



FLORIDA
ATLANTIC
UNIVERSITY

COURSE CHANGE REQUEST Undergraduate Programs

Department Nursing
College Nursing

UUPC Approval 3-29-21
UFS Approval _____
SCNS Submittal _____
Confirmed _____
Banner Posted _____
Catalog _____

Current Course Prefix and Number NUR 4829L **Current Course Title** Nursing Practice Immersion

Syllabus must be attached for ANY changes to current course details. See Checklist. Please consult and list departments that may be affected by the changes; attach documentation.

Change title to:

Change prefix
From: _____ To: _____

Change course number
From: _____ To: _____

Change credits*
From: _____ To: _____

Change grading
From: _____ To: _____

Change WAC/Gordon Rule status**
Add Remove

Change General Education Requirements***
Add Remove

* Review Provost Memorandum
** WAC/Gordon Rule criteria must be indicated in syllabus and approval attached to this form. See WAC Guidelines.
*** General Education criteria must be indicated in syllabus and approval attached to this form. See GE Guidelines.

Change description to:
Academic Service Learning (ASL) Designation

Change prerequisites/minimum grades to:

Change corequisites to:

Change registration controls to:

Please list existing and new pre/corequisites, specify AND or OR and include minimum passing grade (default is D-).

Effective Term/Year for Changes: Summer 2021

Terminate course? Effective Term/Year for Termination:

Faculty Contact/Email/Phone Joy Longo / jlongo@health.fau.edu / 561-297-3389

Approved by

Department Chair [Signature]

College Curriculum Chair [Signature]

College Dean [Signature]

UUPC Chair [Signature]

Undergraduate Studies Dean [Signature]

UFS President _____

Provost _____

Date

2/23/21

12/14/20

2-23-2021

3-29-21

3-29-21

Email this form and syllabus to mjennings@fau.edu seven business days before the UUPC meeting.

**FLORIDA ATLANTIC UNIVERSITY
CHRISTINE E. LYNN COLLEGE OF NURSING
COURSE SYLLABUS**

COVID-19 Statement

All students in face-to-face classes are required to wear masks during class, and students must sanitize their own workstations upon entering the classroom. Taking these measures supports the safety and protection of the FAU community. Students who do not adhere to these rules will be asked to leave the classroom and/or be removed from the course. Students experiencing flu-like symptoms (fever, cough, shortness of breath), or students who have come in contact with an infected person should immediately contact FAU Student Health Services (561-297-3512).

SEMESTER: Fall 2020

COURSE NUMBER: NUR 4829L

COURSE TITLE: Nursing Practice Immersion

COURSE FORMAT: Clinical

CREDIT HOURS: 4

COURSE SCHEDULE: 180 clinical hours

PREREQUISITES: NUR 4638, NUR 3465, NUR 3465L, NUR 4525, NUR 4525L

COREQUISITES: NUR 4764 and NUR 4764L, NUR 4945L or permission of department

FACULTY:

OFFICE HOURS: By appointment via Zoom or Webex, M-Th

COURSE DESCRIPTION: A precepted integrative clinical providing the opportunity to synthesize foundational concepts and master the competencies and skills of the advanced beginner

in professional nursing. Focuses on integration of one's professional nursing identity within the complex organizational environment in which healthcare is delivered. *Grading: S/U*

COURSE OBJECTIVES: Upon completion of NUR4829L, the student will be able to: *

Becoming competent

1. Synthesize knowledge from the sciences, arts and humanities as a foundation for generalist practice in nursing. (PO 2, 3, 8, 9; Essential I-IX)
2. Use multiple patterns of knowing in responding critically and reflectively to calls within nursing situations in generalist nursing practice. (PO 2, 3, 8, 9; Essential I-IX)
3. Promote well-being for persons and populations across the lifespan in a variety of settings. (PO 1 2, 3, 4, 5, 6, 8; Essential I-IX)
4. Use systematic inquiry to inform decision-making, create nursing responses, and evaluate outcomes. (PO 1, 2, 3, 4, 6, 7, 8, 9; Essential I, II, VI, VII, VIII)

Becoming compassionate

5. Affect change through caring leadership to improve quality health outcomes for persons served. (PO 1, 2, 3, 4, 5, 8, 10, 11; Essential I, II, III, V, VI, VII, VIII, IX)
6. Improve quality and safety within complex environments for healthcare delivery. (PO 2-10; Essential I, II, III, IV, VI, IX)
7. Provide care for and with others with awareness of and respect for cultural differences. (PO 2, 3, 5, 8, 9; Essential I, VIII, IX)

Demonstrating comportment

8. Collaborate with nurses and other healthcare professionals in providing care in complex healthcare systems. (PO 1, 2, 3, 4, 5, 6, 8, 9, 10, 11; Essential I, II, III, VI, VIII, IX)
9. Use effective, professional, caring communication in written, verbal and digital formats. (PO 1, 2, 3, 4, 5, 7; Essential I, IV, VI, IX)
10. Demonstrate skill in using patient care technologies and information systems to promote wellbeing, facilitate decisionmaking and enhance collaboration. (PO 2, 3, 5, 7, 8, 9, 11; Essential I, IV, VI, VII, IX)

Becoming confident

11. Unfold a personal journey of coming to know and care for self. (PO 1, 2, 3, 5; Essential I, VI, VIII, IX)
12. Practice nursing safely and ethically in generalist practice. (PO 1, 2, 3, 4, 5, 8, 9; Essential IIX)
13. Demonstrate integrity and accountability in all situations. (PO

1, 2, 3, 4, 5, 8, 9; Essential VIII, IX) **Attending**

to conscience

14. Care for the environment through stewardship of fiscal, material and natural resources. (PO 2, 3, 4, 6, 12; Essential I, III, V, VIII, IX)
15. Advocate for public policy that honors human dignity and health equity. (PO 2, 3, 4, 5, 6, 7, 8, 10; Essential I, III, V, VI, VIII, IX)
16. Participate in social and political activities that improve healthcare for all. (PO 2, 3, 4, 5, 6, 8, 10; Essential I, III, V, VI, VIII, IX)

Affirming commitment

17. Engage in activities that contribute to development of the profession and self as professional (PO 1-12; Essential I-IX)
18. Create environments that nurture the wholeness of persons served. PO 1-9; Essential I-IX)
19. Use nursing theories and research to guide caring-based reflective nursing practice. (PO 2, 3, 5, 8, 9; Essential I, VIII, IX)

**The 6 subjectives based on Roach's (2002) work organize the course objectives.*

TEACHING LEARNING STRATEGIES:

Clinical experiences in primary care setting; post-conference discussions; written reflection journal; Electronic Record Nursing Documentation.

