheet
  - ii. ATI Individual Performance Profile (report with topics to be reviewed)
  - iii. ATI Transcript showing 1 hour Focused Review
  - iv. Remediation documents (three key points for **each topic** AND a Concept Map OR Active learning Template for each of the three deeper learning topics chosen by you).
8. Due dates and grading policies for practice exams, proctored exams and remediation are found in the course calendar.
9. ATI Practice and Proctored Assessments will be administered as follows:

Course	ATI Module	Semester	Year of Program
NSG2050	Skills Modules	Fall	Sophomore
NSG2060	RN Fundamentals	Spring	Sophomore
NSG3010	Nursing Care of Children 2016	Fall & Spring	Junior
NSG3030	Maternal Newborn	Fall & Spring	Junior
NSG3040	Medical Surgical	Fall & Spring	Junior
NSG3099	Nutrition	Fall & Spring	Junior
NSG4070	Leadership	Fall & Spring	Senior
NSG4070 NSG4060	Pharmacology	Fall	Senior
NSG4050	Mental Health	Fall & Spring	Senior
NSG4060	Community Health (Practice exams only)	Fall & Spring	Senior
NSG4070 NSG4060	Comprehensive RN Predictor	Spring	Senior

10. Grading for **Content Mastery Series** (CMS, i.e. all assessments except RN Predictor)
  - a. ATI will account for 10% of the overall test grade (e.g. 30 points in a course with 300 test points).
  - b. Non-Proctored Assessments and all Remediation (including proctored remediation) are a clinical requirement. Failure to complete and turn in these items on time will affect your clinical evaluation.
  - c. Points for the Proctored Assessment are added to TESTING points for the course.

## NSG3010 ATI Grading Rubric

<b>Practice Assessments &amp; Remediation</b>	
<b>Practice Assessment A Remediation</b>	<b>Practice Assessment A Remediation</b>
<b>Proctored Remediation</b>	
Points are not granted for practice tests or remediation. Late submission of required evidence of practice assessment and remediation will affect your clinical evaluation as a reflection of patient safety.	



<b>Proctored Assessment</b>		
<b>Level 2 or higher 45 points (100%)</b>	<b>Level 1 36 Points (80%)</b>	<b>Below Level 1 27 Points (60%)</b>
Total <i>TESTING</i> points possible = <b>45</b>		

CMS Proficiency Level	ATI Points Awarded
Level 2 or greater	100%
Level 1	80%
Below Level 1	60%

## NSG3010 Semester Plan for ATI Assessment (see Course Calendar)

When Taken	Activity	Due Date
Within 1 <sup>st</sup> 4 weeks of semester	Practice Assessment A: <i>RN Nursing Care of Children Online Practice 2016 A</i>	2/14/2020 by 11:59pm
Within 2 weeks of Practice A	Remediation - Practice A	3/2/20 in class
Around week 8 of semester	Practice Assessment B: <i>RN Nursing Care of Children Online Practice 2016 B</i>	3/16/2020 by 11:59pm
Within 2 weeks of Practice B	Remediation - Practice B	4/6/2020 in class
Around week 12 of semester	PROCTORED Assessment: <i>RN Nursing Care of Children 2016</i>	4/7/2020
Within 2 Weeks of Proctored Exam	Remediation – Proctored Assessment	4/15/2020
After Proctored Remediation complete	Retake Proctored Assessment (optional)	TBD

### LEADERSHIP REQUIREMENT

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

### REQUIRED LEARNING ACTIVITIES

1. Medication Quiz (see NSG3011 syllabus for guidelines)\*
2. Individual Readiness Assessment Tests (iRAT) x 6
3. Team Readiness Assessment Test (tRAT) x 6
4. Exams (3 total) – NO Cumulative Final
5. Oral Case Presentation (completed during clinical post-conference)\*
6. Developmental Paper & Teaching Project\*
7. Graded Concept map (see syllabus for NSG3011 for guidelines/rubric)\*
8. ATI (practice exams, proctored exam and remediation)

\* completed on NSG3011 clinical patients/scenario's but points granted in NSG3010 grade

#### Medication Quiz

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

#### Exams – Group Testing

Students learn best with immediate feedback after a test or exam. Major exams will be given during the first hour of class (0735 – 0835) and will be 50 questions in length and consist of

multiple choice, math and essay questions. Students will have a short break after completion of the exam and then return at an assigned time in their pre-assigned team to complete a single group exam. You will work in your teams to complete the exam in a short amount of time (usually 20 minutes). Each team will complete a single exam together. Once team exams are turned in, answers to the exam will be reviewed. The entire class period (including the break) is considered part of the testing process, therefore cell phones, notes, and backpacks will need to stay untouched during the entire class time (including the break) in order to protect the integrity of the test.

