



School of Nursing
NSG 3011
Nursing of Families: Child/Adolescent Clinical Practicum (1 unit)
Fall 2023

<p>Meeting days: Tuesdays or Thursdays</p>	<p>Instructors:</p>
<p>Meeting times: Section 1 – Tuesday AM (0630-1500) Section 2 – Thursday AM (0630-1500) Section 3 – Tuesday PM (1130-2000) Section 4 – Thursday AM (0630-1500)</p>	<p>Section 1 - Professor Jessica Morgan BSN, RN, CPN Cell: 619-849-0494 Email: jmorgan1@pointloma.edu</p> <p>Section 2 - Professor Leah Hill MSN, RN, CPEN Cell: 317-522-6652 Email: lhill1@pointloma.edu</p> <p>Section 3 - Professor Heather Garcia MSN, RN CNS, CPN Cell: 858-829-3915 Email: hgarcia@pointloma.edu</p> <p>Section 4 - Professor Kristine Mandani MSN, RN, CPN Cell: 619-717-6340 Email: kmandani@pointloma.edu</p>
<p>Meeting location: Rady Children’s Hospital 3020 Children's Way San Diego, CA 92123 Main Line: 858-576-1700 2Rose Medical: x22-5834 3East Surgical: x22-8074 4East Medical Pulm: x22-</p>	
<p>Placement: Junior year</p>	

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.

COURSE DESCRIPTION

NSG 3011: Nursing of Families: Child/Adolescent Clinical Practicum consists of opportunities for application of nursing theory and child development as it relates to the child, adolescent clients and their families.

Pre-requisites: Junior Standing in Nursing Program and CHD 1050

Concurrent: 3010

PROGRAM LEARNING OUTCOMES

Upon completion of the program, you will be able to achieve the following outcomes:

PLO 1: 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.	
1.1 Integrate scientific findings to promote patient outcomes and wellness <i>Essentials Domain 1, 4</i>	1.2 Apply evidence and clinical judgment in the delivery of care <i>Essentials Domain 1, 5, 8</i>
PLO 2: 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.	
2.1 Demonstrate Christian servant leadership through holistic compassionate care <i>Essentials Domain 2, 6</i>	2.2 Utilize ethical principles in promoting health of diverse individuals and populations <i>Essentials Domain 3, 9</i>
PLO 3: 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 that conveys information, thoughts, actions and feelings through the use of verbal and nonverbal skills.	
3.1 Incorporate information and communication technologies to facilitate optimal care of patients, nurses, and organizations <i>Essentials Domain 8</i>	3.2 Participate in interprofessional healthcare teams to influence positive patient outcomes across the lifespan <i>Essentials Domain 6</i>
PLO 4: Following Faithfully	
Defined as claiming the challenge from Florence Nightingale that nursing is a “divine imposed duty of ordinary work.” The nursing student will integrate the ordinary work by complying with and adhering to regulatory and professional standards (e.g. ANA Code of Ethics, the California Board of Registered Nursing, Scope of Nursing Practice, SON Handbook). This includes taking responsibility, being accountable for all actions and treating others with respect and dignity.	
4.1 Implement health policies to improve care of diverse patients, communities, and populations <i>Essentials Domain 3, 5</i>	4.2 Develop as a professional nurse through self-reflection, accountability, and life-long learning processes <i>Essentials Domain 9, 10</i>
PLO 5: 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.	

<p>5.1 Demonstrate systems-thinking to enhance access, quality, and cost effectiveness across the healthcare delivery continuum <i>Essentials Domain 5, 7</i></p>	<p>5.2 Apply evidence-based, quality improvement principles to improve patient care delivery <i>Essentials Domain 4, 5</i></p>
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COURSE LEARNING OUTCOMES

The mapping for this curriculum is laid out by course. For each course, the course learning outcomes (CLOs) are mapped to the:

- AACN Essentials (AACN, 2021)
- PLNU BSN Program Learning Outcomes (PLOs)
- Public Health California Code of Regulations: Qualifications and Requirements (PHCCR)

Upon completion of this course, the student will:

1. Demonstrate evidence-based practice, using knowledge and the nursing process, clinical assessment and clinical decision-making in the management of acute and chronic health conditions.

AACN Essentials Domains: 1.1b, 1.1d, 1.2b, 1.2d, 1.2e, 1.3a, 1.3b, 1.3c

PLO: 1.1

PHCCR: A, B, C

2. Provide individualized care and education to children from diverse ethnic, cultural, religious, and socioeconomic backgrounds to meet their unique needs to prioritize care and problems appropriately, while communicating pertinent information in a respectful, compassionate and collaborative manner.

AACN Essentials Domains: 2.1a, b, c, 2.2a, b, c, d, e, f, 2.3a, c, e, f, g, 2.4a, b, c, d, 2.5 c, d, e, g, 2.6a, b, 2.7a, c, 2.8c, d, e, 2.9c, d

PLO: 4.1

PHCCR: D, F, H

3. Practice general principles and practices in the clinical management of children and their families from diverse populations in a safe and ethical way, adhering to infection control policies and procedures.

