** AAS in Nursing Program**

**End of Semester Course Report**

1. Course Number and Name: NURS 158: Nursing Care of Adults in Health and Illness
2. Year / Semester: 2016 Spring
3. Course Faculty (include any adjunct faculty utilized

Peggy Drussel, Staci Warnert, Stacy Rust, Barbara Conton, Michelle Husbands, Alyssa Fedel

**COURSE STATISTICS**

1. Theory Ratio 33:2 Clinical Ratio 6:1 Simulation Ratio 6:1

 (Student to faculty ratios: Please use the number of students at the beginning of the semester for these.)

1. Final Theory Outcomes:
	1. Percent Passed: 89.6%
	2. Percent Failed: 3 (3 Dismissed from program after withdraw date)
	3. Range of Scores: Exams (25% of final grade) = 66.67% - 99%, Final & ATI Nutrition Exam (20%) = 0% - 97% (79.5% - 97% for those students who took both exams), Theory Assignments (15%) 80.22% - 100% Final Course Grades 51.75 – 97.84%.
2. Final Clinical Outcomes:
	1. Percent Satisfactory: 100
	2. Percent Unsatisfactory: 0
3. Course Attrition:
	1. Beginning number of students: 33
	2. Withdrawals: 7 (W/D and dismissed from program)
	3. Incompletes (with expected date of completion): 0
4. Dosage Calculation Test:
	1. First attempt pass 32
	2. Second attempt pass 0
	3. Third attempt pass 1 (Notification of Unsatisfactory Progress Given)
	4. A & P committee recommendation: 0
5. Course Overview
	1. ATI Tools/Materials:

|  |  |
| --- | --- |
| ATI Test Used | When test used during semester |
| Nutrition Practice Exam B | Due by 05/12/2016 |
| Nutrition Practice Exam A | Used throughout semester for journaling.  |
| Nutrition Proctored Exam | 04/25/2017 |
| Nutrition Proctored Exam Retake | 05/01/2017 |
| Real Life C-Diff (Clinical time for all students) | 03/17/17 |

* 1. Brief synopsis of how ATI tools and/or materials were used in the course:

ATI Nutrition was used throughout the course for journaling and study, using both the ATI Nutrition text and ATI web tools, ATI nutrition skills module was also used. ATI was also used for review of study, test taking, skills, and used for new skills checked off this semester to include IV therapy, IV dressings, IV push medications, insulin use and administration, and NG tube insertion and enteral feeding. Nutrition Exam Content Mastery Proctored 2016 Exam was used to evaluate nutrition understanding for NCLEX. Nutrition Proctored exam was given towards the end of the course at the end of April. ATI Nutrition Tutorial Skills Module was assigned prior to Dietitian Clinical rotation – students submitted transcript with Dietitian clinical assignment. Real life C-Diff was used for clinical time. Students completed Real Life and completed adapted clinical care packet for the Real Life C-Diff simulation.
Safe Dosage – submit transcript prior to medication calculation exam with 100% score
Parenteral (IV) medications – submit transcript prior to medication calculation exam with 90% score
Powdered Medications - submit transcript prior to medication calculation exam with 90% score
Dosage and Calculation Tutorial 2.0 – review prior to medication calculation exam
Medication Administration – review prior to medication calculation exam
Oral Medications – review prior to medication calculation exam
Injectable Medications – review prior to medication calculation exam