*The overall exam score will be calculated as follows:*

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

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

## **HONORLOCK**

Honorlock is an online proctoring service. We will be using this service for NSG 2070 for all quizzes and exams. This means all quizzes AND exams are taken on your computer.

- 
- This program will record your screen during testing.
  - Detect search-engine use.
  - Prevent copy and pasting.
  - Prevent opening another browser.
- 

You must bring your computer to class to take the quizzes/exams. You cannot use a tablet or smartphone with Honorlock. You **DO NOT** need to create an account, download software or schedule a proctoring appointment.

You are required to use Google Chrome as your browser for all quizzes/exams.

Honorlock is very simple! All you will need to do is log into Canvas and click on the practice quiz to add the Honorlock Chrome Extension, which is required to take exams.

**You will need to use Google Chrome and download the Honorlock Chrome Extension.** When we are ready to take our first (non-graded) quiz on January 17th, Friday, we will all log into Canvas together and go to your Course NSG 2070. We will take Quiz #1 together towards the end of the class period. This will allow us to work out any issue you may be having.

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## **REQUIRED LEARNING ACTIVITY:**

### **Nip-It Modules**

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**Points Possible:** 15

**DUE DATE:** Complete any time before 2/23/20 at 11:59pm

#### **COMPETENCIES:**

At the completion of this activity, the student will:

##### Module 1 - Vaccine Preventable Diseases

- Explain the historical impact of major infectious disease outbreaks.
- Identify major vaccine preventable diseases.
- Compare how Individual and Community Immunity differ.
- Recognize the implications of choosing not to be immunized.

##### Module 2 - Vaccine Recommendations

- Describe the development of vaccines.
- Differentiate types of vaccines.
- Discuss information on vaccines, including side effects and contraindications.
- Select recommended immunizations for children, adolescents and adults according to the CDC recommended immunization schedule.

##### Module 3 - Vaccine Concerns

- Describe social factors that impact immunization.
- Discuss the public's current vaccine safety concerns.
- Explain barriers to immunization for the public.
- Identify two legal concerns about immunizations.
- Apply ethical principles to vaccine situations.

##### Module 4 - Nursing Roles

- Discuss nursing roles related to immunization: communicator, educator, advocate, coordinator of care
- Describe effective communication strategies with patients and families related to immunization
- Discuss the nurse's professional responsibility to maintain own immunizations

##### Module 5 - Vaccine Administration

- Identify elements of safe vaccine storage.
- Describe techniques that will assist in administering vaccines safely.
- Review vaccine administration routes and skills.
- Describe components of vaccine documentation.
- Differentiate between local and systemic reaction and how to respond.

##### Module 6 - Mass Immunization

- Describe the diseases that could initiate a mass immunization or prophylaxis response.
- Identify the process of a mass immunization event, from surveillance to follow-up.

- Explain the mass immunization/prophylaxis site command structure, functions and traffic flow.
- Discuss differences between mass immunization events.
- Examine the nursing roles within a mass immunization event

## REQUIRED LEARNING ACTIVITY: Oral Case Study

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**Points Possible:** 15

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

### COMPETENCIES:

At the completion of this activity, the student will:

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

### GUIDELINES AND INSTRUCTIONS:

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

## Oral Case Study Presentation Grading Rubric

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

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

**Comments:**

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

## REQUIRED LEARNING ACTIVITY:

# Clinical Concept Map

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Due Date: Varies

## STUDENT LEARNING OUTCOMES:

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 pathophysiology of the disease/condition, patient signs & symptoms, diagnostics and treatment plan
4. Use 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 skill and detail