AACN Essentials Domains: 3.1b,c,h,j, 3.2c, 3.3a, 3.4e, 3.6a,c,d,e

PLO: 2.2

PHCCR: B

4. Employ the nurse's role and responsibilities in personal and patient safety.

AACN Essentials Domains: 5.1a,c,f, 5.2a,b,c,d, f, 5.3a, b

PLO: 5.2

PHCCR: J, L

5. Participate as a member of the interdisciplinary team by communicating in a respectful and professional manner that promotes teamwork and collaboration.

AACN Essentials Domains: 6.1a,b,c,e,f, 6.2a,d, 6.3a,c, 6.4a,b,c

PLO: 3.2

6. Integrate the various communication technologies and informatics tools used in the direct and indirect care of patients and their families.

AACN Essentials Domains: 8.1a,b,c, 8.2a,c,e, 8.4b, 8.5a,b,c,e

PLO: 3.1

7. Demonstrate collaborative care, while protecting patient and family's privacy, respecting their values, adhering to HIPAA policies, having integrity and being accountable for one's actions.

AACN Essentials Domains: 9.1a,b, c,e,f, 9.2b, c, e,f,g, 9.3b,c,d,f,h, 9.4c, 9.5a,b,c,e, 9.6a,b

PLO:2.1

8. Implement self-care behaviors, a spirit of inquiry, clinical judgment, utilization of appropriate resources, DEI, leadership behaviors, and a reflective practice.

AACN Essentials Domains: 10.1a,b, 10.2a,d,e, 10.3c,e,g

PLO: 4.2

REQUIRED LEARNING RESOURCES

Same as NSG 3010

ASSESSMENT AND GRADING

Students will receive a "Credit" or "No Credit" grade for each clinical course. The "Credit" grade is passing or satisfactory; the "No Credit" is not passing.

Clinical Performance Evaluation

The Clinical Performance Evaluation (CPE) form is designed to evaluate students' performance during clinical courses and to highlight areas in which the students are progressing satisfactorily as well as areas that require improvement. The clinical preceptor/faculty will use this evaluation tool for both midterm and end of course evaluations of students in clinical practice. The student will rate themselves first, prior to giving the form to the clinical preceptor/faculty who will then rate the student. Both will review the form together to generate discussion and future performance goals. Both midterm and end of course evaluations will occur on the same form.

Midterm Assessment. The student and preceptor will review the form together to discuss each core competency and jointly rate the student's performance. With faculty, the student will then review the feedback and develop a plan for improvement regarding any areas that were rated as "Below Expectations" or "Does Not Meet Expectations".

Final Evaluation results in a clinical **grade** of either Credit or No Credit. Clinical performance is evaluated using the listed core competencies that mirror the Quality & Safety Education for Nurses (2003) competencies. Students must earn a minimum of 75% of the total possible competency points in order to receive a passing grade. A competency rating of “Does Not Meet Expectations” (i.e. rating of 1), upon final course evaluation, may result in clinical failure (grade of NC).

Fall Pre-Season and Spring Training

Prior to the start of clinical in the fall and spring semesters, Juniors and Seniors are required to participate in clinical skills and judgment practice and testing. The purpose of these mandatory training sessions is to validate students’ ability to perform essential clinical skills prior to patient care. Students must pass the medication calculation exam (93%) and the medication administration competency in order to pass medications in clinical and/or attend clinical at designated clinical site.

If a student is not successful in passing the medication calculation exam or the medication administration skill, they will need to remediate and retest. The need for a second attempt of either competency will require the initiation of a Learning Plan. The need for a third attempt will require the initiation of a Performance Improvement Plan. Those who do not successfully complete a third attempt will be put on Probation.

Required Clinical Modules

Students are required to complete specific modules per PLNU, the San Diego Nursing Education Consortium, and their specific assigned clinical agency before they can begin their clinical rotation. Failure to complete these modules on time can delay the student and/or their entire clinical group from beginning their rotation. Late completion may also require the initiation of the Corrective Action Process.

ASSIGNMENTS

Keep in mind that students in all SON programs must earn a passing grade (75%) for each signature assignment in order to pass a course.

