

**THE UNIVERSITY OF TEXAS AT TYLER  
COLLEGE OF NURSING**

**NURSING LEADERSHIP AND MANAGEMENT  
NURS 4631**

**Summer 2016 Syllabus**

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Monday: 9:00 a.m. – 1:00 p.m.

Location: BRB 1030

May 23, 2016 – August 13, 2016

Clinical and Clinical Conference Times—Monday's TBA

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

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**1.0 Course Schedule**CLASS SCHEDULE- LOCATION TYLER CAMPUS (Room- **BRB 1030**) 9:00 a.m. – 1:00 p.m.NURS 4631 Nursing Leadership and Management: **Long Summer 2016**

Yoder-Wise, 6th ed.

DATE	UNIT	TOPICS	CHAPTERS	CLINICALS
May 23	1	Course Introduction Managing, Leading, Following- Roles, & Cultural Diversity Career Management - <b>Resume</b> <b>**Medication Calculation Exam Today!!!</b>	1, 3, 4, 9 29	<b>Clinical Orientation- ALL Groups</b> TBA
May 30 <b>MEMORIAL DAY NO CLASS</b>	2	Decision Making & Prob. Solving ( <b>TEGRITY</b> ) Benner- From Novice to Expert ( <b>TEGRITY</b> )	6 Benner: 2 & 3	Week 1
<b>Census date – June 6</b>		<b>*** ATI/RN Comprehensive Assessment opens today – you may use your notes, books &amp; ATI Resources</b>		
June 6	3	Legal Issues Delegation	5 26	Week 2
		<b>Resumes due today by 5 pm via Bb – will be graded by your clinical instructor (LUC students give your resume to Ms. Hardaway for grading and feedback.</b>		
June 13	4	<b>EXAM 1</b> (over Units 1 - 3) Computer Lab TBA Power, Politics & Collective Action ( <b>TEGRITY</b> ) Staffing and Scheduling ( <b>TEGRITY</b> )	10, 19 14	Week 3
		<b>***ATI/RN Comprehensive Assessment (Due Monday, June 13 by 5 pm) – students may use notes, books and ATI Resources to take this assessment.</b>		
June 20	5	Strategic Planning, Goal Setting, Marketing ( <b>TEGRITY</b> ) Leading Change ( <b>TEGRITY</b> )	16 17	Week 4
		<b>***ATI/RN Comprehensive Predictor Exam/BRB Academic Computing Center- 9:00 am – 12 noon</b>		
June 27	6	Select, Develop, & Evaluate Staff Quality and Risk Management Patient Safety/Safe Care	15 20 2	Week 1
July 4 <b>NO CLASS</b>	7	Consumer Relationships ( <b>TEGRITY</b> ) Mng. Personal/Personnel Problems & Workplace Violence ( <b>TEGRITY</b> ) Information Technology ( <b>TEGRITY</b> )	22 24 25 11	Week 2
		<b>ATI Leadership Assessment Opens – due 7/22/16 by 5 pm</b>		
<b>Last day to drop/withdraw – July 11</b>				
July 11	8	<b>EXAM 2</b> (over Units 4 – 6) Computer Lab TBA Self-Management ( <b>TEGRITY</b> ) Research and Practice ( <b>TEGRITY</b> ) Building Teams, Communication, Partnership ( <b>NOTES only</b> )	28 21 18	Week 3
		<b>ATI Virtual Review to begin</b>		
July 18	9	Conflict ( <b>TEGRITY</b> ) The Future and Role Transition ( <b>TEGRITY</b> )	25 27, 30	Week 4
		<b>***ATI/RN Comprehensive Predictor Exam RETAKE ONLY /BRB Academic Computing Center- 9:00 am – 12 noon</b>		
July 25		<b>EXAM 3 (Units 7 - 9) Computer Lab TBA</b>		
<b>August 3</b>		<b>PINNING CEREMONY – 10:00 a.m. – 12:00 p.m. – Cowan Center</b>		

**NURSING LEADERSHIP AND MANAGEMENT – NURS 4631****1.1 Course Overview****Semester Hours:**

Six (6) credit hour course with three hours per week didactic content and a total of 112.5 clinical hours.

**Prerequisites and Placement in the Curriculum:**

Completion of all third level courses for generic students and all second semester courses for MINE students is prerequisite.

**Course Description:**

This course presents concepts of nursing leadership, management and professional development. Emphasis is on the synthesis of skills, knowledge and attitudes to coordinate holistic, evidence based care in healthcare organizations.

**Course Student Learning Outcomes**

Upon completion of the course, the student will:

1. Assume responsibility for professional development, including the exploration of role diversification, and life-long learning.
2. Integrate concepts of basic organizational and systems leadership within the culture of the organization to coordinate and assume accountability for quality patient care.
3. Integrate theory and research knowledge in the formulation, implementation, and evaluation of nursing leadership/management actions.
4. Analyze patient care technologies, information systems, and communication devices that support safe nursing practice.
5. Integrate knowledge of the social/ political forces, economic resources, and regulatory processes that impact health care delivery.
6. Collaborate with the inter/intra interdisciplinary team to optimize patient outcomes that reflect human caring.
7. Demonstrate professional values based on moral, ethical, and legal aspects of nursing practice.
8. Utilizing the nursing process, provide safe, holistic, evidenced based patient centered care to diverse populations through health promotion, maintenance, and restoration.

(Approved AA 5/12)

**1.2 Required Texts****Required Texts:**

Yoder-Wise, P. S. (2015). *Leading and managing in nursing* (6th Ed.) St. Louis:

Mosby, Inc. ISBN: 978-0-323-18577-6

Benner, P. (2001). *From novice to expert: excellence and power in clinical nursing practice*. Menlo Park, California: Addison-Wesley Publishing Company. ISBN: 978-0-13-032522-8 or 0-13-032522-8

*NCLEX 10,000: review study software for NCLEX-RN*. (2013). Philadelphia: Lippincott, Williams & Wilkins. ISBN: 978-1451116021

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### **1.3 Attendance**

Attendance during lecture, lab, and clinical experiences is a professional expectation and will be monitored by course faculty. Refer to the university catalog for the policy regarding student attendance and possible student consequences. Students are responsible for all course assignments and content covered in class and clinical conference, including announcements.