## GUIDELINES:

1. Three (3) concept maps due during the semester:
2. Each Completed **Concept Map** MUST include these 3 elements:
  - **Patient Assessment Form** - separate sheet (on Canvas)
  - **Concept Map**: including these elements
    - Medical Diagnosis with brief history and pathophysiology of the disease/problem
    - Relevant diagnostic findings (X-rays, labs, physical assessment findings, etc.)
    - Medications/Treatments ordered (e.g. acetaminophen, dressing change)
    - 2 Patient-Specific Problems (or potential problems)
      - PSYCHOSOCIAL (e.g. loneliness, family coping)
        - 2 goals or expected outcomes
        - 3 interventions per goal (6 total)
        - Evaluation of outcomes (met/not met – why)
      - PHYSIOLOGICAL (e.g. risk for infection, impaired gas exchange)
        - 2 goals or expected outcomes
        - 3 interventions per goal (6 total)
        - Evaluation of outcomes (met/not met – why)
  - **Two (2) Community Resources** specific to the patient – these are agencies or groups in the community that have something to offer the child or family. Often times there are support groups, activities or equipment offered by these entities. An example might be a YMCA in the neighborhood that has after-school care for a child whose mom works or the American Childhood Cancer Association, which offers all kinds of resources, financial and other, to families whose child is being treated for cancer. To

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turn in these resources you must provide a printed home page or document. No urls accepted.

3. First two (2) concept maps – reviewed and graded as pass/fail. Those concept maps that do not meet minimum standards or lack demonstration of competence will be returned for reworking and resubmission.
4. Final concept map (1) will be graded on the first submission using the Final Concept Map Rubric.

**DUE DATE:** The following week in clinical as determined by instructor. **Last map must be turned in no later than 2<sup>nd</sup> to last day of clinical. Late maps will receive zero credit but must still be turned in to pass the course.**

**GRADING:** Map #1 - pass/fail.  
Map #2 – pass/fail  
Map #3 - 15 points

**RESOURCES:** See Canvas to obtain required forms (Patient Assessment Form) and helpful guidelines for completing concept maps. Large size paper will be available outside Dr. Sloan's door for concept map creation.

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**Final Graded Concept Map Rubric NSG311**

Element	Criteria	Points
Complete FINAL Concept Map	Turns in all of the following : <ul style="list-style-type: none"> <li>• Completed Physical Assessment Form</li> <li>• Concept Map</li> <li>• Community Resources (2) (any of these missing = zero for this section)</li> </ul>	5 points
Key Elements Present	<ul style="list-style-type: none"> <li>• Patient's Age (years/mos), Initials</li> <li>• Medical Diagnosis and Pertinent History/Findings</li> <li>• Pathophysiology of Main Problem (risk factors, symptoms, treatment and complications)</li> <li>• 2 Patient-Specific Nursing Problems               <ul style="list-style-type: none"> <li>○ Physiologic (oxygenation, perfusion)</li> <li>○ Psychosocial (loneliness, coping)</li> </ul> </li> <li>• 2 Goals per problem</li> <li>• 3 Interventions per goal</li> <li>• Evaluation of goals (met/not met – why)</li> </ul>	3 points
Nursing Problems & Goals Appropriate to Patient and Shift-Focused	<ul style="list-style-type: none"> <li>• Problems make sense given patient assessment findings (look at top 3 problems on Assessment form = are nursing diagnoses related?)</li> <li>• Goals are written in SMART format               <ul style="list-style-type: none"> <li>○ Specific</li> <li>○ Measurable</li> <li>○ Achievable</li> <li>○ Realistic</li> <li>○ Timely</li> </ul> </li> <li>• Interventions realistic for shift</li> </ul>	4 points
Connections and Logic	<ul style="list-style-type: none"> <li>• Clear connections are noted between interventions (meds, nursing actions, key findings, diagnostics, patient assessment findings)</li> </ul>	3 points
	Final concept maps turned in past the 2 <sup>nd</sup> to last day of clinical WILL NOT BE GRADED.	15 points