GRADING AND EVALUATIONS:

Criteria	Percentage	Due Date
Reflective Journals (3)	5%	See Course Schedule
Clinical Project	0%	See Course Schedule
*ATI RN-Predictor	10%	See Course Schedule
N-CLEX Live Review Dates TBD	20%	See Course Schedule
Clinical Evaluation	65%	See Course Schedule
RN Professional Development Primary Care Modules	0%	See Course Schedule
Total	100%	

***Successful completion of NUR 4829L** is based upon the student *satisfactorily* completing each component of the evaluation methods. Successful completion is as follows: 74% for reflective journal and clinical evaluation; RN-Predictor $\geq 92^{\text{nd}}$ percentile of the *Predicted Probability of Passing the NCLEXRN*[®]; NCLEX Live Review 100% attendance all days.

Students who have not scored $\geq 92^{\text{nd}}$ percentile on the first attempt of the RN Predictor must successfully complete all components of remediation which includes Virtual ATI (at the student's expense). Following successful remediation (i.e. receiving the Green Light from Virtual ATI), students must successfully complete a proctored Comprehensive Assessment ($\geq 92^{\text{nd}}$ percentile on a second attempt of the RN Predictor). Students who do not successfully complete all components of remediation, including a proctored on-site Comprehensive Assessment, will not pass NUR 4829L.

GRADING SCALE: Satisfactory (S) and Unsatisfactory (U) grades: A grade of satisfactory signifies that the work is of C quality or better and meets expectations. An unsatisfactory grade indicates that the work is below C quality and no credit will be given for the work undertaken. A grade below C is not passing in the Undergraduate program.

94-100 = A 90-

93 = A- 87-89 =

B+ 84-86 = B

80-83 = B- 77-79

= C+ 74-76 = C

70-73 = C- 67-

69 = D+ 64-66 =

D 61-63 = D-

0-60 = F

REQUIRED TEXTS:

All ATI Materials

Course Materials from NUR4764, NUR4525, NUR3465

Selected Primary Care articles in CANVAS site.

RN Professional Development Modules: located in CANVAS site or hyperlinks.

RECOMMENDED TEXTS:

FAU LibGuides: Essential caring literature: <https://libguides.fau.edu/caring-science-literature>

FAU LibGuides: APA Boot Camp: <https://libguides.fau.edu/apabootcamp>
<https://libguides.fau.edu/c.php?g=324991&p=2180452>

FAU LibGuides: Nursing Boca Raton: <https://libguides.fau.edu/nursing-boca>

Lehne, R. A. (2015). *Pharmacology for nursing care*. (9th ed). Philadelphia: Saunders. ISBN- 978-14160-6249-3.

Smith, S.F., Duell, DJ., & Martin, B.C. (2012). *Clinical nursing skills* (8th ed.). Prentice Hall Co. ISBN13:978-0-13-511473-5.

TOPICAL OUTLINE:

Clinical Weeks

1. Fulfillment of Essential IX Baccalaureate Generalist Nursing Practice
2. Further development of competence, compassion, comporment, conscience, confidence, and commitment

COURSE ASSIGNMENTS:

Clinical practicum – minimum 180 hours with preceptor; 12-hour shifts (no more than 3 shifts/week);

Reflective Journal – 3 reflective journals submitted in CANVAS, focus on primary care clinical experience

Two questions:

- a. How did you come to know yourself?
- b. How did you come to know the other?

Continue reflecting on the ways of knowing that emerge.

This is a model to help guide reflection through ways of knowing

Reflective	Ways of Knowing
Focus on a description of an experience that seems significant in some way.	Aesthetics
What particular issues seem significant enough to demand attention within this experience?	Aesthetics
How were others feeling and what made them feel that way?	Aesthetics
How was I feeling and what made me feel that way?	Personal
What was I trying to achieve, and did I respond effectively?	Aesthetics
What were the consequences of my actions on the patient, others and myself?	Aesthetics

What factors influenced the way I was feeling, thinking or responding?	Personal
What knowledge informed or might have informed me?	Empirics
To what extent did I act for the best and in tune with my values?	Ethics
How does this situation connect with previous experiences?	Reflexivity
How might I respond more effectively given this situation again?	Reflexivity
What would be the consequences of alternative actions for the patient, others and myself?	Reflexivity
How do I NOW feel about this experience?	Reflexivity
Am I more able to support myself and others as a consequence?	Reflexivity
Am I more able to realize desirable practice monitored using caring science as framing perspectives, Carper's fundamental ways of knowing, Mayeroff's ingredients of caring, Roach's 6 C's, the College of Nursing Philosophy?	Reflexivity

Note: Adapted from Johns, C. (2005). Expanding the gates of perception. In C. Johns & D. Freshwater (Eds.) *Transforming nursing through reflective practice* (2nd ed.). pg 3. Oxford, UK: Blackwell Press.

Clinical Project

Students will collaborate with their assigned clinical agency to implement a project related to an identified primary care need of the clinical agency. Projects will be presented to both the agency and to students in the course.

Grading Rubric:

Criteria	Grading
Identified clinical project need with clinical agency	Complete/Incomplete
Develop clinical project	Complete/Incomplete
Present clinical project to clinical agency and/or colleagues	Complete/Incomplete

ATI RN-Predictor - schedule TBA

The ATI RN-Predictor is administered to all students prior to graduation to facilitate preparation for NCLEX exam. Students must achieve $\geq 92^{\text{nd}}$ percentile of the *Predicted Probability of Passing the NCLEX-RN®*. Students who have not scored $\geq 92^{\text{nd}}$ percentile on the first attempt of the RN Predictor must successfully complete all components of remediation which includes Virtual ATI (at the student's expense). Following successful remediation (i.e. receiving the Green Light from Virtual ATI), students must successfully complete a proctored Comprehensive Assessment ($\geq 92^{\text{nd}}$ percentile on a second attempt of the RN Predictor). Students who do not successfully complete all components of remediation, including a proctored on-site Comprehensive Assessment, will not pass NUR 4829L.

NCLEX Live Review – TBA: 8:30 – 4:00 p.m. for 3 days

Students are required to attend all 3 days of the NCLEX live review course in preparation for the NCLEX exam.

Nursing Practice Evaluation Tool: (See Canvas site for copy of tool)

The nursing practice evaluation tool provides documentation of your performance. At a mid-semester conference, the student, preceptor and faculty will review progress to date in meeting the learning outcomes for the course. Strategies to facilitate achievement of the learning goals will be mutually determined. The Professional Practice Lab and electronic resources and additional clinical hours may be used to augment clinical activities in supporting individual growth. The final evaluation conference will provide the final assessment of achievement of goals. At the conclusion of this course, the nursing practice evaluation tool will be jointly reviewed by the faculty, preceptor and student in a conference, signed and placed in the student's file at the College of Nursing. Signing the tool does not indicate agreement with the evaluation; the student's signature indicates that the evaluation has been reviewed.