Clinical assignments include:

- California Department of Social Services – Mandated Reporter General & Medical Training (7 hours - online modules) *counts toward public health hours.
- 5 Themed journal reflections
- 2 Float experience write-ups
- 1 Case Study Presentation w/ Concept Map
- 2 Concept Maps (must be 2 different diagnoses)
- ***SIGNATURE Assignment: Zoo Paper - Assessing Non-Hospitalized Children and Comparing/Contrasting them to Hospitalized Children***
- Midterm and Final Clinical Evaluation with your Clinical instructor
- Clinical instructor and clinical site evaluations

**assignment details and rubrics below and in canvas course NSG 3010.*

***clinical assignments will be completed on NSG 3011 clinical experiences, but points will be granted in NSG 3010 canvas course.*

TRIGGER WARNING

I acknowledge that each of you comes to PLNU with your own unique life experiences. This contributes to the way you perceive several types of information. In *Nursing of Families: Child/Adolescent Clinical Practicum*, you will encounter various difficult patient situations, some of which you may find triggering. These situations may include discussion or exposure to: pediatric cancer, death and dying, parent/family/caregiver dynamics, suicide, self-harm, eating disorders, trauma, child abuse, violence, and other difficult behavioral and mental health issues. Each time this topic appears in a reading or unit, it is marked on the syllabus. The experiences of being triggered versus intellectually challenged are different. The main difference is that an individual must have experienced trauma to experience being triggered, whereas an intellectual challenge has nothing to do with trauma. If you are a trauma survivor and encounter a topic in this class that is triggering for you, you may feel overwhelmed or panicked and find it difficult to concentrate. In response, I encourage you to take the necessary steps for your emotional safety. This may include leaving class while the topic is discussed or talking to a therapist at the Counseling Center. Should you choose to sit out on discussion of a certain topic, know that you are still responsible for the material; but we can discuss if there are other methods for accessing that material, and for assessing your learning on that material. Class topics are discussed for the sole purpose of expanding your intellectual engagement in the area of pediatric nursing and I will support you throughout your learning in this course.

INCOMPLETE AND LATE ASSIGNMENTS

All assignments are to be submitted by the due dates. Late assignments may affect a student's scoring on the Clinical Performance Evaluation. There will be a 10% reduction of possible points for **each day** an assignment is late and assignments will **not be** accepted for credit four (4) days after the due date. Day 1 starts on the specified due date/time. Assignments will be considered late if posted after the due date and time using Pacific Standard Time. The assignment will still need to be turned in with no points earned 4 days after the due date.

However, I recognize that life happens. If you need an extension, you must contact me **before** the assignment deadline and we will discuss an extension of the due date.

SPIRITUAL CARE

Please be aware PLNU strives to be a place where you grow as whole persons. To this end, we provide resources for our students to encounter God and grow in their Christian faith. If students have questions, a desire to meet with the chaplain or have prayer requests you can contact your professor or the [Office of Spiritual Life and Formation](#).

STATE AUTHORIZATION

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

PLNU COPYRIGHT POLICY

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

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.

ARTIFICIAL INTELLIGENCE (AI) POLICY

Use of Artificial Intelligence (AI) tools (e.g, ChatGPT, iA Writer, Marmot, Botowski) is not permitted, and use of these tools will be treated as plagiarism.

PLNU ACADEMIC ACCOMMODATIONS POLICY

PLNU is committed to providing equal opportunity for participation in all its programs, services, and activities. Students with disabilities may request course-related accommodations by contacting the Educational Access Center (EAC), located in the Bond Academic Center (EAC@pointloma.edu or 619-849-2486). Once a student's eligibility for an accommodation has been determined, the EAC will issue an academic accommodation plan ("AP") to all faculty who teach courses in which the student is enrolled each semester.

PLNU highly recommends that students speak with their professors during the first two weeks of each semester/term about the implementation of their AP in that particular course and/or if they do not wish to utilize some or all of the elements of their AP in that course.

Students who need accommodations for a disability should contact the EAC as early as possible (i.e., ideally before the beginning of the semester) to assure appropriate

accommodations can be provided. It is the student's responsibility to make the first contact with the EAC.

LANGUAGE AND BELONGING

Point Loma Nazarene University faculty are committed to helping create a safe and hospitable learning environment for all students. As Christian scholars we are keenly aware of the power of language and believe in treating others with dignity. As such, it is important that our language be equitable, inclusive, and prejudice free. Inclusive/Bias-free language is the standard outlined by all major academic style guides, including MLA, APA, and Chicago, and it is the expected norm in university-level work. Good writing and speaking do not use unsubstantiated or irrelevant generalizations about personal qualities such as age, disability, economic class, ethnicity, marital status, parentage, political or religious beliefs, race, gender, sex, or sexual orientation. Inclusive language also avoids using stereotypes or terminology that demeans persons or groups based on age, disability, class, ethnicity, gender, race, language, or national origin. Respectful use of language is particularly important when referring to those outside of the religious and lifestyle commitments of those in the PLNU community. By working toward precision and clarity of language, we mark ourselves as serious and respectful scholars, and we model the Christ-like quality of hospitality.

You may report an incident(s) using the [Bias Incident Reporting Form](#).

SEXUAL MISCONDUCT AND DISCRIMINATION

Point Loma Nazarene University faculty are committed to helping create a safe learning environment for all students. If you (or someone you know) have experienced any form of sexual discrimination or misconduct, including sexual assault, dating or domestic violence, or stalking, know that help and support are available through the Title IX Office at pointloma.edu/Title-IX. Please be aware that under Title IX of the Education Amendments of 1972, it is required to disclose information about such misconduct to the Title IX Office.