**REQUIRED LEARNING ACTIVITY:**  
**Developmental Paper & Teaching Project**

**Points Possible: 125**

- Drafts = 50
- Final = 75

**Timeline/Due Dates:**

PHASE	Assignment	Where to turn in	Points Possible	Due Date
<b>*Drafts</b>	Choose patient & perform developmental assessment	NA	0	2/26 or 2/28
	Developmental assessment	Canvas	5	3/1
	Introduction & identifying Data	Canvas	5	3/8
	Area of Risk #1 (3 paragraphs: normal for age, your assessment, recommended interventions)	Canvas	5	3/15
	Area of Risk #2 (3 paragraphs: normal for age, your assessment, recommended interventions)	Canvas	5	3/22
	Pt/Family Teaching Needs	Canvas	5	3/29
	Conclusion, careful review/proof-read of paper and checking APA Format.	Canvas	10	4/5
	Peer review of classmates paper	Canvas	10	4/12
	Teaching Project Summary draft	Canvas	5	4/12
	<b>Final</b>	<b>Final Developmental Paper</b>	Portfolio	50
<b>Final Teaching Project (evidence in Portfolio, actual project in class)</b>		Portfolio & In Class	25	4/19
<b>Final Teaching Project Summary</b>		Portfolio		

\*Drafts will be given full credit if turned in on time and good effort is evident. They will NOT be closely graded. The only feedback students will receive is from peers during peer review. Peer review grade is dependent upon the time and effort you put into peer review as evidenced by adhering to grading rubric while reviewing.

## Student Learning Outcomes:

### Paper:

During the completion of this activity, the student will:

1. Conduct a developmental assessment on a pediatric patient and their family.
3. Analyze the effect of hospitalization on the normal developmental process.
4. Comparing expected norms to actual findings.
5. Identify maladaptive behaviors encountered during the hospital experience and identify 2 areas in which the child is at risk developmentally.
6. Determine evidence-based nursing interventions to address identified developmental concerns or areas for reinforcement.
7. Write a SCHOLARLY paper using APA format, 6<sup>th</sup> Edition.

### Teaching Project:

During the completion of this assignment, the student will:

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

## Instructions – Read Carefully!

### 1) Developmental Assessment

This is an informal, yet guided way to collect developmental data about your patient and their family. Use the Developmental Assessment tool provided in Canvas to collect data about your patient/family. The final product turned in must include the patient's initials, age, a brief History of Present Illness and as much information as you can glean from the patient and family. This must be typed but does not need to be in APA format. Refer to our class Canvas site for more specific guidelines/outline and grading rubric. Leaving large areas blank without explanation will result in a reduction in points granted. This will be turned in on Canvas.

### 2) Developmental Paper

- **Format:** draft sections as well as the final paper must be typed using APA, 6<sup>th</sup> ed. Guidelines. APA is expected and you must adhere to basic APA citation styles and references.
  - This means the paper is written in 3<sup>rd</sup> person (an observer watching from

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

### 3) Developmental Teaching Project

This project consists of 2 parts:

- Teaching Project
- Teaching Project Summary

#### Teaching Project

- For the child evaluated in the developmental paper, design a home-based teaching plan and/or project that is creative, age specific, and well organized with regard to

the disease process, needed education of patient and/or family, and developmental level of child! Should be practical and relevant to their diagnosis and/or developmental level.

- Ideas for possible projects (you are not limited to these): creating games, books, charts, scavenger hunts, posters, education packets, journals, dolls, sticker charts, medical play, resource lists, blankets, audio/video tapes/CD's. The sky is the limit – think outside the box!
  - *Creativity/risk-taking will be generously rewarded!*
- The project will be turned in in class. You need to make sure you have your name on your project!

#### **Teaching Project Summary**

- The student will apply the elements of the nursing process in determining the teaching needs of the child/family and will state a plan for evaluating the effectiveness of the plan.
- Please provide a written 1-2 page summary of why you chose this teaching method for this patient/family. READ THE ATTACHED RUBRIC! Address who, what, how you teach and why it is appropriate for this patient/family. Explain how it meets their developmental, physical, and psychosocial needs. You must explain how would you evaluate patient/parent learning (did they learn what you intended for them to learn with the project).
- This must also be in APA 6<sup>th</sup> Edition Format.
- This will be turned in via Portfolium.

