** 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: 2021 Spring
3. Course Faculty (include any adjunct faculty utilized

Staci Warnert (Theory and clinical Winnemucca), Michelle Husbands (Theory and clinical Elko), Tami Mette (clinical Elko), Sarah Johnson (clinical Elko), Brian Dankowski (clinical Elko), Malia Keep (clinical Pahrump))

**COURSE STATISTICS**

1. Theory Ratio 41:2 Clinical Ratio 4-8:1 Simulation Ratio 5:2

(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: 100% (36 students)
   2. Percent Failed: 0%
   3. Range of Final Scores (theory and clinical): 81.76% - 95.59% (35 students - 1 student did not take final due to clinical outcomes)
2. Final Clinical Outcomes:
   1. Percent Satisfactory: 97.2% (35 students)
   2. Percent Unsatisfactory: 2.8% (1 student)
3. Course Attrition:
   1. Beginning number of students: 41
   2. Withdrawals: 2
   3. Incompletes (with expected date of completion): 0
   4. Dismissed 3
4. Dosage Calculation Test:
   1. First attempt pass 40
   2. Second attempt pass 1
   3. Third attempt pass 0
   4. A & P committee recommendation: 0
5. Course Overview
   1. ATI Tools/Materials:

|  |  |
| --- | --- |
| ATI Test/ Resource Used | When used during semester |
| Nutrition Practice Exam B | Due by 04/26/2021 |
| Nutrition Practice Exam A | Used throughout semester for journaling. (see. |
| Nutrition Proctored Exam | 04/29/2021 |
| Nutrition Proctored Exam Retake | 05/10/2021 |
| Real Life 3.0 Chronic Kidney Disease (fluid imbalance) (Clinical time for all students) | 02/14/2021 |
| Skills Modules: Nutrition (Dietitian clinical rotation), Enteral Feeding/ NGT insertion, Med Administration IV, IV therapy | Beginning of semester & Prior to dietitian rotation |
| Dosage and Calculation 3.0: Powdered Medications, Parenteral (IV) medications, Safe Dosage, Medication Administration, Oral Medications, Injectable Medications | 01/22/2021 |
| RN Video Case Studies: Client Education, Fluid Volume, Oxygenation, Pain Management, Urinary Tract Infection, Type I Diabetes Mellitus, Heart Failure, Medication Interactions, Nursing Process, Metered Dose-Inhalers, ADLs (Clinical time x 8 students) | 03/15/2021 |

* 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 2019 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 3.0 Kidney disease was used for clinical time. Students completed Real Life and completed adapted clinical care packet for the Real Life Kidney Disease simulation, which focused on fluid and electrolyte balance. Dosage Calculation modules were used prior to the semester start (due at orientation: 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 3.0 – 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. Video Case Studies, RN were used for clinical time in Winnemucca after clinical sites were lost this semester due to COVID. The videos were used to reinforce nursing content and work on analysis and planning.

