

The University of Texas at Tyler
College of Nursing

NURS 3613: Mental Health
Spring 2008

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Thurs. 4-5 by appt.

The content of this syllabus/WEB site is subject to change at the discretion of the faculty leaders according to current learning needs.

Approved by FO: 10/02

Class Schedule
Classes are Thursday 1:00PM-3:50PM

- 1/17 **Lecturer: Mrs. Holt-Waldo**
Introduction to Mental Health Nursing and Mental Illness
Areas of Intervention
Psychiatric Nursing Assessment
Evidence-Based Practice
- 1/24 **Lecturer: Mrs. Holt-Waldo**
Legal/Ethical Guidelines
Therapeutic Communication and Interventions
Biological Basis for Understanding Psychotropic Medications
Nurse-Patient Relationship
Therapeutic Use of Self
- 1/31 **Lecturer: Mrs. Hermanns**
Schizophrenia
- 2/7 **EXAM I**
- 2/14 **Lecturer: Ms. Holt-Waldo**
Personality Disorders
Eating Disorders
- 2/21 **Lecturer: Mrs. Hermanns**
Mood Disorders (Bipolar and Depression)
Suicide
- 2/28 **Lecturer: Mrs. Hermanns**
Substance Abuse
Somatoform and Dissociative Disorder
- 3/6 **Lecturer: Ms. Holt-Waldo**
Understanding Stress/Holistic Approaches to Stress
Alternative and Complimentary Therapies
- 3/10-3/15 Spring Break**
- 3/20 **EXAM II**
- 3/21 Last Day to Drop Class with a “W” or withdraw from the course**
- 3/27 **Lecturer: Ms. Holt-Waldo**
Anxiety Defense Mechanisms
Anxiety Disorders

- 4/3 **Lecturer: Mrs. Holt-Waldo**
Family Systems
Child/Adolescent
- 4/7-4/18 **ERI Exam: Mental Health (take anytime from 4/7/08 MN to 4/18/08 MN)**
MUST BE COMPLETD BY 4/18/08 MIDNIGHT
- 4/10 **EXAM III**
- 4/17 **Lecturer: Mrs. Holt-Waldo**
Anger and Aggression
Family Violence
Sexual Assault
Forensic Nursing
Vulnerable Populations
- 4/24 **Lecturer: Ms. Hermmans**
Severely Persistently Mentally Ill
Sociocultural Aspects of Psychiatric Mental Health Nursing
Psychosocial Needs of the Medically Ill
Care of the Dying Patient/Grief
- 5/1 **FINAL EXAM - 1:00-3:00pm**

ERI Policy:

****Please Note: ALL students** must register for ERI. If you registered last semester, you do not have to re-register. **Instructions:** Log onto website and following the directions below:

www.eriworld.com, Select Student Services, Select Registration, then enter school code: YTX008

****Please Note: ALL students** (generic, LVN, students who are repeating the course and current 3613) **MUST take the ERI Exam during the weeks listed above** (Pathophysiology, Pharmacology, and Mental Health). Please make note of the dates and times and mark your calendars. This is the only week that the exam will be available for you to complete. You will be locked out at all other times. The Mental Health Exam is computer generated and is 1 hour and 40 minutes in length. **You must take the exam until you pass it.** Once you have made a passing score, you must **THE PASSING SCORE SHEET FOR THE ERI MENTAL HEALTH EXAM WILL BE CHECKED BY FACULTY. THIS IS REQUIRED IN ORDER TO TAKE THE NURS 3613 FINAL EXAM.** If you do not have a passing score, you will not be able to take the final exam and **WILL RECEIVE “ 0” ON THE FINAL THUS FAILING THE COURSE.** Thank you for your cooperation in this very important matter.

Approved by Faculty Organization May 2005

Content of Syllabus

TITLE:

NURS 3613 - Mental Health

SEMESTER CREDIT HOURS:

Six (6) Credit Hours-Didactic/Clinical (3:3)

PREREQUISITES:

Courses in Level I.

COURSE DESCRIPTION:

Theories and concepts related to human behavior and the promotion, maintenance, and restoration of mental health in diverse populations across the life span are presented within the framework of critical thinking and caring. Emphasis is on communication skills, self-awareness, and therapeutic use of self while exploring issues in mental health nursing. Students provide holistic nursing care to patients with alterations in mental health in selected structured and unstructured settings.

COURSE OBJECTIVES:

Upon successful completion of the course the student will:

1. Utilize critical thinking to provide holistic care to patients experiencing problems in mental health.
2. Integrate research findings and knowledge from nursing and other scientific and humanistic disciplines as it relates to mental health issues.
3. Demonstrate coordination of care through collaboration with members of the interdisciplinary health care team in order to provide appropriate interventions/resources to patients.
4. Explore psychiatric nursing roles in a variety of selected structured and unstructured settings.
5. Assume responsibility and accountability for all professional interactions to reflect interpersonal caring and therapeutic use of self required for the delivery of safe, competent nursing care to patients experiencing mental health problems.
6. Demonstrate professional values which employ ethical, legal, and moral standards in interactions with patients, peers, faculty, and other health care providers in caring for patients experiencing mental health problems.

APPROVED: University of Texas System-Fall 1999 Faculty Organization-Fall 1999

Required and recommended Texts

College of Nursing. (2007). *BSN/MSN guide for nursing students*. Tyler: The University of Texas at Tyler.

Spring 2008 Syllabus for NURS 3613 will be purchased in the bookstore.

McDonald, S.F. (2006). Virtual clinical excursions for Varcarolis, Carson, and Shoemaker: *Foundations of psychiatric mental health nursing* (5th Ed.). Tuscan, Arizona: Wolfson Informatics. <http://evolve.elsevier.com/Vce/> (Workbook)

Varcarolis, E.M. (2006). *Foundations of psychiatric mental health nursing: A clinical approach*. (5th Ed.) Philadelphia: W.B. Saunders Co.

Varcarolis, E.M. (2004). *Manual of psychiatric nursing care plans: Diagnoses, clinical tools, and psychopharmacology* (2nd Ed.). Philadelphia: W. B. Saunders Co.

Recommended

American Nurses Association Foundation of Nursing Packet includes. (*Purchased in Level I Nursing's social policy statement* (2nd Ed.). (2003). Washington, D.C.: American Nurses Association. *Nursing: Scope and standards of practice*. (2004). Silver Spring, MD:

American Nurses Association. *Code of ethics for nurses with interpretive statement*. (2001). Silver Spring, MD: American Nurses Association.

American Psychological Association. (2001). *Publication manual of the American Psychological Association* (5th Ed.). Washington, DC: Author.

***Available in Nursing Lab at all campuses: NCLEX (practice) computer programs and Psychiatric Nursing Made Incredibly Easy CD-ROM**

Required Scantrons to be used for examinations: Look for the correct form which includes F-17255-PAR-L (there are 2 of the same color so make sure to look at the form)

Disability Statement

"If you have a disability, including a learning disability, for which you request disability support services/accommodation(s), please contact Ida MacDonald in the Disability Support Services office so that the appropriate arrangements may be made. In accordance with federal law, a student requesting disability support services/accommodation(s) must provide appropriate documentation of his/her disability to the Disability Support Services counselor. For more information, call or visit the Student Services Center located in the University Center, Room 282. The telephone number is 566-7079 (TDD 565-5579)." Additional information may also be obtained at the following UT Tyler Web address:
<http://www.uttyler.edu/disabilityservices>.

VI. Examinations/Assignments and Grading Policy

For didactic courses only: Completion of NURS 3613 is based on satisfactory attainment of all course criteria. Any student failing to meet the course objectives and expectations must repeat the course and may not progress to the next level.

For clinical courses: Completion of NURS 3613 is based on satisfactory attainment of didactic and clinical criteria. Any student who fails to meet the course objectives and expectations in either the classroom or clinical area must repeat the entire courses and may not progress to the next level.