If you wish to speak to a confidential employee who does not have this reporting responsibility, you can contact Counseling Services at counselingservices@pointloma.edu or find a list of campus pastors at pointloma.edu/title-ix

PLNU ATTENDANCE AND PARTICIPATION POLICY

Regular and punctual attendance to all clinical experiences is considered essential to optimum academic achievement. All clinical hours must be completed and/or made-up. It is the responsibility of the student to initiate communication regarding arrangements for make-up. Make-up for clinical hours is at the discretion of the faculty. Failure to complete clinical hours will result in a "No Credit" for the clinical practicum and an incomplete for the co-requisite theory course. ***Please call/text your clinical instructor if you are late or absent for any reason as early as possible and prior to the clinical start time. Email is not acceptable in this situation.***

For this 2.5-unit course, 100 clinical hours are required. See the table below for details.

Clinical Experience	Direct Hours	Indirect Hours	PHN Hours	PHCCR 1491
Pre-Season/Spring Training		4		
Clinical Orientation		7		
Rady Children's Hospital (9 weeks)	72			
Mandated Reporter Training		7	7	7
Virtual/On-Campus Simulation & Skills lab		6		
Required Zoo Field Trip	6			
TOTALS	78	24	7	7
				TOTAL HOURS = 102

USE OF TECHNOLOGY

In order to be successful in the nursing program, you'll need to meet the minimum technology and system requirements; please refer to the [Technology and System Requirements](#) information. Additionally, students are required to have headphone speakers, microphone, or webcams compatible with their computer available to use. Please note that nursing courses utilize online proctored exams which require a computer with a camera (tablets are not compatible) to complete exams online.

Problems with technology do not relieve you of the responsibility of participating, turning in your assignments, or completing your class work.

SON PROFESSIONAL STANDARDS

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

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

Additional Guidelines

Social networking sites are a great way to connect with many others. These sites can be used to your disadvantage and all persons are advised to employ professional standards on these sites. A general rule would be if what you have posted does not enhance your professional image then it probably needs to be reviewed.

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 and/or Dean of the School of Nursing, and may include assignment/class failure and possible dismissal from the program.

CLINICAL DRESS CODES

Students are expected to present and maintain a professional appearance at all times, including during their clinical rotations and pre-clinical times in any clinical setting, and when wearing the uniform out in public. Students shall adhere to the following dress code guidelines set forth by the SON and the San Diego Nursing Service-Education Consortium, based on the type of clinical setting:

Acute Care Settings

- PLNU-issued green scrubs, kept clean and unwrinkled.
- PLNU student nurse ID badge that is worn above the waist and visible at all times.
- RCHSD student nurse ID badge that is worn with your PLNU badge and visible at all times.
- Bare below the elbow. No Wristwatches. You must obtain a non-electronic lapel watch, clip-on watch or pocket watch that must include a second hand and can be easily cleaned between patient rooms.
- A lab coat or plain black sweatshirt/jacket may be worn if the student is cold.
- Clean, low-heeled shoes with closed toes. Clogs must have a strap around the heels. No sandals or flip-flops. Shoes must be white or black.
- Fun, appropriate, colorful socks may be worn for peds clinicals only.
- Jewelry: No rings of any kind. If you are married you may wear one simple, non-grooved band without stones or a silicone band. No piercings or jewelry/hardware may be evident other than one small stud earring per ear.
- Hair color must fall within natural occurring shades, be neat, and if long, secured back. Facial hair must be neatly trimmed.
- Tattoos must be covered at all times.
- Fingernails must be trimmed short. Light or clear polish without chips is acceptable. No artificial or acrylic nails or components thereof are permitted.
- Makeup is to be worn in moderation.
- No perfumes or scented lotions.

- No low necklines.
- Undergarments cannot be visible through the uniform.

