



STATE OF WISCONSIN
Department of Safety and Professional Services
1400 E Washington Ave.
Madison WI 53703

Mail to:
PO Box 8935
Madison WI 53708-8935

Email: dsps@wisconsin.gov
Web: <http://dsps.wi.gov>

Governor Scott Walker Secretary Dave Ross

Voice: 608-266-2112 • FAX: 608-267-3816 • TTY: 608-267-2416

BOARD OF NURSING
ROOM 121A, 1400 E. WASHINGTON AVENUE, MADISON WI
CONTACT: DAN WILLIAMS (608) 266-2112
APRIL 11, 2013

Notice: The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a description of the actions and deliberations of the Board. A quorum of the Board will be present during the committee meetings.

BOARD OF NURSING MEETING

8:00 A.M

CALL TO ORDER – ROLL CALL

- A. **Adoption of Agenda (1-6)**
- B. **Attendance at Practice Committee (7-20)**
- C. **Attendance at Education and Licensure Committee (21-162)**
- D. **Report of Practice Committee**
- E. **Report of Education and Licensure Committee**
- F. **Approval of Board of Nursing Minutes of March 14, 2013 (163-180)**
- G. **Administrative Matters – Discussion and Consideration**
 - 1) Board Liaison Appointments
 - 2) Paperless Initiative
 - 3) Status Update as to BON Newsletter
 - 4) Staff Updates
- H. **Rachelle Lancaster Report as to the ANEW Speaking Engagement - Discussion and Consideration (181-182)**
- I. **Julia Nelson/Jeff Miller Report as to the NCSBN meeting - Discussion and Consideration**
- J. **Board Delegation for Rachelle Lancaster to Speak Before the Wisconsin League of Nursing (WLN) on 4/11/2013 – Discussion and Consideration (183-184)**
- K. **Request of Annual Report to the Secretary of DSPS - Discussion and Consideration (185-186)**

- L. **Adoption of Robert’s Rules of Order as the Official Parliamentary Authority to Guide the Board of Nursing Meetings – Discussion and Consideration (187-188)**
- M. **Adoption of a Board Seal – Discussion and Consideration (189-190)**
- N. **Board of Nursing Advisor and Expert Lists - Discussion and Consideration (191-192)**
- O. Legislative/Administrative Rule Matters - Discussion and Consideration
- P. Informational Item(s)
- Q. Discussion and Consideration of Items **Received After** Preparation of the Agenda:
 - 1) Introductions, Announcements and Recognition
 - 2) Presentations of Petition(s) for Summary Suspension
 - 3) Presentation of Proposed Stipulation(s), Final Decision(s) and Order(s)
 - 4) Presentation of Proposed Final Decision and Order(s)
 - 5) Informational Item(s)
 - 6) DLSC Matters
 - 7) Status of Statute and Administrative Rule Matters
 - 8) Education and Examination Matters
 - 9) Credentialing Matters
 - 10) Practice Questions/Issues
 - 11) Legislation/Administrative Rule Matters
 - 12) Liaison Report(s)
 - 13) Speaking Engagement(s), Travel, or Public Relation Request(s)
- R. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.; to consider closing disciplinary investigation with administrative warning (s. 19.85(1)(b), Stats. and 440.205, Stats., to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.; and, to confer with legal counsel (s. 19.85(1)(g), Stats.)

- S. **Professional Assistance Procedure (PAP) – Review of Adverse Determination (199-200)**
 - 1) Kathleen D. Ahlstedt, R.N. **(201-208)**
 - 2) Brian J. Reynolds, R.N. **(209-218)**
 - 3) Rachel M. Zwiebel, L.P.N. **(219-230)**
- T. **Deliberation on Monitoring Matters (231-232)**
 - 1) David P. Cross, R.N. – Requesting Modification of Order **(233-250)**
 - 2) Kelly S. Beers Dauman, R.N. – Requesting Modification of Order **(251-268)**
 - 3) Paul Lauer, R.N. – Requesting Modification of Order **(269-284)**
 - 4) Julie Lewis, R.N. – Requesting Reinstatement of License **(285-306)**
 - 5) Laura Manriquez, L.P.N. – Requesting Reinstatement of License **(307-324)**
 - 6) Susan St. Catherine, L.P.N. – Requesting Modification of Order **(325-342)**
 - 7) Regina M. Young, R.N. – Requesting Stay of Suspension **(343-374)**

- U. **Deliberation on Issuance of Administrative Warnings**
 - 1) 12 NUR 228 (J.L.Z.) **(375-376)**
 - 2) 12 NUR 417 (J.P.M.) **(377-378)**
 - 3) 12 NUR 461 (N.J.L.) **(379-380)**
 - 4) 12 NUR 476 (R.G.N.) **(381-382)**
 - 5) 12 NUR 540 (A.L.S.) **(383-384)**
 - 6) 12 NUR 569 (P.L.V.) **(385-386)**

- V. **Deliberation of Proposed Final Decision and Order in the Matter of the Disciplinary Proceedings Against Kay S. White, L.P.N., DHA SPS-12-0053, DLSC 12NUR145 (387-394)**

- W. **Deliberation of Proposed Final Decision and Order in the Matter of the Disciplinary Proceedings Against Beverly A. Servais, L.P.N., DHA SPS-12-0047, DLSC 11NUR439 (395-418)**

- X. **Order to Rescind the Order from the March 14, 2013 Board Meeting in the Matter of Case Number 12 NUR 400 – Jennifer S. Pipes, R.N. (419-420)**

- Y. **Deliberation of Proposed Final Decision and Orders**
 - 1) Jennifer S. Pipes, R.N. (12 NUR 400) **(421-424)**
 - 2) Rita A. Vils, R.N. (12 NUR 209) **(425-436)**
 - 3) Barbara J. Bishop, L.P.N. (12 NUR 227) **(437-448)**
 - 4) Laura J. Nigh, R.N. (12 NUR 251) **(449-456)**
 - 5) Laura A. Flater, L.P.N. (12 NUR 255) **(457-468)**
 - 6) Christy M. Pullara, R.N. (12 NUR 262) **(469-476)**
 - 7) Dawn L. Clifton, R.N. (12 NUR 264) **(477-484)**
 - 8) Dawn Lindemann, L.P.N. (12 NUR 270) **(485-490)**
 - 9) Brandi J. Malcook, R.N. (12 NUR 416) **(491-498)**
 - 10) Joyce C. Bickford, R.N. (12 NUR 620) **(499-504)**

- Z. **Division of Legal Services and Compliance**
 - 1) Case Status Report **(505-510)**
 - 2) Case Closings

- AA. **Credentialing Matters**
 - 1) General **(511-512)**
 - a. Jacintha Frederick – R.N. Endorsement **(513-524)**
 - b. Rose Smith – R.N. Endorsement **(525-530)**
 - c. Enobong Udo – R.N. Endorsement **(531-544)**

- 2) Convictions **(545-546)**
- a. Luke Abar – R.N. Endorsement **(547-556)**
 - b. Allison Deadrick – R.N. Endorsement **(557-564)**
 - c. Amber Doland – R.N. Endorsement **(565-580)**
 - d. Martha Leidheiser – R.N. Endorsement & APNP Certification **(581-594)**
 - e. Michelle Albrecht – L.P.N. Examination **(595-602)**
 - f. William Cauley – L.P.N. Examination **(603-624)**
 - g. Samuel Hill – L.P.N. Examination **(625-668)**
 - h. Becky Riiser – L.P.N. Examination **(669-684)**
 - i. Christopher Allard – R.N. Examination **(685-716)**
 - j. Pamela Bradley – R.N. Examination **(717-730)**
 - k. Sandra Castro – R.N. Examination **(731-744)**
 - l. Shelby Dawson – R.N. Examination **(745-752)**
 - m. Jenny Filarek – R.N. Examination **(753-770)**
 - n. Patrick Floyd – R.N. Examination **(771-778)**
 - o. Clifford Foskett – R.N. Examination **(779-784)**
 - p. Laura English – R.N. Examination **(785-804)**
 - q. Ashley Johnston – R.N. Examination **(805-822)**
 - r. Cynthia McGraw – R.N. Examination **(823-828)**
 - s. Brittany Moe – R.N. Examination **(829-840)**
 - t. Laura Peters – R.N. Examination **(841-854)**
 - u. Sarah Speas – R.N. Examination **(855-880)**
 - v. Dawn Wimer – R.N. Examination **(881-890)**
 - w. Danielle Bosch – L.P.N. Examination **(891-910)**
 - x. Briah Ebert – L.P.N. Examination **(911-920)**
 - y. Tara Gumieny-Bohm – L.P.N. Examination **(921-930)**
 - z. Kelly Hildebrandt – L.P.N. Examination **(931-942)**
 - aa. Rebecca Kaup – L.P.N. Examination **(943-962)**
 - bb. Joleen Kokenzie – L.P.N. Examination **(963-972)**
 - cc. Phillip Scherz – L.P.N. Examination **(973-990)**
 - dd. Trisha Thompson – L.P.N. Examination **(991-998)**
 - ee. Nathaniel Fagan – R.N. Examination **(999-1016)**
 - ff. Sandra Groesbeck – R.N. Examination **(1017-1032)**
 - gg. Courtney Lievrouw – R.N. Examination **(1033-1048)**
 - hh. Kathleen Murphy – R.N. Examination **(1049-1078)**
 - ii. Brian Taplin – R.N. Examination **(1079-1094)**
 - jj. Kari Vadner – R.N. Examination **(1095-1112)**
 - kk. Deborah Wagner – R.N. Examination **(1113-1124)**

- BB. Deliberation on Orders Fixing Costs
- CC. Consulting with Legal Counsel
- DD. Deliberation of Items **Received After** Preparation of the Agenda:
 - 1) Application Issues and/or Reviews
 - 2) Professional Assistance Procedure (PAP)
 - 3) Monitoring Matters
 - 4) Administrative Warnings
 - 5) Review of Administrative Warning
 - 6) Proposed Stipulations, Final Decisions and Orders
 - 7) Proposed Final Decisions and Orders
 - 8) Orders Fixing Costs/Matters Related to Costs
 - 9) Petitions for Summary Suspension
 - 10) Petitions for Re-hearings
 - 11) Complaints
 - 12) Examination Issues
 - 13) Credential Issues
 - 14) Appearances from Requests Received or Renewed
 - 15) Motions

RECONVENE INTO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

Voting on Items Considered or Deliberated on in Closed Session, If Voting is Appropriate

- EE. **Discussion of Board Meeting Process (Time Allocation, Agenda Items)**
- FF. **Discussion and Consideration of Board Strategic Planning and its Mission, Vision, and Values**
 - 1) Completion of Board Member Bios and Picture Taking
- GG. **Attendance at Legislation and Rules Committee (193-198)**

ADJOURNMENT

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PRACTICE COMMITTEE

8:00 A.M.

CALL TO ORDER – ROLL CALL

OPEN SESSION: Practice Committee – Julie Ellis (Committee Chair), Jeffrey Miller, Lillian Nolan, Maria Joseph

- A. **Approval of Agenda (7-8)**
- B. **Approval of the Practice Committee Minutes of March 14, 2013 (9-10)**
- C. **Board of Nursing Position Papers – Discussion and Consideration**
 - 1) Patient Abandonment **(11-12)**
 - 2) Use of Social Media by Nurses **(13-14)**
 - 3) Telephone Triage **(15-16)**
 - 4) Use of Intermediaries **(17-18)**
 - 5) Use of Nurse Technicians **(19-20)**
- D. Public Comments

ADJOURNMENT OF PRACTICE COMMITTEE MEETING

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PRACTICE COMMITTEE
BOARD OF NURSING
MEETING MINUTES
MARCH 14, 2013

PRESENT: Julie Ellis, Lillian Nolan

EXCUSED: Jeffrey Miller, Maria Joseph

STAFF: Dan Williams, Executive Director; Pamela Stach, Legal Counsel; Matthew C. Niehaus, Bureau Assistant and other Department Staff

CALL TO ORDER

Julie Ellis, Chair, called the meeting to order at 10:31 a.m. A quorum of two (2) members was present.

ADOPTION OF AGENDA

MOTION: Lillian Nolan moved, seconded by Julie Ellis, to adopt the agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES OF FEBRUARY 14, 2013

MOTION: Lillian Nolan moved, seconded by Julie Ellis, to approve the minutes of February 14, 2013 as published. Motion carried unanimously.

DISCUSSION AND CONSIDERATION OF BON POSITION PAPERS

MOTION: Lillian Nolan moved, seconded by Julie Ellis, that Position Statements and/or FAQ's do not have the force of law, but are a means of providing direction for nurses on issues of concern to the Board relevant to protection of the public. Board position statements are reviewed annually for relevance and accuracy to current practice, the Nursing Practice Act, and Board rules. Motion carried unanimously.

Patient Abandonment

MOTION: Lillian Nolan moved, seconded by Julie Ellis, to bring the Patient Abandonment Position Statement back to the Committee after revisions reflecting the discussion. Motion carried unanimously.

Performance of IV Therapy by Licensed Practical Nurses

MOTION: Lillian Nolan moved, seconded by Julie Ellis, to remove the position statement on Performance of IV Therapy by Licensed Practical Nurses from the DSPS website. Motion carried unanimously.

Use of Social Media by Nurses

MOTION: Lillian Nolan moved, seconded by Julie Ellis, to bring the Use of Social Media by Nurses Position Statement back to the Committee after revisions reflecting the discussion. Motion carried unanimously.

ADJOURNMENT

MOTION: Julie Ellis moved, seconded by Lillian Nolan, to adjourn the Practice Committee meeting. Motion carried unanimously.

The meeting adjourned at 11:03 a.m.

PATIENT ABANDONMENT

The Wisconsin Administrative Code and the Rules and Regulations that govern the practice of nursing do not specifically define the term “abandonment”. Abandonment falls under the general category of misconduct or unprofessional conduct. Misconduct or unprofessional conduct is defined in N7.04 of the Rules and Regulations. It states, “misconduct or unprofessional conduct” means any practice or behavior which violates the minimum standards of the profession necessary for the protection of the health, safety, or welfare of a patient or the public”.