The following policy must appear in all course syllabi as written (unless exams are not given):

A. Grading Policy

The simple average of the exam grades, before weighted calculation is performed, must be 75% or above to pass the course. Grades will not be rounded when calculating the average (74.5 -74.9 is not rounded to 75). Students with an exam average of 75 or higher will have course grades calculated based on the weighted calculation of the exams and other required course work.

1. List the number of quizzes, exams and/or papers
2. Identify how the percentage is allocated for each (if clinical course, indicate pass/fail).
3. Letter grade assigned according to the following scale:

A	90-100
B	80-89
C	75-79
D	60-74
F	60 and below

B. Grade Replacement Policy

If you are repeating this course for a grade replacement, you must file an intent to receive grade forgiveness with the registrar by the 12th day of class. Failure to file an intent to use grade forgiveness will result in both the original and repeated grade being used to calculate your overall grade point average. A student will receive grade forgiveness (grade replacement) for only three (undergraduate student) repeats during his/her career at UT Tyler. (2006-08 Catalog)

C. Paper/Assignment Re-grading Policy

Student assignments will not be re-graded. At the instructor's discretion, a draft may be written for review.

D. Examination and Examination Review Policy

1. Attendance for exams are mandatory
2. If absence for an exam is necessary, the student is responsible for notifying the faculty prior to the exam with an acceptable reason.
3. Students will be allowed entry to the classroom after an exam has been started ONLY with faculty discretion.
4. Exams will be distributed at the time class is scheduled to begin.
5. All hats/caps must be removed during exam time. All personal items such as purses, books, backpacks, notebooks, and briefcases must be left in the front of the room during testing.
6. Silence will be enforced during the exam time. In order to avoid distraction during the exam, no one will be permitted to leave the room during the exam.
7. Make-up exams will only be given at the discretion of the faculty member and may be in a different format than the original exam.
8. Students will not share calculators during exams. Students will not bring their own calculators, cell phones, or any communicating devices into an examination
9. Exam reviews will be conducted at the discretion of the faculty. Test review may be scheduled with the faculty during office hours and within 10 school days from the return of the exam grades.
10. Any student achieving an examination grade less than 75% must schedule an appointment with the faculty within 10 school days from the return of the exam grades.

E. Academic Integrity

1. Students are expected to assume full responsibility for the content and integrity of all academic work submitted as homework and examinations.
2. Students are advised to review the UT Tyler Academic Dishonesty Policy and Academic Integrity Policy in the Current College of Nursing Student Handbook and Academic Integrity Policy for UT Tyler students at www.uttyler.edu; click on current students, then Vice-President for Student Affairs, then Student Guide for Conduct and Discipline at UT Tyler. These policies are fully endorsed and enforced by all faculty members within the College of Nursing.

3. Plagiarism, cheating, and collusion are unacceptable and if found violating any of these standards the student will be disciplined accordingly (See BSN/MSN Nursing Student Guide for definitions).
4. The College of Nursing reserves the right to dismiss students from the program for any infraction of a legal, moral, social, or safety nature, pursuant to the procedures detailed in the *Regent's Rules*.

VII. Student Dress Code for the University of Texas, College of Nursing:

A. General

It is the philosophy of the College of Nursing that the student has a responsibility to be neatly groomed and modestly dressed. Appearances should promote good health, safety and general well-being of the student. Clothing should avoid brevity and/or design that are offensive to the dignity and rights of others. School officials have the right and responsibility to counsel with the student or take any other corrective action. Types of clothing (other than those specified in this document) may be worn at the direction of the nursing instructor for special events.

B. Classroom

Casual or every day business wear is recommended. This includes but is not limited to the following: Slacks or skirt; sweater, blouse, and shirt. Jeans as well as conservative shorts (mid-thigh or longer) may be worn, but avoid overly frayed or soiled. Shoes must be worn. See items to be avoided below.

C. Professional Presentations, Ceremonies/ Graduation

Business or dressy day social: suit, dress, dressy separates, jacket, ties, nice fabrics. Dress shoes. Avoid denim, jeans, t-shirt or other casual clothes. For workshops/seminars attended by students, business attire will be worn.

D. Items to be Avoided in all School-related Functions (including but not limited to)

Overly frayed, worn or soiled garments. Costume look, transparent blouses, bare midriff shirts, tank tops, spaghetti straps, muscle shirts, overtly sexual, gang colors or logos, facial or body piercing, obscene slogans or pictures, bedroom wear, short-shorts, short skirts, or clothing that may be offensive to others.

E. Laboratory

The school clinical laboratory setting is designed to simulate the health care clinical area. Students will wear clean white lab coats with name tag and UT Tyler school patch on the front left uniform jacket. Classroom attire will be worn under the lab coat.

F. Pre or Post-clinical Experiences in the Health Care Setting

Students may be required to attend conferences or visit the clinical areas as part of their course requirements. Students should wear lab coat with name tag and UTT school patch. The following items will be avoided in the clinical areas: jeans, shorts, sandals, jogging/athletic suits, t-shirts, ball-caps, etc.

G. Clinical Experience

1. When attending any clinical experience students are required to wear the standardized student uniform and white uniform jacket with name badge and school patch. Street clothes will be worn in appropriate clinical settings as directed by the clinical faculty with the white uniform jacket, nametag and school patch (see items above to be avoided in clinical areas). Students are to remember that whenever they are visiting a clinical agency or any clinical site, they represent UT Tyler and the College of Nursing and are expected to be professional in appearance and behavior at all times.
2. When student uniforms are required for clinical experiences, as specified by the course, the following guidelines must be adhered to:
 - a) School patch on the front left of the uniform jacket and the top of the standardized uniform.
 - b) The UTT name badge will be worn in all clinical setting. Name tag must be worn above the waist, so name and title are clearly visible.
 - c) White or neutral nylon hose are worn with dress/skirt; nylon hose, knee-highs or white socks with pants. Socks must cover ankle.
 - d) Clean, white clinical shoes or white leather athletic shoes should be worn (shoes may be mostly white and if stripes or logos are on shoes, these must be minimal and light colored). No canvas shoes or athletic shoes with colored stripes or large logos.
 - e) Jewelry: wedding or engagement rings only; single stud earrings and only 1 in each lobe (no dangling or hoops); no rings or studs in the nose, tongue, lip or any other facial or body piercing (other body piercing must be covered or removed); and, no necklaces or bracelets (only Medic Alert). Must have a watch with a second hand.
 - f) Make-up, hair, and grooming should be conservative. Hair shoulder length or longer must be pulled neatly back in a ponytail or bun. Hair clips, bands, etc. shall be functional, not decorative (no bows). Mustaches and beards will be neatly groomed, clean and trimmed.
 - g) Tattoos must be covered and not visible.
 - h) Nails are to be clean and neatly trimmed to no more than fingertip length, with clear or no polish. No artificial nails in OR or L & D.
 - i) No perfume, after-shave or other strong scents since this causes nausea and /or difficulty in breathing for many patients.
 - j) Gum chewing is not allowed
 - k) Any question concerning adherence to the dress code should be directed toward the clinical instructor.
3. Failure to comply with the above requirements may result in an unexcused clinical absence and/or negative clinical evaluation.
4. If the dress code rules are broken and a change of clothes is not available, the student may be removed from the school-related function for the remainder of the day.

Appropriate disciplinary action will be taken for repeated violations of this code.