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| --- | --- |
| **ATI Nutrition 2016 Proctored Exam** |  |
|  | CurrentSemester(ATI Nutrition 2016 Proctored Exam) | Previous Semester/Spring 2016 (ATI Nutrition 2013 Proctored Exam) | Previous Semester /Spring 2015(ATI Nutrition 2013 Proctored Exam) | Previous Semester /Spring 2014(ATI Nutrition 2013 Proctored Exam) |
| % & # of Group Below Proficiency Level 1 | 0 | 0 | 0 | Not listed |
| % & # of Group at Proficiency Level 1  | 11.1 | 26.9 | 11 | Not listed |
| % & # of Group at Proficiency Level 2  | 40.7 | 65.4 | 72.3 | Not listed |
| % & # of Group at Proficiency Level 3 | 48.1 | 7.7 | 16.7 | Not listed |
| Group Score: (Adjusted) | 76.9 | 71.0 | 74.6 | 69.5 |
| Group Mean—National: | 63.0 | 63.0 | 63.1 | 61.8 |
| Group Mean –Program: | 62.4 | 62.4 | 94.4 | 58.7 |
| Institutional Benchmark: | N/A | N/A | N/A | N/A |
| % of Group Meeting InstitutionalBenchmark: | 88.8% | 73.1% | 84.2% | Not listed |
| Group Percentile Rank - National | 88.9 | 88 | 94.4 | Not listed |
| Group Percentile Rank - Program | 88.9 | 90 | 94.4 | Not listed |
| **Thinking Skills Group Scores** |  |  |  |  |
| Foundational Thinking | 83.3 | 71.1 | 66.7 | 63.2 |
| Clinical Judgment/Critical Thinking  | 76.3 | 70.2 | 77.0 | 69.9 |
| Priority Setting | 79.0 | 85.3 |  85.2% | 86 |
| **Nursing Process Group Scores** |  |  |  |  |
| Assessment | 74.1 | 73.6 | 81.5 | 75.2 |
| Analysis/Diagnosis | 89.4 | 76.9 | 80.6 | 73.7 |
| Planning | 82.2 | 70.1 | 74.2 | 71.9 |
| Implementation/Therapeutic Nursing | 73.1 | 69.6 | 75.9 | 65.4 |
| Evaluation | 75.7 | 68.7 | 71.1 | 68.4 |
| **Major NCLEX Content Areas** |  |  |  |  |
| Management of Care | Not listed | No score | No score availab | No score |
| Safety and Infection Control | 77.8 | 100 | 88.2 | 84.2 |
| Health Promotion and Maintenance | 75.7 | 74.8 | 76.7 | 71.1 |
| Psychosocial Integrity | 90.1 | 61.5 | 68.5 | 62.3 |
| Basic Care and Comfort | 75.1 | 69.4 | 74.7 | 70.3 |
| Pharmacological and Parenteral Therapies | 79.6 | 50 | 94.4 | 65.8 |
| Reduction of Risk Potential | 90 | 79.6 | 80 | 73.2 |
| Physiological Adaptation | 58.6 | 59.6 | 66.7 | 62.3 |
| **QSEN** |  |  |  |  |
| Safety | 79.3 | 75.1 | 88.2 | Not listed |
| Patient-Centered Care | 75.8 | 68.9 | 73.6 | Not listed |
| Evidence Based Practice | 77.9 | 72.3 | 75.1 | Not listed |
| Teamwork and Collaboration | Not listed | Not listed | Not listed | Not listed |

* 1. Any issues identified (i.e. are group scores higher or lower than previous semesters).

This year was the first year the 2016 version was taken (2013 version administered in past). More students scored a Level 3 than in previous years. 88.8% passed the proctored exam on the first attempt compared to 73.1% last year. Scores improved on every aspect of the nursing process. Scores improved in every other category except physiological adaptation and Safety and Infection Control. Physiological Adaptation continues to be a low category for students. In the Physiological Adaptation category a majority of students missed questions related to cancer, liver disease, and cholecystitis which are not discussed until next semester in NURS 257. In the Safety and Infection Control category there was only one question, so the student responses for that one question are reflected in the scores above.

Changes to improve Nutrition ATI Examination: Will continue to incorporate journaling of nutrition ATI questions in the course. Will consider adding a nutrition component on the clinical care packet to reinforce application of nutrition information. Will continue with the Nutrition review day with student nutrition presentations. Moved the Nutrition Exam earlier in the semester to avoid multiple exams at the end of the semester. This seemed to afford students the time to concentrate and study the nutrition content. Will continue to administer Nutrition Exam at the end of April and time the exam with other courses.