## Developmental Paper Grading and Assessment Rubric

### INTRODUCTION & IDENTIFICATION

**All papers must have these 2 sections!**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Assess health/illness beliefs, values, attitudes, and practices of individuals, families, groups, communities and populations (BSN Essential VII: 3)</p> <p>NSG3010: CLO 1.4 NSG3011: CLO 1.1</p>	<ul style="list-style-type: none"> <li>• Includes one or fewer criteria</li> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 2 or fewer criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 3 elements in criteria</li> <li>• May have some grammar, spelling errors</li> </ul>	<p><b>Clear Introduction Paragraph:</b></p> <ul style="list-style-type: none"> <li>• Clear introductory sentence</li> <li>• Purpose of the paper</li> <li>• Relevance of developmental assessment to pediatrics</li> <li>• Topics to be covered in the paper</li> </ul>	5	
<p>Evaluate data from all relevant sources, including technology, to inform the delivery of care. (BSN Essential IV: 6)</p> <p>NSG310: CLO 2.4 NSG3011: CLO 1.3</p>	<ul style="list-style-type: none"> <li>• No identifying data OR</li> <li>• less than 3 required items</li> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Between 3 to 4 of the required criteria</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 5-6 criteria</li> <li>• May have some grammar, spelling errors</li> </ul>	<p><b>Identifying Data:</b></p> <ul style="list-style-type: none"> <li>• Provides patient initials and age (years and months). No names!!</li> <li>• Diagnosis</li> <li>• Brief history of present illness</li> <li>• General appearance statement</li> <li>• List height and weight (and FOC if less than 2 years)</li> <li>• List child's present percentile (height and weight)</li> </ul>	5	

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				<ul style="list-style-type: none"><li>• The expected 50<sup>th</sup> percentile for a child of similar age</li></ul>		
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**Developmental Paper Grading and Assessment Rubric**

**GROSS & FINE MOTOR**

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

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. (BSN Essential IX: 1)  NSG3010: CLO 2.1 NSG3011: CLO 1.2	<ul style="list-style-type: none"> <li>• Does not include this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• Provides poor evidence for assessment</li> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 3 or fewer criteria for this section</li> </ul>	<ul style="list-style-type: none"> <li>• Includes all criteria of this section but, lacks sufficient or appropriate evidence to support assessment of child's gross or fine motor development</li> <li>• May have some minor grammar, spelling errors</li> </ul>	<b>Gross and Fine Motor Neuromuscular Development</b> <ul style="list-style-type: none"> <li>• Assess present fine motor skills and stage and compare to norms for this age. Does the child meet norms or not?</li> <li>• Provides evidence to support assessment findings (behaviors, abilities, interactions, etc.)</li> <li>• Provides at least 2 specific HOME-BASED interventions to promote completion of fine motor development</li> <li>• Provides a broad plan for HOME-BASED accident prevention measures for this age (consider physical, social, psychological safety issues)Well-developed concepts and strong evidence for assessed stage</li> </ul>	<b>10</b>	

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				<ul style="list-style-type: none"><li>• No grammatical or spelling errors</li></ul>		
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**Developmental Paper Grading and Assessment Rubric**  
 SOCIAL

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

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
<p>Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. (BSN Essential IX: 1)</p> <p>Apply knowledge of social and cultural factors to the care of diverse populations. (BSN Essential I: 5)</p> <p>NSG3010: CLO 2.1, CLO 3.5                      NSG3011: CLO 1.2, 2.2, 2.3, 3.2, 4.2</p>	<ul style="list-style-type: none"> <li>Does not include this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>Includes 2 or fewer criteria for this section</li> </ul>	<ul style="list-style-type: none"> <li>Includes all 3 criteria of this section</li> <li>Provides a fair assessment of 6 or fewer aspects of socialization</li> <li>May have some minor grammar, spelling errors</li> </ul>	<p><b>Social Development</b></p> <ul style="list-style-type: none"> <li>Make assessment in the area of socialization considering the following:                             <ul style="list-style-type: none"> <li>Child's personality and temperament</li> <li>Communication ability</li> <li>Stressors in their life, or parents life and how they deal with them</li> <li>Friends or lack of friends</li> <li>School or work</li> <li>Activities</li> <li>Social support (for the child/family)</li> <li>Parental involvement</li> </ul> </li> </ul>	10	

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				<ul style="list-style-type: none"><li>• Sexuality (if applicable)</li><li>• Provides evidence to support assessment findings</li><li>• Suggest at least 2 specific HOME-BASED interventions to promote socialization and appropriate social behavior for the child's age Well-developed concepts and strong evidence for assessments</li><li>• Grammar and spelling strong</li></ul>		
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**Developmental Paper Grading and Assessment Rubric**

