



NURS 4030

COMMUNITY HEALTH SYLLABUS

School of Nursing



LINDA JAMES MSc, RN
PAM SLAGLE MSN, RN

SPRING 2018
SAM HOUSTON STATE UNIVERSITY

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NURS 4030-W: COMMUNITY NURSING
Sam Houston State University
College of Health Sciences, School of Nursing
SYLLABUS - Semester/Year: Spring 2018

COURSE DESCRIPTION:

This course focuses on the synthesis of public health concepts within a preventive framework to promote and maintain the health of communities and includes an examination of the historical development, philosophy, health care systems, epidemiology, and nursing care of specific populations and groups in the community. Primary, secondary, and tertiary levels of prevention are emphasized as they relate to the natural history of disease in individuals, families, and groups. A community health assessment is completed using census data, morbidity and mortality rates, epidemiologic and statistical methods, and community-based research. Progressively more behaviors that are independent are expected of students in community health practice. *This is a writing enhanced and Academic Community Engagement course.*

Disclaimer: Throughout this course, we will discuss various topics that may be sensitive in nature including, but not limited to culture and cultural stereotypes, gender identity, sexual orientation, religion, poverty. The views presented do not represent the views of the faculty, staff or School of Nursing.

CLASS MEETING TIMES: Mondays 15:00pm-17:50pm

CLASS MEETING PLACE: **Huntsville - 1 Financial Plaza Drive, RM 302**
The Woodlands Center- 3380 College Park Dr., RM 353
Please note that both classes will be required to come together periodically during the semester for orientation and guest speakers.

FACULTY:

Lecture:

Linda James, MSc, RN, Course Coordinator, Clinical Assistant Professor

Office: The Woodlands Center, 435C

Phone: 936-202-5123; Cell: 832-797-6363

Email: lsj007@shsu.edu

Office Hours: Monday 11-2:30pm, Thursday 3-5pm and by appointment available by email/phone/text between 8am and 5pm M-F. Please allow 48 hours for email responses. Do not anticipate communications after hours or on weekends.

Pam Slagle, MSN, RN, Clinical Assistant Professor

Office: 230B Huntsville

Phone: 936-294-2563; Cell: 817-475-4051

Email: pfs004@shsu.edu

Office Hours: Monday 1-3pm by appointment Available by email/phone/text between 8am and 5pm M-F. Please allow 48 hours for email responses. Do not anticipate communications after hours or on weekends.

Clinical:

Linda James (as above)

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Pam Slagle (as above)

Dr. Susan McCormick, MSN, RN

Office: Huntsville, Rm

Phone: 936-294-; Cell preferred

Email: spm023@shsu.edu

Office Hours: Mondays by appointment

COURSE CREDIT: 3 credit hours plus 2 credit hours clinical

Clinical: Clinical times will vary by location and students will have to travel. Travel time is not included in the clinical hours. Students are required to complete 90 hours of clinical time. There may be minor variations in the breakdown chart below. Missed hours (partial or full days) will be made up in clinical related assignments. It is an expectation that you will arrive prepared 10 minutes prior to the start of your clinical day. **Some clinical experiences require weekend work (Fri. or Sat.) or evening work. Instructors will make every effort to provide a minimum of 3 notice for these activities.**

Clinical Experience	Hours	
Home Visit	8	
Holocaust Museum	3	
Schools	14	
Clinics	27	
Disaster Simulation	3	
Skills Lab	3	
Estelle Unit	6	
Poverty experience	4	
Windshield Survey	4	
Community Assessment project	10	
Teaching Project (plan/implement)	8	= 90 hours

PRE-REQUISITES: NURS 3620, 3640, 3440, 3350, 3360.

CO-REQUISITES: NURS 4520, 4540.

IDEAS LEARNING OBJECTIVES: The following objectives are used to evaluate at the end of the semester in your IDEAS evaluation surveys.

1. Gain a basic understanding of the subject of community nursing (i.e. factual knowledge, methods, principles, generalizations, theories).
2. Develop knowledge and understanding of diverse perspectives, global awareness and other cultures.
3. Learning to apply course material (to improve thinking, problem solving, and decisions)
4. Acquiring skills in working with others as a member of a team.
5. Learning to apply knowledge and skills to benefit others or serve the public good

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COURSE AND CLINICAL OBJECTIVES

Objective/s	Activities/Assignments	Measurement	Standards Alignment <i>program objectives (PO) and TX DECS</i>
1. Incorporate nursing practices that demonstrate respect for ethnic diversity and socio-cultural practices influencing the social equity of clients in the community.	Clinical placement	Discussion, reflective journaling, discussion board, preceptor evaluation, teaching project, testing	<i>PO: 1,3, 4, TX DECS HA: II B</i>
2. Apply the concept of community to a local clinical service using the nursing process, and the appropriate levels of prevention.	Clinical placement, ACE	Discussion, post clinical reflective journaling, preceptor evaluation, teaching project, testing	<i>PO: 2,4,5,6,7,9; TX DECS HA: I ABD, II ABCE, III ABDF, IV ABCD</i>
3. Perform a community assessment including resource availability, identification of a health need, and development of a plan, for a selected population.	Community assessment project Windshield Survey Group work	Community assessment project; windshield survey, teaching project, peer evaluation	<i>PO: 1, 2,4,5,6; TX DECS HA: I ABC, II ABC, CG, III AC, IV ABCE</i>
4. Identify epidemiologic principles and the implications for community and global health.	Clinical placement, Lecture ACE	Discussion, post clinical reflective journaling, testing	<i>PO:10, TX DECS HA: IIA, C TX DECS HA: III C; II C</i>
5. Identify the stages of disaster preparedness and response at the local, state, national and international levels.	Lecture, simulation	Debriefing and discussion, post clinical reflective journaling	
6. Discuss and demonstrate appropriate care of populations effected by disasters and mass casualty events.	Lecture, online video, simulation	Debriefing and discussion, post clinical reflective journaling	
7. Demonstrate interprofessional collaboration and teamwork in caring for clients	Disaster simulation Clinical placement, ACE	Debriefing and discussion, post clinical reflective journaling; preceptor evaluation, teaching project	
8. Demonstrate professionalism and leadership through dress, attitude, and communications.	Oral presentation in lecture and clinical (client care, interprofessional communications, teaching project), ACE	Preceptor evaluation, faculty evaluation, teaching project	<i>PO: 3,4,5; TX DECS HA: IV A</i>
9. Demonstrate safe and competent nursing care to individuals, families and communities in various clinical settings.	Clinical placement	Preceptor evaluation Faculty evaluation	<i>PO: 2, TX DECS HA: II D</i>

Instructional Strategies:

Teaching/learning strategies will include lecture, classroom discussion, group work, and oral presentations.

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Learning Activities:

Learning activities will include participation in class discussion, case scenarios, oral presentations, written reflections and discussion boards, community assessment paper, quizzes and exams, classroom preparation activities, simulation, community assessment project, windshield survey and agency assignments and other activities as specified.