VIII. Course Information**A. General**

1. If lecture outlines are used, they will be posted on Blackboard a minimum of two (2) working days prior to class and will be removed at midnight prior class,
2. The clinical portion of the course syllabus, handouts, and any other required course materials will to be placed on blackboard.
3. All submitted written material (papers, assignments, examinations, etc.) are the property of the College of Nursing. They will be maintained in an archived file in the College of Nursing.
4. The *BSN/MSN Nursing Student Guide* is available on the CON website at <http://www.uttyler.edu/nursing/> . The student must sign the statement indicating they have accessed the guide and return the signed Student Guide Affirmation Form to the program secretary for placement in the student file. (Responsibility of Level 1 faculty to include in syllabus)
5. Submitting ____ NCLEX 3500 questions each week (Responsibility of Levels 3 and 4 faculty to include in syllabus)
6. ERI Policy (Responsibility of all levels using the ERI to include in syllabus)
7. All nursing students are required to use their student email accounts for all correspondence (Approved FO: 2/03)

IX. Attached Forms to be Read, Signed and Submitted the First Day of Class**A. Student Affirmation Form**

1. Each line must be initialed, signed, and dated for each course every semester.
2. The form will be placed in the student's file

B. Audio/Video-Recording Agreement

1. Any student wishing to record a class must sign this agreement no later than the second week of classes each semester. An agreement must be signed for each course every semester.
2. Due to the confidential nature of some course content, the student will provide written documentation of the erasure of any recordings made during the current semester. Failure to return this written documentation to the faculty by the date of the final examination will result in a grade of "I" (Incomplete).

Student Affirmation Form

_____ I agree to protect the privacy of faculty, peers, patients, and family members of patients by not inappropriately disclosing confidential information about faculty, peers, patients or their family members that is disclosed to me in my capacity as a University of Texas at Tyler nursing student. In addition, I agree not to inappropriately disclose confidential information about any agency or institution that is disclosed to me in my capacity as a University of Texas at Tyler nursing student. I will adhere to HIPAA guidelines.

_____ I have/will read the syllabus of this nursing course I am taking this semester, and I understand the criteria established for grading my course work. I understand that my average on exams must be 75 or higher in order to attain a passing grade for the course.

_____ I agree that I will conduct myself in a manner that exhibits professional values and in accordance with the American Nurses Association (ANA) Code of Ethics for Nurses, the Texas Nurse Practice Act and UTT’s Student Academic Dishonesty Policy.

_____ I will maintain and uphold the academic integrity policy of the College of Nursing and will not condone or participate in any activities of academic dishonesty including, but not limited to, plagiarism, cheating, stealing, or copying another’s assigned work.

_____ I will not recreate any items or portions of any exam for my own use, or for use by others during my enrollment in the College of Nursing

_____ I will not accept or access any unauthorized information related to any exam administered during my enrollment in the College of Nursing.

_____ I will sign only my own papers and other documents and will not sign any other student's name to anything, including class rolls.

_____ I will not allow any other student access to any of my paperwork for the purpose of copying.

Student’s Signature

Date

Student’s Printed Name

NURS 3613
Course

AUDIO/VIDEO-RECORDING AGREEMENT

I have been given permission to record the following class, NURS 3613.

I understand that, the recordings are for my personal studies only. I realize that lectures recorded may not be shared with other people without the written consent of the faculty member. I also understand that recorded lectures may not be used in any way against the faculty member, other lecturer, or students whose classroom comments are recorded as part of the class activity.

I am aware that the information contained in the recorded lectures is protected under federal copyright laws and may not be published or quoted without the expressed consent of the lecturer and without giving proper identity and credit to the lecturer. I agree to abide by these guidelines with regard to any lectures I record while enrolled as a student at The University of Texas at Tyler.

Due to the confidential nature of some course content, I agree to provide written documentation of the erasure of any recordings made during the current semester. Failure to return this written documentation to the faculty by the date of the final examination will result in a grade of “I” (Incomplete).

Print Name

Date

Signature of Student

NURS 3613

Course Number

I have erased all recordings made during this current semester in NURS 3613.

Signature of Student

Date

For Lecture Content**COURSE LECTURE/UNIT & OBJECTIVE SCHEDULE**

*Learning activities for each unit may include films, guest speakers, student participation, and other activities.

****Refer/Review Biological Basis for Understanding Psychotropic Drugs from Textbook for each lecture and the related Chapters in your Pharmacology Text.**

LECTURE/UNIT #1 Course Introduction & Topics: 1/17/08

Introduction to Mental Health Nursing and Mental Illness, Areas of Intervention, Psychiatric Nursing Assessment, & Evidence/Based Practice

LECTURE/UNIT OBJECTIVES**Introduction to Psychiatric Mental Health Nursing and Mental Illness**

- 1) Compare and contrast the concepts of mental health and mental illness.
- 2) Demonstrate the use of the *DSM-IV-TR* and describe the multi-axial system of evaluation.
- 3) Compare and contrast a *DSM-IV-TR* diagnosis with a nursing diagnosis.
- 4) Identify the role of the nurse with the patients experiencing alterations in mental health in structured and unstructured settings.

Areas of Intervention/Psychiatric Nursing Assessment

- 5) Use critical thinking in mental health nursing assessments of patients and identify problem areas using a mental status exam/psychiatric nursing assessment.
- 6) Summarize factors that can affect the mental health of an individual and the ways that these factors influence conducting a holistic nursing assessment.
- 7) Formulate appropriate interventions based on assessment.
- 8) Apply the nursing process in caring for a psychiatric patient.

Evidence-Based Practice

- 9) Examine and utilize available resources for evidence-based practice (EBP) in the mental health setting.
- 10) Analyze the need and value of evidence-based practice in the mental health setting; consider cost-effectiveness.
- 11) Evaluate the mental health setting and consider opportunities for conducting original research or replication of existing research when interventions are not evidence-based, as professional nursing practice should reflect accountability for assuring EBP.

PREPARATION:

Varcarolis - Chapter 1, pp. 2-14, Chapter 4, pp. 63-71 and Chapter 9, pp. 138-154

EVALUATION:

Exams

Classroom Discussion

Clinical Conference/Clinical Performance

Multidisciplinary Treatment Team Plan Presentation

LECTURE/UNIT #2 Topic: 1/24/08

Legal/Ethical Guidelines, Therapeutic Communication and Interventions, Biological Basis for Understanding Psychotropic Medications, Nurse-Patient Relationship, and Therapeutic Use of Self

LECTURE/UNIT OBJECTIVES**Legal/Ethical Guidelines**

- 1) Distinguish between the hospital and community settings with regard to characteristics, goals of treatment, and nursing interventions.
- 2) Describe the role of the psychiatric nurse in four specific areas: partial hospitalization program; psychiatric home care; assertive community treatment; and community mental health center.
- 3) Identify two resources to assist the community psychiatric nurse in resolving ethical dilemmas.
- 4) Implement safety and infection control in your clinical setting according to the policy and procedure of the facility.

Therapeutic Communication/Interventions

- 5) Analyze factors that influence communication.
- 6) Compare and contrast the purpose, focus, communications styles (therapeutic and non-therapeutic communication), and goals for (a) a social relationship, (b) intimate relationship, and (c) a therapeutic relationship.
- 7) Define and discuss the role of empathy, genuineness, and positive regard on the part of the nurse in a nurse-patient relationship.
- 8) Demonstrate use of therapeutic communication techniques.
- 9) Identify specific interventions for common patient behaviors.
- 10) Question how effective and ineffective communication affects your professional life.

Biological Basis for Understanding Psychotropic Medications

- 11) Formulate nursing interventions (based on accurate knowledge of medication actions, use and efficacy, methods of administration, contraindications, side effects, teaching needs, risk factors, and indicated monitoring) for patients being treated with any category or subcategory of psychotropic medication.

Psychotropic Drugs: Psychobiological Theories/Therapies

- 12) Discuss at least eight functions of the brain and the way these functions can be altered by psychotropic drugs.
- 13) For the psychotropic medication categories and subcategories- antipsychotics, antidepressants, mood stabilizers, anxiolytic/hypnotic, and stimulants - discuss the following:
 - a. Goals of therapy
 - b. Modes of action
 - c. Clinical use and efficacy
 - d. Methods of administration

- e. Contraindications
 - f. Side effects and patient education
- 14) Identify how specific brain functions are altered in certain mental disorders (i.e. depression, anxiety, Schizophrenia).
 - 15) Determine nursing responsibilities, considerations, and issues related to the care of patients treated with psychotropic drugs and formulate appropriate nursing interventions.