|  |  |
| --- | --- |
| **ATI Nutrition 2019 Proctored Exam** |  |
|  | Current  Semester Spring 2020 (ATI Nutrition 2019 Proctored Exam) | Previous Semester Spring 2020 (ATI Nutrition 2019 Proctored Exam) | Previous  Semester  Spring 2019  (ATI Nutrition 2016 Proctored Exam) | Previous  Semester/Spring 2018  (ATI Nutrition 2016 Proctored Exam) |
|  |  |  |  |  |
| % & # of Group Below Proficiency Level 1 | 0 | 0 | 0 | 0 |
| % & # of Group at Proficiency Level 1 | 11.1 (4) | 15.8 (6) | 0 | 11.8 (4) |
| % & # of Group at Proficiency Level 2 | 55.6 (20) | 47.4 (18) | 59.3 (16) | 55.9 (19) |
| % & # of Group at Proficiency Level 3 | 33.3 (12) | 36.8 (14) | 40.7 (11) | 32.4 (11) |
| Group Score: (Adjusted) | 77.5 | 74.9 | 78.9 | 76.4 |
| Group Mean—National: | 64.7 | 65.2 | 64.7 | 63.0 |
| Group Mean –Program: | 64.2 | 64.5 | 64.3 | 62.4 |
| Institutional Benchmark: | Level 2 | Level 2 | Level 2 | Level 2 |
| % of Group Meeting Institutional  Benchmark: | N/A | 84% | 100% | 88.2% |
| Group Percentile Rank - National | 96 | 92 | 98 | 99 |
| Group Percentile Rank - Program | 97 | 93 | 99 | 99 |
| **Thinking Skills Group Scores** |  |  |  |  |
| Foundational Thinking | 78.1  78.1 | 83 | 74.9 | 75.8 |
| Clinical Judgment/Critical Thinking | 77.3 | 73.4 | 81.4 | 78.4 |
| Priority Setting | 65.6 | Not Listed | 66.7 | 65.2 |
| **Nursing Process Group Scores** |  |  |  |  |
| Assessment | 70.6 | 73.7 | 60 | 64.7 |
| Analysis/Diagnosis | 86.1 | 75.1 | 74.1 | 79.8 |
| Planning | 82.8 | 65.4 | 83.1 | 80.7 |
| Implementation/Therapeutic Nursing | 79.6 | 77.2 | 82.7 | 77.8 |
| Evaluation | 67.7 | 74.0 | 87 | 82.1 |
| **Major NCLEX Content Areas** |  |  |  |  |
| Management of Care | Not listed | Not Listed | Not listed | Not listed |
| Safety and Infection Control | 86.1 | 100 | 70.4 | 67.6 |
| Health Promotion and Maintenance | 81.9 | 76 | 75.7 | 77.2 |
| Psychosocial Integrity | Not listed | Not Listed | 91.4 | 83.3 |
| Basic Care and Comfort | 76.8 | 76.1 | 83.7 | 79.1 |
| Pharmacological and Parenteral Therapies | 62.5 | 81.6 | 98.1 | 92.6 |
| Reduction of Risk Potential | 77.5 | 67.7 | 74.4 | 76.5 |
| Physiological Adaptation | 73.6 | 74.3 | 81.5 | 73.0 |
| **QSEN** |  |  |  |  |
| Safety | 76.8 | 68.1 | 79.3 | 74.7 |
| Patient-Centered Care | 80.1 | 75.4 | 84.3 | 81.7 |
| Evidence Based Practice | 75.2 | 76.5 | 78.0 | 76.1 |
| 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).

\*Pharmacological and parenteral Therapies (2 items). Students performed similar or better than last year. In areas that were slightly lower than last year they are similar to previous years or higher. Some sections were based on very few questions (Pharmacological and Parental Therapies = 2 questions); thus, would not place a lot of weight on this section. Evaluation is significantly lower than previous years and should be paid the closest attention to (based on 8 questions). Looking at the questions more closely, topics that should be addressed more thoroughly next year should include: Evaluation of client understanding of a low-saturated fat diet, vitamins (vitamin A toxicity), high fiber food sources, J-tubes (prevention of clogging), BMI calculation, metabolic complications, Diabetes and laboratory values, Clinical manifestations of hypoglycemia (need to address with simulation), high potassium foods,

Concepts not covered yet that scored low: folate and pregnancy (N252), chronic nausea and pregnancy (N252), childhood obesity (could discuss in nutrition/obesity as component of the 158 course and also should be addressed in N253). Fluid intake for acute renal failure (N257), hepatitis and cirrhosis (N257),and teaching for a client with a goiter (257)

Will continue to incorporate journaling of nutrition ATI questions in the course. With the new ATI proctored assessment grading grid will use ATI nutrition faculty made exam for journaling. Students will get extra time with practice questions before the proctored exam by taking both Practice A and B as part of the new grid. Need to make sure the newly developed clinical assignments address nutrition of the clients students care for to reinforce nutrition content. Recommend continuing to encourage students to review the ATI Enteral feeding and Nutrition skills modules prior to the Nutrition exam as well as nutrition sections in the Med-Surg textbook and Fundamental’s textbook. Also encourage students to examine the nutrition sections in the ATI med-surg, ATI pediatrics, and ATI OB books to assist with studying and will suggest that again next year. Continue to emphasize nutrition for the disease processes covered in class. The Nutrition review day with student nutrition presentations was changed to include a handout and a brief overview by each group. This worked well with the increase in cohort size and the larger cohorts we expect to continue to see. Plan to continue to keep the Nutrition Exam scheduled earlier in the semester (April) to avoid multiple exams at the end of the semester during finals.