EVALUATION METHODS:

Quizzes	5%
Exam 1	5%
Exam 2	10%
Final (comprehensive)	15%
ATI	10%
Current Issue	5%
Community Assessment Project	20%
Reflections	10%
Windshield Survey	5%
Discussion boards	10%
Teaching Project Evaluation	5%
Total	100%

Clinical: Pass/fail: Failure of the clinical component results in failure of the course.

School of Nursing Grading Scale:

	Percentage	
A	89.5-100	Passing
B	79.5-89.4	
C	74.5-79.4	
D	69.5-74.4	Not Passing
F	69.4 and below	

Calculation of Course Grade:

- In order to progress in nursing, students are expected to pass all nursing courses with at least a “C”.
- Didactic and clinical/laboratory components of nursing courses shall be taken concurrently.
- All clinical and classroom assignments must be completed in order to pass the course.
- Exams, quizzes and ATI make up the **exam average**; exam average must be 74.5 (rounds to 75 per policy; 74.49 DOES NOT) to pass the course.
- Failure for exam average or failure in the clinical portion will necessitate repeating the entire course, including clinical or lab.
- During each semester with clinical practice opportunities, students must take and pass a level-adjusted drug dosage and calculation test per Sam Houston State University School of Nursing Student Handbook Dosages and Calculations Competency Policy. Please see the policy for further information about the test. For the S1 semester, the dosage and calculations exams are proctored and given in a classroom setting. Any student who fails both attempts of the level exam must withdraw from NURS 4520, 4540 and NURS 4030.

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- Standardized tests will count for 10% (for seniors) of entire final grade as per ATI testing policy.

ATI testing:

Practice Assessment Activities	
4 points. Total if all activities are completed	
Complete Practice Assessment A (1 pt.) <i>Remediation:</i> (1 point.) <ul style="list-style-type: none"> • Focused Review • For each topic missed, handwritten three critical points to remember. 	Complete Practice Assessment B (1 point.) <i>Remediation:</i> (1 point.) <ul style="list-style-type: none"> • Focused Review • For each topic missed, handwritten three critical points to remember.
Each activity = 1 point: first practice test, remediation, second practice test, remediation	

First Proctored Assessment			
Level 3 (4 points)	Level 2 (3 points)	Level 1 (1 point.)	Below Level 1 (0 points)
<i>Remediation</i> (2 points) <ul style="list-style-type: none"> • For each topic missed, handwritten three critical points to remember. 	<i>Remediation</i> (2 points) <ul style="list-style-type: none"> • For each topic missed, handwritten three critical points to remember. 	<i>Remediation</i> (2 points) <ul style="list-style-type: none"> • For each topic missed, handwritten three critical points to remember. 	<i>Remediation</i> (2 points) <ul style="list-style-type: none"> • For each topic missed, handwritten three critical points to remember.
Proctored Assessment Retake **			
Retake optional	Retake optional	Retake required	Retake required
Total Points = 10/10	Total Points = 9/10	Total Points = 7-8*/10	Total Points = 6-7*/10

Note: For course grade, 10/10 points. =100 for ATI; 9/10 points. = 90; 8/10 points. =80; 7/10 points. =70; 6/10 points. =60. The student must complete remediation on the FIRST attempt of the assigned practice assessment. Rationales can be turned off and turned on after the completion due date at the discretion of the faculty. The course coordinator will set time in-between practice and proctored assessments.

***One (1) point will be added to the first proctored assessment for students who sit the retake-proctored exam and increase their score from a level 0 or 1 to a level 2 or 3. There is no point for moving from level 2 to level 3.*

First Alert Program

Students who are in academic jeopardy (e.g., demonstrate poor academic performance, poor clinical performance, have frequent or unexcused absences) will be referred to the First Alert team in Academic Support Services. First Alert is a referral system that enables Sam Houston State University faculty and staff to refer students whose in- or out-of-class performance demonstrates a need for academic support to the academic mentors at the SAM Center. Additional information on the First Alert Program can be accessed from <http://www.shsu.edu/centers/sam-center/mentoring/firstalert>.

TEXTBOOK:

Required: Savage, C.L., Kub, J.E., & Groves, S.L., (2016). Public health science and nursing practice: Caring for populations. Philadelphia: F.A. Davis.

COURSE CONTENT OUTLINE:

IMPORTANT: *During lab activities and exams/quizzes, students will be required to store their belongings in open bins and/or shelving. These dates are clearly spelled out on the class schedule. Please plan accordingly in order to properly store your valuables.*

This is a writing enhanced course (“W”), which means that at least 50 percent of your course grade will be derived from writing activities designed to help you master course objectives.

This is an ACE (Academic Community Engagement) course. The motto of Sam Houston State University (SHSU) is “A measure of a life is its service”. SHSU is striving to be a nationally recognized university in civic engagement in which its students give back to the community. In this Academic Community Engagement (ACE) course, you will collaborate with an organization (determined by the course instructors) as part of your clinical hours and explore the variety of ways to interact with the population as you apply your knowledge, skills, and that which is learned in the classroom. It is hoped that you will see yourself as a positive force within the clinical setting and recognize how your actions affect the population you serve. More important, ACE is about fostering civic responsibility in hopes you will understand the value that civic engagement has on the community and you will continue with those activities after graduation.

PRECEPTOR EVALUATIONS

Some placements (i.e. schools, clinics, home visits) will have students work with a preceptor versus the clinical instructor. Students are required to have preceptors complete a clinical evaluation form for these placements (Appendix E). This form is due to the CLASSROOM instructor in hard copy the following class day. Before leaving the clinical site, take a photo of the completed evaluation form and text it to your clinical faculty. If the preceptor chooses to scan and email to the faculty, please notify the faculty. **You are still responsible to ensure the faculty gets the paperwork.** Preceptor evaluations will be used to assist in determining if you have met the requirements to pass the clinical portion of the course. Failure to turn in evaluations may jeopardize your success in the course.

*Students are required to provide the preceptor with a copy of this form at the beginning of the clinical day. **The form is completed once per clinical site on the last day the student attends.**

**The clinical faculty will complete all other evaluations at midterm and end of semester.

CURRENT ISSUES ASSIGNMENT AND RUBRIC

Media of all types are used to convey information to people, organizations, businesses and communities globally. The presentation of a current event will allow you to understand the value of media to health and strengthen your skills in the areas of oral presentations, locating and analyzing data sources, critical thinking, and professionalism.

For this classroom assignment, you will work individually. You will be assigned a class date in which you will bring a current health news issue to class for discussion. Events presented may be regional, national or international and must be **current within 3 months of presentation date**. The event **must be related to the lecture topic of that day**. Students will have **5**

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minutes to present their issue. On presentation day, you are required to hand in, a summary of your points for discussion. It must be in written format using proper grammar and double-spaced. If you choose to use the computer to aid your presentation (i.e. video clip or PPT) you must have the material loaded onto the computer before the start of class by use of a flash drive. You will NOT be able to log into your personal profile on the classroom computer.

