COURSE SYLLABUS

VNSG 1260.501 (2:0:6)

CLINICAL PRACTICAL NURSING (LPN TRAINING) LEVEL I

Vocational Nursing Program

Health Occupations Department

Technical Education Division

Plainview Campus

SOUTH PLAINS COLLEGE

Fall 2019

PLAINVIEW

COURSE TITLE:

VNSG 1260.501 (2:0:6)

CLINICAL-PRACTICAL NURSING (L.P.N. TRAINING)

INSTRUCTOR:

Nursing Faculty / Clinical Instructors

OFFICE LOCATION

Plainview Center – 104F

PHONE / E-MAIL:

806-296-9611 – extension 4405 / sgriffin@southplainscollege.edu

OFFICE HOURS:

By appointment

SOUTH PLAINS COLLEGE IMPROVES EACH STUDENT'S LIFE

COURSE DESCRIPTION:

A health related, work based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional / instructor. Specific detailed learning objectives are developed for each course by the faculty. On-site clinical instruction, supervision, evaluation, and placement is the responsibility of the college faculty. Clinical experiences are unpaid external learning experiences. Course may be repeated if topics and learning outcomes vary.

STUDENT LEARNING OUTCOMES:

As outlined in the learning plan, the student will apply the theory, concepts, and skills involving specialized materials, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the particular occupation and the business / industry; and demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, communicating in the applicable language of the occupation and the business or industry.

COURSE COMPETENCIES:

Student must complete with a passing grade of 77% or above based on the course objectives and in order to move to Level II of clinical competencies.

ACADEMIC INTEGRITY:

Refer to the Plainview Vocational Nursing Student Handbook and the SPC Catalog. In addition, all students are expected to maintain professional conduct and standards, and comply with all clinical guidelines as outlined in the Student Handbook.

SCANS & FOUNDATION SKILLS:

See Clinical Objectives

VERIFICATION OF WORKPLACE COMPETENCIES:

NCLEX-PN Licensure Exam eligibility following successful completion of the one-year vocational nursing program.

TEXTBOOKS:

All current vocational nursing program textbooks. Outside resources may be utilized, yet must be appropriate to the nursing profession and current (within 5 years).

ATTENDANCE POLICY: (Student Handbook)

Level I Clinical – 1 absence Student will be dismissed from the course if a second absence occurs.

**The student is responsible for notifying the Assigned Nursing Unit / Clinical Instructor if unable to be at the assigned clinical site. The unit should be called at least 30 minutes prior to the time scheduled for duty. When student does not call in before 6:30 AM, assignments will be relinquished and the student will be counted absent.

Tardies in the clinical area will not be tolerated. A student is considered tardy if he/she does not report for duty at the scheduled time for that clinical area. A student who accumulates (2) tardies in the clinical component will be counseled by the Program Coordinator. Three (3) tardies in the clinical aspect of the program will be grounds for disciplinary action. **If a student is absent any portion of a clinical shift, this will be considered as one absence. If a student must leave the clinical site for any reason, he/she should report to the instructor assigned to the affiliate, and to the person in charge so that patient responsibilities or duties may be reassigned.

COURSE REQUIREMENTS:

Student must successfully meet all clinical competencies for Level I by the completion of this course with a grade of 77% or above.

Student is to review the Policies and Procedures along with the Confidentiality Agreement for the Center for Clinical Excellence – Reese Center at the following link: www.SIMSPC.org

Confidentiality Agreements should be printed and signed and presented to the nursing office no later than October 1st.

Confidentiality Agreements from each clinical affiliate site will be presented to the student during clinical orientation and the student will provide their signature indicating that they have read and understand the policy set forth by the institution/s. This documentation will also become part of the student file.

GRADING:

A 93 – 100 B 84 – 92 C 77* - 83 *Passing D 70 – 76 F 69 or below

SOUTH PLAINS COLLEGE – PLAINVIEW LEVEL I – CLINICAL OBJECTIVES VNSG 1260

<u>LEVEL I – CLINICAL PRACTICUM</u>: The student should demonstrate satisfactory progress in the following levels of performance toward competency of skills sufficient for entry into Level II of clinical application. (C-1, 2, 3, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20 / F-1, 2, 3, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17)

Clinical practice standards for student performance are based on the SPC Graduate Outcomes. For each graduate outcome, a level of achievement is indicated in the table below. Students are expected to complete the semester at the level indicated, showing progress and increasing competency throughout the semester. Student performance standards are defined as follows (adapted from Krichbaum et al, 1994):