BIBLIOGRAPHY:

Boxer, E. & Kluge, B. (2000). Essential clinical skills for beginning registered nurses. *Nurse Education Today*, 20, 327-335.

Kiernan, J. S. (2020). Best and worst states for nurses. Retrieved from <https://wallethub.com/edu/best-states-for-nurses/4041/>

COURSE SPECIFIC LITERATURE:

American Academy of Ambulatory Care Nursing (2018). *Scope and standards of practice for professional telehealth nursing* (6th ed.). Pitman, NJ: Author.

Bodenheimer, T., & Mason, D. (2017). *Registered nurses: Partners in transforming primary care. Proceedings of a conference sponsored by the Josiah Macey Fr. Foundation in June 2016*. New York: Josiah Macey Jr. Foundation.

Brommelsiek, M., Graybill, T. L., & Gotham, H. J. (2019). Improving communication, teamwork and situation awareness in nurse-led primary care clinics of a rural healthcare system. *Journal of Interprofessional Education & Practice*, 16, 100268.

Florida Nurse Practice Act: Retrieved from http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=04000499/0464/0464.html

Florida Board of Nursing: Retrieved from <https://floridasnursing.gov/>

Maheu, M. M., Drudez, K. P., Hertlein, M., Lipschutz, R., & Walls, K. (2018). Correction to: An interprofessional framework for telebehavioral health competencies. *Journal of Technology in Behavioral Science*, 2, 106-140.

Vanhook, P., Bosse, J., Flintner, M., Poghosyan, L., Dunphy, L., Barksdale, D. (2018). The American Academy of Nursing on policy: Emerging role of baccalaureate registered nurses in primary care (August, 2018). *Nursing Outlook*, 66(5), 512-517.

ESSENTIAL LITERATURE ON CARING SCIENCE (Revised 2017)

Barry, C. D., Gordon, S. C. & King, B. M. (2015). *Nursing Case Studies in Caring: Across the Practice Spectrum*. New York: Springer. ISBN: 978-0-8261-7178-8

Boykin, A. & Schoenhofer, S. (2001). *Nursing as caring: A model for transforming practice*. Mississauga, Ontario: Jones & Bartlett.

Boykin, A. & Schoenhofer, S. & Valentine, K. (2014). *Health care system transformation for nursing and health care leaders: Implementing a culture of caring*. New York: Springer.

Buber, M. (1970). *I and thou*. New York: Scribner.

Davidson, A., Ray, M. & Turkel, M. (Eds.). (2011). *Nursing, caring, and complexity science*. New York: Springer.

Duffy, J.R. (2013). *Quality caring in nursing and health systems: Implications for clinicians, educators, and leaders*. New York: Springer.

Locsin, R.C (2016). *Technological competency as caring in nursing: A model for practice (2nd ed.)*. Silliman University Press, Philippines.

Mayeroff, M. (1971). *On caring*. New York: HarperCollins.

McFarland, M.R. & Wehbe-Alamah, H. (2017). *Leininger's Culture Care diversity and universality: A worldwide theory of nursing (3rd Ed.)*. Burlington, MA: Jones & Bartlett.

Paterson, J. & Zderad, L.T. (1988). *Humanistic nursing*. New York: National League for Nursing.

Ray, M.A. (2016). *Transcultural caring dynamics in nursing and health care (2nd ed.)*. Philadelphia: FA Davis.

Roach, M.S. (1987). *The human act of caring: A blueprint for the health professions*. Ottawa, Ontario: Canadian Hospital Association.

Rosa, W., Horton-Deutsch, S, & Watson, J. (2019). *A handbook for caring science: Expanding the paradigm*. New York: Springer.

Smith, M.C., Turkel, M.C., & Wolf, Z.R. (2012). *Caring in nursing classics: An essential resource*. New York: Springer.

Watson, J. (2009). *Assessing and measuring caring in nursing and health sciences*.
New York: Springer.

Watson, J. (2018). *Unitary caring science philosophy and praxis of nursing*.
Boulder, CO: University Press of Colorado.

Approved by CON Faculty Assembly, 9/25/2017; Revised Committee on Programs 10/ 8/2018;
Presented for Action to CON Faculty Assembly 10/22/2018, Approved CON Faculty Assembly
10/22/18

COURSE POLICIES & GUIDELINES

The well-being of each student as an expression of successful learning is of great importance to the course professor.

Caring for Self

In this course you will need to be organized, aware of due dates for assignments, and committed to devoting adequate time for successful completion of coursework. Being organized is essential for achieving your goals and integral to caring for yourself.

Collegial Caring

A supportive environment for learning is a caring environment in which all aspects of persons are respected, nurtured, and celebrated. The course is a commitment of active and thoughtful participation in which each one of us is both teacher and learner. A caring community is one in which you nurture each other throughout the semester.

Online Course Participation

This course has an online delivery format and clinical practicum. Students are expected to check email frequently and participate in all online course activities and assignments. If you are experiencing major illness or other issues that impact your participation in this course, contact the professor immediately to formulate a resolution.

Clinical Practicum

This course is a clinical practicum and hours related to this clinical practicum must be completed during the semester. All required clinical and course documentation must be completed.

Student Credentials

Student credentials must be up to date in order to practice in a clinical setting. The College of Nursing uses Certified Background/Castle Branch system to track all background checks and health requirements. Prior to the start of clinical, the student must be in full compliance with Castle Branch which is verified by the CON Compliance Officers. The student cannot begin clinical until this is completed. Please contact Colleen Alcantara-Slocombe if you need assistance, email: slocombe@health.fau.edu or phone: 561-297-2872.

Beginning of Term Checklist for Students

- Read the preceptor manual.

- Preceptor Agreement Form to be signed by preceptor on the first day of clinical (form will be provided by clinical faculty) and submitted to Clinical Faculty along with preceptor contact information.

Documentation of Clinical Hours

Students will be required to submit the *Weekly Clinical Evaluation Rubric and Rating Form* in the CANVAS site. All clinical hours are to be verified by the preceptor. Falsified clinical hours are considered plagiarism.

Professionalism

Professionalism is expected in the clinical setting such as arriving on time on expected days in FAU clinical attire and FAU name badge. **Students are not allowed to be in the clinical setting when the University is closed.**

Assignments

All course assignments must be completed by the due dates on the Course Schedule/CANVAS site. Point deduction of one point per day late will be applied to any assignments submitted past the due date without prior approval of course faculty.

Policy for Late Assignments

If you are experiencing some unusual situation, you must contact the professor before the due date of an assignment. Otherwise, all assignments must be submitted by the due date.

Email and Netiquette

Students are required to use their FAU e-mail and are advised to check it frequently for important course announcements. Communication using web-based tools has created the need for a protocol called “netiquette” that encourages efficient and effective communication while discouraging abuse of email, chat sessions, and discussion boards. Proper grammar and spelling is expected. Avoid all text shorthand messages. Civil and respectful messages to faculty and students is required. Visit <http://www.albion.com/netiquette/corerules.html> for more information. No exceptions are permitted.