Score	Possible points=20	Score and comments
/8	Summarizes current event clearly and concisely demonstrating knowledge of the topic. (5 points) Includes identification of the topic, the data source, date of media (3 points)	
/3	Clearly states if this issue is or is not a public health concern (1point.) and why (2 points)	
/4	Teaching notes – handed in at the beginning of the class with proper grammar and spelling, double spaced, name present (4points)	
/2	Uses professional language (1 point) and body language during presentation(1 point)	
/1	Students maintains eye contact with audience. Does not reading notes continuously (1 point)	
/1	Business casual attire (1 point.)	
/1	Completed within allotted time (1 point.)	

Total /20

Comments

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COMMUNITY HEALTH ASSESSMENT PROJECT AND RUBRIC

A community assessment is a focused analysis on the health status of a community. It is a tool used to help identify and prioritize a community's health needs, involves collecting and analyzing data from various sources, and includes input from the community. The assessment forms the basis of health planning, interventions and evaluation and helps to target issues, raise community awareness and promote collaboration to improve the health of the community.

This project is a clinical group assignment and each student is expected to participate in a community health assessment. This group paper is a comprehensive report reflecting theoretical study and a practical analysis of the health (broadly defined) of a selected community population. You will assess and identify causes of illness and death of the assigned community, resources available and social determinants of health including vital statistics. You will collect and analyze data on an assigned population, which may include geographic areas, census tract data and other, demographics such as morbidity and mortality data. From your data, you will prioritize a health concern and consider nursing interventions to address that concern.

All DRAFTS are turned into your clinical instructor via Blackboard at specified intervals during the semester for evaluation. Log sheets of hours worked on the project will be turned in with each draft to the specified drop box. Revisions to the drafts can be made before the final paper is submitted at the end of the semester. All submissions of written work must be in proper APA format but will not be graded until the final paper is submitted.

All students will receive the same grade however; each student will be evaluated by all members of their group as to participation in group meetings, group discussion and completing assignments (quality and timeliness). The scores will be averaged and be your peer evaluation grade. Place all peer reviews and log of hours (see appendix) in hardcopy in the folder pockets . You are also required to log and submit your hours and activity on this project periodically and at the final submission. All drafts are due at 1100pm in BB. **The final paper is due at the start of class on the specified due date..**

Maximum page length is 20 pages excluding title page and references. The final paper is submitted in print format **in a pocketed folder**. Stapled papers will not be accepted for grading and will be returned for correction and considered late. Late entries will follow course policy. **Note: This assignment is submitted in parts except the final paper, which must include all sections. Faculty will provide timely feedback and changes should be made to future submissions.**

Maximum points = 145

Levels of Achievement	Excellent (130-145 = 90-100%)	Above Average (117-129 = 80-89%)	Average (101-116 = 70-79%)	Below Expectations (<101 = < 70%)
Table of contents and Introduction 9 points possible Part A	Table of contents has zero error (2 points). Introduction clearly states who the population is (2 points), the purpose of the paper and outlines the context of the paper (5 points). 8 - 9 points	Table of contents has 2 errors. Introduction clearly states who the population of assessment is. The purpose of the paper somewhat clear and outline of the paper mostly clear. 7.5 - 8 points	Table of contents has 3-4 errors. Introduction somewhat identifies who the population is with some indication of the purpose of the paper and has some outline as to what the paper will include. 6.5 - 7.4 points	Table of contents has 5 or more errors or is missing. Introduction does not accurately identify the population or purpose of the paper. The context of the paper vague or missing. <6.5 points

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<p>Defining and assessing the population <i>10 points possible</i></p> <p>Part A</p>	<p>Assessment includes demographic data for the population such as education, income, causes of death, causes of illness and injury and cultural diversity. (2 points each) 9 - 10 points</p>	<p>Assessment is missing one topic of demographic data with explanation of data. 8 – 8.9 points</p>	<p>Assessment is missing two topics of demographic data. With some explanation of data. 7 – 7.9 points</p>	<p>Assessment is missing three or more topics of demographic data. With minimal explanation of data. <7 points</p>
<p>Literature Review <i>10 points possible</i></p> <p>Part A</p>	<p>Includes an evidence based literature review of 5 or more sources to support your data, your population risk factors, and population health risk factors 9 - 10 points</p>	<ul style="list-style-type: none"> Includes an evidence based literature review or 4 or more sources <p>8 – 8.9 points</p>	<p>Evidence based literature review is less than 3 sources 7- 7.9 points</p>	<p>Evidence based literature review is less than 2 sources. <7points</p>
<p>Interpretation of data and identification of community risks. <i>40 points possible</i></p> <p>Part B</p>	<ul style="list-style-type: none"> Identification of how the data collected compares to the same data for the state and nation. <u>Data is explained: regional population statistics are compared to state and national levels</u> (2 points for each table’s comparison = 12) Includes (table format – see appendix) a correct list of the six determinants of health (DOH) and describes one way each DOH may be affecting the health of this population (1 points for identifying each DOH = 6, 2 points for each description = 12) Identifies 3 strengths and 3 weaknesses of this population. (6 points) Includes identification of one priority health concerns (supported by the data 4points) <p>36 - 40 points</p>	<ul style="list-style-type: none"> Paper integrates textbook material, 2 articles and most assessment data. Paper identifies 2 community health risks based on assessment findings. Linkages between assessment findings and identified risks are clear and have 1-2 inconsistencies to the data. Missing 1-2 strengths or weakness. Includes identification of one priority health concern. <p>32 - 36 points</p>	<ul style="list-style-type: none"> Paper integrates some textbook material, 1 article and some assessment data. Paper identifies 2 community health risks based on assessment findings. Linkages between assessment findings and identified risks are somewhat clear with 3-4 inconsistencies between data and findings. Missing 3 strengths or weaknesses. Includes identification of one priority health concern, which is mostly supported by the data. <p>28 - 32 points</p>	<ul style="list-style-type: none"> Paper integrates little textbook material, no articles and limited assessment data. Paper vaguely or does not identify community health risks. Linkages between assessment findings and identified risks are vague, missing, or greater than 4 inconsistencies with data. Missing more than 3 strengths or weaknesses. Identification of one priority health concern vague or inaccurate. <p><28 points</p>