### **1.4 University Policies**

University policies regarding students' rights and responsibilities, absence for religious observance, absence for university-supported trips, services to students with disabilities, grade replacement, state-mandated course drop policy, and social security and privacy may be found at <http://www.uttyler.edu/academicaffairs/syllabuspolicies.pdf>

### **Disability Statement**

In accordance with Section 504 of the Rehabilitation Act, Americans with Disabilities Act (ADA) and the ADA Amendments Act (ADAAA) the University offers accommodations to students with learning, physical and/or psychiatric disabilities. If you have a disability, including non-visible disabilities such as chronic diseases, learning disabilities, head injury, PTSD or ADHD, or you have a history of modifications or accommodations in a previous educational environment you are encouraged to contact the Student Accessibility and Resources office and schedule an interview with the Accessibility Case Manager/ADA Coordinator, Cynthia Lowery Staples. If you are unsure if the above criteria apply to you, but have questions or concerns please contact the SAR office. For more information or to set up an appointment please visit the SAR office located in the University Center, Room 3150 or call 903.566.7079. You may also send an email to: [cstaples@uttyler.edu](mailto:cstaples@uttyler.edu)

### **1.5 Grading Policies**

Completion of NURS 4631 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 course and may not progress to the next level.

Students will have course grades calculated based on the weighted calculation of exams and other required course work. The weighted calculation must be 75% or above to pass the course.

#### **1. Course Grade Calculation:**

Exam 1	23%
Exam 2	23%
Exam 3	23%
Participation Activities	19%
ATI Process/Rubric	10%
Leadership ATI Assessment	2%

**Note:** Students must complete the ATI Leadership Assessment by the due date listed in the course schedule. An individual score of 60% or greater will result in a score of 100 for the 2% of the grade. Students who score below 60% will receive a score of 50.

Clinical Practicum                      Pass/Fail

2. **ATI Process/Rubric Grade:** During the semester there will be opportunities to gain points by completing ATI practice assessments, remediation and proctored assessments. See the attached grading rubric at the end of this syllabus. There will be a total of 100 points that students can earn based on completion of assignments and outcomes on the ATI proctored assessments. **ATI grades**

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**may not be made up and are due by assigned due dates. Failure to turn in assignments for the ATI rubric on time will result in a zero for that portion of the rubric.**

3. **Participation Grade:** During class time or assignment through Blackboard, an interactive learning activity may be announced. Active participation collectively will equal 100 participation points. Active participation for activities will count toward the total 19%. Attendance for the entire class period is required to receive points for in class group work. **Participation grades may not be made up.** One participation grade will be dropped if a student misses an activity.

The letter grade for the course is assigned according to the following scale: (an average of 74.5 – 74.9 will not be rounded to 75).

A	90-100
B	80-89
C	75-79
D	60-74
F	59 and below

*Approved FO: Fall 1999*

### **Grade Replacement Policy**

If you are repeating this course for a grade replacement, you must file an intent to receive grade forgiveness with the Office of the Registrar by the Census Date (see [Academic Calendar](#) for date) of the semester in which the course will be repeated. Failure to file an intent to use grade forgiveness will result in both the original and repeated grade being used to calculate overall grade point average. Undergraduates will receive grade forgiveness (grade replacement) for only three course repeats; graduates, for two course repeats during his/her career at UT Tyler.

### **Paper/Assignment Re-grading Policy**

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

### **1.6 Examination and Examination Review Policy**

- Attendance for exams is mandatory.
- If absence for an exam is necessary, the student is responsible for notifying the faculty prior to the exam with an acceptable reason.
- Students will not be allowed entry to the classroom/computer lab after an exam has been started ONLY with faculty discretion.
- Exams will be made available at the time class is scheduled to begin.
- 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. Cell phones and iphone watches will be turned off and in backpacks during exams.
- 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.
- 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; such as an essay format. Failure to notify the course faculty of the need to take the exam on an alternate date will result in a grade of zero for that particular exam.
- 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

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the return of the exam grades. Exams review will take place at the end of the exam and provide the student rationales for the questions incorrectly answered.

9. 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.

### **1.7 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 Scholastic Conduct and Discipline Policy in the current College of Nursing (CON) *Guide for Baccalaureate Students* and the *UT Tyler Student Conduct and Discipline Policy* at: [Guide for Baccalaureate Students](#) and [UT Tyler Student Conduct and Discipline Policy](#) . 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 *Guide for Baccalaureate Students* for definitions).
4. The CON 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*.

### **1.8 General Course Information**

1. Lecture outlines will be posted on Blackboard a minimum of two (2) days before class. Please print your outlines **before** the class starts.
2. The clinical portion of the course, handouts, and any other required course materials will be placed on Blackboard.
3. All submitted written material (papers, assignments, examinations, etc.) are the property of the CON. They will be maintained in an archived file in the CON.
4. The *Guide for Baccalaureate Students* is available on the CON website at [Guide for Baccalaureate Students](#)

The student must sign the statement indicating they have accessed the guide and return the signed Student Affirmation Form to the program secretary for placement in the student file.

5. A total of 40 questions from NCLEX 10,000 with a 75% accuracy score will be submitted to the designated leadership clinical faculty each week until the ATI virtual review begins.
6. ATI Policy – all students will complete the two required ATI exams (RN Practice Assessment and Proctored RN Predictor Assessment) by the specified dates at the assigned campus. Students receiving a Predicted Probability of Passing NCLEX Score below 85% on the RN Comprehensive Predictor Exam will be required to complete remediation as assigned by faculty. Failure to meet these requirements will result in an “I” for Incomplete in the course. See ATI Testing Policy & Rubric.
7. All nursing students are required to use their student email accounts for all correspondence.  
(Approved FO 2/03)

### **Forms to be Read, Signed and Submitted the First Day of Class**

#### **1. Student Affirmation Form – pg. 29**

Each line must be initialed and the form signed and dated for each course every semester. The completed form is submitted to Blackboard.