* 1. Course Exams:

|  |  |
| --- | --- |
| Course Exam | Average Percentage |
| Section 1 & 2 | 85% |
| Section 3 & 4 | 89% |
| Section 5, 6, 7 | 85% |
| Final Exam | 85% |

* 1. Any adjustments that may need to be done in course exams related to percentage distribution of NCLEX categories, cognitive level, and nursing process. (Please see test blueprints and allotted percentages of item categories)

Item analysis was conducted for each test and is summarized on the test blueprints. Item discriminations of 0.00 will be reviewed for mastery items. Questions were mostly written at the application level. Will continue with higher percentage of application questions, as application is a required component outlined in the course outcomes. Please see test blueprints for more information. Will examine test questions and consider adding more questions examining Management of Risk Potential.

* 1. Address technology used in the classroom, including IAV, and brief summary of how it was used, what worked well, and any adjustments that need to be made.

IAV was used with three centers (Elko, Winnemucca, and Pahrump). Theory was delivered from Elko to Winnemucca and Pahrump. IAV technology was overall reliable. The main system shut down a few times during the semester, but the IAV facilitator was able to quickly restart the system and get the connection back. During one class period there was a power outage in the town of Winnemucca so the students in Winnemucca were not able to attend class. The class continued IAV to Pahrump and was recorded. The link to the recorded class was sent to the students later that same day. Students in Pahrump and Winnemucca were reminded to not mute their mics in order to remain engaged in the classroom. Student collaboration between the centers worked well for the student Nutrition Presentations. Tips were given to students on how to work in groups at a distance. Will continue to use groups consisting of students at different centers and provide tips for distance group work. Met with students in Pahrump and Winnemucca via Cranium Café, Big Blue Button and IAV during the semester. Instructor Warnert will be located in Winnemucca next year, so theory delivery will be split originating from Elko and Winnemucca.

**THEORY EVALUATION**

1. Textbooks used and evaluation of each:

 Lewis, S., Dirksen, S., Heitkemper, M., &Bucher, L. (2014). Medical-surgical nursing: Assessment and management of clinical problems (9th Ed.). St. Louis, Missouri: Elsevier Mosby. This textbook was used with success within the classroom and was a good choice overall. There were many areas of the text that required the instructors to separate the important tables and information from extra information. Students verbalized difficulty with reading the textbook. Some content, including pathophysiology provided difficult and intense reading. The text includes a lot of information and students often had difficulty deciphering what was important. Examined a new Med-Surg textbook (by Hoffman and Sullivan) that outlines the content following the nursing process and provides students with case studies as they read. Will be using a new textbook to assist students with ease of reading and organization of content. Ladwig, G. B., Ackley, B.J. (2014). Mosby’s guide to nursing diagnoses. (4th Ed.). St. Louis, MO: Mosby. This text was used mostly in the clinical setting for clinical care packet. Was also used as a resource for multiple clinical assignments. In addition, the text was a good resource for building care plans within the classroom. Deglin, J. H., Vallerand, A. H., & Sanoski, C. A. (2016). Davis’s drug guide for nurses. (14th ed.). Philadelphia, PA: F. A. Davis Company. Used during theory study as a resource for looking up medications as outline in the content covered. Also used in the clinical setting as a resource for medication prior to giving and as needed during pre-course work. Students had difficulty using this text at time as the information provided in ATI varied slightly. Followed hospital criteria for medications when there was conflicting information on a drug. Van Leeuwen, A. M., Poelhuis-Leth, D., & Bladh, M. L. (2016). Davis’s comprehensive handbook of laboratory diagnostic tests with nursing implications. (6th ed.). Philadelphia, PA: F. A. Davis Company. Text was used during and before actual care plan work in the clinical setting and is an invaluable tool for students planning care. The text also was used to clarify further tests and treatments highlighted in the Med-Surg textbook. VandenBos, G. R. (Ed.). (2010). Publication manual of the American psychological association. (6th ed.) Washington, DC: AmericanPsychological Association. All students were required to purchase this text in Nursing 135, however, they do not seem to be using successfully. APA continues to be an issue for these students in both the classroom and with assignments. Students were also provided with Owl Purdue as an online resource that they did not use successfully. Multiple instructors marked students down for not using correct APA formatting on assignments/ references. Provided students with examples. Discussing the use of a pocket version of APA as a quick reference that the students can use. \*\*\*\*\*\*\*ATI Nursing Education. (2016). Medical Surgical Nursing (Ed. 10.0) and .Nutrition (Ed. 6.0) Assessment Technologies Institute, LLC. The Med-Surg book was recommended to the students to use as a reference as needed. The Nutrition text was a resource for journaling on nutrition during the course. Was also the resource for the final in Nutrition. Students were able to use the text without difficulty as it is a summary versus extensive information on nutrition. Good supplement for students during this course. Will also incorporate Med-Surg ATI book into theory content and reference for the students.