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<p>Implications for Nursing– Student relates findings to nursing an nursing role <i>26 points possible</i></p> <p><i>Final</i></p>	<ul style="list-style-type: none"> • Describes 2 evidence based primary prevention nursing interventions to address your priority health concern. (5 points each = 10) • Identifies one strategy as an upstream approach and one is a downstream approach to primary prevention. (2 points each = 4) and why (2 points each = 4) • Describe which core public health function each of your primary prevention intervention/strategy addresses (2 point) and explains why. (2 points each) <p>23.5 - 26 points</p>	<ul style="list-style-type: none"> • Describes 1 evidence based primary prevention nursing interventions to address your priority health concern. • Identifies strategy as either an upstream OR a downstream approach. • Identifies which of the 3 core public health functions each strategy falls in with some minor inaccuracies as to why. <p>21 – 23.4 points</p>	<ul style="list-style-type: none"> • Describes 1 evidence-based prevention nursing interventions to address your priority health concern. Intervention is not primary prevention. • Strategy is either an upstream OR a downstream approach. • Identifies which of the 3 core public health functions each strategy falls in with limited or inaccuracy in the why. <p>18.5 - 21 points</p>	<ul style="list-style-type: none"> • Describes 1 prevention intervention that is not evidence based and not primary prevention. Strategy is either an upstream OR a downstream approach. • Does not identify course public health functions. <p>< 18.5 points</p>
<p>Conclusion <i>10 points possible</i></p> <p><i>Final</i></p>	<ul style="list-style-type: none"> • Accurately describes the anticipated short and long-term health outcomes of the 2 interventions (5 points each). <p>9-10 points</p>	<ul style="list-style-type: none"> • Accurately describes the anticipated short and long-term health outcomes of the 1 interventions. <p>8 - 9 points</p>	<ul style="list-style-type: none"> • Accurately describes the anticipated short OR long-term health outcomes of the 1 interventions. <p>7 – 8 points</p>	<p>The clinical faculty will complete all other evaluations at midterm and end of semester.</p> <p><7 points</p>
<p>Format <i>5 points APA</i> <i>5points Spelling</i> <i>Grammar - assessed on final paper.</i></p>	<p>Two (2) or less spelling or grammatical errors. Two (2) or less APA format (references, tables, text citations etc.) errors.</p> <p>9 – 10 points</p>	<p>Three to four (3-4) spelling or grammatical errors and three (3) APA format errors.</p> <p>8 -9 points</p>	<p>Five (5) spelling or grammatical errors and four (4) APA format errors.</p> <p>7 – 8 points</p>	<p>Greater than Five (5) spelling or grammatical errors. Five (5) or more APA format errors.</p> <p>< 7 points</p>
<p>Draft submissions <i>10 points possible</i> Draft submissions are awarded up to 5 points for completeness. Up to 5points awarded on final paper for corrections made.</p>				
<p>Peer Evaluations due on final submission <i>20 points possible</i> Use Peer review form. Late submissions penalty applies.</p>				

DISCUSSION BOARD AND RUBRIC

As a clinical assignment, you are required to participate in the discussion boards identified in your lab section in Blackboard. The discussion boards apply to the Holocaust Museum and prison/Estelle Unit. You are required to complete all components of the discussion board, as posted in Blackboard in your clinical lab section, within one (1) week after the clinical experience, 11pm. (I.e. if you have clinical at the prison on Wednesday, you must complete all posts by the following Wednesday at 11pm). Please note the following guidelines:

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- Students are not able to “make-up” for not posting to the Discussion Board. If you need to be out of town or do not have internet access, you need to arrange to participate in the discussion. Failure to post by the specified dates will result in a “0”.
- The **first post must be within the first 3 days** of the experience.
- You must **reply to a peers** post by 11pm one week after the experience. You will not be able to reply to a peer until you make your initial post.
- Responses should link to material from the required readings or assignments.
- All discussion posts **must reflect proper writing skills** indicative of your educational background. Students shall use correct grammar, spelling, and punctuation.
- Any references shall be **in APA format**.
- Posts are a maximum of 200 words. You must post your initial answer to the posed question and respond to at least 1 other post.
- Posts should be thought provoking, demonstrate critical thinking and a deeper level of understanding. For example, responses such as “I agree”, “ditto” etc. are not appropriate.
- Be respectful of others opinions in your postings. Treat others, as you would like to be treated.
- If there is, a post from the Instructor marked “RESPOND” you must post a response to the question, case study, or problem presented. **This is in addition to your posts.**

Students are expected to participate in the discussions. It is understood that students come from a wide variety of backgrounds and experiences. You are not graded with respect to your performance in comparison with colleagues. You are evaluated on your own level of progress throughout the course and the quality of your participation in class activities.

Criteria	Excellent (54-60)	Above Average (48-53)	Average (43-48)	Below Expectations (<43)
Critical Thinking	<ul style="list-style-type: none"> •rich in content •full of thought, insight & analysis 15 to 20 points	<ul style="list-style-type: none"> •substantial information •thought, insight & analysis has taken place 10 to 14 points	<ul style="list-style-type: none"> •generally competent •information is thin and commonplace 6 to 9 points	<ul style="list-style-type: none"> •rudimentary & superficial •no analysis or insight is displayed 0 to 5 points
Uniqueness	<ul style="list-style-type: none"> •new connections •made with depth and detail 15 to 20 points	<ul style="list-style-type: none"> •new ideas or connections •lack depth and/or detail 10 to 14 points	<ul style="list-style-type: none"> •few, if any new ideas or connections •rehash or summarize other posting 6 to 9 points	<ul style="list-style-type: none"> •off topic •no new ideas 0 to 5 points
Writing Style	<ul style="list-style-type: none"> •few grammatical or stylistic errors 15 to 20 points	<ul style="list-style-type: none"> •several grammatical or stylistic errors 10 to 14 points	<ul style="list-style-type: none"> •obvious grammatical or stylistic errors •errors interfere with understanding content 6 to 9 points	<ul style="list-style-type: none"> •obvious grammatical or stylistic errors •makes understanding content impossible 0 to 5 points

CLINICAL REFLECTION

It is proven that reflective journaling helps instill confidence in students and solidify knowledge in students. It will enhance accountability for your learning and facilitate evaluation. When asked to reflect, while some people simply describe about what happened, others explore deeply into their own feelings and responses to the scenario and thereby engage in more penetrating forms of reflection. However, as Fisher (2004) argues, 'critical reflection' leads to intensive self-awareness, because many spontaneously held beliefs and assumptions are scrutinized, particularly those influenced and nurtured by cultures and institutions such as country or community or religion (Fisher 2004, p.2). Your journal is an opportunity to share with the faculty the use of principles, theory and research in the clinical practice setting.

Fisher, K. 2004. *Critical self-reflection: What is it and how do you do it?* Southern Cross University, Unpublished Manuscript.

As individual work, you are required to submit reflection journals. One in each of the following areas: home health and ACE. Each paper is weighted the same. APA format is required. Writing in the first person is acceptable.

Length: Maximum 300 words. Reflections are due one (1) week from the clinical experience to Blackboard by 1100pm in the lab section.

1. **Home Health Reflection:** Answer the following questions:
 - a. What course objectives did this clinical experience meet?
 - b. Why? What did you learn?
2. **ACE Reflection:** Answer the following questions:
 - a. How did the teaching experience affect the community agency you served?
 - b. What is the value of such service projects to student learning? To the agency or community?

TEACHING PROJECT AND RUBRIC

Working in your clinical groups, your primary goal is to perform a primary prevention strategy to address a community health need and must be included in the project. You may choose to perform a secondary or tertiary intervention. You will meet with the assigned agency and one patron of the agency to interview/discuss with them their perspective of health concerns for this population. Using this information, you will develop a teaching lesson. You may not need to devise something from scratch. Research your topic as there may be evidence based activities already available for you to use. Creativity is valued. You will need to obtain approval for your intervention from both your clinical faculty and the agency. You will be responsible for planning your activity, handouts of any kind, supplies, implementation and any promotion of the activity as needed. Communications with the community partner and faculty needs to be continual by email or in person. Finally, you will complete a written assignment regarding program evaluation. For this individual assignment, you will discuss the importance of evaluation to your teaching project. Include what you learned from the evaluation about your outcomes. How will it affect your teaching methods in the future? Maximum 200 words.