Nurse-Patient Relationship/Therapeutic Use of Self/Assessment of Self

- 16) Examine the therapeutic nurse-patient relationship and therapeutic environment.
- 17) Differentiate between a therapeutic and a social relationship.
- 18) Analyze components of each phase as they apply to the nurse-patient relationship.
- 19) Apply therapeutic interventions in patient care situations.
- 20) Utilize self-awareness, self-reflection, and self-assessment in the therapeutic use of self.
- 21) Demonstrate therapeutic use of self in the promotion of mental health in patient care situations.

PREPARATION:

Varcarolis – Chapter 8, pp. 115-135, Chapter 10, pp. 155-170, Chapter 3, pp. 34-62, and Chapter 11, pp.171-196
Pharmacology Text

EVALUATION:

Exams
Class Discussion
Virtual Clinical Excursions/Workbook
Clinical Conference/Clinical Performance
Multidisciplinary Treatment Team Plan Presentation
Journaling

LECTURE/UNIT #3 Topics: 1/31/08

Schizophrenia

LECTURE/UNIT OBJECTIVES**Schizophrenia**

- 1) Identify a theory (*i.e.* biochemical, genetic, psychodynamic and developmental) explaining the etiology of Schizophrenia and other psychotic disorders which are based on current research when caring for a Schizophrenic patient.
- 2) Differentiate between positive and negative symptoms of Schizophrenia with regard to (a) their response to traditional and atypical antipsychotic medications, (b) their effect on quality of life, and (c) their significance for the prognosis of the disease.
- 3) Identify the behaviors and *DSM-IV-TR* criteria which are present in Schizophrenia and other psychotic disorders.
- 4) Formulate three nursing diagnoses that are appropriate for a person with Schizophrenia.
- 5) Evaluate the nursing responsibilities related to psychotropic medications including implementation and teaching on purpose, action, administration, potential adverse effects,

- and need for patient/family teaching and follow-up care.
- 6) Analyze nursing interventions related to the identified maladaptive neurobiological responses for a Schizophrenic patient using behavioral assessment based on *DSM-IV-TR* criteria.
 - 7) Integrate into nursing care planning realistic patient outcomes including short-term and long-term goals related to patient coping with maladaptive neurobiological responses and identify at least 3 nursing diagnoses for the patient with a psychotic disorder.
 - 8) Develop a teaching plan focusing on critical behaviors of the hospitalized patient with Schizophrenia i.e. key symptom awareness and management, nursing interventions, medication administration and compliance, and reportable changes.
 - 9) Use and practice therapeutic communication (particularly focus on broad opening, reflection of feelings, and exploring) with a patient who has a known diagnosis of Schizophrenia.
 - 10) Describe the defense mechanisms and other coping behaviors related to psychotic disorders.
 - 11) Identify the effective strategies of individual, group, and family therapies that are most useful for patients with Schizophrenia and their families.
 - 12) Identify safety and infection control issues in the Schizophrenic patient.
 - 13) Implement safety and infection control in your clinical setting according to the policy and procedure of the facility.

PREPARATION:

Varcarolis - Chapter 20, pp. 384-421
Pharmacology Text

EVALUATION:

Exams
Class Discussion
Virtual Clinical Excursions/Workbook
Clinical Conference/Clinical Performance
Multidisciplinary Treatment Plan Presentation

LECTURE/UNIT #4 Topic: 2/14/08**Personality Disorders and Eating Disorders****LECTURE/UNIT OBJECTIVES****Personality Disorders and Eating Disorders (Axis II, *DSM-IV-TR* Diagnosis)**

- 1) Describe the signs and symptoms of Personality Disorders: Borderline, Antisocial, Histrionic, Paranoid, Narcissistic, Obsessive-Compulsive, and Dependent and Eating Disorders.
- 2) Recognize the nurse/staff negative responses that are common when confronted by the manipulative behaviors of the patient diagnosed with Personality Disorder and discuss measures staff can take to reinforce clear boundaries.
- 3) Discuss therapeutic interventions for the patient with a Personality Disorder.
- 4) Identify the physiological and behavioral symptoms of Anorexia and Bulimia.

- 5) Identify short and long term goals for patients with eating disorders.
- 6) Develop therapeutic interventions including education plans for the patient and family with an eating disorder.
- 7) Evaluate the response to treatment for a patient with an eating disorder.
- 8) Discuss the nursing assessment, interventions, nursing diagnosis, and outcome measures for patients diagnosed with Personality Disorder or Eating Disorders.
- 9) Identify safety and infection control issues in the Schizophrenic patient.
- 10) Implement safety and infection control in your clinical setting according to the policy and procedure of the facility.

PREPARATION:

Varcarolis - Chapter 16, pp. 275-298 and Chapter 17, pp. 299-323

EVALUATION:

Exams

Class Discussion

Clinical Conference/Clinical Performance/Sim Man

Multidisciplinary Treatment Plan Presentation

Clinical Application Paper

Journaling

Virtual Clinical Excursions/Workbook

LECTURE/UNIT #5 Topic: 2/21/08**Mood Disorders (Bipolar and Depression) and Suicide****LECTURE OBJECTIVES****Mood Disorders (Includes Bipolar Disorders and Depressive Disorders)**

- 1) Apply the *DSM-IV-TR* to identify diagnostic categories, subtypes, characteristics, criteria, and behavior for mood disorders.
- 2) Choose and describe 3 theories of mood disorders (Bipolar and Depression).
- 3) Discuss treatment of mood disorders (including Electroconvulsive Therapy); consider psychological and biological therapies as well as evaluation of patient responses.
- 4) Formulate plans of care based on assessment data and current research findings for Mood Disorders.
- 5) Analyze the social, political, and economic impact of mood disorders and other mental illnesses on society.
- 6) Role-play six principles of communication that is useful for depressed patients.

Suicide

- 1) Identify three common precipitating events.
- 2) Describe suicide precautions and the role of the nurse to protect the mentally ill patient.
- 3) Formulate a "no suicide contract" and its potential effectiveness.
- 4) Apply appropriate patient safety measures in both inpatient and community settings.
- 5) Apply the SAD PERSONS scale, explain 10 risk factors to consider when assessing for suicide.

- 6) Apply appropriate patient safety measures in both inpatient and community settings.

LECTURE #6 Topics: 2/28/08**Substance Abuse**

- 1) Utilize psychological, social and behavioral variables in the assessment and treatment of chemically impaired patients.
- 2) Understand and differentiate between substance abuse and addiction.
- 3) Assess risk factors and nursing interventions for safety in addiction withdrawal.
- 4) Analyze effects of substance abuse of the patient, family and community.
- 5) Formulate a plan of care with realistic outcome criteria for the chemically impaired patient.
- 6) Determine therapeutic interventions for the chemically impaired patient.
- 7) Evaluate risk factor/prevention/treatment for nurses related to chemical dependency.
- 8) Identify safety and infection control issues.
- 9) Implement safety and infection control within the clinical setting according to the policy and procedure of the facility.

Somatoform and Dissociative Disorders

- 10) Compare and contrast essential characteristics in the assessment of Somatoform and the Dissociative disorders.
- 11) Discuss the assessment and interventions for the Somatoform disorders-body dysmorphic disorder, pain disorder, somatization disorder, conversion disorder and hypochondriasis.
- 12) Discuss the assessment and interventions for Dissociative Disorders-dissociative amnesia, dissociative fugue, depersonalization disorder and dissociative identity disorder.
- 13) Describe psychosocial interventions appropriate for the patient with somatic complaints versus Dissociative behavior patterns.
- 14) Formulate a plan of care with realistic outcome criteria for patient with Somatoform or Dissociative disorders.
- 15) Recognize the feeling/responses commonly experience by nurses working with patients with Somatoform and Dissociative Disorders.
- 16) Identify safety and infection control issues.
- 17) Implement safety and infection control within the clinical setting according to the policy and procedure of the facility.