- (1) Provisional: performs safely under supervision; requires continuous supportive and directive cues; performance often uncoordinated and slow; focus is entirely on task or own behavior; beginning to identify principles but application of principles are sometimes lacking.
- (2) Assisted: performs safely and accurately each time observed but requires frequent supportive and occasional directive cues; time management skills still developing; skill accuracy still developing; focus is primarily on task or own behavior with more attention to patient; identifies principles but still may need direction in application of principles.
- (3) Supervised: performs safely and accurately each time behavior is observed; requires occasional supportive and directive cues; spends reasonable time on task and appears generally relaxed and confident; applies theoretical knowledge accurately with occasional cues; focuses on patients initially but as complexity increases, still may focus more on task.
- (4) Independent: performs safely and accurately each time behavior is observed and without need of supportive cues; demonstrates dexterity in skills; spends minimum time on task; applies theoretical knowledge accurately; focuses on patient while giving care.

GRADUATE OUTCOMES	LEVEL I	LEVEL 2	LEVEL 3
Member of the Profession	1	2-3	4
Provider of Patient-Centered Care	2	3	1
Patient Safety Advocate	2	3	4
Member of the Health Care Team	1	2-3	4

The student is evaluated on a weekly basis at the level indicated. In order to exit the clinical course, the student must have a 77 average or above and must be at the Level indicated on the Summative Clinical Evaluation Tool.

Upon satisfactory completion of the course, the student will be progressing toward meeting the SPC Graduate Outcomes and the Texas BON *Differentiated Essential Competencies (DECs)*. The DECs are listed by numbers and letters on the clinical evaluation tool:

- I. Member of the Profession
- II. Provider of Patient-Centered Care
- III. Patient Safety Advocate
- IV. Member of the Health Care Team

Krichbaum, K., Rowan, M., Duckett, L., Ryden, M. & Savik, K. (1994). The Clinical evaluation tool: a measure of the quality of clinical performance of baccalaureate nursing students. *Journal of Nursing Education*, 33 (9), 395-404

Graduate Outcome: Member of the Profession: exhibits behaviors that reflect commitment to the growth and development of the role and function of nursing consistent with state and national regulations and with ethical and professional standards; aspires to improve the discipline of nursing and its contributions to society, and values self-assessment and the need for lifelong learning. ELA: 1

- A. Functions within the student vocational nurse's legal scope of practice and in accordance with the policies and procedures of South Plains College and the clinical agencies.
 - 1. Functions within a directed scope of practice of the student vocational nurse with appropriate supervision.
 - 2. Assists in determination of predictable health care needs of a patient to provide individualized, goal-directed nursing care.
 - a. Practices according to facility policies and procedures.b. Questions orders, policies, and procedures that may not be in the patient's best interest.
- B. Assumes responsibility and accountability for the quality of nursing care provided to patients and their families.
 - 2. a. Provides nursing care within the parameters of student vocational nursing knowledge, scope of practice, education, experience, and ethical/legal standards of care at this level
 - 3. a. Practices nursing in a caring, nonjudgmental, nondiscriminatory manner.
 - b. Provides culturally sensitive health care to patients and their families.
 - c. Provides holistic care that addresses the needs of diverse individuals across the lifespan.
 - 4. Uses performance and self-evaluation processes to improve individual nursing practice and professional growth.
 - 5. a. Assumes accountability for individual nursing practice.
 - 6. a. Follows established policies and procedures.
 - b. Questions orders, policies, and procedures that may not be in the patient's best interest.
 - c. Uses nursing judgment to anticipate and prevent patient harm.
 - 7. Uses communication techniques to maintain professional boundaries in the nurse/patient relationship.
 - 8. Complies with professional appearance (dress code) requirements according to SPC & organizational standards and policies.
- C. Contributes to activities that promote the development and practice of vocational nursing.
 - 1. Identifies historical evolution of nursing practice and issues affecting the development and practice of vocational nursing.
 - 2. Works collegially with members of the interdisciplinary health care team.
 - Practices within the student vocational nursing role and Vocational Nursing Scope of Practice.
 a. demonstrates promptness when reporting to clinical agencies for clinical rotations.
 b. adheres to school of nursing and agency attendance guidelines.
- D. Demonstrates responsibility for continued competence in nursing practice, and develops insight through reflection, self-analysis, self-care, and lifelong learning.
 - 3. Uses self-evaluation, reflection, instructor evaluation and feedback to modify and improve practice.
 - 4. Demonstrates accountability to reassess and establishes new competency when changing practice areas.
 - 5. Demonstrates commitment to the value of lifelong learning.