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Teaching Project Rubric

Criteria	Excellent (45-50 points)	Very Good (40 – 45 points)	Average (35 – 40 points)	Below Expectations (<35 points)
Collaboration 7 points possible	<ul style="list-style-type: none"> • Interviewed the CP and a person who uses the agency (2 points each). • Summary and interpretation shared with faculty at least 2 weeks prior to event. (1 point) • Any promotional materials approved by faculty and CP at least 2 weeks prior to event (1 points each) 	<ul style="list-style-type: none"> • Interview requirements meet • Communicates with faculty and CP as in Excellent. • Materials approved by faculty and CP between 1-2 weeks prior to event 	<ul style="list-style-type: none"> • Interview CP or persons • Communication with faculty and CP < 2 weeks before event • Material approved either faculty or CP, not both 	<ul style="list-style-type: none"> • No interviews • Lacks communication with CP or faculty. • No material approval.
Visuals 14 points	<ul style="list-style-type: none"> • Large print legible at minimum 3 foot away, appropriate use of white space, culturally sensitive, age/education appropriate, colorful, easy to read (6 x2 points. each) • All materials and resources available and quantity (2 points) 	<ul style="list-style-type: none"> • Meets 5 criteria • All materials and resources available and quantity 	<ul style="list-style-type: none"> • Meets 4 criteria • Most materials and resources available with limited quantity 	<ul style="list-style-type: none"> • Meets 3 or less criteria • Did not have materials and resources as outlined in plan
Use of Teaching Learning/Health education strategies 8 points	<ul style="list-style-type: none"> • Teaching was age/education level (2 points), age (2 points) and language (2 points) appropriate • Demonstrated cultural sensitivity (communication styles, personal space) (2 points) 	<ul style="list-style-type: none"> • Meets 3 of the criteria in excellent 	<ul style="list-style-type: none"> • Meets 2 criteria in excellent 	<ul style="list-style-type: none"> • Meets 1 criteria in excellent
Objectives and Intervention. 16 points	<ul style="list-style-type: none"> • Two objectives for the intervention were identified, written and shared with the faculty and community partner at least 2 weeks before the presentation (2points)? • Objectives were measurable, realistic, specific, time sensitive and client focused (6 points x2)? • At least one intervention was a primary prevention strategy (2 points) 	<ul style="list-style-type: none"> • Two objectives identified between 1-2 weeks prior to event. • Objectives meet 5 of the criteria in excellent • At least one Intervention was a primary prevention strategy 	<ul style="list-style-type: none"> • Two objectives identified <1 week prior to event • Objectives meet 4 of the criteria in excellent • Intervention no a primary prevention strategy 	<ul style="list-style-type: none"> • <2 objectives • Objectives meet <4 of the criteria in excellent • No primary prevention strategy
Evaluation 5 points	<ul style="list-style-type: none"> • The students sought immediate feedback from the participants to determine if objectives were met. (2 points) method appropriate (1 points) • The students sought feedback from the CP (2 points.). 	<ul style="list-style-type: none"> • Students evaluated only one objective from participants • Feedback from CP requested 	<ul style="list-style-type: none"> • Student evaluated only one objective from participants • Did not see feedback from CP 	<ul style="list-style-type: none"> • Did not seek feedback on participant learning or CP.

Total points: _____/50

Comments:

Windshield Survey and Rubric

A description of what a windshield survey is on page 87-88 of your Savage et al. (2016) textbook. This assignment survey is an informal means of collecting information about the physical and geographical resources in population assessment data by driving through an area and observing its visible features. Windshield surveys are observations (objective data) made from a moving vehicle or by walking to help you better understand the condition of community/aspects of a community: what are the strengths/assets and weakness/challenges of a community. Do not make judgements or subjective comments or include data/statistics about the neighborhood – it is objective data only.

This assignment will be an individual video of your neighborhood – a one (1) mile radius around your front door. Upload your video and commentary or written comments, to Voice Thread by 11pm on the due day outlined in the course calendar. Videos should be no more than 5-7 minutes. You may use any video format you choose but you must use Voice Thread to upload. Following the rubric, include all outlined areas of your neighborhood of both what is present and what is missing. Use the text boxes or voiceovers to give more details as to what you observe or is lacking.

*See Blackboard assignment for a detailed list of areas to be assessed, how to register for Voice Thread and links to two short how-to videos and an example.

Windshield Survey Rubric

Criteria (Maximum 75 points)	Excellent (68 - 75 points)	Average (60 - 68 points)	Acceptable (53 – 60 points)	Poor (< 53 points)
Neighborhood - boundaries, name of sub-community 5 points	4.5 - 5 Points Indicates the date and time of day (1 point.) and weather conditions(1 point) survey performed Clearly identified neighborhood (1 point) with boundaries, (1 point) name of sub-community (if applicable – 1 point) and clearly indicates student performed a thorough assessment of the community.	4 – 4.5 Points Neighborhood clearly identified with boundaries, name, and sub-community.	3.5 - 4 Points Neighborhood somewhat identified. Several aspects of evaluation are missing.	<3.5 Points Neighborhood vaguely identified.
Assessment 60 points	54-60Points Assessment includes: <ul style="list-style-type: none"> • housing (5 points) • environment - public spaces, streetscape and street use, signs and land use (2 points each = 10 points) • schools – public, private, higher education (2 points each = 6 points) • stores (4 points), industry (4 points), & business (4 points) 	48-53 points Assessment lacking two areas listed in the excellent column	44–48 Points Assessment lacking three or four areas that are listed in the excellent column	< 44 points Information is incomplete with many assessment aspects missing.

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	<ul style="list-style-type: none"> • parks (2 points) and recreation (2 points) • culture (2 points) and entertainment (3 points) • people and race and ethnicity (2 points each = 6 points) • health services – medical and allied health (2 points each) • community and public services (2 points each) • churches (2 points) • community safety (2 points) 			
<p>Conclusion – written component of the assignment – submitted in BB – maximum 1 page. APA format (no title page). 10 points</p>	<p>9 - 10 Points In writing, the conclusion clearly states and summarizes 2 community strengths 1 points each for identifying and being supported by data = 2) and 2 community weaknesses (2 points each as above) of community as it relates to physical and geographical assessment. APA format (1 points). Spelling and grammar (1 points)</p>	<p>8 - 9 Points In writing, the conclusion clearly states and summarizes most of the strengths and weaknesses of the neighborhood. Half point for 1 APA errors. 1 spelling/grammar errors.</p>	<p>7 - 8 Points In writing, conclusion summarizes a few of the strengths and weaknesses of the neighborhood. Zero points for: > 2 APA errors. >2 spelling/grammar errors.</p>	<p>< 7 Points In writing, conclusion is vague and does not summarize strengths and weaknesses of the neighborhood. Zero points for :> 2 APA errors. >2 spelling/grammar errors.</p>

Appendix A

Peer Assessment for Group Process Form

Areas of Group Process Evaluation (This part of the grading process is confidential. Please do NOT share your peer evaluation with anyone).