Academic Integrity

Student work is done independently or in groups if assigned in that manner. Sharing course work or assignments with other students is a breach of academic integrity. Plagiarizing will result in an automatic "0" for all papers, exams, and assignments. Plagiarism includes definitions in the university handbooks and the APA 6th edition manual (this includes turning in work that belongs to someone else, working on assignments that are not group work in groups and turning this in as individual work, and turning in the same work/assignment in more than one course.

Changes in Course Format or Schedule

At times it may be necessary to change the course schedule. The professor can make these changes for the benefit of student learning.

ACADEMIC SERVICE-LEARNING STATEMENT:

This course is designated as an “**academic service-learning**” course. The assistance you provide to the agency/organization during your academic service-learning (AS-L) experience is a service to the community and will allow you to apply knowledge from the course to local, national, and/or global social issues. Throughout this course you will be participating in AS-L activities while demonstrating civic engagement at campus, local, national, and/or global community levels. You will also reflect on your AS-L experience and the impact on the community as well as your professional development.

Criteria:

1. **Relevant and Meaningful Service in the Community** - The AS-L project is applicable to the course and worthwhile in meeting community needs.
2. **Enhanced Academic Learning** - The AS-L project is learned in the classroom and provide an experience in a “real world” setting.
3. **Purposeful Civic Engagement** - The AS-L project is designed to have students practice the learning strategies and/or content of the class that meets course learning objectives in a community setting.
4. **Critical Reflection** - The AS-L project requires reflection on how the project links to (1) course objectives, (2) the impact of the students’ work in the community, and (3) the impact on the students’ personal and professional development.
5. **Hours Required** - FAU requires students spend a minimum of 10 hours on the AS-L project.
6. **Assessment** - Syllabus states how AS-L project will be assessed.*
7. **Assumption of Risk Statement*** (<http://www.fau.edu/lead/pdf/asl-risk-waiver.pdf>)

Academic service-learning notation of hours will post to your transcript with submission of hours to your faculty instructor. An Academic Service-Learning Student Survey is required to be taken at the end of your AS-L project. Please visit the Weppner Center for LEAD & Service-Learning website, www.fau.edu/leadandserve, for the survey link and more information on FAU’s Academic Service-Learning program.

COLLEGE OF NURSING POLICIES

The faculty reserves the right to make changes in course content and requirements.

Policies below may be found in:

a). The Christine E. Lynn College of Nursing Graduate Handbook located at:

<http://nursing.fau.edu/uploads/docs/439/Graduate%20Student%20Handbook%20%20Rev%20June%202012.pdf>

b). Florida Atlantic University’s Academic Policies and Regulations

<http://www.fau.edu/academic/registrar/FAUcatalog/academics.php> and <http://www.fau.edu/regulations>

CODE OF ACADEMIC INTEGRITY:

Students at Florida Atlantic University are expected to maintain the highest ethical standards. Academic dishonesty is considered a serious breach of these ethical standards, because it interferes with the university mission to provide a high quality education in which no student enjoys an unfair advantage over any other. Academic dishonesty is also destructive of the university community, which is grounded in a system of mutual trust and places high value on personal integrity and individual responsibility. Harsh penalties are associated with academic dishonesty. For more information, see University Regulation 4.001. If your college has particular policies relating to cheating and plagiarism, state so here or provide a link to the full policy—but be sure the college policy does not conflict with the University Regulation. For more information, see: <http://www.fau.edu/ctl/AcademicIntegrity.php> **CON**

Academic Integrity:

<http://nursing.fau.edu/academics/studentresources/graduate/policiesregulations/academic-integrity-policy.php>

The College of Nursing regards adherence to the Code of Academic Integrity as a professional competency and an expectation of all students. **ANY** act of dishonesty that violates the code of academic integrity and misrepresents your efforts or ability is grounds for immediate failure of the course.

DISABILITY STATEMENT:

In compliance with the Americans with Disabilities Act Amendments Act (ADAAA), students who require reasonable accommodations due to a disability to properly execute coursework must register with Student Accessibility Services (SAS) and follow all SAS procedures. SAS has offices across three of FAU’s campuses – Boca Raton, Davie and Jupiter – however disability services are available for students on all campuses. For more information, please visit the SAS website at <http://www.fau.edu/sas/>

To apply for SAS accommodations: <http://www.fau.edu/sas/>

COUNSELING AND PSYCHOLOGICAL SERVICES (CAPS) CENTER

Life as a university student can be challenging physically, mentally and emotionally. Students who find stress negatively affecting their ability to achieve academic or personal goals may wish to consider utilizing FAU’s Counseling and Psychological Services (CAPS) Center. CAPS provides FAU students a range of services – individual counseling, support meetings, and psychiatric services, to name a few – offered to help improve and maintain emotional well-being. For more information, go to <http://www.fau.edu/counseling/>

INCOMPLETE POLICY:

The Incomplete Grade Policy is enforced. A student who registers for a course but fails to complete the course requirements, without dropping the course, will normally receive a grade of “F” from the course instructor. A student who is passing a course but has not completed all the required work because of exceptional circumstances may, with the approval of the instructor, temporarily receive a grade of “I” (incomplete). This must be changed to a grade other than “I” within a specified time frame, not to exceed one calendar year from the end of the semester during which the course was taken.

ATTENDANCE POLICY:

Students are expected to attend all of their scheduled University classes and to satisfy all academic objectives as outlined by the instructor. The effect of absences upon grades is determined by the instructor, and the University reserves the right to deal at any time with individual cases of non-attendance. Students are responsible for arranging to make up work missed because of legitimate class absence, such as illness, family emergencies, military obligation, court-imposed legal obligations or participation in University approved activities. Examples of University-approved reasons for absences include participating on an athletic or scholastic team, musical and theatrical performances and debate activities. It is the student's responsibility to give the instructor notice prior to any anticipated absences and within a reasonable amount of time after an unanticipated absence, ordinarily by the next scheduled class meeting. Instructors must allow each student who is absent for a University-approved reason the opportunity to make up work missed without any reduction in the student's final course grade as a direct result of such absence.

RELIGIOUS ACCOMMODATION:

In accordance with rules of the Florida Board of Education and Florida law, students have the right to reasonable accommodations from the University in order to observe religious practices and beliefs with regard to admissions, registration, class attendance, and the scheduling of examinations and work assignments. Students who wish to be excused from coursework, class activities, or examinations must notify the instructor in advance of their intention to participate in religious observation and request an excused absence. The instructor will provide a reasonable opportunity to make up such excused absences. Any student who feels aggrieved regarding religious accommodations may present a grievance to the director of Equal Opportunity Programs. Any such grievances will follow Florida Atlantic University's established grievance procedure regarding alleged discrimination. For more information, see:

<https://www.fau.edu/provost/resources/files/religiousaccommodations-students-and-faculty-821-15.pdf>

CON Religious Accommodation: <http://www.fau.edu/sas/New.php>

USE OF STUDENT COURSE MATERIAL

The Christine E. Lynn College of Nursing may use students' course-related materials for legitimate institutional purposes, such as accreditation, university review process, or state board of nursing review process, etc. In such cases, materials will be used within the college and university.