Graduate Outcome: Provider of Patient-Centered Care: accepts responsibility for the quality of nursing care and provides safe, compassionate nursing care using a systematic process of assessment, analysis, planning, intervention, and evaluation that focuses on the needs and preferences of patients and their families. Incorporates professional values and ethical principles into nursing practice and provides care to individual patients and their families. ELA: 2

- A. Uses clinical reasoning and established evidence-based policies as the basis for decision making in nursing practice.
 - 1. Uses problem-solving approach to make decisions regarding care of assigned patient.
 - 2. a. Organizes care for assigned patient based upon problem-solving and identified priorities.
 - b. Proactively manages priorities in patient care and follows-up on clinical problems that warrant investigation with consideration of anticipated risks.
 - 3. Identifies and communicates patient physical and mental health care problems encountered in practice.
- B. Assists in determining the physical and mental health status, needs, and preferences of culturally, ethnically, and socially diverse patients and their families based on interpretation of health-related data.
 - 1. Uses structured assessment tool to obtain patient history.
 - 2. Performs focused assessment to assist in identifying health status and monitoring change in patient.
 - 3. Reports and documents focused patient assessment data.
 - 4. Identifies predictable and multiple health needs of patient and recognizes signs of decompensation.
 - 5. Shares observations that assist members of the health care team in meeting patient needs.
 - 7. Differentiates abnormal from normal health data of patient.
 - 8. Recognizes healthcare outcomes and reports patient status.
 - 9. Recognizes that economic and family processes affect the health of the patient.
- C. Reports data to assist in the identification of problems and formulation of goals/outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.
 - 1. Integrates concepts from basic sciences and humanities to deliver safe and compassionate care in delivery of patient care.
 - 2. Identifies short-term goals and outcomes, selects interventions considering cultural aspects, and establishes priorities for care in collaboration with patients, their families, and the interdisciplinary team.
 - 3. Participates in the development and modification of the nursing plan of care across the lifespan, including end-of-life care.
 - 4. Contributes to the plan of care by collaborating with interdisciplinary team members.
 - 6. Demonstrates fiscal accountability in providing patient care.
 - 7. Demonstrates basic knowledge of disease prevention and health promotion in delivery of care to patients and their families.
- D. Provides safe, compassionate, basic nursing care to assigned patients with predictable health care needs through a supervised, directed scope of practice.
 - Assumes accountability and responsibility for nursing care through a directed scope of
 practice under the supervision of the instructor or licensed nurse using standards of care and
 professional values.
 - 2. a. Identifies priorities and makes judgments concerning basic needs of one patient with predictable health care needs in order to organize care.

- c. Recognizes changes in patient status.
- d. Communicates changes in patient status to other providers.
- 3. a. Implements plans of care for one patient
- E. Implements aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.
 - 1. Implements individualized plan of care to assist patient to meet basic physical and psychosocial needs.
 - 2. Implements nursing interventions to promote health, rehabilitation, and implements nursing care for clients with chronic physical and mental health problems and disabilities.
 - 4. Communicates accurately and completely responses of patients to treatments and procedures to other health care professionals clearly and in a timely manner.
 - 5. Fosters coping mechanisms of patients and their families during alterations in health status and end of life.
 - 6. b. Seeks clarification as needed.
 - 7. a. Informs patient of Patient Bill of Rights.
 - 8. Communicates ethical and legal concerns through established channels of communication.
 - 9. Uses basic therapeutic communication skills when interacting with patients, their families, and other professionals.
 - 11. Facilitates maintenance of patient confidentiality.
 - 12. a. Demonstrates accountability by providing nursing interventions safely and effectively using a directed scope of practice.
 - b. Provides nursing interventions safely and effectively using established evidence-based practice guidelines.
 - 13. Provides direct patient care in disease prevention and health promotion and/or restoration.
- F. Identifies and reports alterations in patient responses to therapeutic interventions in comparison to expected outcomes.
 - 1. Reports changes in assessment data.
 - 2. Uses standard references to compare expected and achieved outcomes of nursing care.
 - 5. Reports and documents patient's responses to nursing interventions.
- G. Implements teaching plans for patients and their families with common health problems and well-defined health learning needs.
 - 1. Identifies health-related learning needs of patients and their families.
- H. Assists in the coordination of human, information, and materiel resources in providing care for assigned patients and their families.
 - 2. Reports unsafe patient care environment and equipment.
 - 3. Implements established cost containment measures in direct patient care.
 - 6. Assists with maintenance of standards of care.