#### **2. Confidentiality and Privacy Form – pg. 28**

The form must be signed and dated for each course every semester. The completed form is submitted to Blackboard.

**3. Clinical IV Policy Form – pg. 26**

The form must be signed and dated for each clinical course. The completed form is submitted to clinical instructor.

**4. Audio/Video-Recording Agreement – pg. 27**

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. 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).

**5. Student ATI Testing Policy & Rubric – pg. 31**

All students are to read/review the ATI Testing Policy and sign and date. The completed form is submitted to Blackboard.

**1.9 Unit Student Learning Outcomes**

**Unit 1**  
**Career Management**  
**Leading, Managing, Following Roles & Cultural Diversity**

**Career Management****Objectives:**

1. Differentiate among career styles and how they influence career options.
2. Analyze person-position fit.
3. Develop a cover letter and resume targeted for a specific position.
4. Analyze critical elements of an interview.

Textbook —Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.  
**Chapter 29 Managing Your Career**

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**Leading, Managing, Following Roles & Culture****Objectives:**

1. Apply organizational theories and approaches related to leading, managing, and following.
2. Compare and contrast leadership, management and followership roles in the healthcare setting.
3. Evaluate ways to develop and strengthen one’s own style of leadership, management, and followership.
4. Apply principles of leadership, management, and following to the charge nurse role.
5. Demonstrate knowledge of the social/political forces of cultural diversity that impact health care delivery.
6. Evaluate the use of concepts and principles of culture, cultural diversity, and cultural sensitivity in leadership and manager roles.

**Assignment:**

Textbook —Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 1 Leading, Managing, and Following**

**Chapter 3 Developing the Role of Leader**

**Chapter 4 Developing the Role of Manager**

**Chapter 9 Cultural Diversity in Healthcare**

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**Evaluation:** Exam 1



**Unit 2**  
**Decision Making & Problem Solving**  
**Benner – From Novice to Expert & Reflective Practice**

**Benner – From Novice to Expert & Reflective Practice**

**Objectives:**

1. Analyze stages from novice to expert.
2. Evaluate Benner's Domains of Practice.
3. Apply the Reflective Practice process to clinical practice.

**Assignment:**

Benner, P. (2001). *From Novice to Expert: Excellence and Power in Clinical Nursing Practice*. Menlo Park, California: Addison-Wesley Publishing Company.

**Chapter 2 Stages of Novice to Expert****Chapter 3 Domains of Nursing Practice**

**Making Decisions and Solving Problems**

**Objectives:**

1. Apply the primary steps of decision making and problem solving processes to nursing leadership/management situations.
2. Examine strategies/decision-making styles/tools for individual and group problem solving.
3. Inter-relate decision model theory and research in the practice setting.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 6 Making Decisions and Solving Problems**

**Evaluation:** Exam 1

**Unit 3**  
**Legal & Ethical Issues**  
**Delegation**

**Legal & Ethical Issues**

**Objectives:**

1. Apply legal principles that impact nurses' liability.
2. Analyze the causes of malpractice for nurse managers.
3. Apply manager's rights and responsibilities from a legal and an ethical perspective to selected examples.
4. Analyze key aspects of employment law and give examples of how these laws benefit professional nursing practice.
5. Examine the Texas Nursing Practice Act – Standards of Nursing Practice, Safe Harbor and Whistleblower Protections.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 5 Legal and Ethical Issues**

**Delegation**

**Objectives:**

1. Define delegation and the component parts.
2. Utilize the principles and steps of the delegation process as an effective leadership/management strategy.
3. Explain legal, ethical and moral principles involved in delegation.
4. Evaluate the role of the entry professional nurse with respect to delegation and practice parameters.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 26 Delegation: An Art of Professional Practice**

**Evaluation:** Exam 1

**Unit 4**  
**Power, Politics and Influence & Collective Action**  
**Staffing and Scheduling**

**Power, Politics and Influence/Collective Action**

**Objectives:**

1. Inter-relate power and authority theoretical concepts into the formulation and evaluation of management/leadership actions.
2. Explore the concepts of professional and legislative politics related to nursing.
3. Use different types of power appropriately in the exercise of nursing leadership.
4. Understand what is necessary in building a personal power base for effective nursing leadership.
5. Demonstrate knowledge of the social/political forces that are at play in a healthcare organization and impact healthcare delivery.
- \*6. Demonstrate knowledge of the socio-political forces generated in advocacy/representation situations and their impact on changes in health care delivery.
7. Evaluate how participation of staff nurses in decision making relate to job satisfaction.
8. Identify key characteristics of collective action strategies and how they apply in the workplace including shared governance, workplace advocacy, and collective bargaining.
9. Compare the factors that contribute to nurse's decisions to be represented for the purpose of collective bargaining and the decision for no representation.
10. Distinguish between individual rights with collective bargaining contracts and the rights of work at-will employees.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 10 Power, Politics, and Influence****Chapter 19 Collective Action**

**Staffing and Scheduling**

**Objectives:**

1. Differentiate management functions and leadership roles associated with staffing and scheduling.
2. Analyze factors that must be considered when problem solving staffing shortages and other challenges.
3. Identify key external and internal organizational variables that affect staffing plans.
4. Analyze activity reports to determine the effectiveness of a unit's productivity.
5. Discuss the concept of scheduling and balancing the needs of staff versus patient needs.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 14 Staffing and Scheduling**

**Evaluation:** Exam 2

**Unit 5**  
**Strategic Planning, Goal Setting, and Marketing**  
**Leading Change**

**Strategic Planning, Goal Setting, and Marketing**

**Objectives:**

1. Compare and contrast the hierarchical process of mission, vision, values and philosophy as they relate to strategic planning, goal setting and marketing.
2. Apply the strategic planning process to a nursing situation.
3. Explore the planning process as it relates to the nursing process, marketing strategy process, and strategic planning process.
4. Discuss the criteria for goal setting and writing objectives in the planning process.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 16 Strategic Planning, Goal-Setting, and Marketing**

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## Leading Change

### Objectives:

1. Analyze the general characteristics of change in open-system organizations.
2. Relate the models of planned change to the process of low-level change.
3. Evaluate nonlinear theories for managing high-level change.
4. Evaluate the use of select functions, principles, and strategies for initiating and managing change.
5. Formulate desirable qualities of effective change agents.