**EMOTIONAL**

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

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. (BSN Essential IX: 1)  NSG3010: CLO 2.1, CLO 3.5 NSG3011: CLO 1.2, 2.2, 2.3, 3.2, 4.2	<ul style="list-style-type: none"> <li>• Does not include this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>• Includes 2 or fewer criteria for this section</li> </ul>	<ul style="list-style-type: none"> <li>• Includes all 3 criteria of this section</li> <li>• Provides brief assessment or lacks evidence to support</li> <li>• May have some minor grammar, spelling errors</li> </ul>	<p><b>Emotional Development</b></p> <ul style="list-style-type: none"> <li>• Assess status of emotional development (fears, stress, control, volatile behavior, regression, attachment to parents)</li> <li>• Provides appropriate evidence to support assessment findings</li> <li>• Suggest at least 2 specific HOME-BASED interventions to promote resilience and healthy emotional behavior Well-developed concepts and strong evidence for assessments</li> <li>• Grammar and spelling strong</li> </ul>	10	

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**Developmental Paper Grading and Assessment Rubric**  
 FAMILY RELATIONSHIPS

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

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
Assess health/illness beliefs, values, attitudes and practices of individuals, families, groups, communities, and populations. (BSN Essential IIV: 3)  NSG3010: CLO 1.4, 2.1, 3.5 NSG3011: CLO 1.1, 1.2, 1.3, 2.3, 3.3, 4.2	<ul style="list-style-type: none"> <li>Does not include this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>Includes 2 or fewer criteria for this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>Does not use a family theory to assess family dynamics</li> </ul>	<ul style="list-style-type: none"> <li>Includes all criteria of this section</li> <li>Does not use a valid family theory to assess family dynamics or does not use appropriate family theory</li> <li>May have some minor grammar, spelling errors</li> </ul>	<b>Family Relationships</b> <ul style="list-style-type: none"> <li><u>Use a family theory to assess family dynamics</u>, their relationships</li> <li>Describe how the family's function influences the development of the client</li> <li>Suggest at least 2 specific HOME-BASED interventions to promote healthy family interactions</li> <li>Well -developed concepts and explanations</li> <li>Grammar and spelling strong</li> </ul>	10	

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

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

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
Assess health/illness beliefs, values, attitudes and practices of individuals, families, groups, communities, and populations. (BSN Essential IIV: 3)  NSG3010: CLO 2.1 NSG3011: CLO	<ul style="list-style-type: none"> <li>Does not include this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>No citations (automatic zero on entire section)</li> </ul>	<ul style="list-style-type: none"> <li>Includes 2 or fewer criteria for this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>nutritional assessment addresses 3 or fewer elements</li> </ul>	<ul style="list-style-type: none"> <li>Includes 2 or fewer criteria for this section</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>Does not use a family theory to assess family dynamics</li> <li>May have some minor grammar, spelling errors</li> </ul>	<p><b>Nutritional Needs</b></p> <ul style="list-style-type: none"> <li>Assess the patients present dietary habits or diet regimen</li> <li>Perform an assessment of the child’s nutritional needs taking into consideration:               <ul style="list-style-type: none"> <li>Calories needed</li> <li>Current BMI</li> <li>Specific nutrients needed</li> <li>Eating behaviors</li> <li>Meal times/snacks</li> <li>Source(s) of food</li> <li>Dietary practices (cultural/religious)</li> <li>Growth and Development</li> <li>Likes and Dislikes</li> </ul> </li> <li>Suggest at least 2 specific HOME-BASED interventions to promote nutrition and meet the child’s nutritional needs Well – developed, comprehensive assessment with corresponding interventions</li> <li>Grammar and spelling strong</li> </ul>	<b>10</b>	

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

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

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Points Possible	Point s Given
<p>Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. (BSN Essential IX: 1)</p> <p>Apply knowledge of social and cultural factors to the care of diverse populations. (BSN Essential I: 5)</p>	<ul style="list-style-type: none"> <li>Does not include this section and/or does not discuss cultural assessment factors that may conflict</li> </ul> <p style="text-align: center;"><b>OR</b></p> <p>No citations (automatic zero on entire section)</p>	<ul style="list-style-type: none"> <li>Includes 2 elements of this section</li> </ul>	<ul style="list-style-type: none"> <li>Includes all elements of this section including religious and cultural assessment</li> <li>Poor assessment of the role of race, culture and religion as it relates to the healthcare system</li> <li>May have some minor grammar, spelling errors</li> </ul>	<p><b>Cultural/Religious Assessment</b></p> <ul style="list-style-type: none"> <li>Assess and discuss the cultural and religious context of the child and family. Remember race is not culture!</li> <li>Identify possible factors within the family's cultural or religious value system that may conflict with the healthcare system</li> <li>Discuss interventions to minimize conflicts (real or potential)</li> <li>Well developed, thoughtful assessment of the role of race, culture and religion as it relates to the healthcare system</li> <li>Grammar and spelling strong</li> </ul>	<b>10</b>	