ADDITIONAL COURSE SPECIFIC POLICIES

- **CELL PHONE USE** is **absolutely prohibited in all clinical areas and may not be carried anywhere on your person.** Cell phones may be used in the cafeteria or outside the hospital building. Violation of this hospital-mandated policy will result in immediate dismissal from the clinical area and placement on academic probation and/or other disciplinary measures.
- **STUDENT SKILLS LIST:** Per Rady Children’s Hospital San Diego – students can perform skills according to the Nursing Student Skills List (see canvas). It is the student’s responsibility to keep this list with them in clinical and only perform the skills permitted. Under no circumstances, may a student or instructor draw up or administer medication of ANY kind.
- **DRESS CODE is per PLNU policy:** The only exception is that students may wear colorful socks, a colorful headband, and may wear a colorful lanyard. No “hoodies” may be worn - only lab coats are an acceptable means of “warming up” your uniform or a black jacket – see Dress Code policy above. No colored undershirts, messy hair or jewelry beyond the School of Nursing Policy. You are caring for a parents’ most prized possession – their child. Artificial nails of any type are not permissible. Students in inappropriate dress code may be sent home. You must dress and act professionally to be taken seriously as a nursing student and a professional nurse.
- **Long Sleeves/Jackets:** Rady Children’s dress policy requires wearing nothing below the elbow (BBE – Bare Below the Elbow) – no clothing, no jewelry. If you are a person who gets cold easily, you can wear a white or black top no more than $\frac{3}{4}$ sleeves underneath your PLNU scrubs or with the sleeves rolled to the elbow. NO rings, wrist watches. *It is strongly recommended for you to purchase a clip on watch or fob with a second hand to take vital signs.*
- **A student badge provided by RCHSD** must be worn on top of your PLNU SON badge per RCHSD policy. Students will not be allowed into the RCHSD facility without these two badges. Students, who forget to wear their badge, will be sent home to retrieve it before attending any clinical time. It will be left to the discretion of the clinical instructor if you will be able to return to clinical for that shift.
- **Second Set of Eyes:** A student must have a second person with them whenever providing personal care to a patient (i.e. bathing, assessing private areas, gown changes, toileting, and any time a patient curtain is drawn. An RN, or PCA/CNA, RT, clinical instructor, or the patient’s caregiver/parent may serve as the second set of eyes and must be inside the room and visible at all times when a patient curtain is drawn.
- Unless otherwise arranged with your clinical professor, ALL clinical assignments are to be turned in on Canvas. All items must be typed and in a Word document or PDF format when uploaded to canvas, unless otherwise specified by your instructor. Photos of assignments will not be accepted. The only exceptions are the Concept maps assigned. Please take a photo of them, upload to canvas and then turn in the physical map drawn to your clinical instructor for review. Same rules apply for a typed map.

CLINICAL PRACTICUM – MEDICAL UNITS AND 3 EAST SURGICAL UNIT

These units will be our home base for clinical experience. You will be here for the majority of your clinical shifts, except for assigned floating opportunities to other units.

STUDENT LEARNING OUTCOMES

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

GUIDELINES AND INSTRUCTIONS

1. Clinical schedule will be reviewed on Clinical orientation day and posted on Canvas.
2. Pre-conference begins at 0630 for AM groups and will be determined for PM groups by the clinical instructor. Meet in the location determined by your clinical professor. We cannot congregate in large groups at RCHSD.
3. On the medical unit, students are assigned to work with a nurse for the day. After hearing the report, the student and the nurse will determine which patient(s) the student will care for on their shift. For students working on 3 East surgical – your clinical instructor will assign you to the appropriate patient(s) and that will be your RN preceptor.
4. Utilizing the Patient Assessment sheet, collect information on the selected patient. Research the patient's electronic medical record for other necessary information.
5. When possible, prepare quickly for your day by becoming familiar with the diagnosis, medications, treatment, expected outcomes, developmental, family, and cultural considerations, if there is time before report.
6. At 0650, report to your pod/unit and confer with the assigned nurse. Introduce yourself and be present while your nurse is receiving report from the night shift (if AM). Wait until the RN receives report before asking questions. They need to organize their shift & patient care.
7. Communicate clearly with the assigned nurse your 2-3 goals for the day. Abnormal or questionable findings are to be discussed with both your nurse and your instructor immediately, especially if a patient's condition is worsening.
8. Home-Base Units: 2Rose Medical, 4East, or 3East Surgical Unit (see guidelines). Float experiences: Varied units (see Canvas).

- a. Each unit has their own Clinical Practice Guidelines-“CPG” (policy and procedure for how things are done on that unit; frequency of assessments, vital signs, weights, etc). MUST Review this prior to your shift. Students who do not adequately prepare for their clinical experience may be sent home.
- b. These resources must be reviewed the night before clinical. All necessary preparatory information can be found in NSG 3010 Canvas course.

ASSIGNMENT #1: CHILD ABUSE MANDATED REPORTER TRAINING ONLINE MODULES - GENERAL AND MEDICAL PROVIDER TRAINING

Due: before 1st Clinical – It will take you 7 hours to complete both modules. Professor Garcia will assign a specific due date on canvas. Please plan your time accordingly.

STUDENT LEARNING OUTCOMES

1. How the law defines child abuse and neglect
2. What the law requires of you as a mandated reporter
3. What protections the law provides for a mandated reporter
4. How to spot evidence of child abuse
5. How to report child abuse
6. What happens after a report is filed
7. Definitions of some of the terms used in this program

GUIDELINES AND INSTRUCTIONS

1. General Training Go to the following website:
<http://mandatedreporterca.com/training/generaltraining.htm> to complete the general training. Print and Upload certificate to Canvas.
2. Medical Training Once you have completed general training, complete the medical training module at <http://medical.mandatedreporterca.com/intro/intro.htm>. Print and Upload certificate to Canvas.
3. Post all Certificates of Completion in Canvas.
4. Note: certificates must have your name and date on them to be considered legitimate proof of training.