* 1. Course Exams:

|  |  |
| --- | --- |
| Course Exam | Average Percentage |
| Exam 1 | 79% |
| Exam 2 | 85% |
| Exam 3 | 88% |
| Final Exam | 85% |

* 1. Please see test blueprints. Changes need to made to the exams based on the test analysis/ blueprints; however, more changes than those outlined on the test analysis should be made to prepare students for the Next Gen NCLEX. Would suggest removing questions and adding in new scenario based/ Next Gen type questions to prepare students for the new NCLEX.
  2. 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.

WebCampus was used to organize course content and provide students with important course information. IAV was used with four centers (Elko, Winnemucca, Pahrump, and Ely). Theory was delivered from Elko (Husbands) and Winnemucca (Warnert). IAV technology was overall reliable. Due to having to social distance hearing students was occasionally a problem and it was difficult to see students and identify them as they were spaced and the cameras were zoomed out (and students were wearing masks); thus, it was harder to call on students. Zoom and BBB were used to meet with students outside of the classroom and both worked to meet our needs.

**THEORY EVALUATION**

1. Textbooks used and evaluation of each:

Lewis’s Med-Surg (2020) - The text describes concepts in the detail needed for students and gives good pathophysiology review. Content was thoroughly covered in most areas. Important sections such as respiratory and diabetes were very good. Students seemed to grasp concepts provided in the textbook. Textbook PowerPoints were also provided. Some areas were identified where the textbook did not go over all important information (Appendicitis, Total Joint Replacement, gastritis). Students were give supplemental resources such as instructor created PowerPoints and were referred to their ATI Med-Surg textbooks. Mosby’s guide to nursing diagnoses - 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. Davis’s drug guide for nurses - 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. Davis’s comprehensive handbook of laboratory diagnostic tests - Text was used during and before actual care plan work in the clinical setting and is an invaluable tool for students planning care. Publication manual of the American psychological association. (7th ed.) - All students were required to purchase this text in Nursing 135. Some students are doing better with APA than others, but APA continues to be an issue for these students in both the classroom and with assignments. The 7th edition seems to be more straightforward. Students were also provided with Owl Purdue as an online resource. Need to work on APA formatting for references with students and emphasize its importance during orientation. \*\*\*\*\*\*\*ATI Nursing Education. (2019). Medical Surgical Nursing (Ed. 11.0) and .Nutrition (Ed. 7.0) Assessment Technologies Institute, LLC. 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. Incorporated Med-Surg ATI book into theory content and reference for the students and encouraged students to use throughout the course.

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, 2 and 3.

1. Teaching Methods:

A variety of teaching methods were used to include Lecture with PowerPoint and NearPod presentations, Case Studies, group work, classroom activities, games, discussion, and NCLEX style Questions. Students created a fictitious patient at the beginning of the semester that was carried into multiple lectures as an evolving case-study.

**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:**

**Dietitian at NNRH**: Students spent 2 hours with a registered dietitian to evaluate patients. Students completed a mini nutritional assessment with the dietitian and learned about recommended diets. Lab work was looked at intensely and the dietitian worked with students to connect the labs with dietary needs. The dietitian very receptive and willing to continue working with students. Will continue with this rotation as reinforces and has students apply nutrition content. Limitations centered on the dietitian’s availability (Wed. & Fri.) due to part-time schedule and set days of the week.