PROFESSIONAL CLINICAL APPEARANCE AND ATTIRE POLICY

The Clinical Appearance and Attire Policy must be strictly followed. Faculty and student comportment directly reflect upon the Christine E. Lynn College of Nursing's (CELCON) reputation and standing within our communities.

In order to maintain a professional image, **any time in uniform** each student is expected to follow the CELCON policy along with any additional institutional policies*. Modifications for religious accommodations will be honored.

All clinical attire (whether in-patient or community setting) must be clean and non-wrinkled.

Faculty members may tell a student who is not in compliance with any part of the Clinical Appearance and Attire Policy to leave the clinical setting. The lost clinical time cannot be rescheduled, and a clinical warning may be issued.

A student may receive one warning re: policy violation in any area listed below and at such time if possible is expected to immediately correct the issue in order to remain in the Professional Practice Lab/Simulation or clinical/community setting. A second policy violation in any area listed below may result in failure of the course.

Clinical Uniforms:

- Clinical uniforms/attire are to be purchased through FlynnO'Hara Uniforms: Ourcompany.flynno'hara.com
- The FlynnO'Hara Lab coat may be worn over the uniform.
- Only plain white or navy blue under shirts with $\frac{3}{4}$ length sleeves may be worn under the uniform.
- Plain white or black closed-toe and closed-back non-permeable shoes may be worn with white or black stockings or ankle socks. Shoes must not be altered to conceal logos, stripes, or other areas with color.

Required Clinical Equipment (Purchased through MDA)

- Stethoscope (black or navy)
- Watch with second hand is required
- Penlight
- Bandage scissors
- pen

Name Badges

- Students must wear name badges (purchased through FlynnO'Hara Uniforms) as well as the FAU photo ID (Owl Card) or facility issued picture ID whenever entering a clinical setting.

Nails; Hair; Skin

- Nails must be short and clean - no longer than **3mm** (1/4 inch).
- No artificial nails, nail polish, nail jewelry
- Hair must be natural in color, worn off the collar (no pony tails), away from face while in uniform

- Facial hair must be natural in color, clean and trimmed to ¼ inch; otherwise, must be covered
- No visible tattoos/body art
- No artificial eyelashes
- No fragrances are permissible

Jewelry

- No more than 1 small stud earring in each ear is permitted. Loops, hoops, dangle earrings are **Not Permitted.**
- No tongue jewelry
- No facial piercings/jewelry.
- **No other visible body jewelry is permitted.**
- Watch with a second hand is required.
- Only a wedding band is permitted.

*When a clinical partner’s clinical attire policy is stricter than the CELCON’s policy, it supersedes the CELCON policy. Based upon input/feedback from clinical partners, the CELCON policy can be updated and enforced at any time.

UPC, April, 2018; March, 2019

Florida Atlantic University, Christine E. Lynn College of Nursing Weekly Clinical Evaluation Rubric and Rating Form

Course _____ Semester _____ Student _____

Dates of Clinical _____

Faculty _____

	Clinical Competency	Criteria used to identify successful accomplishment of the competency	1	2	3	4	5	6
Critical Element #3,4; course objective #7, 8	Interprofessional Communication	Collaborates and effectively communicates with other health care providers/members (includes instructor) in meeting the patient's calls for nursing - designing plan of care, interact, report, collegial, SBAR						

Professionalism and Leadership - Critical Element #3, 4, 5; course objective #3, 4, 6, 14	Professional Values	Adheres to policies and procedures outlined in nursing handbook, RN scope of practice (ANA, AHNA and Florida Board of Nursing standards).							
	Ethical/Legal Issues	Accountable for assigned client care, Adheres to HIPAA, medical facility policies and procedures							
	Management of Care	Manages client care incorporating time management to organize tasks and effective use of resources. (appropriate and cost effective)							
	Role of the BSN student	Demonstrates accountability for completing assignments on time and for professional behaviors in the clinical environment, well prepared, on time, utilizes time effectively, seeks guidance appropriately, actively participates in pre and post clinical discussions.							
Person-Centered Care: Critical Element #1, 2; course objective #1, 2,	Therapeutic Communication	Uses therapeutic verbal and nonverbal communication in client care, Avoids barriers to communication, develops rapport							
	Caring	Uses caring behaviors (call by preferred name, comfort, respect), Provide care in a safe, timely and efficient manner, Answer call lights, Assess pain and respond appropriately, Identifies needs holistically (physiologic, spiritual, cultural and psychosocial), Identifies cultural and spiritual values, beliefs and attitudes related to client care (Students and clients)							

	ADLs	Perform ADLs to meet client needs (shows initiative and ability to perform independently)							
	Data Collection - Focused Assessment	Makes accurate observations, Data collection is complete and obtained from multiple sources and ways of knowing (client, chart, staff, and family), Performs head to toe and focused assessments and reports abnormalities.							
	Client Education	Identifies learning needs and provides information from established teaching plan. Evaluates client understanding (Teach Back)							

	Clinical Competency	Criteria used to identify successful accomplishment of the competency	1	2	3	4	5	6
Evidence Based Practice and Nursing Judgement: Critical Element #1, 2, 4; course objective #5, 10, 11, 12, 16	Clinical reasoning, Evidence-Based	Identifies complications or changes in client condition and reports deviations promptly. Uses clinical reasoning to assess, choose interventions, and evaluate client responses; evidencebased nursing responses						
	Prioritization	Outlines daily plan of care, adjusts as needed, sets appropriate priorities and provides rationale for client care priorities						
Quality Improvement and Safety: Critical Element #1, 2, 5; course objectives #10, 11,	Quality Client Care	Identifies and addresses client concerns						
	Safety	Safe and competent nursing skills, medication administration (accurately, safe manner, timely, evaluates response to medications), standard precautions and treatments/procedures, Maintains a safe environment						
Informatics: Critical	Documentation/Confidentiality	Documents in a timely, clear, concise, and prompt manner, maintains confidentiality of client information						

Element #3, 4, 5; course objective #9, 10, 13, 15	Technology – safety equipment	Responds appropriately to safety equipment (alarms, call lights, bar codes, etc.)							
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Note: Weeks 7-12 are found in canvas