Graduate Outcome: Patient Safety Advocate: promotes safety in the patient and family environment by: following scope and standards of nursing practice; practicing within the parameters of individual knowledge, skills, and abilities; identifying and reporting actual and potential unsafe practices; and implementing measures to prevent harm. ELA: 2

- A. Demonstrates knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state, and local government and accreditation organization safety requirements and standards.
 - 2. Practices according to Texas Nursing Practice Act and Texas Board of Nursing rules and SPC policies.
 - 3. Seeks assistance if practice requires behaviors or judgments outside of individual knowledge and expertise.
 - 4. Uses standards of nursing practice to provide and evaluate patient care.
 - 5. Recognizes and reports unsafe practices and contributes to quality improvement processes.
- B. Implements measures to promote quality and a safe environment for patients, self, and others.
 - 1. Promotes a safe, effective care environment conducive to the optimal health and dignity of the patients and their families.
 - 2. Accurately identifies patients.
 - 3. a. Safely performs preventive and therapeutic procedures and nursing measures including safe patient handling.
 - 4. Clarifies any order or treatment regimen believed to be inaccurate, non-efficacious, contraindicated, or otherwise harmful to the patient.
 - Documents and reports reactions and untoward effects to medications, treatments, and procedures and clearly and accurately communicates the same to other health care professionals.
 - 6. Reports environmental and systems incidents and issues that affect safety.
 - 8. Implements measures to prevent risk of patient harm resulting from errors and preventable occurrences.
- C. Assists in the formulation of goals and outcomes to reduce patient risks.
 - 2. a. Implements measures to prevent exposure to infectious pathogens and communicable conditions.
 - b. Anticipates risk for the patient.
 - 3. Implements established policies related to disease prevention and control.
- D. Obtains instruction, supervision, or training as needed when implementing nursing procedures or practices.
 - 1. Evaluates individual scope of practice and competency related to assigned task.
 - 2. Seeks orientation/training for competency when encountering unfamiliar patient care situations.
- E. Complies with mandatory reporting requirements of the Texas Nursing Practice Act.
 - 1. Reports unsafe practices of healthcare providers using appropriate channels of communication.
 - 3. Reports safety incidents and issues through the appropriate channels.

- * F. Accepts and makes assignments that take into consideration patient safety and organizational policy.
 - 1. Accepts only those assignments that fall within individual scope of practice based on experience and educational preparation.

Graduate Outcome: Member of the Health Care Team: provides patient-centered care by collaborating, coordinating, and/or facilitating comprehensive care with an interdisciplinary/multidisciplinary health care team to determine and implement best practices for the patients and their families. ELA: 1

- A. Communicates and collaborates with patients, their families, and the interdisciplinary health care team to assist in the planning, delivery and coordination of patient-centered care to assigned patients.
 - Cooperates and communicates to assist in planning and delivering interdisciplinary health care.
- B. Participates as an advocate in activities that focus on improving the health care of patients and their families.
 - 1. Respects the privacy and dignity of the patient.
 - 2. Identifies unmet health needs of patients.
 - 3. Acts as an advocate for patient's basic needs, including following established procedures for reporting and solving institutional care problems and chain of command.
- C. Participates in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.
 - 1. a. Identifies support systems of patients and their families.
 - 2. a. Communicates patient needs to the family and members of the health care team.
 - b. Maintains confidentiality according to HIPAA guidelines.
- D. Communicates and collaborates in a timely manner with members of the interdisciplinary health care team to promote and maintain optimal health status of patients and their families.
 - 1. a. Communicates changes in patient status and/or negative outcomes in patient responses to care with members of the interdisciplinary health care team.
 - b. Follows legal guidelines in communicating changes in patient status, including chain of command and Texas Nursing Practice Act.
 - 3. Contributes to positive professional working relationships.
 - a. Turns in required clinical documentation on appropriate due dates.
 - 5. Recognizes and manages conflict through the chain of command.
 - 6. a. Identifies and reports need for nursing or interdisciplinary team meetings.
- E. Communicates patient data using technology to support decision making to improve patient care.
 - 1. a. Identifies, collects, processes, and manages data in the delivery of patient care and in support of nursing practice and education.
 - 2. a. Applies knowledge of facility regulations when accessing client records.