PREPARATION:

Varcarolis - Chapter 27, pp. 546-573 and Chapter 15, pp. 252-274

EVALUATION:

Exams

Class Discussion

Clinical Conference/Clinical Performance/Sim Man

Multidisciplinary Treatment Plan Presentation

Virtual Clinical Excursions/Workbook

Journaling

LECTURE UNIT #7 Topics: 3/6/08

Understanding Stress/Holistic Approaches to Stress, Alternative and Complimentary Therapies

LECTURE/UNIT OBJECTIVES

Stress/Holistic Approaches to Stress

- 1) Identify the levels of anxiety and the relationship between stress and anxiety.
- 2) Recognize the short and long-term physiological effects of stress.
- 3) Identify persons who are at greatest risk of experiencing untoward effects of stress.
- 4) Discuss interventions and various treatment issues regarding stress.
- 5) Identify alternative/holistic techniques used to manage stress.
- 6) Discuss the nurse's role in assessment/intervention in response to the patient experiencing stress.
- 8) Understand the nurse's personal reactions to stress and how this may impact in a positive or a negative manner on the care of the patient.

Alternative and Complimentary Therapies/Integrative Care

- 9) Formulate the holistic plans of care for patients which promote health, reduce risk, and manage disease.
- 10) Evaluate the safe/unsafe use of alternative/complimentary therapies in specific situations.
- 11) Discuss the concepts of health promotion.
- 12) Examine the health-illness continuum, beliefs and attitudes about health and illness, health promotion, holistic health models of health and illness.
- 13) Discuss the nurse's role in health and illness.
- 14) Describe the use of evidence-based interventions to promote behavior change.
- 15) Analyze directions for research on health promotion and preventive health.

PREPARATION:

Varcarolis - Chapter 12, pp. 197-211 and Chapter 37, pp. 749-767
Pharmacology Text

EVALUATION:

Exams

Virtual Clinical Excursions/Workbook

Class Discussion

Clinical Conference/Clinical Performance

Multidisciplinary Treatment Plan Presentation

Journaling

LECTURE/UNIT #8 Topics: 3/27/08

Anxiety and Defense Mechanisms; Anxiety Disorders

LECTURE/UNIT OBJECTIVES

Anxiety Defense Mechanisms; Anxiety Disorders

- 1) Identify clinical symptoms of phobias, panic disorders, agoraphobia, obsessive-compulsive disorder, post traumatic stress disorder, acute stress disorder, general anxiety disorder
- 2) Explore the differences between normal anxiety, acute anxiety, and chronic anxiety.
- 3) Discuss nursing assessment, interventions, and nursing diagnoses for patients diagnosed with Anxiety Disorders.
- 4) Identify realistic outcome criteria for a patient diagnosed with an Anxiety Disorder.
- 5) Recognize the feelings/responses commonly experienced by nurses working with patients diagnosed with Anxiety Disorders.
- 6) Be able to understand and identify anxiety defense mechanisms and coping styles.
- 7) Discuss interventions and various treatment issues regarding stress/anxiety.

PREPARATION:

Varcarolis – Chapter 13, pp. 212- 225 and Chapter 14, pp. 228-238

Pharmacology Text

EVALUATION:

Exams

Class Discussion

Clinical Conference/Clinical Performance

Multidisciplinary Treatment Team Plan Presentation

Journaling

Virtual Clinical Excursions/Workbook

LECTURE/UNIT#9 Topics: 4/3/08

Family Systems, Disorders of Children and Adolescent

LECTURE/UNIT OBJECTIVES

Disorders of Children and Adolescent

- 1) Differentiate between healthy and unhealthy behavioral characteristics during the assessment of young children and adolescents.
- 2) Explore areas in the assessment of suicide that are unique to children and adolescents.
- 3) Determine appropriate nursing interventions for children/adolescent with conductive disorders and their families.
- 4) Utilize the appropriate overall interventions for child/adolescent disorders.
- 5) Identify safety and infection control issues.
- 6) Implement safety and infection control within the clinical setting according to the policy and procedure of the facility.

Family Systems

- 7) Assess and determine the characteristic of health and unhealthy families.
- 8) Analyze the meaning and value of the family's sociocultural context when assessing and

- planning interventions strategies.
- 9) Formulate outcome criteria that a nurse and family might develop together.
 - 10) Identify various strategies for family intervention.
 - 11) Identify safety and infection control issues.
 - 12) Implement safety and infection control within the clinical setting according to the policy and procedure of the facility.

PREPARATION:

Varcarolis - Chapter 32, pp. 634-657, Chapter 36, pp. 730-748

EVALUATION:

Exams

Class Discussion

Clinical Conference/Clinical Performance

LECTURE/UNIT #10 Topics: 4/17/08**Family Violence, Anger and Aggression, Sexual Assault, Forensic Nursing, Vulnerable Population****Family Violence**

- 19) Discuss the characteristics of the perpetrator compared to those of the vulnerable person.
- 20) Discuss the epidemiological theory of violence related to increased stresses.
- 21) Describe four areas to assess when interviewing a person who has experienced family violence and four nursing diagnoses for the survivor of violence.
- 22) Formulate a written safety plan for an abused spouse.
- 23) Discuss the cycle of violence and assessing the types of maltreatment.
- 24) Discuss interventions including nurse's legal responsibilities.

Anger and Aggression

- 13) Discuss theories that explore the nature of aggression.
 - 14) Discuss assessment/interventions for angry patients with healthy coping skills or marginal coping behaviors.
 - 15) Discuss the uses of behavioral and cognitive behavioral techniques used in anger management.
 - 16) Discuss de-escalation techniques and the use of seclusion and restraints.
 - 17) Discuss psychotropic treatment of chronic aggression.
- 18) Discuss two nursing diagnoses that are important when aggression is identified.

Sexual Assault

- 23) Define sexual assault (rape) and discuss reasons rapes go unreported.
- 24) Discuss acute and long term phases of rape-trauma syndrome.
- 25) Formulate two short term and long term outcomes for the nursing diagnosis: Rape-Trauma Syndrome.
- 26) Describe the role of the sexual assault nurse.
- 27) Identify six overall guidelines for nursing interventions.

- 28) Discuss the myths about rape and its impact on survivors.
- 29) Identify three outcome criteria that would indicate successful interventions for a survivor of sexual assault.

Forensic Nursing

- 30) Discuss the roles of the forensic nurse in various settings.
- 31) Describe the nurse-patient relationship in forensic nursing settings.

Vulnerable Population

- 32) Differentiate the relationship between mental illness and homelessness.
- 33) Formulate a plan of care for the patient experiencing alterations in mental health in the home care setting and the vulnerable population.

PREPARATION:

Varcarolis - Chapter 26, pp. 530-543, Chapter 24, pp. 490-505, Chapter 25, pp. 506-529, and Chapter 31, pp. 623-631

EVALUATION:

Exams
Class Discussion
Clinical Conference/Clinical Performance

LECTURE/UNIT #11 Topic: 4/24/08

Severely Persistently Mentally Ill, Vulnerable Population, Sociocultural Aspects of Psychiatric Mental Health Nursing, and

LECTURE/UNIT OBJECTIVES

Severely Persistently Mentally Ill

- 1) Examine the impact of the various psychological problems manifested by the severely and persistently mentally ill have on the patient and family members.
- 2) Use therapeutic nursing strategies to communicate with the severely persistently mentally ill.