CLINICAL PERFORMANCE EVALUATION RUBRIC

Scale/Label	Standard Procedure	Performance Quality	Assistance
MS (minimal supervision) 94-100%	Safe/Accurate	Consistently meets evaluation criteria with minimal direction. A satisfactory score of “S” must be achieved on each of the 6 caring competencies and the critical elements by the final clinical performance evaluation in order to proceed in the program.	Minimal direction not required
D (Developing) 84-93%	Safe/Accurate	Performance is improving and becoming more consistent; needs moderate level of assistance or supervision, seeks learning experiences. By the final evaluation for the course, all D’s must be S’s to pass the course at minimum 73%. A satisfactory score of “S” must be achieved on each of the 6 caring competencies and the critical elements by the final clinical performance evaluation in order to proceed in the program.	Occasional direction
E (Emerging) 74-83%	Mostly Safe/Accurate	Partial demonstration of skills. Inefficient or uncoordinated. Delayed time expenditure. A developmental plan should be prepared collaboratively for areas of “improvement needed” in formative evaluations. All E’s must be Ds or MS by midterm. A satisfactory score of “S” must be achieved on each of the 6 caring competencies and the critical elements by the final clinical performance evaluation in order to proceed in the program.	Frequent direction

NS (Needs Supervision) 67-73%	Questionably Safe/ Accurate	Performance is inconsistent and/or needs high level of assistance or supervision (60% - 70%). Strengths and areas for improvement should be identified in a comprehensive evaluation by the 3rd week of clinical. A developmental plan should be prepared collaboratively for areas of "improvement needed" in formative	Continuous direction
		evaluations. A score of NS requires a faculty narrative along with a formal action plan. A score of NS post midterm requires a formal meeting with the clinical faculty, BSN Clinical Coordinator, and the student. Two NS's after the formal meeting will result in NE and failure of the course.	
NE (Not Evident) 0-66%	Unsafe/Inaccurate	Does not meet Expectations even after remediation/developmental plan. Unable to demonstrate procedure. Lacks confidence, coordination and efficiency.	Continuous direction
NA - not applicable	Not observed		

**Nursing Practice Evaluation Tool: Critical Elements
Christine E. Lynn College of Nursing**

Student _____ **Clinical Placement** _____

Faculty _____ **Semester/Year** _____

Critical Elements: The following standards are critical to safety in professional nursing practice. Failure to demonstrate safe performance in any of these Critical Elements is failure in the course regardless of proficiency in the performance of other nursing care behaviors or written work. The 6 Cs (confidence, compassion, comportment, competent, conscience, and commitment) are embedded within each critical element.

- 1. Provides patient centered**

care, which focuses on including patients in all decisions and providing compassionate care.

Yes ____ No ____

2. Demonstrates authentic presence and caring behaviors that nurture wholeness (active listening and responding to “that which matters to those nursed”).

Yes ____ No ____

3. Collaborates with other health care providers in designing a plan of care and meeting the patient’s calls for nursing using appropriate professional communication skills.

Yes ____ No ____

4. Demonstrates an ability to understand calls and responses, including multiple ways of knowing and critical thinking in analyzing and interpreting calls and responses, which may include the use of evidence, technology, and quality improvement data.

Yes ____ No ____

5. Maintains a safe environment in the delivery of nursing care that prevents real or potential harm to patients and their families.

Yes ____ No ____

CLINICAL PERFORMANCE EVALUATION RUBRIC

Scale/Label Standard Procedure Performance Quality

Assistance

MS (minimal supervision) 94-100% Safe/Accurate Consistently meets evaluation criteria with minimal direction. A satisfactory score of “S” must be achieved on each of the 6 caring competencies and the critical elements by the final clinical performance evaluation in order to proceed in the program. Minimal direction required

D (Developing) 84-93% Safe/Accurate Performance is improving and becoming more consistent; needs moderate level of assistance or supervision, seeks learning experiences. By the final evaluation for the course, all D’s must be S’s to pass the course at minimum 74%. A satisfactory score of “S” must be achieved on each of the 6 caring competencies and the critical elements by the final clinical performance evaluation in order to proceed in the program. Occasional direction

E (Emerging) 74-83% Mostly Safe/Accurate Partial demonstration of skills. Inefficient or uncoordinated. Delayed time expenditure. A developmental plan should be prepared collaboratively for areas of “improvement needed” in formative evaluations. All E’s must be Ds or MS by midterm. A satisfactory score of “S” must be achieved on each of the 6 caring competencies and the critical elements by the final clinical performance evaluation in order to proceed in the program. Frequent direction

NS (Needs Supervision) 67-73% Questionably Safe/ Accurate Performance is inconsistent and/or needs high level of assistance or supervision. Strengths and areas for improvement should be identified in a comprehensive evaluation by the 3rd week of clinical. A developmental plan should be prepared

collaboratively for areas of “improvement needed” in formative evaluations. A score of NS requires a faculty narrative along with a formal action plan. A score of NS post midterm requires a formal meeting with the clinical faculty, BSN Clinical Coordinator, and the student. Two NS’s after the formal meeting will result in NE and failure of the course. Continuous direction

NE (Not Evident) 0-66% **Unsafe/Inaccurate** Does not meet Expectations even after remediation/developmental plan Unable to demonstrate procedures. Lacks confidence, coordination and efficiency. Continuous direction

N/O = Not observed: No opportunity to observe or perform. A score of N/O prior to midterm needs to be evaluated by the clinical faculty and BSN Clinical Coordinator and an initiation of a formal action plan.

Final Grade will be:

S = Satisfactory (MS, D, E): Consistently meets evaluation criteria with minimal direction (74%-100%). A satisfactory score of “S” must be achieved on each of the 6 caring competencies and the critical elements weekly evaluation in the final clinical performance evaluation in order to proceed in the program.

U = Unsatisfactory (NS, NE): Performance does not meet evaluation criteria.

The student will complete self-evaluations of clinical performance at mid-semester and at completion of the course. The supervising faculty member will conduct weekly evaluations, a mid-semester progress evaluation and final clinical evaluation at the end of the semester.

Mid-Term Evaluation

Student Comments:

Student Signature and Date: _____ Date: _____

Faculty Comments:

Faculty Signature and Date: _____ Date: _____

Final Evaluation

Student Comments:

Student Signature and Date: _____ Date: _____

Faculty Comments:

Faculty Signature and Date: _____ Date: _____

Medication Administration Policy

In order to ensure safe and accurate patient care during clinical rotations that involve medication administration, the student nurse is required to adhere to the following guidelines in accordance with the hospital's policies and procedures and regulations and clinical faculty/Registered Nurse expert discretion.