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**Developmental Paper Grading and Assessment Rubric**  
 Patient/Family Teaching Needs

**All papers must have this section!**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Points Possible	Points Given
Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral, and follow-up throughout the lifespan. (BSN Essentials VII: 5)  NSG3010: CLO 2.1, 3.5 NSG3011: CLO 1.3, 2.3, 3.2, 5.3	<ul style="list-style-type: none"> <li>No need(s) discussed</li> </ul>	<ul style="list-style-type: none"> <li>2 of 4 elements present</li> </ul>	<ul style="list-style-type: none"> <li>3 of 4 elements present</li> </ul>	<ul style="list-style-type: none"> <li><b>Identified Teaching Need(s)</b></li> <li>Explain specific need for patient/family education</li> <li>Identify learners to be taught (patient, parents, both, etc)</li> <li>Describe the value of this education to patient/family development.</li> <li>Grammar and spelling strong</li> </ul>	5	

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**Developmental Paper Grading and Assessment Rubric**  
 Conclusion

**All papers must have these 2 sections!**

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Points Possible	Points Given
Participate in the process of retrieval, appraisal, and synthesis of evidence in collaboration with other members of the healthcare team to improve patient outcomes. (BSN Essential III: 5)  CLO 1.2 CLO 3.5	<ul style="list-style-type: none"> <li>No conclusion</li> </ul>	<ul style="list-style-type: none"> <li>Minimal conclusion, does not summarize findings and/or interventions</li> </ul>	<ul style="list-style-type: none"> <li>Clear concluding paragraph with summary of findings and 2 AREAS identified for intervention or further health promotion</li> <li>Grammar and spelling acceptable</li> </ul>	<b>CONCLUSION</b> <ul style="list-style-type: none"> <li>Clear concluding paragraph with summary of findings and</li> <li>2 AREAS identified for intervention or further health promotion</li> <li>Rationale for choosing those areas</li> <li>Grammar and spelling strong</li> </ul>	<b>5</b>	
Use written, verbal, non-verbal, and emerging technology methods to communicate effectively. (BSN Essential I: 4)	Zero points for any of the following: <ul style="list-style-type: none"> <li>No headings</li> <li>Poor margins</li> <li>Spelling &amp; grammar poor</li> <li>Not within page limit &gt; 1 page under or over.</li> <li>No citations</li> </ul>	<ul style="list-style-type: none"> <li>May or may not have headings</li> <li>Margins uneven</li> <li>Spelling &amp; grammar fair</li> <li>Not within page limit &gt; 1 page under or over.</li> <li>Few citations (&lt;5) or mostly old citations</li> </ul>	<ul style="list-style-type: none"> <li>Margins correct</li> <li>Headings present for each section</li> <li>Acceptable grammar and spelling throughout</li> <li>Within page limit</li> <li>Adequate Citations present</li> </ul>	<b>APA Format</b> <ul style="list-style-type: none"> <li>Margins 1" around</li> <li>Cover page</li> <li>Headings present for each section as listed above.</li> <li>Spelling, grammar &amp; pagination correct</li> <li>6-8 pages (not including teaching project)</li> <li>Strong grammar and spelling throughout</li> <li>Within page limit</li> <li>Appropriate Citations present</li> </ul>	<b>10</b>	

**Comments:**

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### Home-Focused Developmental Teaching Project Summary