You will need this certificate to count towards your Public health hours for your certificate when you graduate. Please keep a copy for yourself.

GRADING: This is a non-graded assignment. Students may NOT begin clinical without successful completion of these modules. If it is not complete by your first clinical you will have a clinical make-up and it will be reflected on your clinical evaluation.

Note: These 7 hours count toward the total number of clinical practicum, indirect hours due for this course.

ASSIGNMENT #2: THEMED REFLECTIVE JOURNAL (5 TOTAL)

STUDENT LEARNING OUTCOMES

1. Reflect on clinical experience as it relates to growth and development as a nurse and document this reflection. Do NOT merely give an account of what happened that day. This is an opportunity to tap into personal emotion and your experience with the patient, family, and/or nurse preceptor (maybe interdisciplinary team). How did this clinical, the situation, the experience impact you in regards to the theme.
2. Evaluate your own clinical performance to determine strengths and areas for improvement. What did you learn? What did you struggle with?
3. Set a minimum of 2 goals for personal learning for future clinical experiences on the journal theme chosen. How will you demonstrate the chosen theme? Be specific! Use SMART goals.

GUIDELINES

The student will complete 5 reflective journal, 1 journal on each of the following topics (total of 5 journals during the semester):

- Responsibility
- Accountability
- Respect/Dignity for others
- Humility
- Courage

The journal reflection must demonstrate thought and effort.

- Journal entries should be posted on Canvas in either Word or .pdf format. No written or emailed copies will be accepted.
- To obtain full points please include all the guidelines and SLOs for this assignment in your reflection.
- Write-ups are generally a minimum of 1 full page and no more than 2 pages double, 1.5 spaced, typed. APA format is not necessary. Be sure to include a) your name and turn-in date, b) the unit visited c) the date of the experience. Write to the student learning outcomes listed above.

Grading: 5 points each

Due Date: Five (5) journals during the semester. Journals must be turned in one week after the experience you are writing about. You may NOT turn in more than 1 journal per week. *See canvas for due dates.*

ASSIGNMENT #3: FLOAT EXPERIENCE AND WRITE-UP

Students will have at least 1-2 opportunities to “float” to various units for their clinical experience (*subject to change depending on hospital*). This experience may be forfeited in the event of an absence (student or instructor), if an absence occurs on a regularly scheduled Medical or Surgical day, or the student requires more time to become competent on home/base unit.

STUDENT LEARNING OUTCOMES

The student will provide written evidence to meet the following outcomes:

1. Reflect upon differences in the nursing role for this experience as compared to other nursing experiences on home/base-unit, within this hospital..
2. Evaluate the meaning of this clinical experience against your own personal definition and view of nursing. This should show some depth of thought and effort!
3. Discuss the ways in which the type of nursing witnessed does or does not fit with your values and strengths. Why or Why Not?
4. Determine specific needs/stressors for the patient population under care in this area, including the teaching and learning needs of patients and/or families.

GUIDELINES AND INSTRUCTIONS for Floating & Write-Up:

1. Write-ups are generally 2 pages, double-spaced, type-written. APA format is not necessary. Be sure to include a) your name b) the unit visited and c) the date of the experience as a header. Write-up will not be accepted if < 1 page.
2. Each write-up should address each of the learning outcomes listed above.
3. Write-ups that reflect a poor effort may be returned to the student for revision or the student may be required to complete an additional write-up to demonstrate outcomes. If a revision is required the student will not receive full credit.
4. All units require pre-clinical reading/preparation prior to your visit. All materials can be found in the Clinical Resources Module in Canvas for NSG3010.
5. Report for pre-conference at designated site. Meet in the location determined by your clinical professor. You will then be sent to your float unit.
6. Floating experiences are to enhance your learning. However, you will not have your clinical instructor on the unit. You will be limited in the skills you can perform. Confer with your assigned nurse preceptor to determine your role in patient care. This is a great opportunity to spend time in EPIC and Lippincott Advisor to learn about your patient’s diagnosis, treatment plan, various interventions and diagnostic tests etc.

7. Students will not chart in EPIC during their float rotations but may look at the patient's medical record they have been assigned to.
8. After conferring with the clinical instructor, report to the float unit charge nurse and locate your assigned preceptor for the shift. Return to your base unit at 12:50pm (AM group) or 6:50pm (PM group) to join your clinical group for lunch and post-conference.

Number Due: 2 Float write-ups for the semester **Grading:** 5 points each
Due Date: One week following the FLOAT experience – *see due dates in canvas.*

ASSIGNMENT #4: CASE STUDY PRESENTATION

STUDENT LEARNING OUTCOMES

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 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 patient 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. No laptops required.
5. Evaluate the effectiveness of your presentation via activity or a quiz etc.