**Highland Manor Senior Teaching:** Due to COVID-19 restrictions, this clinical site was not utilized this semester (Spring 2021). In replacement for this clinical site, students were assigned a group project to develop a video teaching demonstration that addressed a senior/elderly health and wellness topic.

**Golden Health Off-site Work Clinic**: Students worked with RNs in the urgent/walk-in clinic. Students worked with a diverse group of patients and their families from the mining industry. This included immunizations, COVID testing, and acute illness Low numbers of patients due to the COVID-19 pandemic restrictions and the high percentage of telephone triaging affected how much students saw during their rotation.

**Pioneer Urgent Care**: Due to COVID-19 restrictions, this clinical site was not utilized for the Spring 2021 semester per the clinic’s administration request. In place of this clinical rotation, a real-time virtual telehealth simulation was created, and the students were the telehealth nurse triaging, assessing, and managing standardized patients with acute episodic illnesses.

**NNRH Med Surg**: Students 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.

**NNRH Infection Control:**  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 is willing to work with students again. Students verbalized they learned a lot during the rotation. Students helped to administer to the COVID-19 vaccine to pre-scheduled clients

**NNRH Case Management:** Students spent 2 hours with a case manager observing their role/responsibilities in the clinical setting. Student were able to observe a multidisciplinary meeting that involved various client’s discharge/placement needs and the various technology software use for documentation

**NNRH Health Fair:** This event was cancelled due to the COVID-19 pandemic. Will consider using again in the future (refer to 2019 course report for necessary changes/ collaboration with NNRH for future participation in the NNRH health fair). All students agreed to continue with all clinical rotations.

**Nevada Health Center Community COVID-19 Vaccine Outreach –** Students collaborated with a multidisciplinary community health team to administer the COVID-19 vaccine to the elderly residents of Elko County and provided client education based on the CDC.gov guidelines

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

(See above descriptions of the clinical sites and below clinical changes and reasons). – No concerns reported this semester at the above sites

1. Clinical changes and reason(s):  
   **Elko:**  Continued evaluation of the NNRH Health Fair, Pioneer Urgent Care, and Highland Manor Senior Teaching to meet outcomes is necessary since the rotation was cancelled this year.

**Winnemucca:**

**Dietitian at HGH**: Students worked with dietitian to evaluate patients. Students completed a mini nutritional assessment with the dietitian and learned about recommended diets. Lab work was looked at intensely and the dietitian worked with students to connect the labs with dietary needs. They worked with the dietitian on the Med-Surg unit. The dietitian was great with the students and the students indicated they learned a lot from her. She is willing to work with our students again. **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 (with the instructor), 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 nurses worked really well with the students. Census was high enough to meet the needs of the students during their clinical rotations. **HGH – NP Assignment (Nurse Matthews)**: Students worked with the NP seeing patients and discussing the role of the NP in healthcare and health promotion. This allowed the students to evaluate how the NP manages the care of multiple patients with acute and chronic disease processes in the clinical setting to improve patient outcomes. Students verbalized that they had a good rotation with the NP Matthews.

**Golden Valley Medical Center:** This rotation was added to align with wellness assignment and align with Golden Valley Medical Center in Elko. Students worked with the RN at the clinic. Rotations were slow at times and students who went to this rotation at the beginning of the semester were not able to see patients due to the clinic allowing a medical student to complete all patient histories. This was discussed with the Nurse Manager and students in later rotations were able to see more patients with the RN as well as observe the MD during procedures.

**Telehealth Clinic:** Was utilized in lieu of clinic rotations. Good focused learning related to analysis, determining patient needs and patient education. Will continue to use unless other opportunities present themselves, but good learning.

**Changes to clinical sites:** HGH –Acute Care Clinic: No other NPs were working at the other outpatient clinics this year. Continue to reassess for NPs in the future. State of Nevada – Public Health Nurse: Students were not able to work with the public health nurse due to state restrictions related to COVID. The public health nurse is open to working with students again when the pandemic restrictions are lifted. Pleasant SeniorCenter: When it opens students should be able to go back and complete teaching about a health topic. Instead students created a teaching demonstration video.