The Board of Nursing (BON) has been asked to describe some of the circumstances where a nurse’s actions would be considered misconduct or unprofessional with regard to abandonment and thereby subject to discipline. The BON considers each complaint individually, examining the circumstances and facts of the situation as it pertains to the involved licensees, including the nurse who is assigned to provide care the nurses who supervise or manage the staff.

When reaching a decision on whether misconduct has occurred, the BON will consider, but is not limited to the following:

- 1) Generally, for patient abandonment to occur the nurse must first have accepted the patient assignment
- 2) Was sufficient notice given to a manager or other responsible individual, including client in a home care setting, of the nurse’s intent to cease providing nursing care such that arrangements could be made to assure continuity of nursing service?
- 3) Did the nurse report essential patient information to an appropriate person?
- 4) What were the issues or reasons that the nurse would not accept or continue an assignment?

The BON has determined that it will not consider employment issues over which the BON has no jurisdiction. An example may be a nurse refusing to remain on duty for an extra shift or partial shift beyond his/her established schedule.

The primary responsibility of the BON, relative to licensees who practice nursing, is public safety. All investigations of complaints focus on patient safety. The actions and conduct of licensees are determined to be or not to be negligent or unprofessional based on what actions a reasonable and prudent nurse would take in the same or similar circumstances.

Revised 04-01-13
Board Reviewed/Approved

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USE OF SOCIAL MEDIA BY NURSES

The Board of Nursing recognizes the increasing prevalence and use of social media and other electronic social networking (Facebook/Twitter/LinkedIn/You Tube) by nurses. Social media and networking can be a positive professional communication tool for nurses and can enhance the provision of nursing services. These online networks facilitate the rapid exchange and dissemination of information in a public or semi-public forum. However, the use of social media may also have unintended negative impacts in the health care context involving patient privacy and confidentiality of patient-related health care information.

Any patient information learned by the nurse during the course of treatment must be safeguarded by that nurse and may only be disclosed to other members of the health care team who are directly involved in the patient's care and only for health care purposes. Confidential information may only be shared with the patient's informed consent, when legally required or where failure to disclose the information could result in significant harm. Nurses are also required to observe the professional boundaries of the patient-nurse relationship. The ethical standards of professionalism apply equally to online contact and in the online network environment as to face-to-face contact.

Federal law reinforces and further defines patient privacy through the Health Insurance Portability and Accountability Act (HIPAA). The federal law defines individually identifiable information and establishes how this information may be used, by whom and under what circumstances. Breaches of patient confidentiality or privacy can be intentional or inadvertent and can occur in a variety of ways. Common situations involved the use of computers, cell phones, cameras and other electronic devices for on-line posting or dissemination through social media. **“Nurses have violated the standards of professional conduct by taking photos or videos of patients or making disparaging remarks about patients, even if they are not identified”**

The Wisconsin Administrative Code, Chapter N7.04(10) defines the breach of patient privacy and confidentiality in the following manner:

“revealing to other personnel not engaged in the care of the patient or to members of the public information which concerns a patient's medical condition unless release of the information is authorized by the patient or required or authorized by law.”

The Wisconsin Administrative Code, Chapter N7.04 (1), also defines unprofessional conduct as including the violating, aiding or abetting a violation of any law substantially related to the practice of professional nursing. This would apply in situations which involve violations of health care laws such as HIPAA. Thus, a nurse in Wisconsin may be subject to disciplinary action by the Board of Nursing for transmitting or discussing online individually identifiable patient information, including posting or sending photos or videos or other health care records of the patient, unless authorized by law. In addition, a nurse may be found to violate professional nurse-patient boundaries through online contact with patients.

The American Nurses Association (ANA) and the National Council of State Board of Nursing (NCSBN) have recently published materials which address the pitfalls and potential negative consequences of the use of social media in the nursing profession. The ANA has an e-publication “*ANA Principles for Social Networking and the Nurse*” <http://www.nursingworld.org/FunctionalMenuCategories/AboutANA/Social-Media/Social-Networking-Principles-Toolkit.aspx> which provides guidance to registered nurses on using social networking media in a manner that protects the patient’s privacy, confidentiality and inherent dignity.

The NCSBN has published a white paper “*A Nurse’s Guide to the Use of Social Media*” https://www.ncsbn.org/Social_Media.pdf which contains examples of illustrative cases depicting inappropriate uses of social and electronic media. These publications are accessible free of charge through the ANA and NCSBN internet websites. The members of the nursing profession are encouraged to review these useful materials for further guidance.

Adopted 7/19/2012

POSITION OF THE BOARD OF NURSING ON TELEPHONE TRIAGE

In certain clinic settings, RN's and LPN's are performing telephone triage. This practice involves providing guidance to clients who call the clinic regarding health problems or symptoms, which concern them. The advice given by the triage nurse may relate to coming to the clinic, remaining at home and monitoring symptoms, or following a treatment regimen approved by the health care provider.

It is the position of the Board of Nursing that nurses performing telephone triage should be acting according to mutually accepted protocols with a physician, dentist, podiatrist, or optometrist. The board has taken the position that the act of medical diagnosis itself cannot be performed by a nurse as a delegated medical act. The advice or information provided by the triage nurse should not involve medical diagnosis, but should follow the protocols or standing orders of the physician, dentist, podiatrist, or optometrist.

Under sec. 441.11(4), Stats., and sec. N 6.03(1)(a), Code, the function of assessment is performed by the RN. Under sec. N 6.04(1)(e), Code, the LPN may assist with the collection of the data. The board has taken the position that the functions of assessment and evaluation cannot be delegated by the RN to the LPN. Accordingly, LPN's performing telephone triage must do so only in an assistive capacity under the supervision of the RN, physician, dentist, podiatrist, or optometrist.

The board recommends that the triage nurse provide callers with information regarding all options for treatment, including coming into the clinic, going to the nearest hospital or calling 911. In addition, the board recommends that the triage nurse document and name specifically which protocols or standing orders are used in providing guidance to the client based on the information gathered from the caller. The board also recommends documenting the response of the caller to the information provided.

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BOARD POSITION ON THE USE OF INTERMEDIARIES

In response to your request for information regarding relaying of medical orders to registered nurses utilizing an intermediary, it is the position of the Board of Nursing that it is permissible for a nurse to both relay a physician's order as an agent of the physician, and to accept a physician's order as relayed by the physician's agent. Where a physician utilizes an agent to relay the medical order, it is construed as the order of the physician, though the nurse receiving the order retains the rights to either decide not to accept the order or to clarify the order directly with the physician if there are any questions. The underlying basis for permitting use of intermediaries in relaying physician's orders is Wis. Stats. sec. 448.03(2)(e), which permits physicians to delegate patient services under the supervision and inspection of a physician who has the power to direct, decide and oversee the implementation of the patient services rendered. It may be noted, however, that inasmuch as one relaying a physician's order is exercising no discretionary authority no true delegation may be said to occur. Rather, the agent is merely transmitting information pertaining to physician's order.

While the Board of Nursing permits relaying of orders to RN's and LPN's by physicians using an intermediary, the Department of Health & Social Services has a more restrictive rule. In facilities where that department has jurisdiction, the more restrictive rule would apply and, where that situation exists, the Board of Nursing has historically deferred to the Department of Health & Social Services.

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POSITION OF THE BOARD OF NURSING REGARDING THE USE OF NURSE TECHNICIANS

The Nurse Technician is a nursing student who either is actively enrolled in a board approved school of professional nursing, has graduated from such program and does not hold a temporary permit or who has been unsuccessful on the nursing licensure exam and is retaking the exam. This position applies to students or graduates who are employed by agencies or facilities outside of the nursing school program, and does not apply to the supervised clinical experience of the nursing school program. It also does not apply to the role or requirements of the graduate nurse (G.N.) or graduate practical nurse (G.P.N.) who holds a temporary permit. The position of Nurse Technician will only be available up to 6 months from the date of graduation.

The Nurse Technician always functions under the direct supervision of the registered nurse. Under s. N6.02 (6), Wisconsin Administrative Code, direct supervision means immediate availability to continually coordinate, direct and inspect at first hand the practice of another. This has been interpreted by the board to require that the supervising RN must be in the same facility as the nurse technician.

Under s. N6.03 (3), Wisconsin Administrative Code, the supervising RN may delegate acts within the scope of professional nursing to the Nurse Technician, provided the RN does the following:

1. Delegates tasks commensurate with educational preparation and demonstrated abilities of the Nurse Technician;
2. Provides direction and assistance to the Nurse Technician;
3. Observes and monitors the activities of the Nurse Technician; and,
4. Evaluates the effectiveness of acts performed by the Nurse Technician.

The Board of Nursing cautions RN's, agencies and facilities that the Nurse Technician is not licensed to practice nursing either as an RN or LPN. The Nurse Technician performs tasks delegated to him or her by the RN under direction supervision. While tasks or procedures may be delegated to the Nurse Technician, the functions of assessment and evaluation may not, including the preparation or alteration of a plan of care. The Nurse Technician may assist the RN in these functions, but may not perform them in their entirety.

The Nurse Technician position may be beneficial to students, graduates who do not hold a temporary permit, and graduates who have been unsuccessful on the licensing exam,

since it allows them an opportunity to gain from clinical experience apart from that of their nursing school program. In addition, it may be beneficial to the facility or agency since the Nurse Technician may seek future employment there.



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EDUCATION AND LICENSURE COMMITTEE

8:30 A.M.

(OR IMMEDIATELY FOLLOWING ADJOURNMENT OF THE PRACTICE COMMITTEE MEETING)

CALL TO ORDER – ROLL CALL

OPEN SESSION: Education and Licensure Committee –Carol Ott (Committee Chair), Rachelle Lancaster, Gretchen Lowe

- A. **Adoption of Agenda (21-22)**
- B. **Approval of Education & Licensure Committee Minutes of March 14, 2013 (23-26)**
- C. **NCSBN Staff Appearance Regarding Criminal Background Checks - Discussion and Consideration (27-28)**
- D. **Request for Authorization to Plan a Paramedic to Associate Degree in Nursing Program on Behalf of Wisconsin Technical College System – Discussion and Consideration (29-66)**
- E. **Mid-State Technical College Addition of Marshfield Location for Nursing Program - Discussion and Consideration (67-72)**
- F. **UW-Eau Claire Bachelor of Science in Nursing Curriculum Change – Discussion and Consideration (73-156)**
- G. **Faculty Exceptions - Discussion and Consideration (157-158)**
- H. **Clarification of Continuing School Approval as it Relates to the Usage of the NCLEX Pass Rate - Discussion and Consideration (159-160)**

I. **Status Update as to the Guidelines for Nursing Program Approval – Discussion and Consideration (161-162)**

J. Items Received After Preparation of the Agenda

K. Public Comments

ADJOURNMENT OF EDUCATION & LICENSURE COMMITTEE MEETING

EDUCATION AND LICENSURE COMMITTEE
BOARD OF NURSING
MEETING MINUTES
MARCH 14, 2013

PRESENT: Rachelle Lancaster, Carol Ott, Gretchen Lowe, Kay Coppens

STAFF: Dan Williams, Executive Director; Matt Niehaus, Bureau Assistant; Ryan Zeinert, Office of Education and Examinations; other DSPS staff

CALL TO ORDER

Carol Ott, Chair, called the meeting to order at 8:31 a.m. A quorum of four (4) members was present.

ADOPTION OF AGENDA

Amendments to the Agenda

- Item “M” (open session) **RETITLE** the agenda item titled “M. Guidelines for Program Approval” with “C. Guidelines for Program Approval”

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to adopt the agenda as amended. Motion carried unanimously.

**APPROVAL OF EDUCATION & LICENSURE
COMMITTEE MINUTES OF FEBRUARY 14, 2013**

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to approve the minutes of February 14, 2013 as published. Motion carried unanimously.

STATUS UPDATE AS TO THE GUIDELINES FOR NURSING PROGRAM APPROVAL

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to place an item on the April 11, 2013 meeting for a status update as to the Guidelines for Nursing Program Approval document to consider the exceptions. If something arises that requires immediate action before that meeting, the Committee may hold an emergency meeting. Motion carried unanimously.

**BOARD OF NURSING POSITION STATEMENT ON QUALIFICATIONS OF FACULTY
FOR DISTANCE EDUCATION COURSES**

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to request DSPS staff remove the position statement on qualifications of faculty for distance education courses from the DSPS website. Motion carried unanimously.

ALVERNO REQUEST FOR APPROVAL OF CHANGES TO RN-TO-BSN PROGRAM

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to approve changes to the RN-to-BSN program for Alverno College. Motion carried unanimously.

**RASMUSSEN COLLEGE OCALA SCHOOL OF NURSING REQUEST FOR
AUTHORITY TO PLAN AN ONLINE RN-TO-BSN PROGRAM**

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to accept the proposal of Rasmussen College Ocala School of Nursing for authority to plan an online RN-to-BSN program. Motion carried unanimously.

**RASMUSSEN COLLEGE – GREEN BAY – ASSOCIATE DEGREE IN NURSING
PROGRAM**

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to request an addendum from Rasmussen College – Green Bay to the report previously submitted addressing NCLEX scores. Motion carried unanimously.

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to give authority to DSPS within the next 6 months to conduct a survey visit for program approval at Rasmussen College – Green Bay as described in N1.03(4) and defined in N1.02(13). Motion carried unanimously.

MOTION: Kay Coppens moved, seconded by Gretchen Lowe, to request DSPS determine who can legally be delegated to perform site visits. Motion carried unanimously.

WI LUTHERAN COLLEGE BACHELOR OF SCIENCE IN NURSING PROGRAM

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to request that Wisconsin Lutheran College provide an updated progress report addressing N1.06 and a plan to address NCLEX scores to DSPS no later than 8 business days prior to the April, 11, 2013 meeting. Motion carried unanimously.

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to give authority to DSPS before the end of this academic year (May, 2013) to conduct a survey visit at Wisconsin Lutheran College for program approval as described in N1.03(4) and defined in N1.02(13). Motion carried unanimously.

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to request DSPS determine who can legally be delegated to perform site visits. Motion carried unanimously.

HERZING-MADISON REQUEST FOR AUTHORIZATION TO ADMIT STUDENTS TO BACHELOR OF SCIENCE IN NURSING PROGRAM

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to authorize Herzing to admit students for a BSN program. Motion carried unanimously.

MARIAN UNIVERSITY REQUEST FOR APPROVAL OF MAJOR PROGRAM CHANGE TO BACHELOR OF SCIENCE IN NURSING PROGRAM

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to approve Marian University's change to BSN major program proposal. Motion carried unanimously.

LAC COURTE OREILLES OJIBWE COMMUNITY COLLEGE REQUEST FOR APPROVAL OF MAJOR PROGRAM CHANGE TO ASSOCIATE OF APPLIED SCIENCE IN NURSING PROGRAM

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to request a self-evaluation of curriculum for Lac Courte Oreilles Ojibwe Community College by June 1, 2013. Motion carried unanimously.

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to give authority to DSPS to conduct a survey visit at Lac Courte Oreilles Ojibwe Community College for program approval as described in N1.03(4) and defined in N1.02(13). Motion carried unanimously.

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to request DSPS determine who can legally be delegated to perform site visits. Motion carried unanimously.

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to approve the revised curriculum submitted by Lac Courte Oreilles Ojibwe Community College. Motion carried unanimously.

ADJOURNMENT

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 10:31 a.m.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Dan Williams		2) Date When Request Submitted: 4/1/13 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: WI Board of Nursing – Education and Licensure Committee			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? NCSBN staff appearance re: Criminal Background checks – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input checked="" type="checkbox"/> Yes by <input type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: Please add the following representatives from NCSBN to the April agenda. Beth Radtke and Renee Nichols. They will be discussing criminal background checks for candidates taking the NCLEX exam. Carol			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Executive Assistant prior to the start of a meeting.			

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March 5, 2013

Jill M. Remy
Education and Examinations Program Manager
Department of Safety & Professional Services
1400 E. Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935

Dear Ms. Remy,

With the support of all 16 Wisconsin Technical College Nursing Programs we are developing a Paramedic to ADN track at NWTC. I am requesting approval from the State Board of Nursing for this product. I have attached form 1365 with signatures from NWTC. We are the organization responsible for the development of the Paramedic to ADN track. The product will be available for use by all 16 technical colleges. The ADN program chairs at all 16 colleges have supported the development and their signatures are attached here also. Funding for curriculum development was made available to NWTC from the Wisconsin Technical College System.

Northeast Wisconsin Technical College is a two-year technical college, serving Northeast Wisconsin by providing education, training, and life-long learning opportunities for individuals and businesses leading to the development of a skilled workforce. The Learning Division of the College is led by Lori Suddick, VP for Learning, and she and our President, Dr. H. Jeffrey Rafn both support the development of this program. The Health Sciences Department is one of 5 learning departments at the college. The Associate Degree Nursing program resides in the Health Sciences department. I am the ADN program director, and report directly to Lori Suddick. The Paramedic program resides in the Public Safety Department, which is also under the direction of Lori Suddick. We have had full support from paramedic and nursing faculty to develop this product.

I have attached the admission checklist and the four courses that will replace the first year of the ADN program. The Paramedic bridge students will join the regular ADN program students for all of third and fourth semesters of the program. They will also need to complete all General Education requirements of the ADN program and meet ADN program benchmarks prior to admission.

The clinical experience for the Paramedic to ADN course (10-543-129) will be held at a local hospital. We anticipate doing the clinical either on a week-end or during the semester break when other clinicals are not scheduled. NWTC has recently moved to a 15 week academic calendar and now have a 3 week January (winterim) term that would work very well for this clinical experience. We also have summer availability at many clinical sites. Students will use the resources in our Nursing Skills and Simulation labs for their Skills course (10-543-130). Within our system, we have a plan that NWTC will offer the online theory courses to any Paramedics meeting the qualifications statewide, and the skills and clinical



courses would be offered regionally. The exact locations of the colleges offering the skills and clinical courses is yet to be determined. NWTC is committed to offering all courses on a yearly basis.

NWTC has several faculty interested in teaching the Paramedic to ADN curriculum and we have budgeted money to offer these courses in the 2013-14 academic year. At NWTC we plan to absorb the Paramedic bridge students into third semester by increasing the number of clinical groups by one group (8 students) per semester. If there is more interest than this the students will be placed on a waitlist. This is the same process we use with LPN to ADN bridge students.

NWTC is accredited by the Higher Learning Commission, North Central Association. The Associate Degree Nursing program is accredited by the NLNAC (National League for Nursing Accrediting Commission) through 2016. At that time we will seek another eight year accreditation. We have sent a letter to NLNAC requesting a substantive change specific to the Paramedic to ADN program offering.

I would be happy to attend a Board of Nursing meeting to discuss this product. It has been long requested by paramedics around the state.

Sincerely,

A handwritten signature in black ink that reads "Kay L. Tupala".

Kay Tupala, RN, MSN
Dean, Health Sciences
920-498-5482
Kay.tupala@nwtc.edu

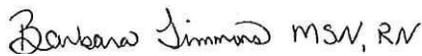
Wisconsin Technical College System
Associate Degree Nursing Programs



Ruth Wheaton Cox RN
Blackhawk Technical College



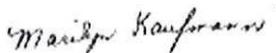
Linda Krueger RN
Chippewa Valley Technical College



Barbara Timmons RN
Fox Valley Technical College



Diane Skewes RN
Gateway Technical College



Marilyn Kauffman RN
Lakeshore Technical College



Kay Grotelueschen RN
Madison College



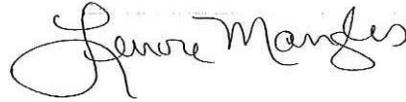
Mary Moss RN
Mid-State Technical College



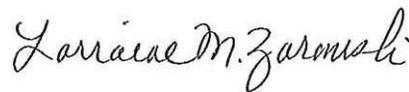
Nancy Vrabec RN
Milwaukee Area Technical College



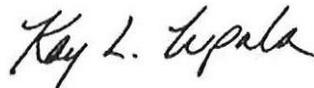
Kathy Van Eerden, MS, RN, CNE
Moraine Park Technical College



Lenore Mangles RN
Nicolet College



Lorraine Zoromski RN
Northcentral Technical College



Kay Tupala RN
Northeast Wisconsin Technical College



Katie Garrity RN
Southwest Technical College



Sandy Stearns RN
Waukesha County Technical College



Barb Kreig RN
Western Technical College



Chaudette Miller, RN
Wisconsin Indianhead Technical College

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8935
Madison, WI 53708-8935
FAX #: (608) 267-1809
Phone #: (608) 266-7703

1400 E. Washington Avenue
Madison, WI 53703
E-Mail: web@dps.wi.gov
Website: http://dps.wi.gov

BOARD OF NURSING

APPLICATION FOR APPROVAL OF A NURSING PROGRAM

Completion of this form is required for all schools applying for approval by the Board of Nursing. The information collected on this form will be used to determine compliance with standards in Chapter N 1, Wis. Adm. Code.

Institution desiring to establish an approved program:

Name Northeast Wisconsin Technical College
Address 2740 W. Mason Street
Green Bay, WI 54307
Type of Program Associate Degree Nursing - Paramedic to ADN Track

The written program proposal as required in Section N 1.03(2), Wisconsin Administrative Code, is attached. It is understood that additional information may be required before the board determines a survey should be made.

There will be no publicity or plans made for the admission of students until the board has determined the written program proposal, clinical facilities, and response to other requirements are satisfactory.

The governing body of the above named institution herein applies for approval by the Board of Nursing.

Date 3/5/13

Signatures:

Kay L. Temple
President/Chair of the Board
Lori Suddick
Secretary of Board/District Director

#1365 (Rev. 9/12)
Ch. 441, Stats.
N 1.03(2)(b), Wis. Adm. Code

STEP 1: Requirements for PRE-PROGRAM Admission: Once accepted you may be financial aid eligible

- Completed application – apply online!
- \$30 application fee (one-time, lifetime, non-refundable fee)
- High school transcript or equivalent (send to above address, ATTN: Admissions)
- Academic skills assessment (taken within the last 5 years)

Your Score	Required Assessment	Pre-Program Scores			If you have not met your pre-program scores, start with these classes:
		Accuplacer	TABE	ACT	
	Reading	55	8.3	15	Reading Prep 77-88-759
	Arithmetic	34	8.8	13	Math Prep 77-854-759
	Sentence Skills	60	7.8	16	Writing Prep 77-851-759

Please know that we will work closely with every student to create a customized pathway based on your needs and goals.

- If you have met the Pre-Program Scores, please proceed to STEP 2

- If you have not met the Pre-Program Scores, please use “Pathway to Success Guide” on page 3
 - ✓ One free retest may be attempted on Accuplacer (within 1 year)
 - ✓ Please make an appointment with your program Academic Advisor or Counselor to further discuss options

STEP 2: Requirements for PROGRAM Admission

Your Score	Required Assessment	Program Scores			Course that will meet Program score upon completion with a C or better
		Accuplacer	TABE	ACT	
	Reading	95	12.5	21	
	Arithmetic	79	12.7	18	
	Sentence Skills	103	12.8	21	
				22	Required Composite ACT

- If you have met the Program Scores, you have completed the testing requirement for the program
- If you have not met the Program Scores, please use “Pathway to Success Guide” on page 3
 - ✓ One free retest may be attempted on Accuplacer (within 1 year) or see above suggestions for courses that can be used to reach Program Score

Additional requirements to be admitted to the Paramedic to ADN program:

- Copy of state or national paramedic licensure
- One year of Paramedic work experience (must provide proof from employer)
- General Chemistry (10806134) with a ‘C’ or better or two semesters of high school Chemistry with a ‘C’ or better
- Biochemistry (10806186) with a ‘B’ or better (*If completed in the summer 2012 or prior, a ‘C’ or better was acceptable.*)
- General Anatomy & Physiology (10806177) with a ‘B’ or better (*If completed in the spring 2009 or prior, a ‘C’ or better was acceptable.*)
- Advanced Anatomy & Physiology (10806179) with a ‘B’ or better (*If completed in the spring 2009 or prior, a ‘C’ or better was acceptable.*)
- Oral/Interpersonal Communication (10801196)
- Developmental Psychology (10809188)
- English Composition 1 (10801136) or Written Communication (10801195)
- X Nursing Assistant (30-543-300) **Waived** – content embedded in paramedic bridge coursework

STEP 3: Begin Paramedic to ADN Theory/Clinical Bridge coursework

After admission to the program, students will need show proof of the following:

- Completed pre-clinical health records
- Current NWTC Caregiver Background Check
- Evidence of current Health Care Provider CPR

Semester One: Paramedic to ADN Courses (Fall Only)

- 10543127 Paramedic to ADN Theory 1 (3 credits, online)
Requires Admission to Paramedic to ADN program
- 10543128 Paramedic to ADN Theory 2 (3 credits, online)
Requires Admission to Paramedic to ADN program

Semester Two: Paramedic to ADN Courses (Spring Only)

- 10543129 Paramedic to ADN Skills (2 credits, in person – TBD in either Marinette or Green Bay)
Requires that Paramedic to ADN Theory 1 & 2 are completed
- 10543130 Paramedic to ADN Clinical (2 credits, in person – TBD in either Marinette or Green Bay)
Requires that Paramedic to ADN Theory 1, 2 and Skills are completed

Students who complete all of the above coursework will have the option to begin the part-time or full-time ADN Bridge program. The ADN Bridge program is available in Sturgeon Bay, Green Bay or Marinette. Please contact the program advisor to discuss your academic plans for completion of the ADN program.

STEP 4: Sequence into ADN coursework

FULL TIME CURRICULUM (Fall and Spring start)	PART TIME CURRICULUM (Spring Start)
<p>Semester One (3rd Semester ADN coursework): *10-543-109 Nsg: Complex Health Alterations 1 (3 credits) *10-543-110 Nsg: Mental Health Comm Con (2 credits) *10-543-111 Nsg: Intermediate Clin Practice (3 credits) *10-543-112 Nursing Advanced Skills (1 credit)</p> <p>Semester Two (4th Semester ADN coursework): *10-543-113 Nsg: Complex Health Alterations 2 (3 credits) *10-543-114 Nsg: Mgt & Profess Concepts (2 credits) *10-543-115 Nsg: Advanced Clinical Practice (3 credits) *10-543-116 Nursing Clinical Transition (2 credits)</p>	<p>Spring Semester (Beginning of 3rd semester ADN): *10-543-109 Nsg: Complex Health Alterations 1 (3 crs) *10-543-111 Nsg: Intermediate Clin Practice (3 credits) (8 weeks of med/surg – 2nd 8 weeks of semester) *10-543-112 Nursing Advanced Skills (1 credit) (first 8 weeks of semester)</p> <p>Summer Semester: *10-543-110 Nsg: Mental Health Comm Con (2 credits) *10-543-111 Intermed Clin Practice (continued from spring) (4 weeks of psych clinical)</p> <p>Fall Semester (Beginning of 4th semester ADN): *10-543-113 Nsg: Complex Health Alterations 2 (3 credits) *10-543-115 Nsg: Advanced Clinical Practice (3 credits) (clinical is 2nd eight weeks)</p> <p>Spring Semester (March Graduation): *10-543-114 Nsg: Mgt & Profess Concepts (2 credits) *10-543-116 Nursing Clinical Transition (2 credits)</p>

<p>Full-time program notes:</p> <p>*Program start terms vary by campus.</p> <p>*Semester two requires all 3rd semester be completed with a 'B' or better.</p> <p>*All course with an * require a grade of a 'B' or better.</p> <p>*Coursework and clinicals in the ADN FT program can be AM or PM.</p>	<p>Part-time program notes:</p> <p>*Program start terms vary by campus. GB Campus is a spring start.</p> <p>*All course with an * require a grade of a 'B' or better.</p> <p>*Coursework and clinicals in the ADN PT program are PM classes and PM clinicals.</p>
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PATHWAY TO SUCCESS GUIDE FOR ASSOCIATE DEGREE NURSING

COMMUNICATION & SOCIAL SCIENCE PATHWAY Your Score: SS: ___ R: ___

√	Reading			Sentence Skills			Course Title	Catalog Number
	ACC	TABE	ACT	ACC	TABE	ACT		
	–			≤ 59	≤ 7.7	≤ 15	Writing Prep	77-851-759
	≤ 54	≤ 8.2	≤ 14	–			Reading Prep	77-858-759
	55	8.3	15	60 – 74	7.8 – 9.8	–	Introduction to College Writing	10-831-103
	55	8.3	15	75	9.9	16	English Composition 1	10-801-136
	55	8.3	15	60	7.8	16	Oral/Interpersonal Comm.	10-801-196
	55	8.3	15	60	7.8	16	Intro to Psychology	10-809-198
	55	8.3	15	60	7.8	16	Intro to Sociology	10-809-196
	55	8.3	15	60	7.8	16	Developmental Psychology	10-809-188

SCIENCE PATHWAY Your Score: R: ___

√	Reading			Course Title	Catalog Number
	ACC	TABE	ACT		
GENERAL CHEMISTRY REQUIREMENT NOT MET PATHWAY					
	≤ 54	≤ 8.2	≤ 14	Reading Prep	77-858-759
	55	8.3	15	General Chemistry	10-806-134
GENERAL CHEMISTRY REQUIREMENT MET PATHWAY					
	≤ 54	≤ 8.2	≤ 14	Reading Prep	77-858-759
	55	8.3	15	Prep for Anatomy & Physiology	10-836-001
	80	12.5	17	Intro to Biochemistry <small>Prerequisite: lab based Chemistry</small>	10-806-186
	80	12.5	17	General Anatomy & Physiology <small>Prerequisite: lab based Chemistry</small>	10-806-177
	Successful Completion of General Anatomy & Physiology (10806177)			Advanced Anatomy & Physiology	10-806-179
	Successful Completion of General Anatomy & Physiology (10806177)			Microbiology	10-806-197

ARITHMETIC PATHWAY Your Score: A: ___

√	ARITHMETIC			Course Title	Catalog Number
	ACC	TABE	ACT		
	≤ 33	≤ 8.7	≤ 13	Math Prep	77-854-759
	34 – 64	8.7 – 12.6	14	Pre-Algebra	10-834-109

GENERAL EDUCATION COURSES RECOMMENDED TO BE COMPLETED PRIOR TO PROGRAM START

- 10809196 Intro to Sociology
- 10809198 Intro to Psychology
- 10806197 Microbiology
- 1 credit of Elective (Associate Degree Level)

Academic Advisor
Kate Kolarik
Katie.kolarik@nwtc.edu
(920) 491-2665

**To schedule an appointment call (920) 498-5444

Northeast Wisconsin Technical College

10-543-127 Paramedic to ADN Theory 1

Course Outcome Summary

Course Information

Description Nursing process implemented to relate care of patients throughout the lifespan with alterations in cognition, elimination, comfort, grief/loss, mobility, skin integrity, and fluid/electrolyte balance and related principles of pharmacology.

Instructional Level Associate Degree

Total Credits 3.00

Course Competencies

1 Differentiate scopes of practice within the nursing profession

Assessment Strategies
in an oral or written response.

Criteria

Your performance will be successful when:

response distinguishes among the different levels of nursing education

response specifies the ethical and legal boundaries of the student nurse as presented in the Code of Ethics and the Nurse Practice Act

response details responsibility for maintaining client confidentiality

response compares various settings in which nurses work

response details the role of nursing organizations

response describes the contribution of all members of the healthcare team

response outlines the standards of regulatory and reimbursement agencies

Learning Objectives

Examine the State Nurse Practice Act as it relates to the roles and responsibilities of the licensed practical nurse and the registered nurse.

Identify the different types of settings where licensed practical nurses and registered nurses work.

Describe the different types of educational nursing programs.

Explain the functions of the American Nurses Association (ANA), the National League for Nursing (NLN), the National Student Nurses Association (NSNA) and LPN organizations.

Indicate how a professional code of ethics is utilized to facilitate the ethical decision making to provide quality client care.

Describe the legal liability responsibilities of the nurse based on standards of care.

Identify the roles and responsibilities of each member of the health care team.

Indicate reasons that nurses need to focus on economics in the delivery of nursing and health care.

Summarize the effects of regulatory and reimbursement agencies that impact care provided in a variety of clinical

settings. (Medicare, Medicaid, JCAHO, DHFS, insurance industry)

2 Maintain a safe, effective care environment

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response indicates correct identification of client prior to performing any client care measures.

response reflects inclusion of OSHA/OBRA regulations regarding microbiological, physical, and environmental safety.

response reflects decision making related to measures to minimize use of restraints.

Learning Objectives

Identify environmental factors affecting safety.

Apply assessment tools to identify safety needs.

Identify nursing strategies for injury prevention.

Identify the types of restraints available.

Review the legal implications of restraint use.

3 Use appropriate communication techniques

Assessment Strategies

through simulations and/or roleplays

by preparing written materials in response to case study situations

Criteria

Your performance will be successful when:

you analyze how your own personal factors influence your ability to communicate effectively

you use therapeutic communication techniques

you apply principles of distance and space

you demonstrate assertive communication

you use the steps of the interview process

you adapt your communication to the level of the client or the audience

you demonstrate respect for confidentiality

you use current and reliable information technology (Web-sites, e-mail, etc)

you use correct medical terminology and abbreviations

you report significant client information orally and in writing

you document according to legal guidelines

you use correct grammar and spelling

Learning Objectives

Describe response styles and other factors that impact verbal communication.

Indicate how nonverbal communication cues and body language affect communication.

Define therapeutic communication.

Explain the phases of the helping relationship.

Examine techniques that enhance or impair communication.

Differentiate between assertive and nonassertive communication.

Identify features of effective group communication.

Indicate why confidentiality of client information is essential.

Examine various types of client records, i.e. Narrative charting, SOAP charting, Focus charting, Charting by Exception, Computer Assisted Charting.

Summarize guidelines for making entries into a client's record.

Identify essential guidelines for reporting client data through change of shift reports, telephone reports, and telephone orders.

4 Use the nursing process

Assessment Strategies

in an oral or written response to case studies/scenarios

Criteria

Your performance will be successful when:

response follows the steps in the nursing process in the correct order

response outlines the data resources needed to complete a client data base

response identifies nursing diagnoses from an designated source

response includes suggestions for the development of a care plan

response reflects priorities of client care.

response contributes to the evaluation of client outcomes

response includes documentation of each phase of the nursing process

response differentiates between the role of the PN and RN in the nursing process

Learning Objectives

Identify the components of the nursing process.

List resources needed to complete a client data base.

Identify different frameworks used for organizing data.

Differentiate between a medical and a nursing diagnosis.

Explain the process of goal setting and outcome identification.

Identify factors that are considered when prioritizing care needs.

Select nursing interventions to support goal achievement

Describe the relationship between client outcomes and evaluation.

Identify PN versus RN roles when using the nursing process.

5 Adapt nursing practice to meet the needs of diverse clients in a variety of settings

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response reflects consideration of the aspects of diversity including age, gender, culture, socioeconomic status, disability and sexual orientation

response details specific adaptations in client care to accommodate the needs of diverse populations

adaptations are reasonable, legal, and ethical

response adheres to the Patient Bill of Rights

Learning Objectives

Identify factors that can be included in the definition of diversity.

Indicate barriers to cultural sensitivity.

Describe techniques and behaviors that reflect cultural sensitivity.

Summarize how health beliefs and practices, family patterns, spirituality, communication style, space orientation, time orientation, and nutritional patterns vary according to the client's culture.

Indicate factors to consider when conducting a cultural assessment.

Describe measures to provide culturally competent care.

6 Provide nursing care for clients with sleep/rest/mobility alterations

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response assesses factors that put clients at risk for problems with mobility and sleep

response recognizes characteristics of sleep deprivation

response considers the use of pharmacological and non-pharmacological measures to promote sleep and rest

response assesses the effects of immobility on body systems

response details the nursing measures to prevent complications of immobility

response promotes the use of effective techniques of body mechanics among caregivers, clients, and significant others

Learning Objectives

Describe the physiology of sleep.

List factors that affect sleep.

Recognize characteristics of sleep deprivation.

Identify interventions that promote sleep and rest.

List the effects of immobility on each body system.

Identify measures to reduce the effects of immobility on each body system.

Identify principles of body mechanics for caregiver, client, and significant others.

7 Provide nursing care for clients with comfort alterations

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response assesses clients for subjective and objective manifestations of alterations in comfort

response adheres to standards of care for the client experiencing pain

response identifies non-pharmacologic and pharmacologic measures to minimize pain and discomfort (nausea, pruritis)

response outlines the plan for monitoring the client response to the interventions for pain and discomfort

Learning Objectives

Describe the physiology of pain.

List factors affecting the pain experience.

Identify objective and subjective manifestations of altered comfort.

List components of a pain assessment.

Identify pharmacologic and non-pharmacologic interventions for pain management.

Describe the evaluation process in pain management.

8 Provide nursing care for clients with nutritional, fluid, and electrolytes disturbances

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response includes a description of variables that influence nutrition, fluid and electrolyte balance

response includes an assessment of a client's nutritional and fluid/electrolyte status
response outlines specific nursing interventions to promote nutrition and fluid and electrolyte balance
response is based on the signs and symptoms of fluid volume excess and fluid volume deficit
response is based on action of nutrients, signs of excess and deficiency, and specific foods associated with each nutrient.
response is based on the interpretation diagnostic tests indicative of a disturbance in nutrition and fluid and electrolyte balance

Learning Objectives

Identify essential nutrients and dietary sources of each.
Examine methods of assessment of nutrition such as body weight, body mass measurements, dietary history, skinfold measurement, serum protein level, and urinary tests.
Identify factors that affect nutrition.
Explain guidelines to evaluate a diet such as the food pyramid and recommended dietary allowances.
Review the distribution and composition of body fluids.
Indicate the functions of sodium, potassium, calcium, and chloride.
Identify factors affecting normal body fluid and electrolyte balance.
Describe the clinical manifestations of fluid volume deficit and fluid volume overload.
Determine risk factors, laboratory findings, and nursing interventions associated with hyponatremia, hypernatremia, hypokalemia, hyperkalemia, hypocalcemia, and hypercalcemia.

9 Provide nursing care for clients with commonly occurring alterations in elimination patterns

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response assesses factors that put a client at risk for alterations in urinary and bowel elimination
response outlines the data that must be collected for identification of alterations in bowel/urine elimination
response is based on the interpretation of basic diagnostic tests of urinary and bowel elimination: urinalysis and occult blood
response details the non-pharmacologic and pharmacologic measures to promote urinary and bowel elimination

Learning Objectives

Review the factors affecting urinary and bowel elimination.
Describe altered patterns of urinary elimination.
Outline nursing assessments for urinary and bowel elimination.
Identify diagnostic procedures related to urinary conditions.
Describe pharmacological and non-pharmacological interventions to treat altered patterns of urinary elimination.
List methods that promote healthy patterns of urinary elimination.
Describe altered patterns of bowel elimination.
Identify diagnostic procedures related to bowel elimination.
Describe pharmacological and non-pharmacological interventions to treat altered patterns of bowel elimination.
List methods that promote healthy patterns of bowel elimination.

10 Provide nursing care for clients with integumentary disorders

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response identifies the clients at risk for impaired skin integrity
response includes an assessment of a client's skin integrity
response notes normal from abnormal findings
response assesses the characteristics of the wound
response applies correct terminology in the description of wounds
response includes an adaptation of care based on integumentary assessment data gathered

Learning Objectives

Review the anatomy and physiology of the skin and mucous membrane.
Identify risk factors which contribute to impaired skin integrity.
Describe the system for staging pressure ulcers.
Review phases of wound healing.
Differentiate between the different types of wound drainage.
Describe potential complications of wound healing.
Indicate factors affecting wound healing.
Summarize the factors that are components of the Braden Scale for Predicting Pressure Sore Risk.
Describe nursing interventions that will prevent skin breakdown and support wound healing.

11 Provide nursing care for clients with infection

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response outlines the factors that put clients at risk for infection
response outlines the dress code and personal practices that reduce the risk of infection transmission
response is based on an assessment of the signs and symptoms of infection
response is based on an interpretation of the diagnostic tests related to client's infectious process
response details the nursing interventions to support or minimize the physical and psychological effects of the infectious process
response demonstrates the ability to correlate nursing interventions to methods used to prevent or disrupt the chain of infection
response follows CDCP standards for isolation procedures
response documents assessment of therapeutic and adverse reactions to pharmacologic therapy for infection

Learning Objectives

Identify risks factors for acquiring an infection.
Review the chain of infection.
Outline nursing assessments for identifying an infectious process.
List interventions that break the chain of infection.
Describe isolation precautions outlined by the CDC.
Identify physical and psychological effects of the infectious process.
List pharmacological approaches to treat and/or prevent infections.

12 Provide nursing care for clients with cognitive and sensory impairments

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

you collect data to identify clients experiencing alterations in cognition or sensory perception
response demonstrates respect for the dignity of the client with cognitive or sensory impairment
response details support for family/significant others caring for clients with cognitive or sensory impairment
response includes community resources available for clients and families with a cognitive or sensory impairment
response includes adaptations to the environment to maintain safety for the client with impaired cognition or sensory impairment
response incorporates nursing strategies to maximize cognitive functioning and sensory perception
response outlines nursing interventions for specific cognitive and sensory disorders

Learning Objectives

Identify factors affecting sensory function.

Determine clients at risk for sensory deprivation, overload, or sensory loss.

Indicate nursing measures to prevent sensory overload and sensory deprivation.

Summarize data that could be indicative of visual, auditory, tactile, olfactory, or gustatory impairment.

Describe the pathophysiology of hearing loss, presbyopia, cataracts, macular degeneration, and glaucoma.

Describe nursing strategies that can assist the client in overcoming sensory deficits.

Define dementia and Alzheimer's disease.

Describe techniques used in assessment of cognition/mentation.

Indicate interventions that can be used to minimize impairment of cognition.

Identify community resources and respite programs available to family members/caregivers of clients with memory loss.

13 Provide nursing care for clients and families experiencing grief and loss

Assessment Strategies

in a written or oral response to case studies/scenarios

Criteria

Your performance will be successful when:

response demonstrates respect the cultural and spiritual beliefs of the client/significant other experiencing grief and loss

response demonstrates the anticipated responses to grief across the lifespan

response includes personal and community resources available

response advocates for the ethical/legal concerns of the client/family making end of life decisions

response employs nursing measures to support palliative care during the dying process

response outlines the nursing responsibilities associated with postmortem care

Learning Objectives

List the factors affecting grief and loss.

Identify stages of grieving.

Review lifespan considerations in the grieving process.

List clinical signs of impending death.

Outline nursing measures to support palliative care during the dying process.

Summarize legal and ethical concerns in end of life decisions.

Review post-mortem care.



Northeast Wisconsin Technical College

10-543-128 Paramedic to ADN Theory 2

Course Outcome Summary

Course Information

Description Nursing care of the developing family, including reproductive and mental health issues, pregnancy, labor and delivery, post-partum, the newborn, and child. Integrated understanding of related pharmacology. Study of family dynamics.

Instructional Level Associate Degree

Total Credits 3.00

Northeast Wisconsin Technical College
10-543-130 Paramedic to ADN Skills
Course Outcome Summary

Course Information

Description Basic nursing skills and physical assessment across the lifespan. Includes medication calculations, aseptic technique, wound care, tracheostomy care, suctioning, management of enteral tubes, medication administration, enemas, ostomy care, and catheterization.

Instructional Level Associate Degree

Total Credits 2.00

Core Abilities

- 1 Communicate Effectively
- 2 Demonstrate Community and Global Accountability
- 3 Demonstrate Personal Accountability
- 4 Solve Problems Effectively
- 5 Think Critically and Creatively
- 6 Value Individual Differences and Abilities
- 7 Work Cooperatively and Professionally

Course Competencies

1 REVIEW: Apply principles of medical asepsis for client and personal safety (tape 15)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Hand Washing Performance Task

Criteria

Your performance will be acceptable when:

you wash hands according to criteria checklist

you maintain clean and dirty areas

you follow standard precautions 100% of time

you use personal protective equipment according to established criteria

you outline isolation procedures

you handle linens and all equipment to minimize the spread of infection

Learning Objectives

Explain how microorganisms are spread.

Identify basic principles of infection control.
Recognize protective measures that lessen chance of disease or germ transmission.
Maintain separation of clean and dirty areas.
List body defenses against invading microbes.
Identify signs/symptoms of infection.
Discuss how attitudes toward hygiene can affect health of the client and oneself.
Differentiate between pathogenic microbes and nonpathogenic microbes.

2 REVIEW: Obtain a health history

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

you modify assessment technique to reflect variations across the lifespan
you establish nurse-client relationship
you use effective verbal and non-verbal communication techniques
you provide privacy
you collect data using a designated format
you modify assessment techniques to reflect ethnic and cultural variations
you document actions and observations
you recognize and report significant deviations from norms

Learning Objectives

Identify kinds of questions you can ask
Identify psycho-social issues

3 REVIEW: Perform a general survey assessment

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

you modify assessment techniques to reflect variations across the lifespan
you maintain asepsis
you maintain privacy
you measure height and weight
you assess vital signs
you assess general mobility
you assess appropriateness of behavior/responses
you assess ability to communicate
you assess basic nutritional status
you assess basic fluid status
you modify assessment techniques to reflect ethnic and cultural variations
you document actions and observations
you recognize and report significant deviations from norms

Learning Objectives

Identify the purpose of the general survey.
Indicate typical sequence for a general survey.

Summarize the components of a general survey of the client.
Contrast techniques of inspection, auscultation, palpation, and percussion.
Identify techniques to promote the physical and emotional comfort of the client during the assessment.
Explain how to modify assessment techniques across the life span.
Define pertinent terminology used in general survey/physical assessment.
Consider how age, ethnicity, and cultural variations may affect the general survey.
Discuss how teaching opportunities can be used during a general survey/physical assessment.
Indicate processes of referral for clients with abnormal findings of general survey/physical assessment.

4 REVIEW: Perform an integumentary assessment

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

- you modify assessment techniques to reflect variations across the lifespan
- you maintain aseptic technique
- you provide privacy
- you assess the skin, hair and nails using a designated format
- you modify assessment techniques to reflect ethnic and cultural variations
- you document actions and observations
- you recognize and report significant deviations from norms

Learning Objectives

Using a designated format, distinguish between normal and abnormal data during assessment of skin, hair, and nails.

Consider how age, ethnicity, and cultural variations may effect the integumentary assessment.

Define pertinent terminology used in integumentary assessment.

Discuss how teaching opportunities can be used during an integumentary assessment.

5 REVIEW: Perform a musculoskeletal assessment

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

- you modify assessment techniques to reflect variations across the lifespan
- you maintain privacy
- you assess body alignment according to a designated format
- you assess contour, size and strength of muscles according to a designated format
- you assess range of motion according to a designated format
- you palpate joints for change in temperature, pain and swelling
- you recognize and report significant deviations from norms
- you document actions and observations

Learning Objectives

Define range of motion (ROM).

Distinguish between normal and abnormal data during assessment of musculoskeletal system.

Relate type of joint motion to each of the body joints.

Describe the range of motion capabilities for each type of joint.

Discuss modifications of assessment techniques of a musculoskeletal assessment across the life span.

6 REVIEW: Perform a head/neck assessment

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

- you modify assessment techniques to reflect variations across the lifespan
- you assess the skull, face and neck using designated format
- you assess nose and oral cavity using a designated format
- you palpate lymph nodes of head and neck
- you recognize and report significant deviations from norms
- you document actions and observations

Learning Objectives

Distinguish between normal and abnormal data during assessment of the head, neck, and related lymphatic system.

Identify anatomical landmarks used to assess head/neck lymph nodes and the thyroid gland.

Discuss assessment techniques of the head/neck that reflect variations across the life span.

Document assessment of the head/neck and the lymphatic system of the head/neck.

7 REVIEW: Perform a basic eye/ear assessment

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

- you modify assessment techniques to reflect variations across the lifespan
- you inspect the eyes using a designated format
- you measure visual acuity using a Snellen chart
- you evaluate extraocular motion
- you inspect the external ear and canal using a designated format
- you evaluate hearing acuity
- you document actions and observation
- you recognize and report significant deviations from norms

Learning Objectives

Distinguish between normal and abnormal data during assessment of the eye and ear.

Become familiar with the equipment used during an assessment of the eyes and ears.

Discuss assessment techniques of the eye/ear that reflect variations across the life span.

Document assessment of the eye/ear.

8 REVIEW: Perform an abdominal assessment

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

- you modify assessment techniques to reflect variations across the lifespan
- you provide privacy

you assess the abdomen using designated format
you differentiate normal and abnormal bowel sounds
you document actions and observations
you recognize and report significant deviations from norms

Learning Objectives

Identify anatomical landmarks and techniques used to assess the abdomen.
Complete an abdominal assessment and documentation using the designated format.
Differentiate between normal and abnormal abdominal assessment data (including bowel sounds) and document.
Compare and contrast how age-related variations may effect assessment of the abdomen.

9 Perform a breast/testicular assessment

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

you modify assessment to reflect variations across the lifespan
you provide privacy
you assess breasts using designated format
you demonstrate teaching self breast exam
you assess testicles using designated format
you demonstrate teaching self testicular exam
you document actions and observations
you recognize and report significant deviations from norms

Learning Objectives

Instruct the recommended frequency and procedure for breast and/or testicular self-examination.
Distinguish between normal and abnormal data obtained in breast and/or testicular assessment.
Identify life span variations which may affect breast and testicular assessment.
Perform the recommended procedure and documentation for breast and/or testicular examinations.

10 Assist with bathing (tape 33)

Assessment Strategies

in a written/oral examination
in a performance demonstration by completing the Tub and Shower Performance Task
in a performance demonstration by completing the Sponge Bath Performance Task

Criteria

Your performance will be acceptable when:

you assist the client to shower according to criteria checklist
you assist the client with a tub bath according to criteria checklist
you assist the client with a partial or sponge bath according to criteria checklist

Learning Objectives

Explain the relationship between cleanliness and healthy skin.
Describe observations that should be reported.
Individualize personal care (including bathing, oral and nail care, grooming, perineal care) according to client's needs.
Assist client with shower.
Assist client with tub/shower.

Assist client with tub bath.
Assist client with a sponge bath.

11 Give complete bed bath (tape 34)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Bedbath Performance Task

in a performance demonstration by completing the Back Massage Performance Task

Criteria

Your performance will be acceptable when:

you bathe the client while in bed

you give the client a complete bedbath according to the criteria checklist

you give the client a back massage according to the criteria checklist

Learning Objectives

Demonstrate a bed bath including the back massage according to established criteria.

Explain basic safety precautions related to bathing clients while in bed.

Identify observations to be made while bathing a client.

Use various privacy measures to protect client's dignity and comfort during the bed bath, such as bath blankets, towels, curtains, and doors, to reduce overexposure.

12 Provide for personal care and hygiene (tape 35)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Perineal Care (female) Performance Task

in a performance demonstration by completing the Perineal Care (male) Performance Task

in a performance demonstration by completing the Nail and Hand Care Performance Task

in a performance demonstration by completing the Nail and Foot Care Performance Task

in a performance demonstration (Oral Hygiene Performance Task)

in a performance demonstration (Special Oral Hygiene Performance Task)

in a performance demonstration (Cleaning Dentures Performance Task)

Criteria

Your performance will be acceptable when:

you provide perineal care for male and female client according to the criteria checklist

you provide special oral hygiene according to the criteria checklist

you provide nail care on hands and feet for client, including clipping of nails according to the criteria checklist

you provide oral hygiene for client, including cleaning of dentures for client according to the criteria checklist

Learning Objectives

Explain the importance of adhering to standard precautions for perineal and oral care.

Provide for perineal care as part of the bath procedure.

Explain how the procedure for perineal care differs for male and female clients.

Demonstrate male and female perineal care.

Demonstrate how to trim fingernails and toenails in lab or clinical setting.

Explain why assistant may not trim the nails of clients with poor circulation or diabetes.

Demonstrate cleaning of dentures.

Provide for oral hygiene.

13 Assist with personal grooming (tape 36)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Shampoo (bed/tub/sink) Performance Task

in a performance demonstration by completing the Helping Clients Dress and Undress Performance Task

in a performance demonstration by completing the Shaving Performance Task

in a performance demonstration by completing the Shaving with Electric Razor Performance Task

Criteria

Your performance will be acceptable when:

you assist client with shaving according to the criteria checklist

you assist client with dressing according to the criteria checklist

you assist client with shampooing according to the criteria checklist

Learning Objectives

Explain why it is important not to use electric razors on clients receiving oxygen.

Assist clients with shaving.

Demonstrate a bed shampoo.

Groom client's hair.

Assist clients with dressing and undressing.

14 Provide for personal skin care (tape 32)**Assessment Strategies**

in a written/oral examination

in a performance demonstration

Criteria

Your performance will be acceptable when:

you use measures to promote skin integrity while caring for client

you report signs of pressure ulcers to the appropriate staff

you use devices to prevent pressure

Learning Objectives

Describe functions of the integumentary system.

Identify changes in elderly client's skin.

Utilize special devices in the clinical situation to prevent skin breakdown.

Use proper techniques to promote skin integrity appropriate to the individual.

List abnormalities, including color changes to be reported when observed.

Describe types of clients and areas of body prone to developing pressure sores.

15 Provide wound care**Assessment Strategies**

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

you adapt procedures to reflect variations across the lifespan

you use aseptic technique

you verify medical order

you assemble necessary supplies

you explain procedure to client

you obtain culture specimen according to designated procedure/checklist
you cleanse or irrigate wound according to designated procedure/checklist
you assess tissue condition and drainage
you apply a variety of dressings according to designated procedure/checklist
you recognize and report significant deviations in wounds
you document actions and observations

Learning Objectives

Discuss the theory and practice of moist wound healing.
Describe the phases of wound healing.
Define wound debridement and its place in wound care management.
Describe techniques for removal, application of a wound dressing (surgical asepsis, "no touch"), and wound culture.
Describe characteristics of a wound and any drainage to be included in documentation.
Contrast types of products and dressings indicated for use in wound management, including application and maintenance.
Discuss the necessity of pain management prior to and during a dressing change.
Differentiate among types of drains and management devices indicated for use in wound healing.
Indicate techniques and precautions to be implemented during wound irrigation.
Identify criteria and procedure for removal of sutures, staples, and/or drains.
Identify situations in which you would use clean versus sterile gloves/technique.
Indicate techniques to maintain medical and surgical asepsis.
Describe characteristics of a sterile field.
Describe the procedure you would follow if sterile technique has been broken

16 Assist with nutrition and fluid needs (tape 39)

Assessment Strategies

in a written/oral examination
in a performance demonstration

Criteria

Your performance will be acceptable when:

you record/report food intake and observations
you follow basic restrictions of common modified diets
you provide adequate fluid intake during the shift

Learning Objectives

Determine components of the food pyramid.
Recognize types of therapeutic diets.
Outline reasons why fluid balance is critical to general health.
List six nutrients essential for life.
Explain the structures of the gastro-intestinal system.

17 Assist client with eating meals (tape 40)

Assessment Strategies

in a written/oral examination
in a performance demonstration by completing the Feeding the Client Performance Task

Criteria

Your performance will be acceptable when:

you assist client with feeding according to the criteria checklist

Learning Objectives

Delineate basic guidelines for assisting the client with foods and fluids.

Explain why an upright position is best for eating.

Provide care before and after each meal

Discuss role of nursing assistant with clients receiving tube feedings or parenteral nutrition.

Identify which foods or fluids are considered fluid intake.

Use various adaptive devices that disabled clients may use to feed themselves.

18 Assist with eating difficulties (tape 41)

Assessment Strategies

in a written/oral examination

in a performance demonstration

Criteria

Your performance will be acceptable when:

you report pertinent observations relative to difficulty swallowing or with appetite or with gastric distress

you feed client who has difficulty swallowing

Learning Objectives

Outline care for one who is vomiting.

Explain importance of reporting complaints of gastric distress (nausea, anorexia, heartburn, indigestion).

Identify major hazards of dysphagia.

Incorporate measures for feeding clients who have difficulty swallowing.

19 Measure intake and output (tape 42)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Measuring Intake and Output Performance Task

Criteria

Your performance will be acceptable when:

you measure intake and output according to the criteria checklist

you calculate intake and output accurately

you provide fluid intake during shift

you record intake and output accurately on required forms

Learning Objectives

Identify basic principles of fluid balance to maintain a healthy body.

Explain why fluid balance is so critical to general health.

List reasons for recording intake and output.

Record intake and output.

20 Assist client with bladder elimination (43)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Giving the Bedpan or Urinal Performance Task

Criteria

Your performance will be acceptable when:

you toilet clients using bedpan, urinal or commode according to the criteria checklist

you report observations relative to urinary elimination

Learning Objectives

Describe the principles of infection control in regard to toileting.
Describe characteristics (COCA) of normal urine and urination
Place client on a bedpan and/or commode and with the urinal.
Explain the importance of keeping the client's skin clean and dry
Identify observations relative to elimination that need to be reported

21 Assist client with bowel elimination (tape 45)

Assessment Strategies

in a written/oral examination
in a performance demonstration

Criteria

Your performance will be acceptable when:

you toilet clients on demand or according to schedule
you report pertinent observations relative to bowel elimination
you follow infection control practices relative to infectious wastes
you keep perineal area clean and dry

Learning Objectives

Identify infection control practices that are essential in regard to toileting.
Explain importance of keeping client's skin clean and dry.
Outline factors that can affect normal bowel elimination.
Determine observations that need to be reported.
Assist clients meet elimination needs.

22 Facilitate alternative methods of elimination (urinary and bowel)

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

you modify assessments techniques to reflect variations across the lifespan
you maintain aseptic technique
you verify physician's orders
you select appropriate equipment for enema, ostomy care, specimen collection, and catheterization
you explain procedure to client
you perform intervention according to designated procedure/checklist
you document actions and observations
you recognize and report significant deviations from norms

Learning Objectives

Distinguish between fleets, tap water, and retention enemas and describe when each is used.
Identify safety precautions to take/nursing interventions to be carried out for the client before, during, and after enema administration.
Recognize the different types of bowel diversions and implications for altered elimination patterns.
Identify factors which contribute to skin/stoma damage and the nursing to make/interventions to carry out to maintain skin integrity.
Cite how often disposable ostomy appliances should be changed and the measures to control odor.
Describe techniques to prevent complications which can occur during/following an ostomy irrigation.

Identify situations in which urinary catheterization, straight or indwelling, is required.
Compare and contrast the procedure for male and female catheterization.
Describe nursing interventions to prevent catheter-associated urinary infections during catheter insertion, maintenance, and irrigation.
Identify clinical situations in which catheter irrigation, intermittent/continuous, is required.
Identify areas for potential contamination during catheter/bladder irrigation procedures.
Indicate techniques for insertion and maintenance of supra-pubic catheters.

23 REVIEW: Demonstrate specimen collection specimen collection procedures

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

- you modify procedure to reflect variations across the lifespan
- you maintain standard precautions
- you select appropriate equipment
- you explain procedure to client
- you follow specific directions for equipment according to designated procedure/checklist
- you document actions and observations
- you recognize and report significant deviations from norms

Learning Objectives

Discuss the reasons that certain specimens/cultures (wound, sputum, throat, urine, stool, gastric, blood glucose) are ordered.
Discuss the differences between aerobic and anaerobic cultures.
Describe the procedure for obtaining a throat, sputum, urine, stool, or across the life span.
Identify procedure for sending cultures/specimens to lab.
Determine why a culture/specimen is obtained before antibiotics are started.
Define hemocult and gastrocult tests.
Describe how to utilize the test strip when testing urine, stool, or gastric comments.
Indicate when blood glucose monitoring should be performed.
Identify normal blood glucose levels across the life span.
Indicate infection control techniques to use with blood glucose monitoring equipment.
Compare techniques for acquiring the blood sample for blood glucose monitoring across the life span.

24 Assist with ambulation (tape 57)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Ambulation with Transfer Belt Performance Task

Criteria

Your performance will be acceptable when:

- you assist client to walk while using the gait/transfer belt according to criteria checklist
- you assist client in using adaptive equipment as required by the plan of care including cane, crutches, walker
- you promote client independence (participation) using verbal and nonverbal techniques within the limitations of the individual client's impairments

Learning Objectives

Identify adaptive equipment to assist with ambulation as outlined in the plan of care.
Promote independence of clients within the limitations of their physical, emotional, and intellectual impairments.

Assist the individual to use mobility aids (cane, crutch, walker,).
Outline the steps to ambulate an individual using the gait/transfer belt.
Describe actions to be taken when client is falling.

25 Use client transfer techniques (tape 58)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Transferring Performance Task

Criteria

Your performance will be acceptable when:

you transfer client with one person assisting using the transfer belt according to criteria checklist

you transfer client with two people using the transfer belt according to criteria checklist

you use proper body mechanics during all transfers

you use the variety of devices available while transferring clients, such as the sliding board

Learning Objectives

Use proper body mechanics in all transfers.

Practice principles of safety in all transfers.

Outline the procedure for transferring a client with a transfer belt with assistance of one person.

Outline the procedure for transferring a client with a transfer belt with assistance of two people.

Interact with clients transferring independently such as when using the sliding board.

Manipulate various removable or movable parts of a wheelchair.

26 REVIEW: Perform tracheostomy care and suctioning procedures (oral, nasal, pharyngeal, and tracheostomy)

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

you adapt procedure to reflect variations across the lifespan

you maintain adequate oxygenation

you verify that there is a backup tracheostomy kit available

you maintain aseptic technique

you explain procedure to client

you follow designated procedure/checklist

you document actions and observations

you recognize and report significant deviations from norms

Learning Objectives

Identify clinical situations that would require oral-pharyngeal, nasal, and/or tracheostomy suctioning.

Describe when medical versus surgical asepsis is required for suctioning.

Describe the equipment/supplies needed for the various types of suctioning.

Describe the procedure for oral-pharyngeal, nasal, and tracheostomy suctioning of a client across the life span.

Discuss methods of communication for a client with a tracheostomy tube.

State assessment data for evaluating the effectiveness of suctioning.

Describe the process for providing tracheostomy care.

Recognize, report, and document significant deviations from the norms when suctioning or providing trach care on a client.

27 **REVIEW: Maintain enteral tubes (feeding, irrigation, suction)**

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

- you modify procedures to reflect variations across the lifespan
- you maintain aseptic technique
- you select appropriate equipment
- you explain procedure to client
- you determine appropriate placement
- you implement measure to prevent displacement of tube
- you follow medical orders and designated procedures/checklists: feedings/irrigation/suction
- you document actions and observations
- you recognize and report significant deviations from norms

Learning Objectives

- Identify equipment required for parenteral medications.
- Identify techniques for preparing drugs to administer intradermal, subcutaneous, and intramuscular routes.
- Identify injection sites.
- Describe techniques for safe administration of injections.

28 **REVIEW: Administer medications via the enteral route (oral/tube/rectal)**

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

- you modify procedure to reflect variations across the lifespan
- you follow aseptic technique
- you verify medical orders
- you identify the client
- you check for client allergies
- you verify the correct drug including expiration date
- you verify the correct route
- you verify the correct time
- you verify the correct dose
- you verify all information three times
- you explain to client
- you follow designated procedures/checklists: oral/tube/rectal
- you document actions and observations
- you calculate correct amount to administer

Learning Objectives

- Identify clinical situations in which a nasogastric (NG) tube with suction is indicated.
- Identify the purpose of suction, the "blue pigtail," and irrigation of a nasogastric tube.
- Contrast criteria that would be assessed to determine whether the NG tube is functioning properly.
- Differentiate between nasogastric and PEG (percutaneous enteral gastrostomy) feeding tubes.
- Identify long-term vs short-term situations in which enteral feedings are required.

Compare and contrast techniques of intermittent and continuous feedings.

Describe the procedure of giving a tube feeding, including checking placement/residual and positioning of the client.

Identify techniques to maintain integrity of the skin and mucous membranes for clients with nasogastric or PEG tubes.

Identify complications of tube feedings and appropriate nursing interventions.

Identify various preparations of drugs that can be administered orally, rectally, and through a feeding tube.

Describe techniques for effective delivery of medication through a feeding tube

Indicate when feeding tube medications can and/or should be crushed or dissolved in fluid.

Describe the advantages and disadvantages to the feeding tube route of medication administration.

Identify client and clinical contraindications to administering feeding tube medications.

29 REVIEW: Administer medications via topical, transdermal, eye, ear, inhalation, and vaginal routes

Assessment Strategies

in the laboratory through a simulation or role-play

Criteria

Your performance will be successful when:

you modify procedure to reflect variations across the lifespan

you maintain aseptic technique

you verify medical orders

you follow the five rights

you select appropriate equipment

you calculate correct amount to administer

you select appropriate site

you administer medication according to designated procedure/checklist

you document actions and observations

you recognize and report significant deviations from norms

Learning Objectives

Identify various preparations of drugs that can be administered via the oral, rectal, eye, ear, inhalation, vaginal, and topical routes across the life span.

Describe techniques to enhance oral medication absorption.

Differentiate between oral, buccal, and sublingual routes.

Describe the advantages and disadvantages to the oral, eye, ear, inhalation, vaginal, topical, and rectal route of medication administration.

Identify client and clinical contraindications to administering oral, rectal, and feeding tube medications.

Indicate how principles of asepsis differ for the administration of these medications.

Review the appropriate abbreviations for the eye and the ear.

Discuss how to teach a client proper use of a metered dose inhaler (MDI) to receive the recommended dose and avoid excessive inhalations.

Identify which clients would benefit from using a spacer to receive medications through a MDI.

Review how to determine how much medication is left in the MDI.

Describe procedure for administering medications through an ultrasonic nebulizer.

Determine two to maintain clean equipment with use of an MDI/nebulizer in the long-term care setting or in the home setting.

Discuss pediatric and geriatric considerations with administration of medications through ultrasonic nebulizer or MDI.

Recognize, through the use of medication resources, pertinent laboratory tests related to medication administration.

30 Use restraining devices (tape 24)

Assessment Strategies

in a written/oral examination

in a performance demonstration by completing the Application of Soft Vest Restraint Performance Task

Criteria

Your performance will be acceptable when:

you apply soft vest restraint according to criteria checklist

you use restraint devices when directed by the professional staff

you use devices considered as restraints according to facility policies

Learning Objectives

Describe the steps in applying a soft vest restraint.

Demonstrate a quick-release knot.

Detail safety precautions required when a restraint is used for a client.

Clearly explain at least four dangers when using physical restraints.

Differentiate devices that are considered restraints (chemical and physical) from those that are not.

31 Use restraining alternatives (tape 25)

Assessment Strategies

in a written/oral examination

in a performance demonstration

Criteria

Your performance will be acceptable when:

you employ alternative measures to restraints to maintain proper position and safety

you use restraint alternatives when directed by professional staff

you maintain client rights

Learning Objectives

Explain purposes of using restraint alternatives.

Compare examples of restraint alternatives.

Explain who is responsible for determining the use of restraint alternatives.

Northeast Wisconsin Technical College
10-543-129 Paramedic to ADN Clinical
Course Outcome Summary

Course Information

Description Introductory clinical emphasizes basic nursing skills and application of nursing process to clients and families across the lifespan. Emphasis placed on assessment, relationships, communication, data collection, documentation, and medication administration.

Instructional Level Associate Degree

Total Credits 2.00

Core Abilities

- 1 Communicate Effectively
- 2 Demonstrate Community and Global Accountability
- 3 Demonstrate Personal Accountability
- 4 Solve Problems Effectively
- 5 Think Critically and Creatively
- 6 Value Individual Differences and Abilities
- 7 Work Cooperatively and Professionally

Course Competencies

1 Adhere to principles of safety and infection control.

Assessment Strategies
in a clinical setting.

Criteria

Your performance will be successful when:

- you come to clinical mentally and physically prepared to provide safe and effective care.
- you protect clients from injury, infection, and harm.
- you protect self and others from injury, infection, and harm.
- you maintain a safe, effective care environment.
- you use available technology in accordance with agency policies and procedures.
- you request assistance when needed.

2 Administer medications safely.

Assessment Strategies

in a clinical setting.

Criteria

Your performance will be successful when:

you recall client medication information including classification, indication, action, dosage, side effects, interactions, and nursing implication.

you calculate medication dosages and IV rates correctly.

you check "five" rights and client identifiers prior to medication administration.

you perform appropriate assessments prior to, during, and after medication administration.

you follow correct procedures in preparing and administering medications.

you administer medications within the agency-allotted timeframe.

you collect data related to the effects of medications administered.

you relate clients' medications to their health status.

3 Communicate therapeutically with clients and families.

Assessment Strategies

by communicating therapeutically in a clinical setting.

Criteria

You modify communication according to developmental level.

You use therapeutic communication techniques.

You maintain nurse-client relationship.

You maintain professional boundaries with clients.

You accommodate for barriers to communication.

You communicate in ways that honor diversity.

Learning Objectives

Demonstrate therapeutic communication techniques with clients.

Adapt communication techniques to individual client.

Analyze therapeutic, verbal, and nonverbal communication skills when working with clients and families.

Demonstrate therapeutic relationships with clients and families within professional boundaries.

4 Collect data with assistance.

Assessment Strategies

by collecting data.

in a clinical setting.

Criteria

Criteria:

You perform assessments using techniques correct for clinical setting.

You collect data in a timely manner according to clinical site expectations.

You assess environmental and cultural barriers that impact data collection.

You utilize multiple resources when collecting data.

You verify abnormal data with an experienced practitioner.

Learning Objectives

Differentiate between subjective and objective data.

Utilize data from health history to provide nursing care.

Report significant data to instructor and/or appropriate nursing staff in a timely manner.

Provide for client privacy and confidentiality when collecting data.

Utilize health facility resources to obtain data.

Utilizes approved medical abbreviations and terminology in reporting data.

5 Report abnormal data.

Assessment Strategies

by reporting abnormal data.
in a clinical setting.

Criteria

Criteria:

You recognize normal and abnormal assessment findings.

You report abnormal data to the person with responsibility for data.

You report abnormal data in a timely fashion according to clinical site expectations.

Learning Objectives

Differentiate between abnormal and normal data with assistance.

Utilize agency documentation system to record abnormal data.

Report significant data to instructor and/or appropriate nursing staff in a timely manner.

Utilizes approved medical abbreviations and terminology in reporting abnormal data.

6 Document effectively.

Assessment Strategies

in a clinical setting.

Criteria

Your performance will be successful when:

you document complete, accurate, pertinent information in a timely manner.

you complete documentation according to agency guidelines (format, timing, abbreviations, etc.).

you use appropriate terminology, spelling and grammar in written communications.

7 Provide basic nursing cares.

Assessment Strategies

by providing basic nursing cares.
in a clinical setting.

Criteria

Criteria:

You assist client with activities of daily living (ADL's).

You implement nursing interventions that reflect the needs of diverse populations.

You implement safe and effective nursing care in a timely manner.

You provide relevant health care information.

You demonstrate honesty, patience, and sensitivity.

You modify a standard plan of care based on client's needs.

Learning Objectives

Adhere to agency policies and procedures in providing nursing care to clients.

Describe the nursing process as a problem-solving and decision-making tool for client care.

Utilize problem-solving techniques when providing client care.

Prioritize nursing care in a safe manner.

Provide required nursing care.

Collaborate with nursing staff to modify nursing care.

Utilize time-management techniques when providing nursing care.

8 Perform nursing skills following established standards.

Assessment Strategies

by performing various nursing skills in a clinical setting.

Criteria

Criteria:

You locate and review agency policies and procedures related to skills.

You assemble all equipment and supplies.

You prepare the client for the procedure.

You inform the client of activities throughout the procedure.

You carry out the steps of the skill correctly and efficiently.

You maintain the client's privacy and dignity.

You assess and intervene to meet the needs of the client throughout the procedure.

You evaluate and document the client's response to the procedure.

Learning Objectives

Adhere to agency policy and procedures in all aspects of health care delivery.

Utilize problem-solving techniques when providing nursing skills.

Demonstrate nursing skills that are respectful of client rights.

Provide for client privacy and confidentiality when providing nursing skills.

Utilize agency documentation system to record pertinent information clearly, accurately, and legibly.

Performs assigned nursing skills to meet client needs.

9 Reinforce standardized teaching plans.

Assessment Strategies

in a clinical setting.

Criteria

Your performance will be successful when:

you provide relevant, accurate health care information.

you collect data related to learning needs, readiness and barriers.

you use appropriate teaching and learning principles when implementing the teaching plan.

you collect data related to learning outcomes.

you suggest modifications to the teaching plan if indicated.

10 Participate in planning nursing care.

Assessment Strategies

by planning care for assigned clients in the clinical setting.

Criteria

You participate in pre-clinical discussion of your client.

You demonstrate prior theoretical preparation.

You demonstrate preparation of predictable psychomotor skills.

You set priorities for cares.

You collaborate with the staff when organizing cares.

You utilize resources appropriate to planning of care.

You participate in pre- and post-clinical discussion of your client.

Learning Objectives

Collaborate with the client, family, and health care team to plan client outcomes and interventions.

Integrate assessment data with client's current condition to plan care.
Apply theoretical concepts in planning care.
Determine priorities in planning care.
Plan for performance of actual/potential psychomotor skills.
Plan care identifying and utilizing appropriate resources.
Utilize the nursing process to plan care.

11 Implement established plans for client care.

Assessment Strategies
in a clinical setting.

Criteria

Your performance will be successful when:

you determine and support client preferences.
you prepare clients for interventions.
you perform nursing skills competently.
you demonstrate caring behaviors towards clients and families.
you respond to clients in distress.
you provide needed cares efficiently and effectively.
you ensure clients' ADLs are completed.
you consider the needs of a diverse group of clients when implementing nursing cares.
you provide nursing cares for more than one client.

12 Participate in collaborative client care.

Assessment Strategies
in a clinical setting.

Criteria

Your performance will be successful when:

you use appropriate channels of communication.
you report complete, accurate, pertinent information to instructor and staff.
you maintain effective communication with peers, staff, and instructor.
you convey mutual respect, trust, support, and appreciation for other members of the health care team.
you assist others to ensure safe and effective care.
you contribute to projects, discussions, and post-conferences.
you seek information from other health care team members.
you apply conflict resolution and problem solving skills as appropriate.
you make and communicate adjustments in team assignments.

13 Provide complex cares under direct supervision for clients across the life span.

Assessment Strategies
by performing cares in the clinical setting.

Criteria

You consider the clients psychosocial needs.
You consider the clients developmental needs.
You consider the clients learning needs.
You consider the clients physical needs.
You consider the clients spiritual and cultural needs.

You collaborate with others.
You complete cares in an organized and timely manner.
You demonstrate clinical interventions appropriate to situation.
You complete cares within the scope of practice.
You report concise and pertinent client data.
You demonstrate professional behavior.

Learning Objectives

Individualize care based on the psychosocial, developmental, and learning needs of client.
Individualize care based on the spiritual and cultural needs of client.
Individualize care based on physical assessment.
Collaborate with the client, family, and health care team to provide nursing care.
Demonstrate nursing care in an organized and timely manner.
Implement nursing interventions based on assessment data.
Demonstrate safe nursing care within the scope of practice.
Report concise and pertinent client data utilizing nursing process.

14 Use management skills in providing client care.

Assessment Strategies

in a clinical setting.

Criteria

Your performance will be successful when:

you complete cares in an organized and timely manner.
you organize client care activities to meet client needs.
you demonstrate flexibility in adapting to changing situations.
you accept delegated tasks only if appropriate.
you use principles of priority setting in managing a group of clients.
you ensure that delegated acts are completed.
you provide feedback regarding performance of delegated acts.
you evaluate the effectiveness of own management skills.

15 Provide health care instruction to clients.

Assessment Strategies

by performing client teaching in the clinical setting.

Criteria

You identify client needs.
You determine cognitive barriers to learning.
You determine physical barriers to learning.
You determine environmental barriers to learning.
You determine client readiness to learning.
You accommodate learning to meet client needs.
You initiate teaching methods appropriate for clients.

Learning Objectives

Individualize client teaching based on client needs.
Assess barriers to learning.
Assess client learning readiness.
Utilize the nursing process to formulate the teaching plan.

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Mid-State Technical College
Written Notification to the State Board of Nursing
related to adding a location for the Nursing Program
February 6, 2013

This is a report prepared for Wisconsin State Board of Nursing to notify the Board of an additional location for the nursing program at Mid-State Technical College. This is a planned change with expected implementation date of August 2013.

1. Name of the governing organization and the Nursing Education unit:

Nursing Department
Mid-State Technical College (MSTC)
500 32nd Street North
Wisconsin Rapids, WI 54495

2. Current teaching locations for the program and all program options:

Currently all nursing courses are offered at the college's primary location – Wisconsin Rapids Campus. However, clinical courses are offered throughout the district and theory courses have been offered via video conferencing to the Marshfield campus and online throughout the district.

Program Options:

- Generic ADN program
- LPN to ADN Mobility

3. Current program enrollment and any plans for changes in enrollment:

Currently we accept 40 new students every August and January resulting in a possibility of 160 over four semesters of nursing courses. There are no plans to increase enrollment at this time. The request is relocate 1 lab section to the Marshfield campus. That means we will have one less section in Wisconsin Rapids. There will not be any increase in students admitted.

4. The name, credentials and contact information of the nurse administrator:

Mary Moss RN MSN EdD
Service and Health Associate Dean – Nursing
Mid-State Technical College
500 32nd Street North Wisconsin Rapids, WI 54494
Phone 715/422-5510 Fax 715/422-5313 Email: mary.moss@mstc.edu

5. The date the planned change will become effective:

We would like to implement classes at the MSTC Marshfield campus in August 2013.

6. The rationale for the change:

MSTC is located in central Wisconsin which is a relatively rural area. The college's primary campus is located in Wisconsin Rapids. The college has 3 additional campus locations and they are each about 35-40 miles apart. Currently the skills lab courses are offered at the Wisconsin Rapids campus only. Rationale is 1) to decrease the drive time for students and increase their access to practice lab time, and 2) theory courses and clinical courses are available in the north end of the district and this requested change would allow skills lab courses to be offered in this area thereby allowing students to complete the complete nursing program at this Marshfield location.

7. Documentation of Board of Nursing approval, and NLNAC approval:

This is formal notification to the Wisconsin Board of Nursing. A formal, written Substantive Change Report was submitted 2-6-13 to the National League for Nursing Accrediting Commission.

8. Copies of notifications sent to students and/or other constituents as appropriate:

There have been no notices sent to students prior to NLNAC approval. For Fall 2013 courses, registration and enrollment will open April 25, 2013. Marshfield course offerings will be listed in the Fall 2013 class schedule.

Relocation or Establishment of an additional Location

1. Description of additional location including address and ownership of the property:

Mid-State Technical College - Marshfield Campus
2600 W. 5th Street Marshfield WI 54449
Phone: 715/387-2538 Fax: 715/389-2864

2. Photographs of the new space or additional location:

Photographs of the Marshfield campus are attached.

3. Documentation of faculty involvement in decision making:

The decision to open a nursing skills lab on the Marshfield campus was a college decision to better serve students in the north end of the district. Faculty were not actually involved in the decision making. Dr. Mary Moss, the Nursing Associate Dean was involved in the decision making. Since that time, faculty have been volunteering for reassignment to the Marshfield campus. If approved by NLNAC, the plan is to have one nursing faculty relocated to the Marshfield campus on a full time basis, and one part time faculty assigned to the Marshfield campus one day per week.

4. Documentation of internal approval processes

Planning meetings held and Process for Internal approval processes:

- 10-10-12 with Dr. Mary Moss, Janet Newman Dean of Service and health, Brenda Dillenburg Campus Administrator of the Marshfield campus. Decision made to proceed with grant application to cover skills lab expenses, and continue with approval process through NLNAC.
- 10-29-12 meeting Mary Moss and Janet Newman to further discuss option to have nursing skills lab in Marshfield.
- 10-31-12 Advisory Committee meeting and agreement to continue process
- 11-2-12 inventory of skills lab supplies and equipment needed to start a nursing skills lab at the Marshfield campus.
- 11-8-12 Mary Moss met with Janet Newman, Dean of Service and health, and Ann Krause-Hanson Vice President of Academic Affairs to discuss general Purpose Revenue grant applications. Decision was made to proceed with GPR application to cover skills lab expenses.
- 11-15-12 Letter requesting approval for Marshfield site location sent to Dr. Charlotte Price at NLNAC.
- 11-29-12 Mary Moss met with Robin Beeman at University of Wisconsin Eau Claire campus in Marshfield. Discussed offering skills lab classes at the MSTC campus in Marshfield. At this time there is no desire to increase the number of students.
- 12-7-12 GPR grant submitted to improve access for nursing students in the north half of the MSTC district by offering all Nursing courses in the Marshfield area.
- 1-7-13 Letter received from NLNAC, Dr. Cordia Starling that a formal Substantive Change report was needed. MSTC Administration notified and decision made to continue forward.

5. Documentation of Governing Organization/Institution accrediting agency approval and state Board approval if required:

MSTC is HLC accredited through the North Central Association. The college is currently using the AQIP process to maintain HLC accreditation. All of the college campuses were visited and the college as a whole was accredited at the time of the last visit

State Board of Nursing and NLNAC were notified.

6. Description of how the establishment of an additional location impacts all Six NLNAC Accreditation Standards

1. Standard 1 Mission and Governance

- There will be one nurse administrator for both locations.
- There will be one nursing program budget for both locations.
- The nursing faculty will work with the nurse administrator to cultivate new nursing partnerships in the northern end of the district.
- There will not be a nursing coordinator on the Marshfield campus.
- Nursing faculty on the Marshfield campus will be expected to attend all faculty meetings and assigned level meetings. The majority of these meetings will be held via videoconferencing to facilitate discussions.

2. Standard 2 Faculty

- The faculty located on the Marshfield campus will continue to report to Dr. Mary Moss the nursing administrator, as the faculty on the Wisconsin Rapids campus do.
- Faculty on the Marshfield campus will meet the same qualifications as the rest of the nursing faculty.
- Faculty orientation, and performance evaluations will be done by Dr. Mary Moss

3. Standard 3 Students

- Students on the Marshfield campus will have access to all of the same student services that other student on the Marshfield campus have access to. As listed above there are counseling, advising, disability services, technology support and library services available to students on the Marshfield campus. The main Financial Aid office is located in Wisconsin Rapids and is accessible through telephone, email or intermittent informational sessions brought to the Marshfield campus. These services are equitable to the services that the student on the Wisconsin Rapids campus have access to.

Bookstore & Sales: Textbooks for Marshfield scheduled courses may be purchased through the Bookstore which is located in the Business Office.

Computer Services: All computer labs are available for student use if a class is not scheduled during that time.

Counseling Services: Counseling services are available through Student Affairs. The office is open Monday through Friday from 7:30am - 4:00pm. Students may schedule an appointment by contacting the Student Affairs office at 715.389.7001.

Financial Transactions & Payments: Tuition payments may be made during regular Business Office hours: Monday - Thursday: 7:30am - 7:30pm, and Friday: 7:30am - 4:00pm.

Library: The library is open from 7:30AM - 6:00PM Monday through Thursday and 7:30AM - 4:00PM on Fridays during the fall and spring semesters. Summer hours are posted.

- Records for all nursing students will be securely stored electronically and will be password access only. These records are available on the college network which can be accessed in Wisconsin Rapids and in Marshfield.
- Program information documents will be the same for one nursing program despite two locations. Students will be informed in the class schedule of the locations in which they can access a class.

4. Standard 4 Curriculum

- There will be one unified curriculum for both locations. The mission/vision philosophy and program outcomes will all be the same. The course competencies for skills lab will be the same in Wisconsin Rapids and in Marshfield.
- Theory courses are based on a 1:1 ratio of credits to contact hours. Skills lab is 1:2 and clinical is 1:3. The skills lab courses in Wisconsin Rapids and in Marshfield will both follow this ratio.