1. Students MUST
 - a. Complete a medication exam with a passing score of 90% prior to medication administration on the unit specific to the assigned clinical rotation within the first two weeks of the semester.
 - i. Students must be prepared to fully participate in clinical by the third week in NUR 3262L, 4525L and 4716L (these are 12 week rotations), and by the second week in NUR 3465L and 4764L (these rotations are limited to six weeks). Students will take the Medication Administration Exam prior to the clinical rotation.
 - ii. There is a three exam attempt limit. If the student is unsuccessful after the third attempt, the student cannot meet the course objectives and cannot progress in the clinical course; therefore, a grade of 'U' is earned.
 - b. Administer medications with the direct supervision of the clinical faculty or assigned Registered Nurse expert.
2. Beginning in NUR 4716L the student may irrigate IV lines with saline flushes only with direct supervision of clinical faculty and/or Registered Nurse expert.

3. Students must adhere to the College of Nursing Medication Administration Policy and the Clinical Partner's Student Medication Administration Policy.
 - a. The student must always follow both policies. If the Clinical Partner's policy allows administration of 5.a – e below **the student must adhere to the CON policy.**
4. Students MUST
 - a. Administer medications with the direct supervision of the clinical faculty or assigned Registered Nurse expert [Preceptor]
 - b. Beginning in NUR 4716L the student may flush peripheral IV lines with saline flushes only with direct supervision of clinical faculty and/or Registered Nurse expert. [NUR 4716L is a prerequisite to NUR 4829L].
5. Even if allowed by the Clinical Partner's Student Medication Administration Policy, Students MAY NOT administer
 - a. Blood products,
 - b. IV push medication
 - c. IV narcotics medications under any circumstance
 - d. Drugs during a "Code"
 - e. Central line flushes (i.e., porta-cath or PICC line)
6. Students are not allowed to accept verbal or telephone orders from any healthcare provider.

PROCEDURE: The student MUST

1. Identify key information regarding the medication to be administered:
 - a. Mechanism of action
 - b. Major side effects and incompatibilities
 - c. Rationale for medication use
 - d. Correct medication dosage/IV rate calculation completed
 - e. Available assessment considerations (i.e. BP, HR, drug levels, blood sugar)
 - f. Selection of proper needle/syringe size, site (for IM/SQ administration), and volume capacity for site chosen
 - g. Saline flush guidelines
2. Identify/verify patient's allergies prior to medication administration.
3. Identify the eight rights of medication administration as follows:
 - a. Right patient
 - b. Right medication
 - c. Right dose
 - d. Right route
 - e. Right time/frequency
 - f. Right patient education
 - g. Right documentation
 - h. Right to refuse
4. Maintain standards of patient safety, including proper hand washing and clean or sterile techniques and disposal of sharps, as appropriate during the entire medication administration process.

5. Use two patient identifiers prior to medication administration to ensure safety. According to JCAHO, acceptable identifiers include:
 - a. The individual's name
 - b. An assigned identification number
 - c. Telephone number
 - d. Date of birth
 - e. Social Security number
 - f. Address
 - g. Photograph
6. If the Clinical Partner's policy allows, document with the clinical faculty or Registered Nurse expert's supervision in the patient's medication administration record providing correct medication, dose, and administration time according to the institutional procedures along with licensed personnel's signature/initial.

I HAVE READ AND UNDERSTAND THE ABOVE POLICY AND GUIDELINES. I RECOGNIZE THAT FAILURE TO COMPLY WITH THESE GUIDELINES MAY RESULT IN IMMEDIATE DISMISSAL FROM THE CHRISTINE E. LYNN COLLEGE OF NURSING.

Student signature: _____

Date: _____

Approved by the UPC 4/9/18

ATI Assessment and Remediation Program Policy

(The RN-BSN track is exempt from the ATI Policy as these students are already licensed RN's)

Introduction

The Assessment Technologies Institute (ATI) is an online, comprehensive, testing and review program, designed to provide students with various learning tools that will assist them in learning course content, identifying strengths and weaknesses, reviewing content, improving test taking abilities, and ultimately successfully passing the NCLEX-RN® for professional licensure.

Research has demonstrated a strong correlation between successful completion of ATI proctored assessments and successful first-time pass rates on the NCLEX-RN® (Davenport, 2007). Courses at the Christine E. Lynn College of Nursing (CELCON) integrate the ATI Comprehensive Assessment and Remediation Program (CARP) as 10% of the course grade in selected courses.

ATI program consists of practice assessments, proctored exams, and tutorials. All proctored assessments, including the RN Comprehensive Predictor will be scheduled on specific dates and times.

As part of the ATI package, students will be required to complete proctored assessments as a course requirement in select courses. Proctored ATI exams will be given at the FAU Testing Center (students pay a sitting fee for each exam) and under exceptional circumstances may be given in the classroom. If in the classroom, students are required to bring a laptop with Wi-Fi capability and, browsers compatible with the ATI program. Proctored ATI exams will be administered prior to course completion and scheduled by course faculty.

Practice Assessments

Two practice assessments are required as part of the preparation for the proctored exams. Proficiency as defined by ATI and is equivalent to the CELCON 74% minimum is the benchmark with **one attempt on each** assessment. **Following completion of the first practice assessment, all students will do the required remediation (minimum 2 hours) and take the second practice assessment in a minimum of 7 days after the first practice assessment.** Remediation for practice assessments is outlined below.

Practice Assessments are worth 2 points each and up to 4 points total (**must complete Assessment A & B to receive any points and must score 65% or greater on both Assessment A & B to receive 4 points; if score is less than 65% on Practice A or Practice B, then zero points awarded for that assessment.**

Complete Practice Assessment A	Complete Practice Assessment B
<p>Remediation: Minimum two-hour Focused Review</p> <p>For each topic missed, complete an active learning template and identify three points to remember.</p> <p>Templates and three critical points to remember must be turned in to the</p>	<p>Remediation: Minimum two-hour Focused Review</p> <p>For each topic missed, complete an active learning template and identify three critical points to remember.</p> <p>Templates and three critical points to remember must be turned in to the instructor.</p>

***All completed remediation material must be handwritten and is due to the instructor prior to the student taking the proctored assessment. These are independent assignments and not group work. If the proctored assessment is taken before remediation is submitted to the instructor, the student will receive zero points for the practice assessments.**

Proctored Assessments

To assist in preparation for the proctored assessment, students must complete practice assessments with remediation, and all ATI assigned application exercises. Students are required to complete both practice assessments, and create a focused review following the assigned minimal remediation time to address their areas needing improvement. Faculty may assign additional ATI application exercises and practice assessments as requirements within the course in addition to the Proctored ATI exam. As content exams indicate successful readiness for the next level of the curriculum and the RN Predictor Exam, **students must earn at least a Level 2 on the content exams or they may not progress in the curriculum.** Remediation will be assigned to ensure this readiness and progression.

The course-specific proctored ATI assessments will count for **10 percent** of your course grade. Grades will be calculated using the information outlined below.

Proctored Assessments

- I. Students have earned 0 - 4 points on practice assessments.
- II. Students can then earn an additional 2 to 6 points based on assessment outcome.