**Pahrump:**

**Dietitian**: The registered dietician from Pahrump Davita Dialysis came to the campus and provided a lecture with case scenarios related to how dieticians create diets for patients with a variety of diagnosis. The students also participated in a dietician Bingo game created by MyPlate.gov. On a separate occasion, the students completed a mini nutritional assessment on one of their patients during a clinical rotation. Using the information from the assessment, the students created a powerpoint presentation discussing the type of diet recommended for their patient and analyzing the relevance of the diet to the patient’s diagnosis. The students felt all the activities were beneficial to increasing their knowledge regarding the importance of diet and the health and well- being of their patients. **Desert View Urgent Care:** Students were assigned to work with an RN in the Emergency Department Urgent Care at Desert View Hospital. This Urgent Care allowed the students to care for a diverse population of patients, including children and adolescents, who came to the hospital for a variety of complaints. These complaints included flu like symptoms, rash of unknown origin, broken bones, respiratory issues, mental health issues and blood sugar control. The students all agreed this was a valuable rotation and should be continued. **Desert View Medical Surgical Unit**: Students completed patient assessments, EMR documentation, patient teaching, medication/ IV administration, development of patient care plans along with a variety of clinical tasks such as IV starts and foley catheter insertion. Also included in this rotation was a leadership day during which the student assumed the role of the charge nurse. The student leader was responsible for assigning patients to each student, assigning acuity levels, and ensuring their students had the resources necessary to be successful during the clinical day. The leadership student also facilitated the debrief at the end of the day. The staff and administration at DVH were very welcoming to the students and served as wonderful mentors. **Case Management**: The students spent 3 hours with the RN Case manager at Desert View Hospital. Due to COVID, the Case Manager spent most of her hours working from home but consented to come to the hospital for the 3 hours scheduled with the student. The Case Manager spent the majority of the 3 hours talking to the students about her role as a case manager instead of reviewing patient charts. I recommend talking to the case manager prior to next year to review the objectives of the experience and ensure she provides experience for the students that meets our course objectives. **Nurse Practitioner Day 1 and Day 2**: The students spent two days with a local Nurse Practitioner (NP) who works with a Cardio/ Pulmonary Physician. The students observed the NP as she performed physical assessments on the patients, reviewed medications, provided teaching to the patient and family members and updated the general treatment plan. This experience allowed the students to see patients in an outpatient setting working with an advanced practice nurse. The students agree this was a valuable experience and should be continued.

Briefly describe any concerns regarding the clinical sites used: There were no concerns regarding the clinical sites this semester. As I mentioned above, the only change I would make would be to meet with the Case Manager at DVH prior to the semester and review the Student learning Outcomes for the course.

**Senior Teaching**: The Pahrump Senior Center was closed due to COVID restrictions. The students worked together in groups of 3 or 4 and video recorded a teaching session that would have been presented at the Senior Center. The presentation topics included exercise for seniors, basics of creating a facebook page, relaxation techniques and a cooking demonstration. The students felt this was a beneficial assignment.

**Dietitian at WBRH:**

Because our dietitian works very few hours per month, Ely students were unable to meet with her. Ely students participated in a Zoom meeting with the dietitian who presented to the Pahrump cohort. (Also see Pahrump eval of this rotation above). Professor Keep facilitated this presentation and the accompanying activity. Students stated that they learned from this activity and did well with the Bingo activity which confirmed their retention of information required for this module.

**WBRH - 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 developed care

plans. Students were able to follow their clients to other areas for testing. Students reported that they enjoyed the clinical experience at the hospital facilities and enjoyed the smaller, more intimate setting of WBRH. The nurses worked well with the students. Census was high enough to meet the needs of the students during their clinical rotations. 100% of students agreed WBRH provided a supportive learning environment and clinical rotations should continue.