### Assignment:

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

#### **Chapter 17 Leading Change**

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Evaluation: Exam 2

## Unit 6

### Selecting, Developing, & Evaluating Staff Safe Care: The Core of Leading & Managing Managing Quality and Risk

#### Selecting, Developing, and Evaluating Staff

### Objectives:

1. Relate concepts of role theory to performance.
2. Compare roles of the manager and the potential employee in the staff selection process.
3. Explain important components of the staff development process.
4. Analyze potential strategies that may be utilized in the appraisal process.
5. Explain components of the coaching process used to develop followers.

### Assignment:

Textbook—Yoder-Wise, P. S. (2016). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

#### **Chapter 15 Selecting, Developing, and Evaluating Staff**

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### Safe Care: The Core of Leading and Managing

### Objectives:

1. Identify the key organizations leading the patient safety movement in the United States.
2. Describe the primary safety strategies implemented nationally and their impact on clinical outcomes.
3. Define the role of the nurse leader in patient safety and clinical outcome management.
4. Define nurse sensitive measures and the role of the registered nurse.

### Assignment:

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 5th ed. Revised Reprint,** St. Louis: Mosby.

#### **Chapter 2 Patient Safety**

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### Managing Quality and Risk

### Objectives:

1. Describe the forces shaping healthcare quality and their impact on outcomes.
2. Apply the steps of the quality improvement cycle to clinical situations.
3. Describe the core concepts of risk mitigation to clinical practice and the leadership role.
4. Apply the concept of clinical variance reporting to the clinical setting.
5. Define value based payment and implications for nursing and healthcare facilities.

### Assignment:

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

#### **Chapter 20 Managing Quality and Risk**

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Evaluation: Exam 2

**Unit 7**  
**Consumer Relationships**  
**Managing Personal & Personnel Problems & Workplace Violence and Incivility**  
**Caring, Communicating and Managing with Technology**

**Consumer Relationships**

**Objectives:**

1. Categorize health consumer relationships into relationship structures.
2. Compare and contrast social/political/economic/and regulatory forces that influence consumer relationships in healthcare.
3. Explore the importance of a service-oriented, caring philosophy to the quality of the nurse-patient relationship.
4. Analyze successful nurse-patient relationships with the responsibilities of nursing—service, advocacy, teaching, leadership.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.  
**Chapter 22 Consumer Relationships**

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**Managing Personal & Personnel Problems and Workplace Violence and Incivility**

**Objectives:**

1. Examine common personal/personnel problems.
2. Relate role theory to performance problems.
3. Distinguish effective strategies/steps to guide and discipline employees with performance problems.
4. Explain specific guidelines for documenting performance problems.
- \*5. Categorize the types of violence/incivility that may occur in the workplace.
6. Analyze risk factors for potential violence or disruption
7. Describe guidelines for preventing workplace violence and incivility.
8. Evaluate interventions that help prevent violence and incivility.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.  
**Chapter 24 Managing Personal/ Personnel Problems**  
**Chapter 25 Workplace Violence and Incivility**

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**Caring, Communicating and Managing with Technology**

**Objectives:**

1. Articulate the role of several new technologies in patient safety.
2. Describe the core components of informatics: data, information, and knowledge.
3. Describe three types of healthcare information technology trends.
4. Explore the issues of patient safety, ethics, and information security and privacy within information technology.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.  
**Chapter 11 Caring, Communicating, and Managing with Technology**

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**Evaluation:** Exam3

**Unit 8**  
**Self-Management: Stress and Time**  
**Translating Research into Practice**  
**Building Teams through Communication and Partnerships**

**Self-Management**

**Objectives:**

1. Define self-management.
2. Explore personal and professional stressors.
3. Analyze selected strategies to decrease stress and promote self-care.
4. Evaluate common barriers and selected strategies to effective time management.
5. Critique strengths and weaknesses of selected time-management strategies.

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**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 28 Self-Management: Stress and Time**

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**Translating Research in Practice**

**Objectives:**

1. Define research utilization.
2. Analyze the process involved in incorporating research at the organizational level.
3. Evaluate strategies for incorporating evidence-based practice at the clinical level.
4. Assess organizational barriers to and facilitators of the implementation of research findings.
5. Identify strategies for translating research into practice within the context of an organization.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 21 Translating Research into Practice**

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**Building Teams through Communication and Partnerships**

**Objectives:**

1. Differentiate between a group and a team.
2. Distinguish between effective and ineffective communication interactions.
3. Apply the guidelines for active listening and acknowledgment to clinical situations.
4. Synthesize concepts, principles, and practices from earlier classes on communication to relate to management/ leadership.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 18 Building Teams Through Communication and Partnerships**

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**Evaluation:** Exam 3

**Unit 9**  
**Conflict Management**  
**Role Transition and Thriving for the Future**

**Conflict**

**Objectives:**

1. Integrate theory and research knowledge in the formulation, implementation, and evaluation of nursing leadership/ management functions relative to conflict.
2. Use a model of the conflict process to assess the nature and source of conflict.
3. Determine which of the approaches to conflict is the most appropriate and effective in situations.
4. Analyze how conflict impacts on professionalism, organizational culture, and the health care delivery system.
5. Complete the self-assessment tool to identify the most frequently used conflict management approach.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 23 Conflict: The Cutting Edge of Change**

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**Role Transition & Thriving for the Future**

**Objectives:**

1. Evaluate individual readiness for RN clinical roles in comparison to student clinician roles.
2. Analyze strategies for successful BSN role transition.
3. Propose ways to integrate caring, accountability, reflective practice, and expertise into entry-level professional nurse roles.
4. Project future health care trends and their impact for the practice of nursing.
5. Identify leadership strengths nurses need for the future.