REVIEWED / REVISED:	AUG 1999 AUG 2000	AUG 2005 AUG 2006	AUG 2011	AUG 2017
	AUG 2000	AUG 2006 AUG 2007	SEPT 2012	AUG 2018
	AUG 2001	AUG 2007 AUG 2008	AUG 2013 AUG 2014	AUG 2019
	MAY 2003	AUG 2009	AUG 2014 AUG 2015	
	AUG 2004	AUG 2010	AUG 2016	

NURSING CAREPLAN – VNSG 1260.501 FALL SEMESTER

Student:		Date of Clinical Week:
Instructor:		
	Admit Date	
	Physician	
	Allergies	
Medical Diagnosis: Primary Diagno	sis: (Information written f	rom chart as "admission diagnosis")
Secondary Diagr	nosis: (Any long standing l	nealth problems)
		rgery done on this admission)
SUBJECTIVE DATA:	DATA C	OLLECTION
CHIEF COMPLAINT and since admission)	: (Signs and symptoms exp	erienced by client prior to seeking medical attention,
PAST MEDICAL HIS other major health probl	TORY: (Past illnesses – in ems – Medication Reconcil	cluding past injuries, hospitalizations, surgeries and liation [medications taken upon admission])
FAMILY HISTORY: and/or psychological)	(Include any significant hea	alth problems among blood relatives, both physiological
PSYCHOSOCIAL / C	ULTURAL / SPIRITUAL	<u>.:</u>
Occupation - (if	retired, previous work)	
Support systems	- (family, friends, church)	
Ethnic / cultural	influence	
Religious prefere	ence	
Behavior / affect		
Communications		
	,	
Coping ability		

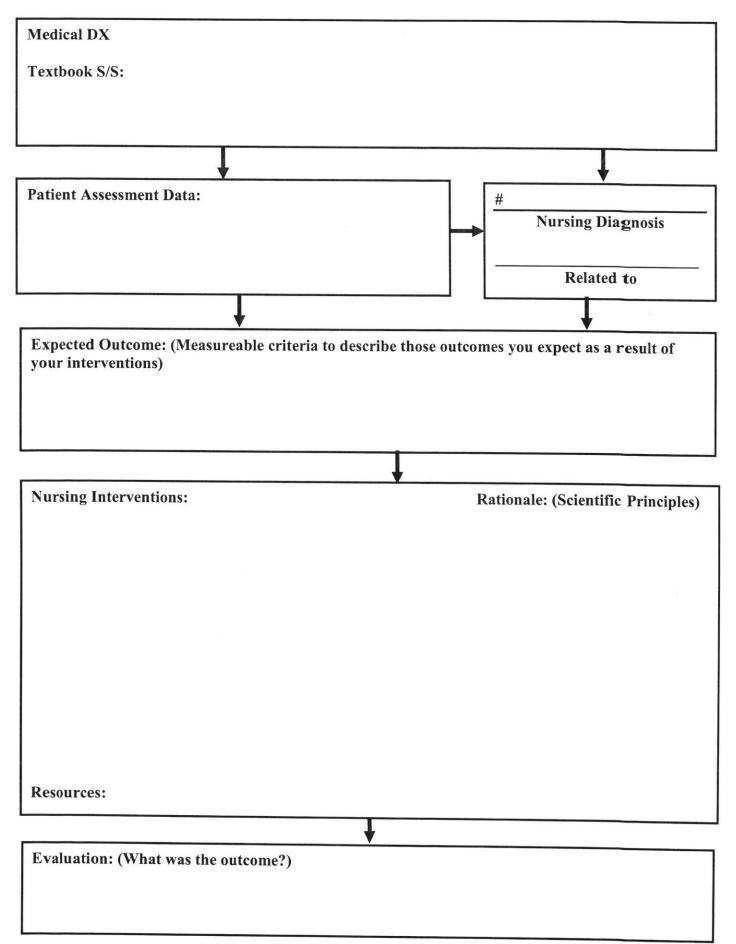
OBJECTIVE DATA: (Physical Assessment)