**WBRH Clinic:**

NP Assignments (various providers): Students worked with the NP seeing patients and discussing the role of the NP in healthcare and health promotion. This allowed the students to evaluate how the NP manages the care of multiple patients with acute and chronic disease processes in the clinical setting to improve patient outcomes. 100% of students agreed all the NPs provided a supportive environment and clinical should continue with them. They spent time with Maja Lee, Suzi Axelrod, and when they were unavailable, they traveled to Eureka and followed Tamesha Pena and Nik Hirschi. They were able to go on house calls and see what the nurse does for the school district.

**WBRH Acute Care Clinic:**

Acute Care Clinic (various providers): Students were at the outpatient walk-in clinic with various nurse practitioners. 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. Student logs showed students saw a variety of patients. The students reported a positive experience with each NP, and that each NP approaches their patients with a different emphasis. They all reported that the NPs at the clinic in Eureka provided a richer experience. They reported feeling as if they were a bother at the clinic in Ely.

**NNRH:**

Students traveled to Elko to participate in a COVID-19 vaccination clinic. All reported that this was a valuable experience and that they are much more comfortable giving injections; however the students verbalized that the nursing staff was not very inviting and felt that they were intruding.

**Lab:**

In Ely, the lab is off site at the high school. We are unable to access the lab until 1000 when other classes are finished using the room. There have been some glitches, such as: the wall unit came without all the parts and needed to be sent back. A replacement has not come. There is not a private area in which simulations can be performed. It is suggested that this set-up goes up to the college campus in the nursing classroom. Video equipment arrived several weeks ago but have not been installed.

**GBC Campus and Classroom:**

The classroom for nursing is quite large and students report feeling comfortable there. IAV is in the room but not set up. Many times, it would have been nice to have a building so that work could be done on the weekends. The staff are incredibly supportive. There is room to set up a space for beds and simulations.

**Conclusion:**

Students indicated that all clinical sites (except Elko) provided a supportive environment, generally followed best practices, had established health and safety goals, and to continue clinical rotations. Best practice concerns were identified when they occurred, and students were able to discuss their concerns with the nurse who were their leaders for the day, the charge nurse, or the pharmacist.

(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. Continue with safety and infection control stations were added to lab practice time at the beginning of the semester to emphasize patient safety and infection control in the clinical setting. Students participated in hands on safety simulations and practiced body mechanics and infection control principles and discussed. Will continue to implement safety stations next year.

Wording was updated on the clinical care-packets to elicit deeper thinking and clinical reasoning. All students completed a video of a teaching demonstration (senior teaching) as senior centers across the state were closed due to COVID and in-person teaching could not be done. The videos were well done and met the objectives; however, actual client education with interaction is preferred in the future.

**Ely**

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:** Reexamine using the Health Fair (if NNRH is hosting again after COVID) to meet outcomes.

**Winnemucca:** Will need to reevaluate use of the walk-in clinic/ NP clinics at HGH depending on practitioners working in the clinics next year. The a “virtual clinic” with ATI RN Case Videos was used due to lack of clinical sites related to COVID; however, would not suggest using again and instead try to reestablish clinical time with the public health nurse and HGH clinics.

**Pahrump & Ely**: Met with dietitian in the classroom with real life examples due to lack of a dietitian available in the clinical setting. Students completed a more detailed nutrition exam on an assigned patient during one of their med-surg rotations.

**Elko & Winnemucca:** Continued positive feedback from students regarding the Telehealth online clinic. Consider the continued use to develop clinical reasoning and supplement clinic time if needed.

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

Students participated in a total of 5 simulations for this course. Students in Elko and Winnemucca completed two simulations in the sim lab and Pahrump students completed three simulations in the sim lab (with the exception of 1 student in Pahrump who only completed 1 sim in sim lab). The remaining simulations due to the COVID-19 pandemic were completed online via Laerdal’s Vsims. The Renal Colic simulation was substituted with a post-hysterectomy sim available on the Vsim. Both simulations addressed pain management and the Vsim addressed opioid CNS depression and administration of Narcan. Content related to renal colic from the original sim was discussed in class instead. All simulations worked to meet the course outcomes. Students were provided a debriefing from the Vsim online and then completed debriefing questions that faculty reviewed and provided feedback on.