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 case study must be different from the patient you use for your developmental paper.
2. This Case study presentation includes 1 concept map that you will present during your assigned presentation time. This concept map is 1 of 3 maps due this semester.
3. Discuss your choice of patient with your clinical instructor. This is to evaluate appropriateness of the patient 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 (if applicable), and growth percentiles.
5. Student attendees should be given 3 key “take-away” points to remember about this case/diagnosis.
6. Presentations should be 15 minutes in length. 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 Professor Garcia or your clinical instructor if you have questions!

Due Date: Presented in clinical during Post-Conference. *A sign-up sheet will be completed in clinical to sign up for a presentation date. If you are sick on your scheduled presentation day, your clinical instructor will work with you to reschedule it. No changes to sign-ups except for absence due to illness or medical/family emergency will be permitted and/or is up to the discretion of your clinical instructor. Please review your other course assignments to ensure you have adequate time to prepare.*

Grading: 15 points

*see grading rubric below

Case Study Presentation - Grading Rubric

Criteria	Initial (0-40%)	Emerging (40-60%)	Developed (60-80%)	Highly Developed (90-100%)	Max Points Possible	Points Given
Assessment Data	(0-0.5pt) Contains 4 or less of the key elements Missing all elements = 0 points	(1) Contains 5-6 of the key elements	(1.5) Contains 7 of the key elements	(2) Contains all of the following 8 KEY ELEMENTS: First Initial of patient ONLY Age (years; months if under 2yrs) Diagnosis History (hx) - current & past medical hx (including prenatal hx); if not present then state that. Prognosis – survival/cure Social, Family & Cultural assessment – who is at bedside w/ patient. Summary of findings of labs and other tests - implications & significance for the patient, normal or abnormal Medications - dosage, action, classification, RN considerations, rationale for use in this patient more (make a table if > 5 meds).	2	
Review of Disease Process	(0-1pt) 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: · Pathophysiology of Main Problem or Disease · Etiology of disease (if known) – must state unknown if there is none. · Incidence of disease/problem · Complications · Medical Treatment	3	
Growth & Development	(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: · Discusses Erikson Stage · Discusses Piaget Stage · Compares found (actual) stage of patient to expected stage · Provides examples of behavior to justify found (actual) stage child is in	3	

Nursing Process	(0-1) 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"> · Creates a concept map to share with peers during presentation that incorporates the nursing process with pathophysiology · Nursing diagnosis/Problems · Measurable, realistic goals? · Interventions · Evaluation – were outcomes met? *see concept map rubric for questions	3	
Community Resources	(0) No resource is presented.	(0) Contains less than 2 of the key elements	(0.5) Contains 2 of the key elements	(1) Contains all of the following 3 KEY ELEMENTS: <ul style="list-style-type: none"> · Identify at <u>least one community resource</u> or agency that would be helpful to the patient/family with appropriate services to help promote the health and wellbeing of the child · Resource is age/diagnosis appropriate · Resource is relevant to this patient 	1	
Quality of Presentation	(0) Contains 3 or fewer key elements (0) *if No KEY take-away points presented and/or not uploaded to canvas and/or no citations present	(1) Contains of the key elements	(2) Contains 7-8 of the key elements	(3) Contains all of the following 9 KEY ELEMENTS: <ul style="list-style-type: none"> · Includes adherence to time limit (15 minutes) (acceptable if 1 min under or over) · Speaks clearly · Presentation organized and flows well · Ability to engage fellow students in learning · Uses min. of 1 teaching aid to facilitate learning · Uses Concept Map in presentation to facilitate learning · <u>*Emphasizes 3 key “take-away” points for future practice</u> · Provides 2 current and quality sources and a typed bibliography (textbook can be 1 source) · Everything is uploaded to canvas 	3	
TOTAL:					15	

Comments: Teaching Aid

3 Take-aways

Reference page

ASSIGNMENT #5: CLINICAL CONCEPT MAPS

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/ diagnosis /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. Demonstrate consistent 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 (upload to Canvas)
 - ***Concept Map***: including these elements (see rubric below)
 - ❖ 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)
 - ❖ Two Patient-Specific Problems (or potential problems) - Nursing Dx:
 - Problem #1 - PSYCHOSOCIAL (e.g. loneliness, family coping)
 - 2 goals or expected outcomes
 - 3 interventions per goal (6 total) – specific goals with a timeframe attached (i.e., by the end of the shift, or over the next 2 hours)
 - Evaluation of outcomes (met/not met – why?)
 - Problem #2 - PHYSIOLOGICAL (e.g. risk for infection, impaired gas exchange, impaired mobility)
 - 2 goals or expected outcomes
 - 3 interventions per goal (6 total) - specific goals with a specific time frame attached
 - Evaluation of outcomes (met/not met – why?)

- ***One (1) 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 turn in these resources you must provide a printed home page or document. No URLs accepted.