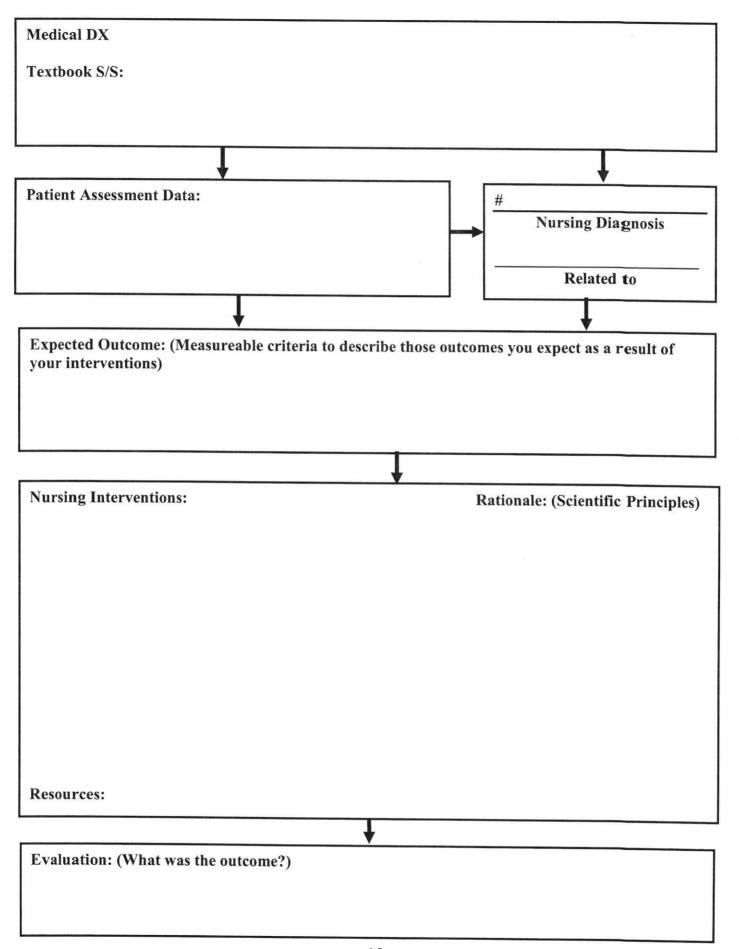
Vital Signs:	Admission Day 1 (AM set) (PM set) Day 2 (AM set) (PM set)	$_{\mathrm{T}}^{\mathrm{T}}$, P, P, P, P, P, P, P, P, P, P	, R , R , R	, O2 Sats, O2 Sats, O2 Sats, O2 Sats, O2 Sats, O2 Sats,	, BP, BP, BP, BP, BP, BP	, Pain Assessment
Admission:	Height: ft	_in_	(_ cm) /	Weight:	lb (kg)
IV Therapy:	Solution		Site_	и	Rat	te	
Site Assessment (IV or Saline Lock):							
Diet: Activity:							
Oxygen Therapy	: Liter flow_		1	Method			
<u>PT:</u>				OT:			