1. Teaching Methods

ATI was utilized for demonstration of skills. Practice in the skills lab; high-fidelity simulation in practice lab (Vsim with Laerdal online); ATI Real; post-conference debriefing with discussion and focused topics; clinical rotations (at clinical sites listed above) with observation and hands on application of theory content. Online ATI Real Life and Nurse TIM Scenarios, ATI Case scenario videos, Instructor and student led telehealth experience, and clinical conference debriefing for online conferences.

**FULL COURSE OVERVIEW**

1. What worked well and reason(s):

Various teaching methods worked well. Objectives for each module were updated to more clearly reflect pertinent knowledge and align with the new textbook. Provided students who did not pass the final with a guided remediation to complete during finals week.

The following changes were made to the course at the beginning of the semester based on Mountain Measurements:

Physiological Adaptation: Added a pathophysiology section to the critical thinking maps.  Had students create a patient that we carried through the semester to address comorbidities while caring for acute disease processes.  The patient case study was not utilized as much following changes made to online teaching with COVID-19. Will continue to have students create a patient next semester and incorporate the patient further into the semester next year. Incorporated a case study specific to recognizing fluid and electrolyte imbalances. Analysis: Changed the clinical logs for the Acute Care Clinic, Case Manager, and Golden Health/Golden Valley assignments to reflect an analysis piece.  Brought up analysis in class when going through our class patient and other case studies and when discussing nursing diagnoses.

Musculoskeletal: Musculoskeletal concepts were reinforced in Laerdal’s Vsim debriefing – faculty also provided feedback on the scenario. It was intended to incorporate a full case study for students to work through in class for the musculoskeletal content; however, due to a switch to online musculoskeltal content was taught through NearPod with student participation with answering questions and practice NCLEX questions. Will plan on adding a case study with the student created patient next semester. One of the Vsims specifically addressed fracture with a scenario. More questions were added to the final related to musculoskeletal content and students were informed this content would be heavier on the final since they have not been tested on it before.

To address 2nd year gaps:

* The wording was changed to the clinical care packets at the beginning of the semester to illicit responses with deeper thinking and connecting the information to patients.
* In class have discussed complete assessment data and have been able to engage students with more interactive activities than last year (due to class on BBB). Presented case scenarios where students need to pick out abnormal and normal information.
* Simulation with debriefing rather than online simulation this year was better for student learning. Durins sim made sure to discuss gathering all information before intervening or calling the physician
* Students did not complete templates for pharmacology and only for clinical. Most students seemed to be more acutely aware of the meds they have completed templates on for their patient rather than copying and pasting from pharmacology class; however, improvement in this area related to meds and clinical could still be improved (see pharmacology course report).

1. Anticipated Changes

Significant changes are anticipated due to the integration of Linda Caputi’s clinical reasoning book and clinical suggestions. Clinical assignments and rotations will need to be closely analyzed to determine how they can promote clinical reasoning and new assignments should be developed (or used from Linda Caputi’s book). With the revision of clinical assignments consider the student time and plan to create assignments that will promote the most thinking without overloading the students with work. Clinical sites will need to be reevaluated since changes previously had to be made (clinical sites lost due to COVID-19 – see above clinical analysis). Also, plan on changing exams and questioning in class to reflect the Next Gen NCLEX type questioning.

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

Weekly theory content aligns with pharmacology, which makes it easier for the students to apply the different concepts (align meds and the disease process and understand their meaning)

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

Point allocation will change with the changes in clinical assignments. Since the course is a 3 credit clinical course would recommend enough points in various clinical assignments so no one assignment will significantly bring down a student’s grade.

1. Other changes and reason(s):

See noted changes above

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

and filed.

* 1. Integrated Concepts Illustration has been updated with

all changes made and filed.

* 1. Test blueprint has been filed with course report.

**Faculty Signature(s):** Staci Warnert, Michelle Husbands

**Date:** 05/26/2021

**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.