<i>Student score</i>	Level 3	Level 2	Level 1	Below Level 1
<i>Points awarded</i>	4 points	3 points	1 point	0 points
<i>Remediation/retake</i>	<p>Remediation:</p> <ul style="list-style-type: none"> • Minimum onehour Focused Review • For each topic missed, complete an active learning template and/or identify three critical points to remember. • <i>No retest</i> 	<p>Remediation:</p> <ul style="list-style-type: none"> • Minimum twohour Focused Review • For each topic missed, complete an active learning template and identify three critical points to remember. • <i>No retest</i> 	<p>Remediation:</p> <ul style="list-style-type: none"> • Minimum three-hour Focused Review • For each topic missed, complete an active learning template and identify three critical points to remember. <p><i>*Retest required</i></p>	<p>Remediation:</p> <ul style="list-style-type: none"> • Minimum four-hour Focused Review • For each topic missed, complete an active learning template and identify three critical points to remember. <p><i>*Retest required</i></p>
	2 points	2 points	2 points	1 point

<i>Points awarded after remediation and retakes</i>				
<i>Total potential points for level</i>	10/10	9/10	7/10	5/10

**If required to retake a Proctored Assessment so the student meets the program benchmark of Level 2 on the retake, that student can earn an additional percentage point (for example, a Level 1 student can now earn 1 more point added to the 7 already earned points to now have 8 points if the retake score is Level 2).*

Successful completion of NUR 4829L and Certification to take the NCLEXRN®:

Prior to NUR 4829L: Nursing Practice Immersion students must complete the ATI Comprehensive Predictor.

All pre-licensure students must be certified by the Assistant Dean of the Bachelor of Science in Nursing (BSN) Program in order to take the NCLEX-RN®. To be certified, students are expected to achieve a score $\geq 92\%$ of the *Predicted Probability of Passing the NCLEX-RN®*. **Students who have not scored ≥ 92 nd percentile on the first attempt of the RN Predictor must successfully complete all components of remediation which includes Virtual ATI (at the student's expense). Following successful remediation (i.e. receiving the Green Light from Virtual ATI), students must successfully complete a proctored Comprehensive Assessment (≥ 92 nd percentile on a second attempt of the RN Predictor).** If this score is not achieved after the second Predictor assessment, students must remediate and take the RN Comprehensive Predictor Retake II at the student's expense. The student will continue to remediate until the student demonstrates readiness to take the NCLEX-RN®.

Undergraduate Program Committee Approval March 9, 2015; February 1, 2016 UPC
May 3, 2018' UPC December 3, 2018; UPC October 7, 2019; January 13, 2020

WEAR FACE COVERINGS

All students are to wear a mask covering the nose and mouth upon entering the College of Nursing and throughout the time while in the building. Persons without masks will not be allowed in the College of Nursing. Additionally, persons are to wear a face shield over the mask

when in the laboratory areas, maintain social distancing of 6 feet, wash hands and use hand sanitizer.

COURSE SCHEDULE

Date	Topic/Focus/Clinical	Assignments
Week One	Orientation	ATI Predictor Exam Required Agency Documents Completed Preceptor Agreement Signed
Week Two	Clinical Primary Care	Reflective Journal #1 Weekly Clinical Evaluation Tool
Week Three	Clinical Primary Care	Weekly Clinical Evaluation Tool Midterm Evaluation: Preceptor, Student, Faculty RN Professional Development Modules
Week Four	Clinical Primary Care	Reflective Journal #2 Weekly Clinical Evaluation Tool RN Professional Development Modules
Week Five	Clinical Primary Care	Reflective Journal #3 Weekly Clinical Evaluation Tool RN Professional Development Modules
Week Six	Clinical Primary Care	Weekly Clinical Evaluation Tool RN Professional Development Modules Final Evaluation: Preceptor, Student, Faculty NCLEX Live Review: Dates TBD

PROFESSIONAL STATEMENT <http://nursing.fau.edu/academics/student-resources/undergraduate/policiesregulations/professional-statement.php>

When students of nursing begin their course of study, they enter into an implied professional agreement-agreeing to abide by the American Nurses Association (ANA) Code of Nursing Ethics and to conduct themselves in all aspects of their lives in a manner becoming a professional nurse. The College of Nursing faculty holds a professional ethic of caring and healing, recognizing that each person's environment includes everything that surrounds an individual. Similarly, the College creates an environment that preserves the wholeness and dignity of self and others. The faculty requires self and socially responsible behavior and will not accept actions that can be perceived as hostile, threatening or unsafe to others. It is the College's

expectation that students promote a positive public image of nursing. It is the College's goal, as a professional college, to build an expanding community of nursing scholars and leaders within the context of its' caring-based philosophy. Safety of the person being nursed and accountability for individual actions are priorities and/or critical components/elements of a professional nursing education. Students who do not abide by this policy will be subject to appropriate academic sanctions which may include disciplinary action, dismissal from the College of Nursing, and/or suspension or expulsion from the University.

Approved in Faculty Assembly 11/28/2016



CHRISTINE E. LYNN COLLEGE OF NURSING

STATEMENT OF PHILOSOPHY

Nursing is a discipline of knowledge and professional practice grounded in caring. Nursing makes a unique contribution to society by nurturing the wholeness of persons and environment in caring. Caring in nursing is an intentional mutual human process in which the nurse artistically responds with authentic presence to calls from persons to enhance well-being. Nursing occurs in nursing situations: co-created lived experiences in which the caring between nurses and persons enhance well-being. Nursing is both science and art. Nursing science is the evolving body of distinctive nursing knowledge developed through systematic inquiry and research. The art of nursing is the creative use of nursing knowledge in practice. Knowledge development and practice in nursing require the complex integration of multiple patterns of knowing. Nurses collaborate and lead interprofessional research and practice to support the health and well-being of persons inextricably connected within a diverse global society.

Persons as participant in the co-created nursing situation, refers to individual, families or communities. Person is unique and irreducible, dynamically interconnected with others and the environment in caring relationships. The nature of being human is to be caring. Humans choose values that give meaning to living and enhance well-being. Well-being is creating and living the meaning of life. Persons are nurtured in their wholeness and well-being through caring relationships.

Beliefs about learning and environments that foster learning are grounded in our view of person, the nature of nursing and nursing knowledge and the mission of the University. Learning involves the lifelong creation of understanding through the integration of knowledge within a

context of value and meaning. A supportive environment for learning is a caring environment. A caring environment is one in which all aspects of the person are respected, nurtured and celebrated. The learning environment supports faculty-student relationships that honor and value the contributions of all and the shared learning and growth.

The above fundamental beliefs concerning Nursing, Person and Learning express our values and guides the actions of Faculty as they pursue the missions of teaching, research/scholarship and service shared by the Christine E. Lynn College of Nursing and Florida Atlantic University.

'revised April, 2012.'