Sociocultural Aspects of Psychiatric Mental Health Nursing

- 3) Examine ways to assess sociocultural factors of patients.
- 4) Analyze sociocultural factors that hinder the delivery of quality mental health.
- 5) Identify strategies to provide socioculturally sensitive nursing.

Psychological Needs of the Medically Ill

- 6) Describe at least two common mental health sequelae and two psychological responses to a serious medical illness.
- 7) Perform a psychosocial (psychological-social-spiritual) nursing assessment.

Care of the Dying and for Those Who Grieve

- 8) Integrate grief issues of patients and families into patient care in a variety of settings.
- 9) Compare and contrast the characteristic of normal bereavement and dysfunctional

grieving.

- 10) Determine the appropriate nursing care/interventions for patient in the hospice setting versus in the hospital setting.
- 11) Utilize therapeutic communication for the dying patient and grieving family/friends.
- 12) Identify safety and infection control issues.
- 13) Implement safety and infection control within the clinical setting according to the policy and procedure of the facility.

PREPARATION:

Varcarolis - Chapter 28, pp. 575-586, Chapter 7, pp.99-114 Chapter 29, pp. 588-600, Chapter 30, pp. 601-622

EVALUATION:

Exams

Clinical Conference/Clinical Performance

Multidisciplinary Treatment Plan Presentation

Journaling

Virtual Clinical Excursions/Workbook/Sim Man

FOR CLINICAL COURSES**I. Clinical Course****A. Unsafe Clinical Practice**

1. Any act of omission or commission, which may result in harm to the patient, is considered unsafe clinical practice, and may result in removal from the clinical setting, disciplinary action according to the discretion of the course faculty, a negative clinical evaluation, a course failure, and/or dismissal from the program.
2. During the clinical practicum, unsafe clinical practice is defined as any one of the following: When the student:
 - a. Commits repetitive and/or a single, serious medication error.
 - b. Violates or threatens the physical, psychological, microbiological, chemical, or thermal safety of the patient.
 - c. Violates previously mastered principles/learning objectives in carrying our nursing care skills and/or delegated medical functions.
 - d. Assumes inappropriate independence in action or decisions.
 - e. Does not adhere to current CDC guidelines for infection control.
 - f. Fails to recognize own limitations, incompetence, and/or legal responsibilities.
 - g. Fails to accept moral and legal responsibility for his/her own actions thereby violating professional integrity as expressed in the Code of Ethics for Nurses.
 - h. Arrives at clinical settings in an impaired condition as determined by the clinical instructor.
3. Failure to comply with any of the above requirements may result in an unexcused clinical and/or negative clinical evaluation.

Policy Revision and approval: Spring 2006

B. Clinical Objectives

Upon successful completion of the course (NURS 3613), the student will: (FO 9/1999)

PROVIDER OF CARE

1. Assess the health status and mental health needs of individuals and their families with alterations in mental health.
2. Identify individualized problems/psychosocial diagnoses based on assessment data.
3. Participate in formulating individualized multi-disciplinary treatment team plans of care with appropriate nursing intervention for the patient with alterations in mental health.
4. Implement nursing actions that are based on current theory and research.
5. Evaluate the effectiveness of nursing interventions in meeting the expected outcomes.
6. Revise the plan of care when the expected and actual outcomes do not coincide.

COORDINATOR OF CARE

7. Coordinate care for patients that is organized, thorough and provided in a timely manner.
8. Identify community resources that enhance patient coping skills.

MEMBER OF THE PROFESSION

9. Demonstrate responsibility and accountability for own actions.
10. Apply legal and ethical principles to the care patients.
11. Abide by the laws and standards designated by The University of Texas at Tyler (UTT), UTT College of Nursing, Board of Nurse Examiners, and the American Nurses Association Code of Ethics.
12. Project a professional image by adhering to dress code and attendance requirements.
13. Maintain strict confidentiality

COMMUNICATION

14. Document relevant patient information accurately, concisely and in a timely manner.
15. Verbally communicate pertinent patient information to appropriate health care team members.
16. Establish effective working relationships with clinical faculty, facility personnel, peers, patients and patient families.
17. Maintain therapeutic interpersonal relationships and psychological safety with patients.

SAFETY

18. Provide safe care by accurately administering medications in real and simulated situations.
19. Accurately identify safety risks and appropriately intervene to provide a safe Patient environment.

APPROVED: University of Texas System-Spring 1999Faculty Organization-Spring'00

IX. CLINICAL CONFERENCES:

Attendance at clinical conferences is mandatory (this is a part of your scheduled clinical experience). It provides opportunities for simulated clinical learning experiences, discussion of clinical performance, application of theory to practice and identification and discussion of researchable clinical problems in the psychiatric setting. **Students are expected to actively participate and maintain professional behavior.**

**THE UNIVERSITY OF TEXAS AT TYLER
COLLEGE OF NURSING AND HEALTH SCIENCES
NURS 3613**

CLINICAL OBJECTIVES

Upon completion of NURS 3613 clinical experience, the student will have demonstrated the ability to:

I. PROVIDER OF CARE

1. Assess the health status and mental health needs of individuals and their families with alterations in mental health.
2. Identify individualized problems/psychosocial diagnoses based on assessment data.
3. Participate in formulating individualized multi-disciplinary treatment team plans of care with appropriate nursing intervention for the patient with alterations in mental health.
4. Implement nursing actions that are based on current theory and research.
5. Evaluate the effectiveness of nursing interventions in meeting the expected outcomes.
6. Revise the plan of care when the expected and actual outcomes do not coincide.

II. COORDINATOR OF CARE

7. Coordinate care for patients that is organized, thorough and provided in a timely manner.
8. Identify community resources that enhance patient coping skills.

III. MEMBER OF THE PROFESSION

9. Demonstrate responsibility and accountability for own actions.
10. Apply legal and ethical principles to the care patients.
11. Abide by the laws and standards designated by The University of Texas at Tyler (UTT), UTT College of Nursing, Board of Nurse Examiners, and the American Nurses Association Code of Ethics.
12. Project a professional image by adhering to dress code and attendance requirements.
13. Maintain strict confidentiality.

IV. COMMUNICATION

14. Document relevant patient information accurately, concisely and in a timely manner.
15. Verbally communicate pertinent patient information to appropriate health care team members.
16. Establish effective working relationships with clinical faculty, facility personnel, peers, patients and patient families.
17. Maintain therapeutic interpersonal relationships and psychological safety with patients.

V. SAFETY

18. Provide safe care by accurately administering medications in real and simulated situations.
19. Accurately identify safety risks and appropriately intervene to provide a safe patient environment.

III. MEMBER OF THE PROFESSION: Demonstrate responsibility and accountability for own actions. Apply legal and ethical principles to the care patients. Abide by the laws and standards designated by The University of Texas at Tyler (UTT), UTT College of Nursing and Health Sciences, Board of Nurse Examiners, and the American Nurses Association Code of Ethics. Project a professional image by adhering to dress code and attendance requirements. Maintain strict confidentiality.

EXPECTED BEHAVIOR	3	2	1	0	3	2	1	0	COMMENTS
Professional Character									
1. Accountability/ Responsibility									
2. Professional Awareness									
3. Integrity									
4. Advocacy									
5. Moral Conduct									
Ethical/Legal Conduct									
1. Confidentiality									
2. Professional Standards									
Professional Image									
1. Dress Code									
2. Attendance									

IV. COMMUNICATION: Document relevant patient information accurately, concisely and in a timely manner. Verbally communicate pertinent patient information to appropriate health care team members. Establish effective working relationships with clinical faculty, facility personnel, peers, patients and patient families. Maintain therapeutic interpersonal relationships and psychological safety with patients.

EXPECTED BEHAVIOR	3	2	1	0	3	2	1	0	COMMENTS
1. Written Documentation									
2. Verbal Communication									
3. Interpersonal/Psychological									

V. SAFETY: Provide safe care by accurately administering medications in real and simulated situations. Accurately identify safety risks and appropriately intervene to provide a safe patient environment.