DUE DATE: *See Due dates in canvas.*

RESOURCES: See Canvas to obtain required forms (Patient Assessment Form) and helpful guidelines for completing concept maps. Do not use paper smaller than 8.5 x 11 or smaller. Ok to be typed. Must see the connections (use arrows to show the critical thinking) on your map. Be organized! Messy and disorganized maps will be returned.

Grading:

Map #1 - this map is done with your Case Study presentation

Map #2 – 20 points

Map #3 – 20 points

****You must take a picture of your map and upload it to canvas and turn in the hard copy to your clinical instructor for review. You may be asked to revise and resubmit your map if little effort is seen, bullet points are missing, and /or messy work or no connections are displayed on map.***

see rubric below

Concept Map Rubric NSG 3011

Student:	Clinical Experience Date: Date turned in:		
Element	Criteria	Points Possible	Points Earned
Complete Concept Map	Turns in all of the following : <ul style="list-style-type: none"> ● Completed Physical Assessment Form ● Concept Map ● Community Resources (1) <i>*any of these 3 missing = zero for this section</i>	5	
Key Elements Present	<ul style="list-style-type: none"> ● Patient's Age (years & months) ● Initials ● Medical Diagnosis and Pertinent History/Findings ● Pathophysiology of Main Problem (risk factors, symptoms, treatment & complications) ● Patient-Specific Nursing Problems (2 total): <ul style="list-style-type: none"> ○ #1 Physiological ○ #2 Psychosocial ● 2 Goals per problem ● 3 Nursing Interventions per goal (6 total) ● Evaluation of each goals (met/not met; why) 	5	
Nursing Problems & Goals Appropriate to Patient and Shift-focused	<ul style="list-style-type: none"> ● Problems make sense given patient assessment findings (look at elements above) ● Goals are written in SMART format <ul style="list-style-type: none"> ○ Specific ○ Measurable ○ Achievable ○ Realistic ○ Timely ● Nursing Interventions are specific, <u>realistic for shift</u> <i>*if problems, goals, interventions do not make sense for this diagnosis, or goals are not written in SMART format, zero points for this section.</i>	5	
Connections and Logic; Visible on the concept map; Able to bring it all together	<ul style="list-style-type: none"> ● Clear connections are noted between: interventions, meds, nursing actions, key findings, diagnostics, patient assessment findings, problems etc. <i>*if connections are missing or lack effort in making connections, zero points for this section.</i>	5	
TOTAL Points:		20	

COMMENTS:

ASSIGNMENT #6: FIELD TRIP ACTIVITY REFLECTION

Purpose: We have spent the semester learning how to care for hospitalized children of all developmental ages with different illnesses and dysfunctions. It is important to assess the growth and development of non-hospitalized children. Children love to communicate and express themselves through play and laughter. The zoo will provide an educational environment for you to assess children of all ages and compare and contrast their growth and development to the children you cared for in the inpatient hospital setting. This is all about visual assessment. Do NOT approach any child or the adult with them.

Student Learning Outcomes

Upon completion of this activity the student will be able to:

1. Compare and Contrast behaviors of healthy children to hospitalized, ill appearing children.
2. Understand how children at different developmental stages interact with the environment around them.
3. Verbalize Erikson's and Piaget's stages of growth and development.
4. Describe how being in the hospital may hinder growth and development in children.
5. Describe how being at the zoo, a non-hospital/fun-interactive environment can help the growth and development of children.

Instructions & Rubric:

1. Assess children at different stages and how they interact with the various animal exhibits and other activities there are at the zoo (Skyfari, eating cotton candy, feeding the giraffes if applicable) by answering the questions below (2 points):

What ages did you see? How did they interact with different animal exhibits (list what exhibit were you at)?

2. Assess how children interact with other children (list what exhibit you were at) by answering the questions below (2 points):

1. Do they get along with other children?
2. What kind of play is it? What activities are they doing?
3. Are they having fun or are they crying? Why, based on your assessment?

3. Assess how children interacted with their parents/caregivers at the zoo? What age/stage were they? Is this different then what you assessed in the families of hospitalized children? What role does the environment play in children's development? (2 points)

4. Assessment that learning has occurred:

1. Answer the questions above in your paper. You do not need citations for this informal paper but it does need to sound professional and be organized.
2. Include at least 2-3 paragraphs on your overall experience at the zoo and answer: What did you learn about children who are not experiencing illness?

What did you learn about the importance of health and what kids need in order to grow and develop? (3 points)

3. Paper should be 2 pages, no more than 1.5 line-spaced, typed and a thoughtful reflection of your experience at the zoo. It should compare and contrast healthy kids to hospitalized kids you have cared for this past semester. NO NAMES or DIAGNOSES needed. (1 point)

****This is a visual assessment of growth and development of children in a therapeutic environment. No need to approach or interview children or their parents/caregivers.***

This must be done to complete your clinical hours NSG 3011

Due Date: *see canvas*

Grading: 10 points