1. Weekly content:

See Syllabus with Theory Schedule for specific content.

1. Special Experiences related to student learning outcomes and competencies:

 Collaborative testing was utilized for the course exams.

1. Teaching Methods:

 Various of teaching methods were used to include Lecture with PowerPoint and Prezi, Case Studies, group work, classroom activities, games, discussion, and NCLEX style Questions.

**CLINICAL EVALUATION**

1. Clinical Site Evaluation - Include EBP, Patient Health & Safety and ANA Standards

(Please list strengths and/or limitations specific to each site)

**Elko:**

**Southern Bands Public Health Nurse (IHS)**: Students accompanied the public health nurse to assess and address health concerns of the Native American population. The focus of the assignment was to identify diverse needs and develop a teaching plan r/t prevention, using EBP. We were informed students needed to complete additional paperwork and fingerprints to continue clinical. Students also were not able to spend as much teaching time with the Public Health Nurse due to travel times between seeing clients. Will consider removing this clinical next year. Possibly students would be able to attend clinical at the actual clinical for Indian Health Services Southern Bands.

**Dietician at NNRH**: Students worked with dietician to evaluate patients for four hours. Students completed a mini nutritional assessment with the dietician and learned about recommended diets. Lab work was looked at intensely and the dietician worked with students to connect the labs with dietary needs. The dietitian is willing to continue working with students. Will continue with this rotation as reinforces and has students apply nutrition content.

**Highland Manor Teaching:** Students developed a teaching demonstration and plan to for exercise and fitness at the Highland Manor. The DON at Highland Manor was impressed with the students and stated they have never had so many residents participate in the exercise and fitness courses. Students utilized evidence based exercises for the elderly to develop a class and teaching demo.

**Golden Health**: Students worked with RNs and observed the Wellness Coach (when available). Students worked with a diverse group of patients and their families from the mining industry. This included immunizations, occupational physicals, acute illness, and lifestyle modification education.

**Pioneer Urgent Care**: Students assisted nurses, nurse practitioners, and physicians in this facilities to provide care for acute conditions. There was a multitude of various learning activity that went on depending on the day..

**NNRH Med Surg**: Student provided assessment and care within their scope to a minimum of one patient per clinical rotation, providing assessment, EMR documentation, medication administration, and developing care plans.

* All students agreed or strongly agreed to continue clinical rotations at NNRH. Two students disagreed to continue rotations at Pioneer Urgent Care, Golden Health, and IHS.\

Two students commented that they enjoyed all of the clinical rotations. The majority of the comments were positive regarding the nursing care. There were a couple of comments about slow workflow at Golden Health and Pioneer Urgent Care. Will be developing clinical activities to assist to keep the students engaged with clinical reasoning while they are in the clinical setting.