Rate **yourself and each group member** on the parameters below:

Quality: Completed all assignments at the level of quality expected by the group.

Responsibility: Completed all assignments in a timely manner; did their fair share of the work.
The group could depend on the person to do the job.

Teamwork: Worked well with other team members, followed ground rules set by team, comments were constructive. Accepted criticism well, and did their part without complaining.

Contribution: Contributed to the group in an equitable fashion, followed through and was dependable, participated in decision making, participated in and attended group meetings.

Attitude: Projected positive attitudes throughout group assignment. Openness to others perspectives when different from their own. Did not monopolize the group or insist on his or her own way.

Includes a statement of what you contributed to the group project and what you could have done better.

On a scale of 0-4 with 4 being the best, rate **yourself and each member** according to following areas. Scale: 0 Needs Improvement, 1, 2, 3= Good, 4= Excellent

Team Member	Quality	Responsibility	Teamwork	Contribution	Attitude	Total/20
Self Name:						
Name:						
Name:						
Name:						
Name:						
Name:						
Name:						
Name:						
Name:						
Name:						

Comments: If you rank a peer less than 20, please explain why.

Statement of how you contributed to the project and what you could have done better.

Appendix B

Determinants of Health Chart

Determinant of Health	Health Concern for this population
Sample: Environmental	Sample: The condition of the school as built before 1978 and showing signs of disrepair with cracked walls, peeling paint (this should already be in your assessment) put these children at potential risk for lead exposure.

Appendix D

Exam Remediation Form

Name: _____

Date: _____

Instructions: Review your exam immediately after completion. Write the concepts you frequently missed on the page. You may use the back to help track as you review. The “title” of the question will help you identify the concepts. **You may not write down test questions or answers.** For each concept, write three (3) critical points to remember. (One word answers not sufficient for points) The more detail, the more learning you do. Submit the completed assignment to the drop box in blackboard (BB), section 01 by 11:00 p.m. on the **same day as of exam only**. *Late entries will not receive bonus dollars.*

- Maximum of 10 concepts
- No maximum page limit

Concepts missed:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Instructor certified no questions written down and only concepts.

_____ Signature required prior to leaving class for bonus point.

Appendix E

**SHSU School of Nursing NURS 4030 Community Nursing
Evaluation of Student Performance**

Student: _____

Site: _____

Complete the preceptor evaluation at the end of the student's last day with you. Return forms with the student or scan and emailed to either clinical faculty: lsj007@shsu.edu OR pfs004@shsu.edu at the end of their last day with you.

Rankings: **S** = satisfactory **N/S** = unsatisfactory

Please rate the student on each of the following behaviors and expectations. Space for comments is available or you may use the back.

Adherence to Foundations of Nursing in the Community	Rating
(a) Demonstrates therapeutic communication	
(b) Demonstrates cultural awareness of diverse and/or vulnerable populations and provides nursing care to clients and the community that is culturally sensitive.	
(c) Asks appropriate questions about your role and the impact on health of this population	
(d) Collaborates with the interdisciplinary healthcare team to achieve optimal care of the client and community	
(e) Demonstrates safe and accurate assessment of client	
(f) Identifies the impact of a health issue on the community as well as individual and family.	
(g) Identifies how/where to find referral information.	
(h) Identifies how individual health issues effect the health of the population at hand.	
Professionalism	
(a) Demonstrates professionalism in all interactions with staff and clients.	
(b) Reports to clinical rotation on time.	
(c) Displays honesty and integrity and assumes responsibility for one's own actions	
(d) Demonstrates awareness of own limitations and seeks help appropriately.	
(e) Is neatly groomed in SHSU community uniform with SHSU ID badge and agency badge	
(f) Has required supplies (pen, stethoscope, penlight)	

Preceptor Signature and email: _____ **Date:** _____

Comments (use back of form)

Appendix F

Poverty dollars: These may be added at \$10 earned = 1%.

*Bonus dollars are awarded the same in both campuses.

- You are responsible for keeping your bonus dollars and will cash them in for bonus points on the poverty day.
- If poverty dollars are lost, they will not be reissued (you lose the opportunity to cash them in).
- Apply bonus dollars to any assignment grade, exam 1 or quizzes (does not apply to exam 2, final exam or any ATI tests/remediation).
- You do not have to apply all dollars to one grade. It may be applied in \$10 amounts only. (For example – you have \$20, \$10, or 1% may be put on quizzes and \$10 or 1% may be put on the windshield survey. You may not allot \$5).
- Once you apply your dollars, you may not make any changes as to where to apply them.
- No rounding of dollars is permitted (I.e. \$7 does not round and may not be applied anywhere).
- Dollars may not be sold or given to another student.

How to earn bonus dollars

1. **Remediation** for mid-semester exams only: Earns \$10.
2. **Community service** (when offered) \$10/service opportunity that meets the requirements
3. **Classroom games:** Earns \$10 when indicated. Note: not all games have points.
4. **Classroom worksheets:** Earns \$10 when indicated. Note: not all worksheets have points.

Counterfeiting of money will result in loss of ALL bonus dollars AND be subject to the university academic honesty/plagiarism policy within the university, which may result extra assignments and/or failure of the class.

Expectations for Success in this Course

- Read the lesson and the required assigned material. All the content you need for this class, including links to discussions and assignments, is available under "course content." All of the assignment/discussions are listed in the lessons under Course Content. Most due dates are in the syllabus/class schedule but in particular, occasions, the class faculty may announce the due date.
- Participate fully in the course. Your ideas, comments and feedback expressed in your assignments and shared with faculty and classmates are important and valued.
- Check Blackboard twice during the week to check for updates, read announcements, work on assignment, check clinical site updates
- Manage your time wisely in order to complete your assignments on or before deadlines.
- Seek assistance immediately if you are having trouble. Follow the chain of command – peer, classroom faculty, course coordinator, level coordinator, Assistant Director, Director, Dean
- At the end of the course, all students are asked to complete evaluations of the course, faculty and clinical sites.

Dress Code: Each student is expected to comply with the dress code of the Department of Nursing (refer to your Student Handbook) even if your agency's code is more relaxed. If you have questions about the dress code and faculty's expectations, please clarify these points early in the semester. All students are required to wear their SHSU student photo ID in the clinical setting. Failure to comply with dress code and standards may result in probation or clinical failure. Course specific policies include:

- Ponytails are not allowed to touch below your chin line – longer ponytails must be put in a "bun"
- The community uniform is worn at all times except for the wound clinic in which scrubs may be worn.
- The blue fleece vest CANNOT BE WORN for any direct client contact. You must take it off.
- See dress code statement under course expectation in syllabus for specific requirements for this course that override the dress code policy in the student handbook.