**Assignment:**

Textbook—Yoder-Wise, P. S. (2015). **Leading and Managing in Nursing, 6th ed.** St. Louis: Mosby.

**Chapter 27 Role Transition**

**Chapter 30 Thriving for the Future**

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**Evaluation:** Exam 3

## Clinical Practicum

### 2.0 Overview

The clinical practicum is arranged in an agency with a clinical preceptor. Students learn to function in the role of an entry-level professional nurse, providing and coordinating, through others, competent nursing care for groups of patients. This experience is arranged according to each student's background and need, as determined by the individual student, the course faculty, and the clinical faculty.

Completion of NURS.4631 is based on satisfactory attainment of didactic and clinical criteria. Passing of clinical is based on successful completion of the following:

- Clinical rotation hours (112.5 hours)
- Assigned clinical experiences
- Clinical/Reflective Journals (2)
- Critical Chart Review/Appraisal (1)
- Completion of 40 NCLEX questions per week – **(until the start of ATI Virtual Review)**

Any student who fails to meet the course objectives in either the classroom or clinical area must repeat the entire course and may not progress to the next level. Clinical is graded on a pass/fail basis. **A score of 0 in any of the clinical behaviors at any time during the clinical experience may result in automatic failure in the clinical component of the course. Any student with more than one unsatisfactory clinical score (score of 1) may fail the clinical component and be required to repeat the entire course.**

### 2.1 Medication Administration Exam

1. All clinical courses will require a medication administration exam to be administered prior to attending actual clinical experiences.
2. If the student does not achieve a grade of 90% or higher after **2 attempts**, has failed the clinical component of the course and must withdraw from the course for the semester.
3. A grade of "W" is recorded on the student's transcript, however, the grade is documented in the student's file, in the College of Nursing, as a course failure.

**Clinical medication errors will be documented in College of Nursing student files.**

*Approved FO: 5/00*

*Revised UG Studies: 1/12*

### 2.2 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.

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c) violates previously mastered principles/learning objectives in carrying out 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, negative clinical evaluation, and/or clinical failure.

*Policy Revision and Approval: Fall 2012*

### **Student Accountability**

Students may NOT:

- Take verbal or telephone orders from physicians, midwives, nurse practitioners, or physician assistants
- Transcribe or note physician, midwife, nurse practitioner, or physician assistant orders
- Witness operative or procedural permits
- Perform any skill that violates the Nurse Practice Act, even if under a physician's supervision (i.e. intubation of a patient)
- Perform any delegated **medical** act (i.e. removal of chest tube, arterial line, pacer wires)
- Discontinue central IV lines, including PICC lines
- Access central venous access devices (i.e. porta-cath, medi-port)
- Administer chemotherapy
- Initiate or adjust IV Pitocin drips during the labor process
- Initiate IV therapy in the nursery
- Take possession of the narcotic keys
- Sign out narcotics, witness stocking of narcotics, or remove narcotics from a storage unit
- Initiate infusion of blood products

Students **MUST** be supervised by the preceptor/instructor when:

- Performing any peripheral or central IV related procedure (including IV initiation, hanging solutions, changing tubing, flushes, IVPB, IVP, site dressing change)
- Performing an unfamiliar skill; students should only be performing skills listed on the CON clinical lab check-off lists
- Administering medications by any route

If present during a code, a student may:

- Perform CPR except on a newborn
- Document code procedures
- NOT administer drugs or perform skills other than basic CPR

*Policy Revision and Approval: Spring 2011*

### **2.3 Clinical Student Learning Outcomes**

The clinical objectives guide the experience and behaviors while students are working under the guidance of the clinical instructor and/or preceptor's position. With increasing knowledge and skill during the experience, the student becomes more independent, is able to synthesize theories and concepts related to critical thinking, change theory, conflict resolution, delegation, and changes that

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impact the health care delivery system. Students prepare personal learning objectives, which complement the clinical objectives for the course.

Upon successful completion of the course, the student will:

### **I. PROVIDER OF PATIENT-CENTERED CARE**

1. Assess multiple patients for health status and health needs.
2. Identify actual and potential problems for multiple patients based on assessment data.
3. Formulate individualized plans of care with appropriate interventions and patient outcomes for multiple patients.
4. Implement nursing actions that are based on current theory and research.
5. Evaluate the effectiveness of nursing interventions in meeting the expected outcomes.

### **II. MEMBER OF THE HEALTHCARE TEAM**

1. Function in the role of an entry level professional nurse, providing and coordinating through others, competent, nursing care for groups of patients.
2. Interrelate theory and research knowledge in the formulation, implementation, and evaluation of nursing leadership/management actions.
3. Analyze the concept of professionalism, the organizational culture, and the health care delivery system as they relate to interdisciplinary practice.

### **III. MEMBER OF THE PROFESSION**

1. Demonstrate responsibility and accountability for own actions.
2. Abide by the laws and standards designated by the University of Texas at Tyler College of Nursing, Texas Board of Nursing, ANA Standards of Practice, and the ANA Code of Ethics.
3. Project a professional image by adhering to the dress code and meeting the attendance requirements.

### **IV. COMMUNICATION**

1. Document in a comprehensive, organized, and clearly stated manner.
2. Establish effective working relationships with clinical faculty, facility personnel, peers, patients, and patient's families.
3. Display responsibility and accountability for professional interactions to reflect interpersonal caring.

### **V. PATIENT SAFETY ADVOCATE**

1. Provide safe care by accurately administering medication in real and simulated situations.
2. Ensure accurate transcription of all medical orders.
3. Accurately identify safety risks and appropriately intervene to provide a safe environment for patients, families, and health care providers.