**Winnemucca:**

**Dietician at HGH**: Students worked with dietician to evaluate patients for four hours. Students completed a mini nutritional assessment with the dietician and learned about recommended diets. Lab work was looked at intensely and the dietician worked with students to connect the labs with dietary needs. They worked with the dietician in both Med Surg and Harmony Manor. The dietician, Tiffani Navlika, was very impressed with the care and time the students provided to patients in the skilled nursing facility, Harmony Manor. **HGH - Med Surg**: Students provided assessment and care within their scope to one patient per clinical due to patient census. Students utilized the EMR system, Pyxis for medication, and developing care plans. Students were able to follow their clients to other areas for testing. Most students reported enjoying the clinical experience at the hospital facilities. The hospitalist, Dr. Mahadeva, told the instructor and students she was very impressed with the students and was looking forward to working with them next year and when they graduate. **HGH – Wellness Assignment**: Students worked with the Nurse Practitioner (NP), Nurse Matthews for their Case Management clinical. This allowed the students to evaluate how the NP manages the care of multiple patients with chronic disease processes in the home and in the clinical setting to improve patient outcomes. Students were not able to work with the case manager due to a new employee in the position; the hope is the students will be able to work with the case manager in future semesters. Most students reported enjoying this clinical and reported they learned more regarding a nurse’s expected delivery of care. **HGH –Acute Care Clinic**: Students were at one clinical setting with NP, Nurse Hurst. Each student worked with the NP for eight hours assessing patients, providing immunizations, education, medication reconciliation, procedures; all within their scope and under the supervision of the NP. Students expressed dissatisfaction with Nurse Hurst. All students disagreed or strongly disagreed to continue clinical rotations with Nurse Hurst. **State of Nevada – Public Health Nurse**: Students worked with the PHN for eight hours. Students assisted PHN with immunizations, assessments, and family planning for clients of various ages and sexes. Most students reported enjoying the clinical and reported this clinical also helped them understand the needs of the community with regards to medical care and the need for providers. **Pleasant Senior Center**: Students developed a teaching demonstration for seniors at the center. The topics addressed were nutrition and exercise. Students also volunteered time to do BPs on seniors after completion of the demonstration and socialized with seniors for lunch. Students reported enjoying the clinical and lunch period in which they were able to give more information to the seniors and learn more about the aging population.

**Pahrump:**

**Pahrump** **Dietitian** at Desert View Hospital (DVH): Students worked with registered dietitian, completing nutritional assessments on multiple patients, then focused on one patient intensively to develop a teaching plan. The dietitian educated them on the interdisciplinary partnership between the RN, MD and RDN (registered dietitian nutritionist). The RDN shared her expertise regarding recommended diets based on multifactorial analysis including disease process and labwork. **Infection Control** at DVH: Students each spent 4 hours with the Infection Control RN at the hospital learning her collaborative role and advocacy for best practices to keep nosocomial infections at a minimum. The infection control nurse has over 44 years of experience as an RN and is passionate in her role. **Case Management** at DVH: Students each spent 4 hours with the case management team learning about their role from admission through discharge, including transfer and placement, if needed. The rotation was scheduled to capture the daily interdisciplinary rounds between bedside nurses, attending physicians and the case management team. **Senior Center**: Students developed a teaching demonstration about possible interactions between vitamin supplements and prescribed medications. After the presentation, questions were answered and blood pressures measured. **Calvada Urgent Care**: Students assisted an NP-C (Certified Nurse Practitioner) in providing acute care for 9 hours during one clinical day. Donna Kelly is an enthusiastic educator and practitioner. The students saw varied complaints and were able to utilize many of their practiced skills including IM injections and enemas. **Medical/Surgical/Telemetry unit at** **DVH:** Students provided assessment and care within their scope of practice for two patients each clinical day. They utilized EMR documentation, administered medications, and developed care plans. All students enjoyed their clinical rotations per their report. Additionally, each student spent one clinical day as the Team Leader of their student cohort and another clinical day completed a comprehensive medication analysis on one patient. Students were readily able to see themselves as change agents for evidence-based practice in their future career.

* All students agreed or strongly agreed to continue clinical rotations at all clinical sites.

(All Centers) **EBP, ANA standards, and patient health and safety** are addressed in each assignment to include the Med-Surg assignments. Med-Surg assignments (CCP) have areas that address each of these areas by students. Students were able to identify problem areas and often this was the focus of debriefing after clinical experiences. Reflection was key in providing care and addressing these areas.

1. Briefly describe any concern(s) regarding clinical site(s) used.

See above descriptions of the clinical sites and below clinical changes and reasons.

1. Clinical changes and reason(s):

**Elko:**  The IHS clinical rotation will continue to include more in depth paperwork for students. Will need to carefully consider student benefit and learning and time with the public health nurse. The public health nurse is also difficult to schedule clinical rotations with. Will consider using the IHS clinic or removing this clinical rotation.

**Winnemucca:** All students provided negative feedback about Nurse Practitioner Hurst during the clinical site evaluations. Will anticipate not using this clinical rotation based on student feedback. Instead anticipate working with the newly hired Case Manager at HGH.