EXPECTED BEHAVIOR	3	2	1	0	3	2	1	0	COMMENTS
*1. Medication administration									
*2. Environmental									

VI. MASTERY SKILLS: Skills performed in the clinical area are completed following accepted standards of nursing practice. These skills will be performed without cues of support from the clinical faculty. Failure to perform the mastery skills will result in an automatic failure of the course regardless of the clinical performance or grade in the theory component of the course.

EXPECTED BEHAVIOR	3	2	1	0	3	2	1	0	COMMENTS
1. Monitor and maintain safety	■			■	■			■	
2. Monitor and maintain infection control	■			■	■			■	
3. Actively listen (feedback indicated active listening/comprehension)	■			■	■			■	
4. Assess psychosocial issues	■			■	■			■	
5. Therapeutic Communication Interactions: Verbal and Non-Verbal (clinical interactions indicate applied learning)	■			■	■			■	

<u>MID-CLINICAL</u>	Contract Initiated:	Yes	No
Demonstrated clinical strengths:			
Demonstrated clinical weaknesses:			
Measures to strengthen clinical performance:			
_____ Clinical Faculty	_____ Student		
Date: _____			

FINAL CLINICAL

Demonstrated clinical strengths:

Demonstrated clinical weaknesses:

Measures to strengthen clinical performance:

Clinical Faculty

Student

Date: _____

NURS 3613 CLINICAL EVALUATION CRITERIA

EXPECTED BEHAVIOR	3 EXCEEDS EXPECTATION	2 MEETS EXPECTATION	1 UNSATISFACTORY	0 UNSAFE
<u>I. PROVIDER OF CARE</u>				
A. NURSING PROCESS				
1. Assessment Obj. 1: Assess the health status and mental health needs of individuals and their families with alterations in mental health.	Completes data base with all objective and subjective data of the by identifying physiological, psychological, and sociocultural strengths and weaknesses	<u>Usually</u> completes data base with all objective and subjective data by identifying physiological, psychological, and sociocultural strengths and weaknesses	<u>Frequently</u> requires assistance in completing data base with all objective and subjective data to identify physiological, psychological, and sociocultural strengths and weaknesses	<u>Cannot</u> complete a data base with all objective and subjective data to identify physiological, psychological, and sociocultural strengths and weaknesses
2. Nursing Diagnosis and Expected Outcomes Obj. 2: Identify individualized problems/psychosocial diagnoses based on assessment data.	Identifies and prioritizes signs and symptoms and actual and potential problems/risk factors and patient responses to problem/risk factors	<u>Usually</u> identifies and prioritizes signs and symptoms and actual and potential problems/risk factors and patient responses to problems/risk factors.	<u>Frequently</u> requires assistance to identify and prioritize signs and symptoms and actual and potential problems/risk factors and patient responses to problems/risk factors.	<u>Consistently</u> requires assistance in identifying and prioritizing signs and symptoms and actual and potential problems/risk factors and patient responses to problems/risk factors
3. Patient Outcomes Obj. 3: Participate in formulating individualized multi-disciplinary treatment team plans of care with appropriate nursing intervention for the patient with alterations in mental health.	Formulates individualized patient outcomes in collaboration with patient and other health care providers utilizing SMART (short, measurable, applicable, realistic, timely) goals	<u>Usually</u> formulates individualized patient outcomes in collaboration with patient and other health care providers utilizing SMART (short, measurable, applicable, realistic, timely) goals	<u>Frequently</u> requires assistance to formulate individualized patient outcomes and to utilize SMART goals	<u>Cannot</u> formulate individualized patient outcomes utilizing SMART goals

EXPECTED BEHAVIOR	3 EXCEEDS EXPECTATION	2 MEETS EXPECTATION	1 UNSATISFACTORY	0 UNSAFE
<p>4. Delivery of Care Obj. 4: Implement nursing actions that are based on current theory and research.</p>	<p>Implement a plan of care to manage actual and potential problems/risk factors in a safe manner according to principles/theoretical rationales. Previously learned skills are performed in an organized manner without supervision. Is prepared for new skills utilizing appropriate scientific principles and seeks appropriate supervision</p>	<p><u>Usually</u> implements a plan of care to manage actual and potential problems/risk factors in a safe manner according to principles/theoretical rationales. Previously learned skills are performed in an organized manner without supervision. Is prepared for new skills utilizing appropriate scientific principles and seeks appropriate supervision</p>	<p>Requires <u>direct</u> support and supervision to perform previously learned and new skills in an organized manner. Requires assistance in seeking appropriate supervision and implementing planned nursing actions in a safe manner according to nursing principles/rationales</p>	<p><u>Consistently</u> requires direct support and supervision to perform previously learned and new skills in an organized manner. <u>Consistently</u> requires assistance in seeking appropriate supervision and implementing planned nursing actions in a safe manner according to nursing principles/rationales</p>
<p>5. Evaluation of Patient Outcomes Obj. 5 & 6: Evaluate the effectiveness of nursing interventions in meeting the expected outcomes. Revise the plan of care when the expected and actual outcomes do not coincide.</p>	<p>Identifies patient outcomes met with supportive data. Identifies partially or met outcomes with recommendations to alter and/or revises plan of care</p>	<p>Evaluates process and outcomes of nursing interventions based upon desired patient outcomes and patient response. <u>Needs assistance</u> with altering and/or revising plan according to outcomes</p>	<p><u>Frequently</u> requires assistance evaluating the process and patient outcomes. <u>Frequently</u> needs assistance with altering and/or revising plan of care according to outcomes</p>	<p><u>Consistently</u> requires assistance evaluating the process and patient outcomes. Cannot alter and/or revise plan according to outcomes</p>

EXPECTED BEHAVIOR	3 EXCEEDS EXPECTATION	2 MEETS EXPECTATION	1 UNSATISFACTORY	0 UNSAFE
<u>II. COORDINATOR OF CARE</u>				
Obj. 7 & 8: Coordinate care for patients that is organized, thorough and provided in a timely manner. Identify community resources that enhance patient coping skills.				
1. Time Management	Nursing care is organized and timely to meet the prioritized needs of the patient. Utilizes multidisciplinary resources and patients and participates in planning delivery and evaluation of care in a variety of settings	Nursing care is organized and timely to meet the prioritized needs of the patient. Requires <u>minimal</u> supervision Utilizes multidisciplinary resources and patients and requires <u>minimal</u> supervision when planning delivery and evaluation of care	<u>Frequently</u> requires supervision with time utilization to organize and prioritize needs of the patient Has <u>difficulty</u> identifying multidisciplinary resources and working with patients to plan health care delivery	<u>Poor</u> judgment is consistently used in work organization, priority setting, and/or time utilization <u>Cannot</u> identify multidisciplinary resources to plan and coordinate care and has difficulty working with patients to plan health care delivery
2. Clinical Decision-Making and Clinical Judgment	Makes pro-active decisions in managing care. Referrals to appropriate resources made as needed. Uses clinical decision-making model (CDM) correctly	With <u>minimal supervision</u> is able to make decisions and referrals as needed. <u>Usually</u> works through CDM correctly	<u>Frequently</u> requires supervision to make decisions and referrals as needed. Has <u>difficulty</u> using CDM correctly	<u>Does not</u> use CDM
<u>III. MEMBER OF THE PROFESSION</u>				
A. Professional Character				
Obj. 9: Demonstrate responsibility and accountability for own actions.				
1. Accountability/Responsibility	Assumes accountability and responsibility for quality of nursing care for patients according to level of competence and course objectives. Utilizes constructive criticism consistently	Assumes accountability and responsibility for quality of nursing care for patients according to level of competence and course objectives. Usually utilizes constructive criticism consistently Requires <u>minimal</u> supervision to realistically identify own strengths and weaknesses and seeks measures to increase professional growth	<u>Fails</u> to assume responsibility for own actions and fails to utilize constructive criticism to enhance clinical performance	
2. Professional Awareness	Realistically identifies own strengths and weaknesses and independently seeks measures to increase professional growth	Requires <u>minimal</u> supervision to realistically identify own strengths and weaknesses and seeks measures to increase professional growth	<u>Frequently</u> requires assistance to identify strengths and weaknesses, or initiate measure for professional growth	<u>Fails</u> to identify own strengths and weaknesses, or initiate measures for professional growth
3. Integrity		Always reports errors/incidents to clinical faculty and appropriate facility personnel in a timely manner and seeks resolution to the issue/s	<u>Does not</u> report error/incidents to clinical faculty and appropriate facility personnel in a timely manner or seeks resolution to the issue/s	