### **VI. MASTERY SKILLS**

#### **A. Patient Care/Nursing Synthesis – Health Promotion, Maintenance, and Restoration**

1. Direct Care of Multiple Patients: Assessments, Medications, Procedures, Charting
2. Discern Acuties/ Levels of Care/ Priorities
3. Synthesis of Old and New Clinical Knowledge
4. Patient Chart Reviews: Critical Nursing Issues
5. Agency Chart Audits: Quality Management
6. Patient and Family Advocacy (Teaching, Support, Referrals, Follow-up)
7. Document Admissions and Discharge Procedures
8. Advanced Patient Interviewing/ Communication
9. Collaborative Care Communication
10. Integration of Theory and Evidence Based Practice
11. Integration of Technology and Information Systems

#### **B. Team Leadership/Charge Responsibilities**

1. Give and Receive Staff Report
2. Make Team Assignments and Delegate
3. Supervise Team



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4. Collaboration: Nurses/ Health Team
5. Staff Teaching on Relevant Topic

**C. Management and Leadership**

1. Evaluate Agency Organizational Chart Components
2. Assess Patient Load and Staffing
3. Analyze Unit Budget Process
4. Survey Quality/ Risk Management
5. Examine Delegation Process
6. Review Staff Evaluation Procedures & Tools
7. Compare Management/ Leadership Styles

## **2.4 Clinical Dress Requirements**

### **Undergraduate Clinical Dress Requirements:**

**General:** It is the philosophy of the School 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.

**Classroom:** Casual or everyday 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 items. Shoes must be worn. See items to be avoided below.

**Professional/Clinical Presentations:** Business or dressy day social: suit, dress, dressy separates, jacket, tie, nice fabrics, and dress shoes. Denim, jeans, t-shirt or other casual clothes are not considered appropriate and are not allowed. For workshops/seminars attended by students, professional/business attire will be worn. Students will wear a clean, white lab coat, with the UT Tyler School of Nursing patch, over professional attire at the discretion of the nursing instructor.

**Skills Laboratory and Simulation:** The school clinical laboratory setting is designed to simulate the hospital or health care clinical area. Students will wear the adopted uniform with name badge and UT Tyler School of Nursing patch on the front left pocket area while in the Skills laboratory and Simulation setting.

**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 will wear lab coat with name badge and UT Tyler school patch. Professional dress will be worn under the lab coat. The following items will be avoided in the clinical areas: jeans, shorts, sandals, jogging/athletic suits, t-shirts, ball-caps, etc.

**Clinical Experience:** When attending any clinical experience students are required to wear the adopted student uniform with name badge and school patch. Professional dress will be worn in appropriate clinical settings as directed by the clinical faculty with white lab coat, name badge and school patch (see items to avoid in clinical areas). Students are to remember that whenever they are visiting a clinical agency or any clinical site, they are a representative of UT Tyler and the School of Nursing and are expected to be professional in appearance and behavior at all times. Students will refrain from wearing student uniforms to non-UT Tyler related activities (restaurants, shopping, etc.)

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 pocket area of lab coat and uniform top.
- b) The UT Tyler name badge with photo will be worn in all clinical settings. 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 ankles.
- d) Clean, white clinical shoes or white leather athletic shoes should be worn, no canvas, mesh, or clogs (shoes may be mostly white and if stripes or logos are on shoes, these must be minimal and light colored). Shoes must be secured at heel with fixed back.

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- 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); no necklaces or bracelets (only Medic Alert). Students 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; no polish or artificial nails.
- 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.

Failure to comply with the above requirements may result in an unexcused clinical absence and/or negative clinical evaluation.

In order to meet the variety of needs for warmth the following options for undershirts and/or jackets are permissible:

- l) No undershirt for females are required if uniform top neckline is such that complete modesty is maintained, no cleavage is to be showing.
- m) Sleeveless white round neck tank top.
- n) A short sleeve, round neck, royal blue or white top available through designated vendor.
- o) A 3/4 length sleeve, white top available through designated vendor.
- p) Men will wear a round neck white undershirt without visible logos or advertising. Short sleeves should not be visible hanging from under sleeve of uniform top.
- q) Long sleeve or turtleneck tops are not acceptable options.
- r) A royal blue, cotton jacket available through a designated vendor with the UT Tyler School of Nursing patch on the upper left pocket area, may be worn over the student's matching UT Tyler uniform.

Some individual situations may require collaborative effort by faculty to reach an appropriate solution to best deal with tattoos, skin disorders etc.

**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 styles, 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.

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.**

Revised: Fall 2015

## **2.5 Learning Lab/Simulation Center Guidelines**

Introduction While you are in a learning lab at a UT-Tyler College of Nursing facility in the student role, you should be respectful of the lab environment; this time is considered a clinical experience.

### UT-Tyler Policy

1. All student learners will follow the skills laboratory student dress code while participating in lab experience. Dress code may be altered at the discretion by the faculty of the course based on the intent or need of the lab.

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2. It is the student's responsibility to bring the required, standard equipment for the learning lab/simulation experience, including, but not limited to textbooks, lab book, syllabus, stethoscope, etc.
3. Students are to complete any required preparation for the lab experiences, i.e. watching of required videos, completing case studies, reading assigned articles or text, completion of ATI skill modules, etc.
4. Safety for all participants must be ensured, i.e.
  - a. Keep Lab neat and orderly.
  - b. Put equipment where instructed.
  - c. No equipment should be moved, touched, or disconnected unless supervised by the clinical faculty or lab coordinator.
  - d. Be aware of any wires and tubes which may pose a risk for falls or patient endangerment.
5. Students are to speak with their peers and clinical instructor with professional communication.
6. No food or drink is allowed in the simulation area/skills lab except with instructor approval.
7. Do not sit on any bed; there are chairs and tables available.
8. Any supplies or equipment checked out from the lab needs to be returned to the skills lab coordinator by the required date. Failure to do will result in an incomplete in the course until the equipment is returned or may require replacement cost.
9. Phones are to be put away and silenced while in the learning labs. Students are not to video or audio record any learning lab/simulation experience.