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

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Points Possibl e	Points Given
<p>Provide appropriate patient teaching that reflects developmental stage, age, culture, spirituality, patient preferences, and health literacy considerations to foster patient (family) engagement in their care. (BSN Essential IX: 7)</p> <p>NSG3010: CLO 1.2, 1.4, 2.1            NSG3011: CLO5.1.1, 1.3, 3.2, 4.2, 5.3</p>	<ul style="list-style-type: none"> <li>Does not address identified needs of patient/family</li> <li>Not home focused</li> </ul>	<ul style="list-style-type: none"> <li>Project addresses non- identified needs of family</li> <li>Not home-focused</li> </ul>	<ul style="list-style-type: none"> <li>Project addresses physical/psycho social needs but misses most important issues</li> </ul>	<p>Project clearly addresses one of the identified physical/psychosocial learning needs (based on assessment) of the patient or family</p> <ul style="list-style-type: none"> <li>REMEMBER: The project must addressed HOME-FOCUSED teaching needs</li> </ul>	6	
<p>Provide appropriate patient teaching that reflects developmental stage, age, culture, spirituality, patient preferences, and health literacy considerations to foster patient (family) engagement in their care. (BSN Essential IX: 7)</p> <p>NSG3010: CLO 3.5            NSG3011: CLO 1.3, 2.4, 3.2, 4.2, 5.3</p>	<ul style="list-style-type: none"> <li>Is NOT developmentally appropriate for patient and or family's needs</li> </ul>	<ul style="list-style-type: none"> <li>Is somewhat developmentally appropriate for patient and or family's needs</li> </ul>	<ul style="list-style-type: none"> <li>Is developmentall y appropriate but lacks clear relevance to teaching needs</li> </ul>	<ul style="list-style-type: none"> <li>The project is developmentally appropriate for patient and or family teaching needs</li> </ul>	6	
<p>Integrate evidence, clinical judgement, interprofessional perspectives and patient perspectives in planning, implementing and evaluating outcomes of care. (BSN Essential III: 6)</p> <p>NSG3010: CLO 1.4, 3.4            NSG3011: 1.1, 1.2, 3, 4, 4.1</p>	No plan included	Plan brief and non-specific	<p>Plan present but method of evaluation weak or inappropriate            Project shows effort</p>	<p>Includes a highly specific plan for the evaluation of the effectiveness of this project related to patient/family understanding and knowledge</p>	6	

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Assume accountability for personal and professional behaviors. (BSN Essential VIII: 2)  NSG3010: CLO 1.5 NSG3011: CLO 1.1, 1.2	No project provided = <b>zero for entire project</b>	Project is poorly executed, shows little effort or time	Project shows Time and effort	Project is well-executed and demonstrates the investment of thought, creativity and time into product	5	
Evaluate the credibility of sources of information, including but not limited to databases and Internet resources. (BSN Essential III: 4)  NSG3010: CLO 1.2	No APA used OR No references No Project Summary = <b>zero for entire project</b>	APA fair OR Missing/inappropriate references	APA present 2 or fewer references Less than 1 pg Not labeled!	<b>Minimum 1-2-page summary is in APA 6<sup>th</sup> edition format with references</b>  <b>Project labeled with student name!</b> APA format 5 or > appropriate references 2 or > pages Labeled clearly with student name	2	
<b>Projects turned in without a Project Summary page will not be graded and will be given a zero!</b>						
<b>Total Points Possible</b>					<b>25</b>	

Comments:

## ATI Remediation Cover Page

**Binder Clip or Staple ONLY – No folders/binders accepted**

Student Name (Print): \_\_\_\_\_

Course: NSG \_\_\_\_\_

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### Type of Remediation submitted:

Practice A  Practice B  Proctored

# of topics to remediate: \_\_\_\_\_

### Documents Submitted: (will be returned if incomplete)

*Individual Performance Profile* (with your name clearly visible) with topics to review numbered.

Remediation clearly numbered to correlate with topics to review

### Percent of remediation completed:

100%

Less than 100%

I attest that the information on this page is accurate and verifiable.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**Student Acknowledgement of School of Nursing ATI Policy**  
(Upload to “ATI Policy” assignment in Canvas. Keep original for your records.)

INITIAL each statement and sign below:

\_\_\_\_\_ I have read and I understand the 2019-2020 SON ATI Assessment and Review Policy.

\_\_\_\_\_ I have reviewed the grading policy for my course and understand how ATI testing can affect my course grade.

\_\_\_\_\_ I understand that it is my responsibility to use all of the books, tutorials and online resources available from ATI, as designated by the SON.

\_\_\_\_\_  
Student PRINTED name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature