HOUSTON COMMUNITY COLLEGE

Coleman

COLLEGE FOR HEALTH SCIENCES

**HOUSTON COMMUNITY COLLEGE SYSTEM**

# ASSOCIATE DEGREE NURSING PROGRAM

**Coleman Health Science Center**

## *RNSG 2160*

**CLINICAL-MENTAL HEALTH NURSING**

# SYLLABUS

# (CLINICAL COMPONENT)

## Fall SEMESTER 2015

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Revised October 2015

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# COURSE EXPECTATIONS CONTRACTUAL AGREEMENT

## RNSG 2160
## CLINICAL-MENTAL HEALTH NURSING

I_____, have read the syllabus and fully understand the expectations of me as a student in this clinical course.

**My signature below signifies my willingness to comply with the course requirements.**

**Signature: _____ Date: _____**

[revised October 2015]

## I. COURSE DESCRIPTION:

A method of instructions providing detailed education, training, work based experience, and direct patient/client care, in community and hospital settings. This course is designed to introduce the student to mental health needs of individuals and families across the life span. The focus is on communication skills, psychiatric disorders and various treatment modalities. Clinical activities include nursing care of clients in community and hospital setting. On-site clinical instruction, supervision, evaluation, and placement are the responsibility of the college faculty. Clinical experiences are unpaid external learning experiences.

## II. PRE-REQUISITES: AS PER ADN HANDBOOK POLICIES

## *III. CO-REQUISITE: RNSG 2213*

## IV. COURSE OBJECTIVES:

1. **Determine the mental health status and mental health needs of clients and families across the life span with disordered behavior problems based upon interpretation of health data in collaboration with clients, families, and other health care professionals.**

2. Formulate goals and plan of care for clients and their families with mental-health problems based upon analysis of the data in collaboration with clients, families, and other health care professionals.

3. Implement the plan of care within legal and ethical parameters using various therapeutic treatment modalities to assist clients and their families to meet health care needs safely.

4. Use principles of therapeutic communication with clients and families in collaboration with other health care professionals.

5. Design a teaching plan based upon identified learning needs of clients and their families concerning health promotion and health maintenance.

6. Use various methods to evaluate client and family responses to therapeutic interventions. (i.e., Abnormal Involuntary Movement Scale)

7. In collaboration with other health care professionals, manage a therapeutic milieu with a group of clients in a hospital or community setting.

8. Use principles of psychopharmacology to identify safe and effective clinical management of clients taking psychiatric medications through assessment, diagnosis, and treatment.

## *V. METHODS OF ACCOMPLISHING LEARNING OUTCOMES*

1. Classroom lecture/ discussion
2. Multimedia – Computer Aided Instruction

3. Independent study of assigned topics
4. Clinical Experiences

## *VI. EVALUATION*

### A. CLINICAL GRADING:

Criteria for passing the clinical portion of the course include all of the following:

1. The student must submit one satisfactorily written process recordings of Therapeutic conversations.
   **Process Recording is worth 25% of your clinical grade.**
   **Due Date: Week of November 8th in clinical.**

**2.** Students must submit one care plan which obtains a grade of 75 or greater. Failure to obtain a grade of 75 on a care plan will result in the student's submitting an additional care plan within one week of the initial failure. The new care plan **(not a revised care plan)** must obtain a grade of 75 or greater.
**Care Plan = 30% of clinical grade**
**Due Date: Week of November 15th in clinical**

3. All students are required to attend one Twelve-Step Program meetings. A written papers concerning the Twelve Step meetings is required Twelve Step Paper for a total of 10% of your clinical grade.
   **Due Date: Week of November 1 in clinical.**

4. All students are required to submit a weekly clinical journal related to situations encountered in the clinical settings.
   **Six weekly clinical journals are worth 10% of your clinical grade.**
   **Due Date: Every week in clinical**

**5.** All students must complete the depression scale for a geriatric client in the clinical setting and submit a narrative paper = 5% of total grade
**Due Date**: **Week of November 29th in clinical**

**6**. Student will receive a weekly clinical grade for 20% of the total clinical grade
**Due Date: Weekly**

6. Clinical evaluation is an ongoing weekly process and will be formally conducted once during the semester. Student whose performance is in need of improvement is counseled by faculty and informed in writing.

Students will receive a weekly evaluation and it will account for 20% of the final grade.

Behavior of any student that endangers the lives' of clients, other people, and/or oneself may lead to removal of that student from the clinical facility.

There may be additional written work as assigned by your instructor dependent on the particular needs and types of clients. In addition, if a student turns in work late the instructor will deduct five (5) points each day up to seven (7) days. Papers exceeding (1) week or 7 days will result in a zero for the grade.

**GRADING SCALE:***

A = 90 – 100
B = 80 – 89
C = 75 – 79
D = 60 – 74
F = below 60

## VII. ATTENDANCE AND TARDINESS

### A. CLINICAL:

Students are expected to attend all scheduled days of clinical experience and orientation. Clinical absences are unacceptable. For RNSG 2160, student must complete 48 hours for mental health clinical rotation. Students are also responsible for notifying the instructor, before duty time, if he/she is going to be absent or anticipates tardiness. **Students who fail to notify their clinical instructor of a clinical absence will receive a zero (0) for this behavior on the weekly performance evaluation.** If you leave clinical early it will a result in an absence. Any unexcused absence will result in a deduction of 10% per occurrence to the final grade. Failure to complete the required hours may result in the student receiving an incomplete for the clinical course and may not progress in the program. **Any absence must be accompanied by valid documentation. A student who has excessive absences may be administratively dropped from the course.**

Two tardies equal one absence. **One (1) instance of clinical tardiness will result in the student being counseled for unprofessional conduct**. Arriving at the clinical site more than 30 minutes late will result in the student being dismissed from the clinical area and marked absent.

**Students who are either pregnant or have become pregnant during their clinical rotation must submit documentation from their physician to assume full duty in**

**clinical. For the safety of the student, clinical facilities have the right to deny clinical experience to those who are pregnant.**

## VIII. REQUIRED TEXTBOOKS:

**A.** **Townsend Mary. C. Essentials of Psychiatric Mental Health Nursing (Concepts of Care in Evidence-Based Practice); F.A. Davis Company, 6th edition, 2014.**

B. **Recommended Reading:** Any supplemental reading materials or learning tools will be announced by the instructor of the course.

1. *American Nurses' Association: A statement on psychiatric mental health clinical nursing practice and standards of psychiatric-mental health clinical nursing practice.*

## IX. POLICIES:

All students will adhere to HCCS policies as delineated in the HCCS and ADN handbooks.

## X. SPECIAL NEEDS:

Students with special needs should refer to the procedure identified in the HCCS Student Handbook. The procedure may be started with a phone call to the Coleman College Disabilities counselor.

## XI. LEARNING ACTIVITIES

### A. Contemporary Technology

1. Computer Assisted Instruction
2. Classroom Instructional Software
3. Videos
4. Medline Access

### B. Concept Reinforcement

1. Clinical experiences
2. Critical thinking scenarios
3. Seminar activities
4. Study Guide exercises

### C. Clinical Activities

1. Community Agencies
2. Provide supervised nursing care for clients in selected hospitals and/or community mental health clinics

## *XII. METHODS OF EVALUATION*

1. Completion of clinical requirements with a grade of 75 or greater.

## *XIII. REFERENCES*

1. Required textbook
2. Current nursing professional journals/periodicals (within the last five years)
3. Current edition of **Publication Manual of the American Psychological Association**

**POLICY AND PROCEDURE**
**STATEMENT RE:**
**CLINICAL BEHAVIORS**

**INTRODUCTION/PURPOSE:**
The clinical component for the A D N courses is graded on a Pass/Fail basis utilizing a summative tool at the end of each clinical rotation. The purpose of this statement is to identify the procedure and consequences for unsatisfactory behaviors. These procedures should be initiated upon the occurrence of the unsatisfactory behavior or action rather than at the conclusion of the clinical rotation.

Clinical behaviors that are normally dealt with fall into three categories: The **first level** identified as **BNI** (behaviors needing improvement) involve incidents such as uniform infractions and misunderstanding of care plan assignments. The **second level**, identified as **RNI** (reportable negative incidents) are more serious infractions which necessitate more serious recognition and remediation. An example might be the failure to report vital signs not within the normal range or repeated failure to report to the clinical area without the appropriate preparation. The **third level**, identified as **RNCI** (reportable negative critical incidents) indicates a **very serious infraction** which has endangered or impaired a life. These behaviors correspond to the Critical Elements that the faculty has identified as *Safety, Accountability, and Confidentiality*. An example might be a medication error that impaired a life or side rail left down resulting in patient injury. Student behaviors related to the Critical Elements are starred on the Clinical Evaluation Tools. **Three RNI's or the occurrence of 1 RNCI (reportable negative critical incident) may result in a student being dismissed from the A D N program upon recommendation of a 5 member faculty committee.**

**PROCEDURE:**

**Level I - BNI** (**B**ehaviors **N**eeding **I**mprovement)

1. Identify the behavior to the student and counsel as needed.
2. Document behavior or action via the ADN's "Prescription for Success" form or an HCCS Contact Action Form.
3. Observe and document correction of behavior or action.

**Level II - RNI** (**R**eportable **N**egative **I**ncident) - May be a more serious offense as described above or repetition of a particular BNI.

1. Identify the behavior or action to the student.
2. Fill out a Contact Action Form **and** designate the incident as an RNI and submit it to the campus Department Head.
3. The Department Head will then activate a 5 member faculty hearing committee to determine if the offense warrants elements being **one of the three RNI's**.
   **Three RNI's approved by a 5 member faculty hearing committee may result in the student being dismissed from the A D N program at any point during the course of study.**
4. If the RNI was not approved, the incident is filed only as a BNI and the student will be required to do remediation designated by the committee.

**Level III - RNCI**(**R**eportable **N**egative **C**ritical **I**ncident - One in which life is impaired or endangered)

1. Steps 1 and 2 as above, **however** the Contact Action must be identified as an RNCI (reportable negative critical incident).
2. Step #3 as above, however, the Faculty Committee must now determine if this behavior warrants removal of the student from the program or decide if this is one of the three RNI's.
3. If the Reportable Negative Critical Incident report is accepted by the committee, **then institutional policy is followed to remove the student from the program.**
4. If an RNI status is granted, then assigned remediation must be performed by the student.

My signature below signifies that I have read and fully comprehend the above policies and procedures with their accompanying implications.

_____
Student Signature Date

[revised October 2015]

**RNSG 2160**
**GRADE COMPUTATION**

Student Name: _____

Process Recordings _____x.25 = ____

Care Plan _____x.30 = _____

12 Step Paper _____x.10= _____

Weekly Clinical Journals _____x.10 = _____

Depression Scale _____X. 05=_____

Weekly Formative Evaluation _____ X .20 = _____

Cumulative Clinical Grade: _____

Absence: (- 10%) _____

**FINAL Course Grade** _____

[revised October 2015]

## PROCESS RECORDING GRADING FORM REQUIRMENTS

1. Process recordings should be focused with an appropriate topic for the interaction; namely, the objective/goal. The interaction should be 20 minutes for the first interaction and the second process recording should be 30 minutes long with a concentrated effort by the student to observe and record the content and context of the focused interaction.

2. Turned in on time or five (5) points per day deducted from your process recording clinical grade if turned in late each day.

3. Documentation reflects student's sincere attempt at therapeutic communication. Student begins interaction with an appropriate opening, and directs interaction toward the established goal(s) and within the established boundaries. Refer to the Process Recording Grade Sheet for additional parameters.

4. Student is able to identify appropriate significant insights into their own behavior as well as the client's behavior (Defense mechanisms, content and context of interaction(s)).

[revised October 2015]

**PROCESS RECORDING GRADE SHEET**

**Name:** _____

**Date:** _____

Five (5) points will be deducted for spelling, grammar, punctuation errors.
Five (5) points per day will be deducted for paper not submitted on time.

| **Criteria** | **Possible Points** | **Actual Points** |
|---|---|---|
| 1**. Parameters:** Student establishes parameters for session | 6 | |
| 2. **Clarification:** Recognized when clarification is needed and validates with client during the interview | 12 | |
| 3. **Recurrent Themes:** Identifies obvious, recurrent themes in the client's conversation | 12 | |
| 4. **Defense and/or coping mechanisms:** consistently identifies mechanisms correctly | 12 | |
| 5. **Recognition of behavior:** Recognized changes in the client's behavior and usually follows through with appropriate nursing interventions. | 12 | |
| 6. **Communications Techniques:** Correctly uses a variety of therapeutic techniques. Consistently identifies techniques correctly. Identifies rationale for using various techniques. Conscious and therapeutic use of non-verbal communication. Provides restatement for any non-therapeutic statements in evaluation. | 12 | |
| 7. **Student's Thought and Feelings:** Identifies own thoughts and feeling during interaction or on evaluation. | 12 | |
| 8. **Change of topic:** Student changes the topic or the focus of the client's topic. | -5 | |
| 9. **Closure:** Student brings closure to the session in an appropriate manner. | 6 | |
| 10. **Goal(s):** States goal(s) for interaction. Goal(s) is/are specific, realistic, and appropriate. | 8 | |
| 11. **Feedback:** Student directs feedback toward behavior that the client has the capacity to modify | 8 | |
| Points deducted for late submission | | |
| Points deducted for errors in spelling/punctuation/ grammar. | | |
| TOTAL | 100 | |

COMMENTS:

[revised October 2015]

# TWELVE STEP PROGRAM PAPER REQUIREMENTS

**Student Requirements**:

1. Student must attend one 12-Step Chemical Dependency Programs, one AA or one CA or NA group, where the group leader is a peer, not a professional.

2. Students will respect the anonymity/confidentiality of the group members. No last names or any identifiable criteria will be obtained from members of the group.

3. Student will dress appropriately (no shorts, t-shirts, tight clothes, etc). Students will not wear name tags or any other markings which will identify them as an HCC student. Student's focus in attending this self help program is NOT participation but observation of interactions within the group.

**Directions for Paper:**

After attending 12-Step meetings, the student will submit a typed (1–2 page) paper for each support group visited. The papers must include a grade sheet as well as the items listed below. 12 Step papers must be typed. Points will be deducted (maximum of five (5) points) for spelling, grammar, punctuation errors. There will be eight (8) sections in the paper, and each section will be labeled by the title of the alpha label, and will contain the descriptive response for that section. For example: a. Type of Group Attended; b. Philosophy of the meeting. Five points per day will be deducted for papers not submitted on time.

a. Identify the type of group attended (i.e. Alcoholic Anonymous, Cocaine Anonymous, etc).
b. Describe the philosophy of the particular 12-Step Meeting attended.
c. Where was the meeting held and who sponsored the meeting?
d. Discuss the demographic make-up of the group members
e. What were the ground rules for the meeting?
f. Describe the interactions that took place while the meeting was in session.
g. Describe the primary theme or themes that seemed to dominate the group process. Were they directly or indirectly related to the stated reasons for the group meeting?
h. Describe the major functional problem area(s) of the group members. How does abuse affect their life?

[revised October 2015]

**12-Step Paper Grading Sheet**

Name: _____

Date: _____

Submit typed (1-2) page paper

Five (5) points will be deducted for spelling, grammar, punctuation errors.
Five (5) points per day will be deducted for paper not submitted on time.

| Criteria | Possible Points | Actual Points |
|---|---|---|
| 1. Identify type of group attended (A.A., N.A. etc). | 5 | |
| 2. Describe philosophy of 12-step meeting attended. | 15 | |
| 3. Describe/ discuss where meeting was held and who sponsored the meeting. | 5 | |
| 4. Discuss demographic make-up of group members. | 15 | |
| 5. What were the ground rules for the meeting? | 15 | |
| 6. Describe the interactions that took place while the meeting was in session. | 15 | |
| 7. Describe primary theme(s) that seemed to dominate group process. Were they directly / indirectly related to stated reasons for the group meeting? | 15 | |
| 8. Describe the major functional problem area(s) of the group members. How does abuse affect their life? | 15 | |
| Points deducted for late submission | | |
| Points deducted for errors in spelling, punctuation, or grammar. | | |
| TOTAL | 100 | |

COMMENTS:

[revised October 2015]

# WEEKLY CLINICAL JOURNAL

Name: _____ Date:_____

**Observation**

**Expectations:**

**Feelings:**

**Evaluation:**

[revised October 2015]

RNSG 2160

# WEEKLY CLINICAL JOURNAL GRADING CRITERIA

| Criteria | Points |
|---|---|
| Turned in on time (As scheduled) | 1.6 |
| Meets expectations (well thought out ideas about own expectations) | 5 |
| Meets expectations, (demonstrates understanding of own feelings) | 5 |
| Meets expectations (about evaluation and what might have been learned from the experience). | 5 |
| Comments: | |
| | |
| | |
| | |

[revised October 2015]

**PROCESS RECORDING FORM**

**Student Name:_____ Date:_____ Process Recording #:_____**

**Client's Initials:_____ Brief Description of Presenting Problem(s):_____**

**Goal/objective for this Interaction:** ***Allow client to verbalize their feelings about xxx.*** **(Goal will never be for you to get a process recording or have an interaction!!)**

| **Student's Verbal & Non-Verbal Interactions** ***(Verbatim)*** | **Patient's Verbal & Non-Verbal Interactions** ***(Verbatim)*** | **Student's Thoughts & Feelings** | **Analysis (with rationale for actions/communications)** |
|---|---|---|---|
| *Each interaction include:*<br>1. Verbatim transcript of your verbal and nonverbal communications<br>a. Nonverbal communications should be enclosed in parentheses.<br>b. Include your posture-body movements, facial expressions, sound inflection-rate-volume & eye contact. | *Each interaction include:*<br>1. Verbatim transcript of patient's verbal and nonverbal communication.<br>a. Nonverbal communication should be enclosed in parentheses | *Each interaction include:*<br>1. Written description of your conscious thoughts and feelings experienced at the time of the interaction<br>a. Recording of thoughts and feelings will assist you to: 1. Recognize overt and covert clues of behavior that indicates feelings.<br>2. Increase acceptability of your overt expressions of feelings.<br>3. Increase self-introspection of your response, expression, or lack of expression or feelings. | *Each interaction include:*<br>1. Identify communication techniques. State whether the technique is therapeutic or non-therapeutic. Explain rationale for using technique.<br>2. Ask yourself: "What does this behavior mean?", "Why am I saying this?", "Why did the patient say that?"<br>3. Identify specific defense mechanisms and/or coping mechanisms<br>4. Inferences or interpretations of behavioral dynamics.<br>5. Corrects and provides restatement for non-therapeutic statements.<br>6. Everything appearing in this column must be documented according to APA format and from a source of authority. |

[Revised
October 2015)

# Weekly/Summative Formative Evaluation Tool RNSG 2160
# Mental Health Nursing Clinical Component

## Student

| BEHAVIOR | Date | Date | Date | Date | Date | Date | Date | Date | COMMENT/EXAMPLE |
|---|---|---|---|---|---|---|---|---|---|
| 1. Reports to clinical on time and/or notifies appropriate personnel of tardiness or absence. | | | | | | | | | |
| 2. Reports information critical to client care in a timely manner. | | | | | | | | | |
| 3. Seeks and requests learning experiences to enhance own learning, including using learning resources such as library, internet, nursing journal, etc. | | | | | | | | | |
| 4. Completes weekly medication review using a variety of psychotropic medications. | | | | | | | | | |
| 5. Demonstrates acceptance of own responsibility and accountability for nursing practice. | | | | | | | | | |
| 6. *Maintains confidentiality in all client matters. | | | | | | | | | |
| 7.*Functions Safely | | | | | | | | | |
| 8. Demonstrates through appearance, verbal or written communication, and person to person interactions, a courteous, constructive and positive attitude | | | | | | | | | |
| 9. Reviews client data and/or receives report on client to ensure proper care. | | | | | | | | | |
| 10. Seeks out client and endeavors to establish a rapport | | | | | | | | | |
| 11. Uses therapeutic communication when interacting with client.. | | | | | | | | | |
| 12. Helps support the therapeutic milieu by initiating and participating in social, recreational, and diversional activities. | | | | | | | | | |
| 13. Indicates basic knowledge of client medications. | | | | | | | | | |

[Revised
October 2015)

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 14. Identifies emotions, behaviors and physiological signs and symptoms manifested by psychiatric clients. | | | | | | | | | **COMMENTS/EXAMPLE** |
| 15. Identifies teaching needs of clients in relation to cultural, economic, and personal learning abilities. | | | | | | | | | |
| 16. Assesses the behavioral dynamics of the individual client, i.e., defense mechanisms. | | | | | | | | | |
| 17. Formulates appropriate nursing diagnoses for particular clients/families. | | | | | | | | | |
| 18. Writes and/or discusses immediate and short-term client goals and measurable outcome criteria designed to reduce/alleviate client problems. | | | | | | | | | |
| 19. Communicates outcomes of care and pertinent information verbally and in writing. | | | | | | | | | |
| 20. Seeks & uses feedback from instructor/nursing staff. | | | | | | | | | |
| 21. Written assignments are turned in on time. | | | | | | | | | |
| 22. Maintain standard of performance under stress. | | | | | | | | | |
| 23. Seeks clarification of assignment & role responsibility when in doubt. | | | | | | | | | |

* Indicates the behavior critical to performance and student must receive a satisfactory rating in these areas. One unsatisfactory in a critical area will result in ten points deduction from the final grade. Three unsatisfactory in other areas will result in five points deduction from the final grade.

**Evaluation Codes:** **Satisfactory**
**Needs Improvement**
**Unsatisfactory -**
**NO = not observed**
**NA = not applicable**

[Revised
October 2015)

**Additional comments:**

**Student Signature**_____**Faculty Signature** _____

[Revised
October 2015)

**RNSG 2160 CARE PLAN GRADE SHEET***
***(Based on P.I.C.O. Model derived from Evidence Based Practice)**

| **Student Name**: | **Care Plan #** | **Date:** | **Score:** |
|---|---|---|---|
| | | | |

| **P: Patient/Problem(s)** | **Potential Score** | **Earned Score** |
|---|---|---|
| 1. Physical Assessment from Chart including Labs with interpretation and Medications with interpretation<br>2. Axis I – V complete with explanation of GAF score<br>3. Mental Status Exam with specific examples<br>4. Three Developmental Theorists identified correctly<br>5. Subjective & Objective Data to Support the Nursing Diagnosis. | (8)<br>(8)<br>(8)<br>(8)<br>(8) | |
| **I: Intervention & Nursing Diagnosis**<br>1. Selects & numbers nursing diagnosis in order of highest priority<br>2. Related factors support the nursing diagnosis and interventions (i.e. medication, cultural aspects, developmental aspects)<br>3. Interventions individualized | (10)<br>(10)<br>(10) | |
| **C. Comparison/Evidence Based interventions.** Each intervention **supported by a documented reference.** | (15) | |
| **O: Outcomes & Goals:** Are goals clear and related to ND? Outcomes based on nursing plan/Interventions. Outcomes clear, measurable & related to ND? Outcomes met? If not why? | (15) | |

[ Revised October 2015

# RNSG 2160 Clinical Care Plan

**Student's Name:** **Date:** **Unit:**

**Patient's initials**: **Age**: **Gender:** **Ethnicity:**

**Date of Admit:**

**Legal status:_____V____InV Highest Grade Completed:**

**Instructions: Initial information should be taken from the chart. This information can then used to complete the rest of the care plan.**

**Client's Complaint:** _____

**History of Present Admission:**

**Client's stated understanding of diagnosis:**

**Laboratory (only identify problem areas):**

| Test | Date | Results | Interpretation | Nursing Implication(s) |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Physical assessment:** (Not a formal head-to-toe assessment)

***From chart:***

**Vital signs: BP**: **HR:** **T:** **R:**

[ Revised October 2015

**Integument:**

**Cardiovascular:**

**Muscular-Skeletal**:

**Respiratory:**

**Gastrointestinal:**

**Genitourinary:**

**DSM-V Diagnosis:**

**Axis I:** _____
**Axis II:** _____
**Axis III:** _____
**Axis IV:** _____
**Axis V:** _____

## Psychiatric Medications:

| Name | Dosage | Route | Specific use for this Client | Side Effects Food/Drug Interactions | Nursing Implications | Client Learning Needs & Understanding |
|---|---|---|---|---|---|---|
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| 6. | | | | | | |
| 7. | | | | | | |
| 8. | | | | | | |
| 9. | | | | | | |
| 10. | | | | | | |

## Other Medications:

| Name | Dosage | Route | Specific use for this Client | Side Effects Food/Drug Interactions | Nursing Implications | Client Learning Needs & Understanding |
|---|---|---|---|---|---|---|
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| 6. | | | | | | |
| 7. | | | | | | |
| 8. | | | | | | |
| 9. | | | | | | |
| 10. | | | | | | |

***Clinical presentation (textbook description) of Axis I and II diagnoses. Axis II may not always be listed. List the GAF score (AXISV) and describe what is the significance of the patient's score.***

***Mental Status on day of care:*** Provide **evidence** (examples) for each category and indicate any change from admission Mental Status Exam (MSE).

**Appearance:**

**Mood & Affect** ***(give data and note if congruent)***:

**Mood**:

**Affect:**

**Memory Recent & Remote** *(evaluate and provide verifiable examples)*:

**Thought Process &Content** *(provide examples of each to support findings)*:

**Insight & Judgment** *( provide examples of each to support findings)*:

**Developmental Level:** *Identify developmental levels for the following theorists, then choose one other theorist from your textbook that you think most appropriately defines your client's developmental level. You must describe the client's* ***current behavioral*** *developmental level not their chorological developmental level.*

| Theorist | Level | Supporting Data |
|---|---|---|
| **Maslow:** | | |
| **Erikson** | | |
| **Other** | | |

**How does the client's culture impact his or her mental health needs at this time?** *(it always does)*

**How does the client's spirituality impact his or her mental health needs at this time?** *(may be formal religion, or simply sense of meaning and hope)*

**How is the client participating in Treatment Plan?** (List all that apply)

**Nursing Process:** Refer to your text for essential elements of documentation. Include mood, affect, and behavior as well as physiologic data in the assessment.

Problem List: (Include all current problems for this client.) **Prioritize** the list before completing the plan of care.

| Client Problem | Priority | Assessment Data |
|---|---|---|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |

**Highest Nursing Diagnosis:**

**Diagnosis (Problem R/T Etiology or Human Response R/T Stressor):**

_____

**Data supporting Problem (AEB):**

_____

_____

_____

_____

**Expected Outcomes** *(include short term objectives that demonstrate measurable progress to major goal(s)***:**

**Short term goals:**

_____

_____

**Long term goals:**

_____

_____

**Nursing Interventions (***make specific to individual and useful to nurses that come after to you to care for patient;* **w/ Rationale):**

**Plan:**

**a) Immediate plan:**

_____

_____

_____

_____

b) **Discharge planning and use of community resources:**

_____

_____

_____

_____

c) **Actual Outcome (**how is client different from morning report**)**

_____

_____

_____

_____

**References:**

_____

_____

**INSTRUCTOR'S COMMENTS:**

_____

_____

Your instructor will be looking for evidence of learning, growth and increased observational skills. You may be asked to redo sections of this worksheet to ensure you meet the learning objectives.

| Evaluation (To be completed by instructor) | |
|---|---|
| Score: | _____<br>Instructor's signature<br>Date _____ |

[Revised October 2015)

**GERIATRIC DEPRESSION SCALE (Short Form)**
**(Mandatory For Geriatric Clients)**

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**Choose the Best Answer for How You Felt Over the Past Week**

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1. Are you basically satisfied with your life? .... ..... ..... ..... .....yes/no
2. Have you dropped many of your activities and interests?.... ..... .....yes/no
3. Do you feel that your life is empty? .. ..... ..... ..... ..... .....yes/no
4. Do you often get bored? ..... ..... ..... ..... ..... ..... .....yes/no
5. Are you in good spirits most of the time? ..... ..... ..... ..... .....yes/no
6. Are you afrai0d that something bad is going to happen to you? ..... .....yes/no
7. Do you feel happy most of the time?. ..... ..... ..... ..... .....yes/no
8. Do you often feel helpless? ... ..... ..... ..... ..... ..... .....yes/no
9. Do you prefer to stay at home, rather than going out and doing new things?..... ..... ..... ..... ..... ..... ..... .....yes/no
10. Do you feel you have more problems with memory than most?..... .....yes/no
11. Do you think it is wonderful to be alive now? ..... ..... ..... .....yes/no
12. Do you feel pretty worthless the way you are now?. ..... ..... ..... yes/no
13. Do you feel full of energy?.... ..... ..... ..... ..... ..... ..... yes/no
14. Do you feel that your situation is hopeless?.. ..... ..... ..... .....yes/no
15. Do you think that most people are better off than you are? . ..... .....yes/no

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The following answers count one point;
scores > 5 indiçâtes- probable dépression:

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| | | |
|---|---|---|
| 1. NO | 6. YES | 11. NO |
| 2. YES | 7. NO | 12. YES |
| 3. YES | 8. YES | 13. NO |
| 4. YES | 9. YES | 14. YES |
| 5. NO | 10. YES | 15. YES |

Write a 2 page double space narrative paper describing your client's affect, mood and five three part nursing diagnoses.

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What independent and collaborative interventions could be utilized to improve your client's mental wellbeing?

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[Revised October 2015)

SCANS

AREAS OF COMPETENCY FOR RNSG 2160

The following areas of competency will be determined in this course (RNSG 2263) by the following means:

## ENHANCE BASIC SKILLS

# 28) Perform listening skills
This skill will be demonstrated by the student's ability to write a process recording of a therapeutic conversation. This skill requires the ability to listen to what the client is really saying regarding his feelings, and underlying dynamics of behaviors. Performance will be satisfactory if a passing grade on the process recording is achieved.

#29) Speaking Competence
This skill will be demonstrated by the student's ability to give a brief oral presentation in post-conference, consisting of a case study of a client. Performance will be satisfactory if the student is able to articulate the specified information.

## DISPLAY APPROPRIATE PERSONAL QUALITIES

#40) Demonstrate appropriate self-esteem
This skill will be demonstrated by the student's ability to demonstrate professional conduct at all times. In so doing, the student will demonstrate belief in their own self-worth, maintaining a positive view of self, and demonstrating knowledge of own skills and abilities, as well as, being aware of this impact on others.
Performance will be satisfactory if the student is able to make a passing grade on their "clinical behaviors" performance each week.

#41) Demonstrate appropriate social skills
This skill will be demonstrated by the student's ability to participate in the therapeutic milieu in clinical. The student is expected to interact with clients, participating in planned social activities. Performance will be satisfactory if the student is able to make a passing grade on their "clinical behaviors" performance each week.

[Revised October 2015)

# STUDENT EVALUATION OF CLINICAL AFFILIATE AGENCY

**Section I:**

**Affiliate Agency:_____ Semester:_____ Year: _____**

**Section II:**

**Please evaluate the factors listed below and circle a number from the scale that best reflects your opinion.**

| Least Important | | | | | | Most Important |
|---|---|---|---|---|---|---|
| **1** | **-** | **2** | **-** | **3** | **-** | **4** | **-** | **5** |

**Factors about the affiliate agency which enhanced your learning experience:**

**1 – 2 – 3 – 4 – 5** **Multidisciplinary approach to health care**
**1 – 2 – 3 – 4 – 5** **Nursing Staff**
**1 – 2 – 3 – 4 – 5** **Patient population**
**1 – 2 – 3 – 4 – 5** **Educational Opportunities**

**Section III:**

**Please evaluate each individual unit to which you were assigned with regards to the following criteria:**

| Strongly Disagree | | | | | | Strongly Agree |
|---|---|---|---|---|---|---|
| **1** | **-** | **2** | **-** | **3** | **-** | **4** | **-** | **5** |

**1. Unit:_____ # of days assigned to unit:_____ shift:_____**

**1 – 2 – 3 – 4 – 5** **Unit operations appeared organized**
**1 – 2 – 3 – 4 – 5** **Resources were readily available**
**1 – 2 – 3 – 4 – 5** **The staff were good role models**
1 – 2 – 3 – 4 – 5 The experience obtained was beneficial to my education
**1 – 2 – 3 – 4 – 5** **The health care team members answered my questions**

**2. Unit:_____ # of days assigned to unit:_____ shift: _____**

**1 – 2 – 3 – 4 – 5** **Unit operations appeared organized**
**1 – 2 – 3 – 4 – 5** **Resources were readily available**
**1 – 2 – 3 – 4 – 5** **The staff were good role models**
1 – 2 – 3 – 4 – 5 The experience obtained was beneficial to my education
**1 – 2 – 3 – 4 – 5** **The health care team members answered my questions**

**3. Unit:_____# of days assigned to unit:_____shift: _____**

**1 – 2 – 3 – 4 – 5** **Unit operations appeared organized**
**1 – 2 – 3 – 4 – 5** **Resources were readily available**
**1 – 2 – 3 – 4 – 5** **The staff were good role models**
1 – 2 – 3 – 4 – 5 The experience obtained was beneficial to my education
**1 – 2 – 3 – 4 – 5** **The health care team members answered my questions**

**4. Unit:_____# of days assigned to unit:_____shift: _____**

**1 – 2 – 3 – 4 – 5** **Unit operations appeared organized**
**1 – 2 – 3 – 4 – 5** **Resources were readily available**
**1 – 2 – 3 – 4 – 5** **The staff were good role models**
1 – 2 – 3 – 4 – 5 The experience obtained was beneficial to my education
**1 – 2 – 3 – 4 – 5** **The health care team members answered my questions**

**5. Unit:_____# of days assigned to unit:_____shift: _____**

**1 – 2 – 3 – 4 – 5** **Unit operations appeared organized**
**1 – 2 – 3 – 4 – 5** **Resources were readily available**
**1 – 2 – 3 – 4 – 5** **The staff were good role models**
1 – 2 – 3 – 4 – 5 The experience obtained was beneficial to my education
**1 – 2 – 3 – 4 – 5** **The health care team members answered my questions**

**Section IV:**

1. **Of the educational experiences encountered at this affiliate agency which did you find most helpful? Please explain.**
   **a._____**
   **b._____**
2. **Of the education experiences encountered at this affiliate agency which did you find least helpful? Please explain.**
   **a._____**
   **b._____**

**Section V:**

1. **Would you be interested in working at this institution? Any specific area?**
   **Yes:_____No:_____Please explain: _____**
   _____
2. **If you had to identify one or more nurse(s) at this facility who was most helpful to you who would it be?**
   **Name:_____Unit:_____**
   **Name:_____Unit:_____**
3. **Please comment on any other factors or suggestions that you believe we should be aware of:**
   _____

HOUSTON COMMUNITY COLLEGE SYSTEM

# CLINICAL INSTRUCTOR'S EVALUATION BY THE STUDENT

Clinical Instructor's Name:_____Date: _____

Scale: This evaluation is on a Likert Scale of 1 - 5 with 1 being the lowest score and 5 being the highest score.

| | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| 1. The instructor provides adequate and accurate information to students about clinical requirements. | | | | | |
| 2. The instructor is physically present in the clinical area on assigned days and hours to supervise students. | | | | | |
| 3. The instructor conducts a conference session with students. | | | | | |
| 4. The instructor returns student written work within one week with constructive criticism and comment. | | | | | |
| 5. The instructor provides opportunities for students to demonstrate nursing skills prior to evaluation. | | | | | |
| 6. The instructor demonstrates required skills for the students when necessary. | | | | | |
| 7. The instructor provides meaningful dialogue with the student about program progress. | | | | | |

[Revised October 2015)