**Pahrump**: No changes anticipated.

Minor changes made to clinical care packet to add clarity for next year.

Will plan on adjusting the acute care clinical and wellness assignments to include a component that students complete during the clinical day while in the clinic. Will consider having students log the patients they see with the nurse they are working with and in a table format write nursing considerations, identify potential risks and complications and/or a health promotion consideration. Then students will choose one of those patients to complete the written assignment. Will also reexamine the non-med-surg clinical assignments to include components that will further promote critical thinking while in the clinical setting. One student commented about the clarity of the community assignments. Will reexamine the assignment instructions and corresponding rubrics for clarity.

1. Special Experiences related to student learning outcomes and competencies:

Students participated in a total of 5 simulations for this course. Pre-briefing was added with sim this year along with pre-work questions. Positive feedback was received regarding simulation and learning. Two students completed remediation after simulation by completing the same exact simulation again. The students increased their performance with remediation. In addition to sim, students also completed Real Life with ATI.

1. Teaching Methods

ATI was utilized for demonstration of skills. Practice in the skills lab; high-fidelity simulation in practice lab; ATI Real Life simulation with debriefing; post-conference debriefing with discussion and focused topics; clinical rotations (at clinical sites listed above) with observation and hands on application of theory content.

**FULL COURSE OVERVIEW**

1. What worked well and reason(s):

 Various teaching methods worked well. All students agreed or strongly agreed that they met all of the SLO’s. Activities that were implemented were successful. Students responded favorably to the inclusion of NCLEX questions in class. Students completed critical thinking maps prior to each class. The critical thinking maps were modified and simplified from the year before to closely align with the nursing process. The critical thinking maps were also incorporated in class to reinforce content. The ATI nutrition exam was administered at the end of April instead of closer to finals week. This worked well to allow students to balance studying for several exams at the same time. Students were able to focus on the nutrition content and had increased performance on the ATI proctored nutrition exam from the year before.

1. Anticipated Changes

Minimal changes are anticipated. Will change the syllabus regarding the administration notifications of unsatisfactory progress after exams to align with the mental health course (NURS 159). Will reevaluate clinical time allotment for all three sites. Will be using a new med-surg textbook with new resources for students. Will consider using the resources associated with the textbook as pre-work for class in place of and/or in addition to the critical thinking maps. Will also anticipate editing and carefully examining each module’s objectives to reflect the module and guide students studying. With refined module/section objectives will consider not providing students with study guides for the exams. Instead will direct students to study using the module objectives.

1. Changes to weekly content and reason(s):

Weekly theory content will remain the same with the addition of GI content. Will meet with Instructors teaching NURS 257 about moving some GI content from NURS 257 to NURS 158 to have students work with GI content all semesters in the program to better prepare them for NCLEX. With the addition of GI content other content may need to be adjusted to allow plenty of dedicated time for topics.

1. Changes to point allocation and reason(s):

The percentages of the exams, final exam, ATI nutrition, and theory assignments needs to be adjusted. The percentage for the theory assignments needs to be decreased or all theory needs to be combined into one category and points adjusted to equate the percentage per assignment and exam within the theory category (overall percentage). Mathematically with theory assignments constituting 15% a student could fail all 3 of the course exams and the final and still pass the theory portion of the course. A change is needed to decrease the weight of the theory assignments within the course.

1. Other changes and reason(s):

None

1. Administrative:
	1. Syllabus has been saved to file. [x]
	2. The course was backed up on WebCampus. [x]
	3. Grades have been entered. [x]
	4. Grade book has been saved to file. [x]
	5. Student work samples have been filed in student file. [x]
	6. Student clinical care packets have been filed in student file. [x]
	7. Curriculum map has been updated with all changes made

and filed. [x]

* 1. Integrated Concepts Illustration has been updated with

all changes made and filed. [x]

* 1. Test blueprint has been filed with course report. [x]

**Faculty Signature(s):** Staci Warnert & Peggy Drussel

**Date:** 5/18/17

**Directions:** Complete and save in Dropbox/Nursing Shared Files/SPE/Course Reports along with syllabus, clinical schedule, grade book, curriculum map, integrated concepts illustration, and test blueprint.