Clinical Equipment: In all settings, unless otherwise instructed, you must have a stethoscope, pen light, pen and paper. In the home and shelter settings, you will be required to bring your blood pressure cuff.

Absence/tardiness to clinical: In addition to the School of Nursing policy on tardiness and absence, if students are sick, they MUST notify their clinical instructor AND agency preceptor before the start of clinical day. Clinical absences may need to be made up at the discretion of the instructor.

Classroom Conduct and Civility: The instructor will conduct this class in an atmosphere of mutual respect. The instructor encourages active participation in class discussions. We may have strongly differing opinions on the various topics of class discussions. Conflicting ideas are encouraged and welcome. The orderly questioning of the ideas of others, including the instructor, is similarly welcome. Faculty will manage the discussions so that ideas and arguments can proceed in an orderly fashion. You should expect that if your conduct during class discussions seriously disrupts the atmosphere of mutual respect, you would not be permitted to participate

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further. Laptops and cell phones are permitted for classroom-designated activities only as defined by the faculty.

Faculty/Student Communication: Course faculty often communicate important course updates using the SHSU email system. Students are expected to check their SHSU email account daily (excluding weekends) and reply, as appropriate within the time specified by the instructor. Students may text faculty when the faculty member has indicated that this as an acceptable means of communication. Students must include their name in the text message. In addition, students are to abide by texting guidelines set forth by the faculty member. Refer to the *Faculty/Student Communication Policy* in the Student Handbook for further guidance.

Group Assignments: Group dynamics and the group process are important learning outcomes for the Department of Nursing graduates. Many opportunities for learning these skills are integrated into the curriculum. Characteristics of successful groups are:

1. Members identify goals and objectives.
2. Members set deadlines for completion of tasks.
3. Members distribute equitable assignments and complete them in a timely fashion.
4. Members report at scheduled meeting times.
5. If problems arise in a group, members attempt to resolve the problems internally.
6. If unable to resolve group dynamic problems, consult course faculty for direction in problem resolution

Late Work: All assignments will be assigned a due date. A penalty of 10% will be deducted each day it is late up to 3 days at which time a “0” will be awarded at midnight of the 3rd day. Some assignments may be required to be submitted to pass the course even if a zero (0) is assigned. The faculty has the right to make allowances for a student in consultation with the course coordinator.

Missed Quizzes: Missed quizzes cannot be made up. For one quiz per semester, if a legitimate note is provided to the course coordinator within 48 hours of a student absence, the grade will be exempt otherwise; a grade of zero (0) will be awarded.

Missed exams: Students must notify the course coordinator of tardiness or absence prior to the start of the exam. After notification, late arriving students will be allowed to start the exam but will not be given an extension of time. (I.e. Exam time 1-3pm. Arrive at 1:15pm. Exam ends at 3pm). After notification and with appropriate documentation, a makeup exam will be assessed at the discretion of the course coordinator and must be taken on the date and time designated by the course coordinator. Failure to notify the course coordinator of absence or tardy may result in being assessed a zero (0) for the exam.

Recording lectures: No recording of lectures is allowed. Unauthorized recording may result in failure of the course.

School of Nursing Policies

Syllabus modifications: the course instructor may modify the standards and requirements set forth in the syllabus at any time. Notice of such changes will be posted in course announcements or communicated by written or email notice.

Absence Policy

Presence at lectures, clinical rotations, and other events are an important part of the student learning experience in the Sam Houston State University (SHSU) School of Nursing (SON). Absences are obstructive to this process and are strongly discouraged.

There are two kinds of absences recognized by SHSU SON: an absence given with prior notice and a no-call/no-show absence. An *absence given with prior notice* is one in which the professor or clinical instructor was directly spoken with by phone call or in person before the scheduled class/clinical start time. A *no-call/no-show absence* is an absence in which the student does not attend the class or clinical rotation and has not directly spoken with the instructor/professor before the scheduled class/clinical start time.

An absence “occurrence” is defined as any absence, regardless of the reason, and will begin the first absent day and end the last absent day, so multiple days can comprise a single absence occurrence.

ATTENDANCE AT ALL SCHEDULED CLINICAL EXPERIENCES (INCLUDING SIMULATION, SKILLS LAB, OR OTHER EXPERIENCE) IS MANDATORY FOR ALL STUDENTS. Any student who is experiencing symptoms of an infectious process (i.e.: fever, vomiting, diarrhea, etc.) should contact faculty at least one hour prior to scheduled clinical start time to advise of symptoms. Depending on the assigned clinical experience, students may be required to notify appropriate clinical agency personnel. Clinical make-up assignments will be required.

Due to the importance of clinical experiences for the student’s learning, any absence from clinical may prohibit the student from meeting course outcomes, which may result in clinical/course failure.

The following absence guidelines apply:

- Two no-call/no-show absences may result in dismissal from SON.
- Two or more didactic (course) absence occurrences in a single semester may result in failure of the course.
- One absence from clinical may prohibit the student from meeting course outcomes, which may result in clinical/course failure.
- Six absence “occurrences” while the student is enrolled and engaged in coursework within the SON may result in dismissal from the SON.

Any occurrence lasting two days or more will require documentation (SHSU Student Health Center or healthcare provider’s note, etc.) to be submitted to the faculty member of each course/clinical rotation missed. The healthcare providers note is submitted in addition to a completed Form 8: Student Absence/Tardy Form.

With each absence occurrence, the student must complete and sign the Form 8: Student Absence/Tardy Form and submit to course faculty within 24 hours upon return to classroom or clinical for the SON. All Student Absence/Tardy forms are to be signed by course faculty and submitted to the Administrative Assistant for the Director of the SHSU SON. Student Absence/Tardy forms for students assigned to The Woodlands campus (TWC) are to be submitted to the Administrative Assistant to the Assistant Director of the SON at TWC.

Tardiness Policy

Tardiness is an unprofessional behavior and is disruptive to the class and clinical environment. Thus, all students are expected to arrive on time to class and clinical and are expected to return from break on time. Students arriving after the scheduled start time are considered tardy. Tardiness may result in loss of course points and/or additional assignments per course faculty discretion. The student must complete Form 8: Student Absence/Tardy form for each tardy

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incident and submit it to course faculty with 24 hours of incident. The following outlines the consequences of student tardiness.

First tardy incident = counseling of student by the Course Coordinator;

Second tardy incident = counseling of student by the Level Coordinator;

Third tardy incident = counseling of student by the Director of the School of Nursing;

Fourth tardy incident = may result in course failure

Examination Policies: Test grades will be posted when item analysis is completed. Written exams and written assignments must be completed as scheduled. If a student is unable to complete a written (clinical or class) assignment, arrangements must be made with the instructor(s).

See [Absence from Scheduled Examinations Policy](#) in the *SON Student Handbook* for guidelines regarding absence from exams.

Cell phones must be turned off during the exam. Both cell phones and laptops not being used to test cannot be visible during testing and exam reviews. If a student has a cell phone visible, his or her test will be taken away and the student will receive a grade of zero on the test. There will be no sharing of calculators during exams.