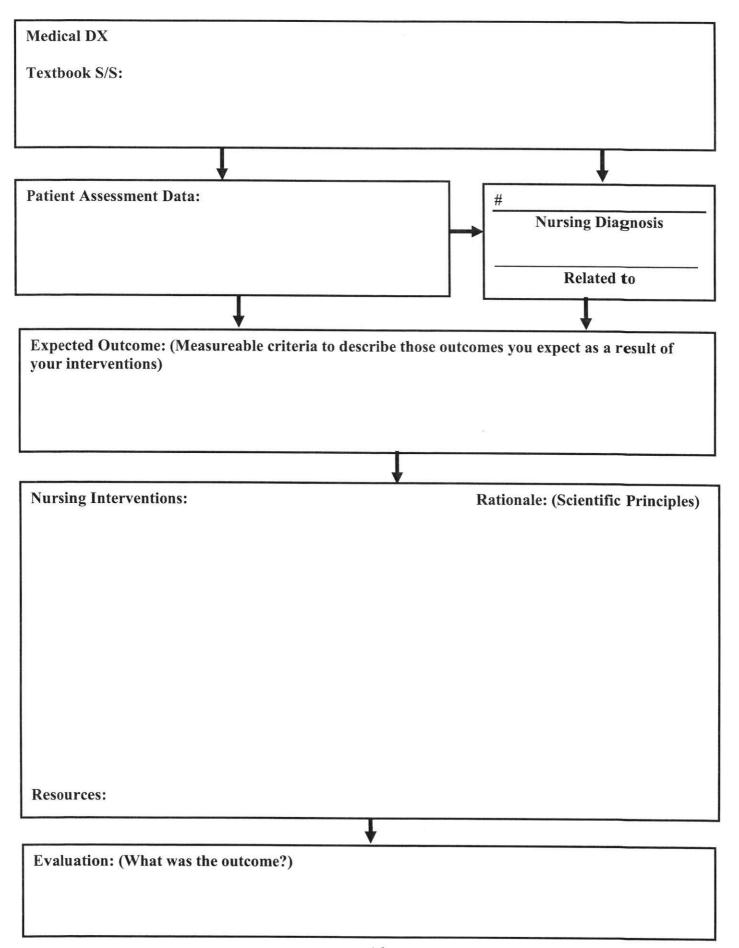
SYSTEM TO SYSTEM ASSESSMENT (Data collection you will use to document your initial assessment in the patient's clinical record. This is a systematic method to assist you in learning physical assessment.) DAY 1 **NEUROLOGICAL**: DAY 2 LOC-Orientation -Speech -Movement of extremities -Hearing -Eyes (PERRLA) -Any numbness or paralysis -Hand grip -**RESPIRATORY:** Airway -Skin color -Rate, effort, depth -Use of accessory muscles -Any SOB with activity -Breath sounds -O2 sat -Oxygen therapy-**CARDIOVASCULAR:** Heart rate, rhythm, quality -Peripheral pulse / bilateral -Apical pulse Capillary refill -Neck vein distention -Chest pain or radiating pain -Skin temp / color **GASTROINTESTINAL:** Abdomen contour (round, flat, distended, soft) -Tenderness (location) -Bowel sounds -Bowel habits (last BM) - (Describe BM if occurs on your shift) -Condition of mouth / dentition -Food / fluid intake -Diet tolerance (% of each meal) -Any Nausea /Vomiting? **URINARY:** Continent or Incontinent -Color, consistency, amount of urine output -Toileting (BRP or ad lib) Assistance required -Bedpan or urinal -Foley catheter - Size___ ____/ color / amount of output -Bedside commode-MUSCULOSKELETAL: Muscle strength / weakness -Posture / gait (any stooping or shuffling) -Joints (any swelling, stiffness, pain) -Assistive devices (walker, cane, crutches, prosthesis) -**REPRODUCTIVE:** Genitalia (Normal M/Fe) -Any noted -Swelling -Lesions -Masses -Abnormal Discharge -Absence of -**INTEGUMENTARY:** Skin turgor (use forehead or upper chest in elderly) -Lesions -

Bruising / rashes / scars -texture -

Nails / hair -







Examples of Scientific Support for Nursing Interventions (Rationales)

Nursing Diagnosis: Activity Intolerance (related to weakness)

Intervention: Monitor V/S during and after activity. Note any increase in heart rate, BP, respirations, dizziness, dyspnea, and tachypnea.

Rationale: Cardiopulmonary changes may result from attempts by heart and lungs to supply adequate amounts of oxygen to the tissue during activity. Changes may indicate oxygen available is being used by primary organs is insufficient to meet cellular demand for increased energy productivity.

Intervention: Assist patient to prioritize ADL's and desired activities. Alternate rest periods with activity periods.

Rationale: Preserves and maintains energy level while alleviating strain on the cardiac and respiratory system. Rest periods provide time for oxygen to reach the cellular level to meet body demands for energy production.

Intervention: Provide quiet, non-stimulating environment.

Rationale: Rest is needed to lower body's oxygen requirements – reduces strain on heart and lung.

Intervention: Elevate head of bed as tolerated.

Rationale: Enhances lung expansion to maximize oxygenation for cellular use.

** Site all resources** on a separate sheet in alphabetical order and include as last sheet of clinical paperwork using the following guidelines:

For textbooks

Author, (Copyright date), <u>Title of Text</u>, Edition, Publisher, City and State of Publisher.

For website addresses (appropriate time frame for nursing resource -5 years)

Website address, retrieval date

** All clinical paperwork pages should be numbered, in correct numerical order, and submitted in an enclosed folder with student name clearly visible.