EXPECTED BEHAVIOR	3 EXCEEDS EXPECTATION	2 MEETS EXPECTATION	1 UNSATISFACTORY	0 UNSAFE
4. Advocacy	Consistently applies appropriate strategies guided by professional standards and ethics codes when advocating for patients	<u>Usually</u> applies appropriate strategies guided by professional standards and ethics codes when advocating for patients	<u>Frequently</u> requires supervision to apply appropriate strategies guided by professional standards and ethics codes when advocating for patients	<u>Does not</u> function as a patient advocate
5. Moral conduct	Consistently recognizes cultural diversity, belief systems, and values when interacting and communicating with others	<u>Usually</u> recognizes cultural diversity, belief systems, and values when interacting and communicating with others	<u>Frequently</u> requires supervision to recognize cultural diversity, belief systems, and values when interacting and communicating with others	<u>Unaware</u> of cultural diversity, belief systems, and values
<p>B. Ethical/Legal Conduct</p> <p>Obj. 10, 11, & 13: Apply legal and ethical principles to the care patients. Abide by the laws and standards designated by The University of Texas at Tyler (UTT), UTT College of Nursing and Health Sciences, Board of Nurse Examiners, and the American Nurses Association Code of Ethics. Maintain strict confidentiality.</p>				
1. Confidentiality		Protects faculty, peers, patient/s confidentiality in all settings		Breaches confidentiality

EXPECTED BEHAVIOR	3 EXCEEDS EXPECTATION	2 MEETS EXPECTATION	1 UNSATISFACTORY	0 UNSAFE
2. Professional standards		Abides by the laws and standards designated by the University of Texas at Tyler, College of Nursing, and Nurse Practice Act for the State of Texas, Board of Nurse Examiners, and Nursing Code of Ethics. Adheres to the standards of the clinical agency		Violates any law or standard designated by the University of Texas at Tyler, College of Nursing, Nurse Practice Act for the State of Texas, Board of Nurse Examiners, and Nursing Code of Ethics and/or standards of the clinical agency
C. Professional Image Obj. 12: Project a professional image by adhering to dress code and attendance requirements.				
1. Dress code		Complies with required clinical dress code in all settings	<u>Requires reminders</u> of required clinical dress code	<u>Does not</u> comply with required clinical dress code
2. Attendance		Always arrives to clinical assignment on time with timely notification of clinical faculty and/or facility if going to be late. Excused absence with prior notification to clinical faculty and clinical faculty	<u>Frequently</u> arrives late to clinical assignment with or without timely notification to clinical faculty and/or facility	<u>Unable</u> to meet clinical objectives due to repeated absences and/or tardiness

EXPECTED BEHAVIOR	3 EXCEEDS EXPECTATION	2 MEETS EXPECTATION	1 UNSATISFACTORY	0 UNSAFE
<u>IV. COMMUNICATION</u>				
1. Written Documentation Obj. 14: Document relevant patient information accurately, concisely and in a timely manner.	Documentation of care is comprehensive, organized, and clearly stated without errors. Penmanship is legible Spelling, punctuation, and grammar are correct	Documentation of care is <u>generally</u> comprehensive, organized, and clearly stated Penmanship is legible <u>Occasional</u> spelling, punctuation, and grammar are incorrect	<u>Frequently</u> assistance is required to organize comprehensive, clear documentation Penmanship is <u>not</u> legible <u>Frequent</u> spelling, punctuation, and grammar errors made	Documentation of care is <u>incomplete</u> and <u>not</u> legible <u>Poor</u> spelling, punctuation, and grammar
2. Verbal Communication Obj. 15: Verbally communicate pertinent patient information to appropriate health care team members.	Updates clinical faculty and/or facility personnel regarding patient/s status as required Gives concise report to appropriate clinical facility personnel and/or clinical faculty when leaving patients	<u>Occasional</u> reminder required to update clinical faculty and/or facility personnel regarding patient/s status Gives concise report to appropriate clinical facility personnel and/or clinical faculty when leaving patients	<u>Consistent</u> reminders required to update clinical faculty and/or facility personnel regarding patient/s status Report is incomplete and requires cueing from clinical faculty and/or clinical personnel	<u>Does not</u> update clinical faculty or facility personnel regarding patient/s status Report not done
3. Interpersonal/Psychological Communication Obj. 16 & 17: Establish effective working relationships with clinical faculty, facility personnel, peers, patients and patient families. Maintain therapeutic interpersonal relationships and psychological safety with patients.	Establishes effective working relationships with clinical faculty, facility personnel, peers, and patient/s Demonstrates insight and understanding of therapeutic behavior/s	<u>Generally</u> establishes effective working relationships with clinical faculty, facility personnel, peers, and patient/s Demonstrates insight and understanding of therapeutic behavior/s	<u>Frequently</u> has problems establishing effective working relationships with clinical faculty, facility personnel, peers, and patient/s <u>May not</u> recognize therapeutic behavior/s	<u>Consistently</u> has problems establishing effective working relationships with clinical faculty, facility personnel, peers, and patient/s <u>Does not</u> recognize therapeutic behavior/s

EXPECTED BEHAVIOR	3 EXCEEDS EXPECTATION	2 MEETS EXPECTATION	1 UNSATISFACTORY	0 UNSAFE
<u>V. SAFETY</u>				
1. Medication Administration/ Simulations/Therapeutic Interventions Obj. 18: Provide safe care by accurately administering medications in real and simulated situations.		Administers and calculates medications/solutions correctly according to medication administration policy		<u>Does not</u> administer and/or calculate medications/solutions correctly. Needs continuous supervision. <u>Places the patient in jeopardy</u>
2. Environmental Obj. 19: Accurately identify safety risks and appropriately intervene to provide a safe patient environment.		Complies with OSHA guidelines and Universal Precautions. Provides safe patient environment. Anticipates unsafe situations and provides preventive interventions. Seeks guidance from appropriate facility personnel and/or clinical faculty		<u>Does not</u> comply with OSHA guidelines or Universal Precautions. <u>Does not</u> provide safe client environment or anticipate unsafe situations. Performs interventions without seeking guidance from appropriate facility personnel or clinical faculty
<u>VI. MASTERY SKILLS</u>				
1. Monitor and maintain safety.		Performs skills without assistance or cues from faculty.	<u>Does not</u> perform skills without assistance or cues from faculty.	
2. Monitor and maintain infection control.		Performs skills without assistance or cues from faculty.	Unable to perform skills without assistance or cues from faculty.	
3. Actively listen (feedback indicated active listening/comprehension)		Performs skills without assistance or cues from faculty.	Unable to perform skills without assistance or cues from faculty.	
4. Assess psychosocial issues.		Performs skills without assistance or cues from faculty.	Unable to perform skills without assistance or cues from faculty.	
5. Therapeutic communication interaction: Verbal and Non-verbal (clinical interactions indicate applied learning)		Performs skills without assistance or cues from faculty.	Unable to perform skills without assistance or cues from faculty.	