#### Mannequin Care

10. Consider all mannequins (or peers acting as patients) to be true patients and treat them with respect – keep them covered and dressed. Maintain privacy between your patients (mannequins or peers) by pulling screens or pull drapes as necessary.
11. Do not move, reposition, or disconnect any mannequin unless instructed by the lab coordinator.
12. Do not apply or insert any substances, such as Betadine, KY jelly, IV catheters, and Foley catheters to any mannequin without specific direction from your instructor.
13. There are specific mannequin lubricants and tapes available. Students are not to perform any practice task training on the high fidelity mannequins as replacement parts are expensive; instead, please use the task trainers for practice.

## **2.6 General Clinical Information**

### **Guidelines for Clinical Practice**

- Clinical orientation will be completed prior to the first scheduled clinical experience.
- All students meet with their clinical instructor the first week of the clinical rotation to determine clinical experience objectives and learning experiences.
- All students must submit a list of 3-4 personal goals to achieve during the semester specific to nursing leadership and management, pertinent to personal career advancement after graduation. Submit these goals to the clinical instructor by the first day of clinical.

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- Clinical preceptors are chosen by clinical faculty, depending on the clinical area requested. Preceptors will meet criteria set by the Texas Board of Nursing and the CON. Students will not establish a preceptorship with their own supervisor. Clinical may not be on the same unit where a student is employed.
- **Students will not complete any clinical activities until the formal preceptor agreement is signed. Any clinical time completed but not scheduled with the clinical faculty will not count toward the student's total clinical hours.**

### **Clinical Attendance**

- Attendance in clinical is **MANDATORY**. If an absence is necessary, the student must notify the clinical faculty and the clinical preceptor at least one hour prior to the scheduled clinical time. If you are going to be late, you must also notify the clinical facility and clinical preceptor. Failure to do so will be considered a breach of accountability and will result in an unsatisfactory clinical evaluation for that day. Prior approval must also be secured from clinical faculty to leave the clinical site early.
- 112.5 clinical hours are required in this course. You may get permission to use eight hours for an appropriate continuing education opportunity.
- A student missing clinical will present for approval a written plan as to how he/she will make up the clinical time. Make up time for missed clinical time will be arranged at the discretion of the clinical faculty.
- Any student who cannot/does not make up clinical time as determined by the clinical faculty, will be assigned an unsatisfactory for that clinical day.
- Any student with more than one unsatisfactory clinical time will fail the clinical component and repeat the entire course.
- Students working a shift prior to the assigned clinical experience are at high risk for unsafe clinical practice.

### **Immunizations/CPR/Professional Insurance**

Students are responsible for providing proof of professional liability insurance coverage, CPR certification, and immunizations prior to clinical experiences. Students will not be allowed to start their clinical rotation until all requirements are met.

The University of Texas at Tyler, hospitals and other health facilities do **NOT** cover any medical expenses as a result of accident or injury; thus, each student is responsible for any medical or hospitalization charges that occur.

### **Student Clinical Evaluations**

Clinical student evaluations will be placed in the student's file at the end of the semester for each clinical course.

### **Clinical Conferences**

Clinical conferences will be arranged after clinical experiences, and will interrelate both theory and research knowledge. Each student will be required to link all clinical experiences to course material and to locate and discuss findings pertinent to the clinical learning experience. Attendance is required at each designated meeting.

Failure to meet and actively participate during a scheduled clinical conference will constitute an unsatisfactory clinical.

### **Clinical/Reflective Practice Journals**

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The purpose of a clinical journal in this course is to provide a record of professional development. This journal is intended to reflect attitudes and insights about one's daily experiences in the clinical environment, and should be reflective of your critical thinking about those experiences. Clinical journals will focus on leadership issues, on synthesis of nursing care information and reflective practice to demonstrate clinical excellence.

Completed journals must be computer generated and should include specific weekly goals.

### **Validation of Student Clinical Performance**

**EACH day's** clinical experience times will be verified by the clinical preceptor on the Validation Log. Evaluation conferences may be scheduled as deemed necessary by the student, preceptor, or faculty.

### **Completed Written Work**

When submitting written work to faculty, be sure your name is on the work. Assignments are to be submitted with the instructor's name. All papers are the property of the University.

## **2.7 CLINICAL ROTATION SCHEDULE**

**FIRST CLINICAL ROTATION SCHEDULE:** 5/24/16 – 6/24/16

**SECOND CLINICAL ROTATION SCHEDULE:** 6/26/16 – 7/22/16

Clinical Evaluations TBD by clinical faculty

**COLLEGE OF NURSING  
THE UNIVERSITY OF TEXAS AT TYLER**

**CLINICAL INTRAVENOUS POLICY**

I \_\_\_\_\_ understand that at no time in any clinical experience in the nursing program will I be allowed to prepare or perform any peripheral or central line intravenous (IV) procedures without direct visual supervision of either a clinical preceptor or UT Tyler clinical instructor. These procedures include, but are not limited to:

- ✓ Initiating an IV
- ✓ IV push medications
- ✓ IV piggyback solutions
- ✓ Hanging an IV solution
- ✓ Flushing an IV line
- ✓ Changing IV tubing
- ✓ Site dressing changes

I understand that if I violate this policy at any time I will receive a clinical failure, thus failing the clinical course. The severity of the violation will determine if I am allowed to continue in the nursing program.

      NURS 4631       Semester:  Fall  Spring  Summer

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Printed Name

Approved: Student Affairs- 4/11; Undergraduate Studies- 5/11  
(Place in student's file)

**Please access this form on Blackboard/Course Documents/Clinical Forms; copy, complete, and turn into clinical instructor.**

### AUDIO/VIDEO-RECORDING AGREEMENT

I have been given permission to record the following class, NURS 4631. 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
_____	<u>NURS 4631</u>
Signature of Student	

I have erased all recordings made during this current semester in NURS 4631.