Contact with a student taking an exam can occur by calling 936-294-2371 (Huntsville) or 936-202-5111 (TWC) and someone will come and notify the student of an emergency.

ATI Testing Policy: As a part of coursework in the School of Nursing, standardized examinations (ATI) are mandatory to fulfill requirements of many courses. These examinations provide students with diagnostic information regarding their knowledge base for nursing practice. Students should take these standardized examinations seriously.

If the student does not achieve the acceptable passing score of proficiency level 2 or higher when tested, remediation will be required. *The student is responsible for completing any required remediation or testing.* Students must make an appointment with course faculty to discuss specific individual performance concerns. The student must retest within a specified period. If the acceptable passing score is still not achieved, the student must remediate further.

Progression Policy: To pass the course successfully, students must achieve at least a 75% exam score in addition to having an overall “C” in the coursework. If your exam score at the end of the course is less than 75% (74.5% and higher rounds up; 74.99 does not) you will fail the course and will be required to retake the course including the clinical component, if applicable.

All clinical and classroom assignments must be completed in order to pass the course. Failure in any component will necessitate repeating the entire course. Didactic and clinical/laboratory components of nursing courses shall be taken concurrently.

In order to progress in the SHSU nursing program, students are expected to pass all nursing courses with at least a “C”.

Students are expected to abide by and will be held accountable to all policies within the [Nursing Student Handbook](#). Please refer to this handbook for further information with regard to the following policies.

STUDENTS WITH DISABILITIES POLICY:

It is the policy of Sam Houston State University that individuals otherwise qualified shall not be excluded, solely by reason of their disability, from participation in any academic program of the university. Further, they shall not be denied the benefits of these programs nor shall they be subjected to discrimination. Students with disabilities that might affect their academic performance should register with the Office of Services for Students with Disabilities located in the Lee Drain Annex (telephone 936-294-3512, TDD 936-294-3786, and e-mail disability@shsu.edu). They should then make arrangements with their individual instructors so that appropriate strategies can be considered and helpful procedures can be developed to ensure that participation and achievement opportunities are not impaired.

SHSU adheres to all applicable federal, state, and local laws, regulations, and guidelines with respect to providing reasonable accommodations for students with disabilities. If you have a disability that may affect adversely your work in this class, then we encourage you to register with the SHSU Services for Students with Disabilities and to talk with me about how we can best help you. All disclosures of disabilities will be kept strictly confidential. NOTE: No accommodation can be made until you register with the Services for Students with Disabilities. For a complete listing of the university policy related to rights and responsibilities, see: <http://www.shsu.edu/dotAsset/187f9029-a4c6-4fb4-aea9-2d501f2a60f3.pdf>

Academic Policies

- a. Class attendance policy (see [SHSU Class Attendance policy AP 800401](#)) – each faculty member is obligated to clarify her/his classroom policy regarding absences in writing to each student enrolled in class.
- b. [Procedures in cases of Academic Dishonesty AP 810213](#) (be sure to include statement regarding plagiarism)
- c. [Academic Grievance Procedures for Students AP 900823](#)
- d. [Students with Disabilities AP 811006](#)
- e. [Student Absences on Religious Holy Days AP 861001](#)
- f. [Use of Telephones and Text Messengers in Academic Classrooms and Facilities AP 100728](#)

Academic Honesty/Plagiarism: Students are expected to engage in all academic pursuits in a manner that is above reproach. Students are expected to maintain honesty and integrity in the academic experiences both in and out of the classroom. Any student found guilty of dishonesty in any phase of academic work will be subject to disciplinary action. The University and its official representatives may initiate disciplinary proceedings against a student accused of any form of academic dishonesty including but not limited to, cheating on an examination or other academic work that is to be submitted, plagiarism, collusion and the abuse of resource materials.

The use of unauthorized material, communication with fellow students during an examination, use of unauthorized technology during an exam, attempting to benefit from the work of another student and similar behavior that defeats the intent of an examination or other class work is unacceptable to the University. Cheating on examinations, plagiarism, improper acknowledgment of sources in essays, the use of a single essay or paper in more

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than one course without permission, and falsification of records or documentation are considered serious offenses and shall be grounds for disciplinary action. Students will receive a zero on the test or assignment in question and will be reported to the Director of the School of Nursing and to the Dean of the College of Health Sciences. For more information, please refer to SHSU Academic Policy Statement #810213, *Procedures in Cases of Academic Dishonesty*.

<http://www.shsu.edu/dotAsset/728eec25-f780-4dcf-932c-03d68cade002.pdf>

Allegations of **student misconduct**, as defined in paragraph 5.2, Chapter VI of the *Rules and Regulations*, Board of Regents, The Texas State University System, and Sam Houston State University *Student Guidelines*, published by the Dean of Students' Office, will be referred to the Dean of Students' Office for necessary action.

Dean of Students: <http://www.shsu.edu/dept/dean-of-students/>.

Student Absences on Religious Holy Days (AP 861001)

Section 51.911(b) of the Texas Education Code requires that an institution of higher education excuse a student from attending classes or other required activities, including examinations, for the observance of a religious holy day, including travel for that purpose. Section 51.911 (a) (2) defines a religious holy day as: "a holy day observed by a religion whose places of worship are exempt from property taxation under Section 11.20". A student whose absence is excused under this subsection may not be penalized for that absence and shall be allowed to take an examination or complete an assignment from which the student is excused within a reasonable time after the absence.

University policy 861001 provides the procedures to be followed by the student and instructor. A student desiring to absent himself/herself from a scheduled class in order to observe (a) religious holy day(s) shall present to each instructor involved a written statement concerning the religious holy day(s). The instructor will complete a form notifying the student of a reasonable timeframe in which the missed assignments and/or examinations are to be completed.

<http://www.shsu.edu/dotAsset/0953c7d0-7c04-4b29-a3fc-3bf0738e87d8.pdf>

Academic Grievance Procedures for Students (AP 900823)

Academic grievances include disputes over course grades, unauthorized class absences/tardiness, suspension for academic deficiency, instructor's alleged unprofessional conduct related to academic matters, graduate comprehensive and oral exams, theses and dissertations, and withdrawal or suspension of privileges related to degree-required clinical rotation, internships, or other clinical service delivery in professional degree programs.

If the dispute is determined to be based upon professional judgment, the aggrieved student is entitled to have, as appropriate and in turn, the department/school chair, College Academic Review Panel, academic dean, Dean of Graduate Studies (for graduate student issues), and .

<http://www.shsu.edu/dotAsset/0bb1346f-b8d6-4486-9290-dba24123d0d8.pdf>

Students are expected to abide by and will be held accountable to all SHSU policies contained with the SHSU Student Guidelines available at <http://www.shsu.edu/students/guide/>. Please refer to this handbook for further information in regards to the following policies.

FERPA

Disruptive conduct under **Dean of Students-General Conduct and Campus Regulations**
Withdrawal/resignation

Syllabus Acknowledgement Form

I _____ acknowledge I have read the syllabus for NURS 4030 Foundations of Nursing in the Community. By signing this form, I agree to abide by the parameters set out in the syllabus.

Student Signature

Date