_____	_____
Signature of Student	Date

Revised with permission from TCU  
Approved FO: 10/06

**Please copy, complete, and turn in first day of class if recording.**

## Confidentiality and Privacy

### Violations of confidentiality include but are not limited to:

1. Photocopying patient documents, removing patient documents from the clinical site, and postings of patient information on Internet social networking sites (Facebook®, MySpace®, Twitter®, YouTube®, etc.) as well as online blogs and journals.
2. Contacting patients/patients' family members through a social networking system.
3. Photographing in any clinical setting. Taking and/or posting any picture taken within a clinical facility without written permission of the facility or patient (even if the patient's identity is not disclosed) is a breach of the **Health Insurance Portability and Accountability Act (HIPPA)**.
4. Discussing/posting any patient information related to the clinical facility one is assigned on Internet social networking sites or in a public place.
5. Social networking, texting, email, and other recreational computer use is prohibited during class or clinical time.
6. Using U.T. Tyler, College of Nursing's name, logo, or other information in one's personal social networking profile. Pictures of oneself should not be posted wearing U.T. Tyler nursing attire. Social networking mediums, blogs, Twitter® and Internet/electronic mail, all are considered public domain.

Failure to comply with the above guidelines will result in disciplinary action which can include dismissal from the program. Any student found in violation of the above mentioned policies and/or any policies related to conduct unbecoming a University of Texas at Tyler student, is subject to procedural disciplinary action as outlined in the U.T. Tyler Manual of Policies and Procedures for Student Affairs: Specifically Sec 8-801 and 8-804:

<http://www2.uttyler.edu/mopp/documents/8Student%20Conduct%20and%20Discipline.pdf>

### **Type your signature and date in the space below**

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

\_\_\_\_\_  
Date

NURS 4631

Approved: UG Studies: 5/11

**Please access this form on Blackboard/Assignments and submit first day of class.**



**Student Affirmation Form**  
**(Please initial each statement)**

- \_\_\_\_\_ 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.
- \_\_\_\_\_ After any simulated learning lab experience, I will not share details and activities with other students who have not participated in the learning experience.

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Student's Printed Name

NURS 4631  
 Course

Approved: University of Texas System-Spring 1996  
 Faculty Organization-Spring 1996  
 Revised: Spring 2000; May 2004, Summer 2005, Fall 2011

**Please access this form on Blackboard/Assignments and submit first day of class.**

## Social Networking Policy

Online social networking mediums, such as Facebook® and MySpace®, etc. may be effective modalities for students to connect in positive ways. However, students must be aware of, and sensitive to, the information and pictures they post (of themselves and others).

The **purpose** of this policy is to outline the privacy and confidentiality issues related to students' postings to ensure safeguarding of The University of Texas at Tyler (U.T. Tyler), College of Nursing's identity, integrity and overall reputation, in an effort to prevent violations of confidentiality and privacy.

**Social Networking** (definition) – Any activity that involves interaction with other individuals/users in an online environment, *i.e.*, Facebook®, Twitter®, MySpace®, Flickr®, Friendstar®, Classmates.com®, LinkedIn®, Xanga®, Bebo®, etc.

([http://en.wikipedia.org/wiki/List\\_of\\_social\\_networking\\_websites](http://en.wikipedia.org/wiki/List_of_social_networking_websites)). In addition, the use of other electronic devices to record pictures, images, and other information or data that may be stored, reviewed, or shared with others either immediately or at a future date are considered social networking.

For purposes of this policy, this interaction includes, but is not limited to, browsing other users' profiles/personalized web pages, browsing other users' photos, reading messages sent through social networking forums, and engaging in online messaging services, such as instant messaging or email that is in any way related to U.T. Tyler or the College of Nursing or activities conducted while in attendance at the University. The following provides guidance as to what type of behavior is inappropriate relative to online social networking. These guidelines are not all inclusive; rather, they are intended to be used as a foundation for sound decision making.

Students are encouraged to refer to the following which was prepared by the National Council of State Boards of Nursing (NCSBN): *Professional Boundaries: A Nurse's Guide to the Importance of Professional Boundaries*, located at: [https://www.ncsbn.org/Professional\\_Boundaries\\_2007\\_Web.pdf](https://www.ncsbn.org/Professional_Boundaries_2007_Web.pdf)



## **2.7 General Information on Virtual ATI Review**

Students will be enrolled in the Virtual ATI Review course after they have completed the initial RN Comprehensive Predictor exam. Students will receive information on how to complete an orientation to the review course and a coach/ATI faculty member will be assigned to the student to develop an individualized learning plan based on their exam results. Students will be contacted by their assigned coach/ATI faculty member via their Patriots email account. Students will use their existing ATI username and password to log into the virtual classroom ([www.atitutor.com](http://www.atitutor.com)).

1. The virtual classroom includes nine content modules with more than 275 learning activities. Each module contains an ATI Content Mastery Series® Review Module e-book, a case study, quizzes of the week, and alternate-item questions quiz, which gives students access to more than 300 practice questions.
2. Students follow a similar order of module review, but each student will receive individualized feedback after each assessment and will progress through the review according to their performance and participation.
3. The sequence of the modules includes the following.

Module 1: NCLEX Strategies includes NurseLogic® 2.0 Active Learning Templates, and additional test-taking strategies.

Module 2: Fundamentals

Module 3: Pharmacology

Module 4: Medical Surgical

Module 5: Maternal Newborn

Module 6: Nursing Care of Children

Module 7: Mental Health

Module 8: Leadership

Module 9: Predictor and NCLEX Readiness includes recommendations for a final review before taking the predictor, criteria to determine the Green Light, how to remain ready for NCLEX after receiving the Green Light status, and requirements for preparing for a predictor retake, if needed.

4. The student will be directed to review the learning activities where they feel review is needed to prepare for the Virtual-ATI assessment. Once the assessment is taken, the student will receive individualized feedback and remediation from their coach based on their score and the topics identified on the assessment.
5. The student will then complete the requested remediation and return to the coach in a classroom message for feedback and the next assessment code. The student may be asked to take additional assessments in the same content area until demonstrating mastery of the content area.
6. Each week a progress report is generated and sent to all course faculty to see student participation from the previous week. Students must remain active and participate weekly in order to obtain the additional point from the ATI process rubric.