5. Standard 5 Resources

- There will be one budget for the nursing program despite two locations
- The student in Marshfield will have the same access to Skills lab equipment and supplies. This is the reason for the supplemental GPR grant application.
- Technology and technology support are available at all MSTC campus locations
- Library resources are primarily accesses through online data bases. Though there are limited hard copy print books for nursing on the Marshfield campus. This may an area for improvement. However, The online nursing and health databases are available throughout the district. In addition there is a very large medical center located in Marshfield that allows students in that area access tot eh Medical Center library.

6. Standard 6 Outcomes

- There will be one SEP plan for the entire program.
- Data will be separated into cohorts to measure NCLEX, program completion and satisfaction indicators at each location.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

Name and Title of Person Submitting the Request: Jill M. Remy, Program Manager		Date When Request Submitted: 3/28/2013	
		Items will be considered late if submitted after 5 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before meeting for all other boards 	
Name of Board, Committee, Council: Board of Nursing			
Board Meeting Date: 4/11/2013	Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	How should the item be titled on the agenda page? UW-Eau Claire Bachelor of Science in Nursing Curriculum Change	
Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	Is an appearance before the Board being scheduled? If yes, by whom? <input type="checkbox"/> Yes by _____ (name) <input checked="" type="checkbox"/> No		Name of Case Advisor(s), if required:
Describe the issue and action the Board should address: Review, discuss and make motion relating to proposal to change BSN curriculum at UW-Eau Claire; make recommendations as needed.			
If this is a "Late Add" provide a justification utilizing the Agenda Request Policy:			
<u>Directions for including supporting documents:</u> 1. This form should be attached to any documents submitted to the agenda. 2. Documents submitted to the agenda must be single-sided. 3. Only copies of the original document will be accepted. 4. Provide original documents needing Board Chairperson signature to the Bureau Director or Program Assistant prior to the start of a meeting.			
Authorization:			
Jill M. Remy		3/28/2013	
Signature of person making this request		Date	
Supervisor signature (if required)		Date	
Bureau Director signature (indicates approval to add late items to agenda)		Date	



University of Wisconsin-Eau Claire

105 Garfield Avenue • P.O. Box 4004 • Eau Claire, WI 54702-4004

February 11, 2013

Dr. Carol Ott, Chair
Education and Licensure Committee
Wisconsin Board of Nursing
1400 E Washington Ave
PO Box 8935
Madison, WI 53708-8935

Dear Dr. Ott:

On behalf of Chair Rosemary Jadack and the faculty of the Department of Nursing of the College of Nursing and Health Sciences at the University of Wisconsin – Eau Claire, I am submitting required materials describing the revised BSN curriculum BSN program at UW-Eau Claire.

This major curriculum revision began several years ago, with the publication of the 2008 revision of the Essentials of Baccalaureate Education by the AACN. Our previous curriculum had been in place since the late 1990's and needed revision to conform with updated baccalaureate education essentials as well as with other key nursing education initiatives such as QSEN.

The process began with a revision in the BSN Program Student Learning Outcomes. Revisions were also made in the mission, vision, and philosophy of the Nursing Department, the curricular organizing framework and Level Student Learning Outcomes. The process has resulted in a revised curriculum consisting of 22 courses in a five-semester program. The prerequisites for the BSN remain unchanged.

We will be admitting the first class of the revised curriculum in early June 2013 so are submitting required descriptive materials somewhat more than three months in advance of that date. We have attached a Guide to the submitted materials that will explain the documents and how they speak to the Guidelines for Major Program Change of the Wisconsin Board of Nursing.

On the advice of Ms. Jill Remy, with whom the Chair of our Undergraduate Curriculum Committee recently spoke by telephone, we are submitting this material by February 15th in order to allow time for processing by all concerned parties prior to the next Board of Nursing meeting which we understand is in March. If you have questions or concerns, please do not hesitate to contact me; my contact information is below.

Sincerely,

Dean Linda K. Young, PhD, RN, CNE, CFLE
College of Nursing and Health Sciences
University of Wisconsin-Eau Claire
715.836.4904
younglk@uwec.edu

Excellence. Our measure, our motto, our goal.

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**University of Wisconsin – Eau Claire
College of Nursing and Health Sciences
Department of Nursing**

Guide to Materials Submitted to the Wisconsin Board of Nursing re: the BSN Curriculum Revision

Board of Nursing Item #	Required Documentation per Board of Nursing Guidelines for Major Program Change	Corresponding Document	Filename
1	Rationale for change	Described in the cover letter from Dean Linda Young	UWEC_CoverLetter_DeanYoung
2	Philosophy of nursing program/conceptual framework	<ol style="list-style-type: none"> 1. Philosophy 2. Organizing framework 	<ol style="list-style-type: none"> 1.UW-EC_2a_Philosophy 2. UW-EC_2b_Curricular_Organizing_Framework
3	Objectives/purpose of nursing program	<ol style="list-style-type: none"> 1. Mission/vision 2. Program/Student Learning Outcomes, BSN 3. Level learning outcomes, BSN 	<ol style="list-style-type: none"> 1. UW-EC_3a_Nursing_Department_Vision_Mission 2. UW-EC_3b_BSN_Program_Student_Learning_Outcomes 3. UW-EC_3c_BSN_Level_Learning_Outcomes
4	<p>Outlines for the first course(s) with expected terminal behaviors</p> <p>(Course syllabi include course number and title, number of credits, course description, course objectives, topical outlines, methods of instruction, and methods of evaluation of learning)</p>	<ol style="list-style-type: none"> 1. Revised BSN Curriculum Course Overview 2. Sample program of study, Revised BSN Curriculum (includes prerequisite courses) 3. Individual course syllabi <ol style="list-style-type: none"> a) Sophomore 2 Semester <ol style="list-style-type: none"> a. NRS 245 Pharmacology for Nursing Practice b. NRS 249 Normal and Therapeutic Nutrition in Nursing Practice c. NRS 257 Foundations of the Profession and Discipline of Nursing d. NRS 259 Foundations of Nursing Practice e. NRS 267 Practicum: Foundational Skills for Nursing Practice b) Junior 1 Semester <ol style="list-style-type: none"> a. NRS 317 Practicum: Advanced Skills for Nursing Practice b. NRS 327 Nursing Leadership and Systems I c. NRS 337 Nursing Care of Adults and Older Adults I d. NRS 347 Psychiatric and Mental Health Nursing c) Junior 2 Semester <ol style="list-style-type: none"> a. NRS 357 Nursing Care of Adults and Older Adults II b. NRS 359 Practicum: Nursing Care of Adults and Older Adults c. NRS 367 Community and Public Health Nursing d. NRS 376 Nursing Care of Women, Infants, and Families e. NRS 378 Practicum: Nursing Care of Women, Infants, and Families 	<ol style="list-style-type: none"> 1. UW-EC_4a_BSN_Curriculum_Overview 2. UW-EC_4b_BSN_Sample_Program_Study 3. The filenames of all 22 course syllabi begin with the course prefix and number (e.g., NRS 245)

		<ul style="list-style-type: none"> d) Senior 1 Semester <ul style="list-style-type: none"> a. NRS 424 Nursing Leadership and Systems II b. NRS 428 Practicum: Nursing Leadership I c. NRS 446 Nursing Care of Children and Families d. NRS 447 Practicum: Nursing Care of Children and Families e) Senior 2 Semester <ul style="list-style-type: none"> a. NRS 457 Nursing Care of Chronically Ill Patients and Their Families b. NRS 467 Seminar: Innovative Solutions to Complex Healthcare Problems c. NRS 477 Practicum: Nursing Leadership II d. NRS 487 Transition to Professional Nursing Practice 	
5	Plan for evaluation of revised curriculum	1. Plan for Evaluation of Achievement of Program/Student Learning Outcomes at end of program	UW-EC_5_Plan_Evaluation_Revised_Curriculum
6	Plan for utilization of faculty and clinical facilities for ongoing curriculum and for revised curriculum	1. Faculty & Clinical Facility Use - Excel document, sheet 1	UW-EC_6_Utilization_Faculty_Clinical_Facilities
7	Planned schedule for implementation of revised curriculum and termination of ongoing curriculum	1. Implementation and Termination Plan - Excel document, sheet 2	UW-EC_7_BSN_Implementation_Termination_Plan
8	Plan for facilitation of students who fail a course when it is offered for the last time.	1. Facilitation of Students in Case of Failure - Excel document, sheet 3	UW-EC_8_Facilitation_Student_Failure

Philosophy of the Department of Nursing

Nursing is a discipline that practices. In our practice, we protect, promote, and optimize health and abilities; prevent illness and injury; alleviate suffering through the diagnosis and treatment of human response; and advocate in the care of individuals, families, communities, and populations (American Nurses Association, 2003). In our practice, evidence underscores what we do and client education assumes a primary role. In all settings, holism shapes our approach and expands our effectiveness. Although deliberate and purposeful, to improve world health we also remain imaginative and continually search for the unforeseen in our practice.

Nursing is a discipline that leads. Leadership demands us to confront what is and imagine what could be. We hold and articulate our own values and visions with conviction. But in challenging what exists, we also recognize that accomplishing commonly-shared goals about health requires collaboration that emerges from inclusive leadership. Inclusion is expanded because professionally-educated nurse leaders strive to understand people who are unlike them. Furthermore, leadership insists that we persuade rather than coerce, appreciate the power of mutual information, and live peacefully with irony and paradox. As architects, then, nurse leaders design strategy, influence policy, and advocate for clients in political places. As designers, nurse leaders inspire others to seek environmentally-beneficial solutions. Both strategy and inspiration call for knowledge, energy, and courage.

Nursing is a discipline that generates, translates, and applies knowledge. Research, as the process of knowledge generation, uses data that are systematically collected and judiciously interpreted to help us answer questions and construct interventions. We engage in this process with students and colleagues, as well as with other campus and community partners. In this collaboration, where we respect traditional and emerging approaches to knowledge generation, we study issues that influence nursing practice, education, and administration. Our goal is that our research launches wide-ranging conversations, contributes to a culture of scholarship in all settings, and advances and promotes world health and well-being.

Nursing is a discipline that educates. Because nursing education is a liberal education, faculty and students reflect thoughtfully, commit to innovation, and exhibit a spirit of scholarship. As educators, we value multiple evidence-based methods of teaching and honor numerous ways of learning. Nursing education serves society where we strive to practice wisely and try to understand unpredictability and complexity. At the same time, nursing education is a reflective haven where we can disagree, examine, and dialogue in ways that incite and enrich us. Unmistakably, then, preparing students for the workforce is not our only goal as we both serve society and retreat from society in our nursing education. More broadly, improved healthcare outcomes for all people direct our teaching and learning. Freedom and lifetime growth for both students and faculty draw us onward. With our rekindled effort, this nursing education will become more accessible to all.

As we *practice, lead, generate knowledge, and educate*, several convictions structure our actions. First, the American Nurses Association Code of Ethics for Nurses (Fowler, 2008) guides our decisions. Further, a commitment to a person-centered collaborative relationship secures what we do. This commitment compels us to embrace diverse peoples and understand distinctive lifestyles from all global places and positions. By foregrounding ethics and relationship, a seamless link merges our roles in practice, leadership, knowledge generation, and education.

In our blended roles, it is our curiosity and wonder—our search for opportunity and sense of inquiry—our ability to create associations and see patterns—that lead us forward. In this way, we focus on social justice, environmental protection, and the promotion of world health through our engagement with and contributions to the human health experience.

American Nurses Association. (2003). *Nursing's social policy statement* (2nd ed.). Silver Spring, MD: Author.

Fowler, M. D. M. (Ed.). (2008). *Guide to the Code of Ethics for Nurses: Interpretation and application*. Silver Spring, MD: American Nurses Association.

**UW-Eau Claire
College of Nursing and Health Sciences
Department of Nursing**

Nursing Curricular Organizing Framework

Core Concepts

- **Nurse as *leader***
- **Nurse as *scholar***
- **Nurse as *professional***
- **Nurse as *global citizen***

- **Nurse as *leader***

Empowering others and stimulating change to reach a shared vision.

- **Nurse as *scholar***

Drawing on a liberal education to reason critically, investigate carefully, and think creatively to build an advancing discipline and affect patient outcomes.

- **Nurse as *professional***

Advocating vigorously for the profession and providing nursing care that is based on the Code of Ethics.

- **Nurse as *global citizen***

Enlarging an understanding of the world that expands inclusivity, embraces diversity, and strengthens cultural sensitivity to reduce health disparity.

Approved by the Nursing Department September 16, 2010

University of Wisconsin-Eau Claire
College of Nursing and Health Sciences
Department of Nursing

Vision: Educating nurse leaders to challenge boundaries and build bridges for a healthier world.

The mission of the UW-Eau Claire Department of Nursing is to:

- educate nurses to lead within diverse, complex environments
- promote health and the public good through ethical leadership, collaboration, and practice
- contribute to knowledge development for health and nursing
- serve the broader missions of the College and University

Nov 24, 2008

University of Wisconsin – Eau Claire
Department of Nursing
Bachelor of Science in Nursing Program Student Learning Outcomes

Students graduating from UW-Eau Claire with the Bachelor of Science in Nursing demonstrate accomplishment of the AACN Baccalaureate Essentials* through:

1. Integration of liberal and nursing education, with particular distinction in:
 - leading change in complex health care environments.
2. Organizational and systems leadership for patient safety and quality care, with particular distinction in:
 - developing effective working relationships for quality improvement and optimizing patient care outcomes.
3. Scholarship for evidence-based practice, with particular distinction in:
 - providing leadership in the synthesis and application of evidence with integration into changing standards of care.
4. Information management and application of patient care technology.
5. Understanding of health care policy, finance and regulatory environments, with particular distinction in:
 - advocacy for individuals, families, and communities.
6. Interprofessional communication and collaboration for improving patient health outcomes, with particular distinction in:
 - delivery of evidence-based, patient-centered care;
 - coordination of care across settings and through the health-illness trajectory.
7. Clinical prevention and population health for optimizing health, with particular distinction in:
 - analysis of population health needs, determinants, and resources, and development of action strategies.
8. Professionalism and professional values, with particular distinction in:
 - ethical practice, social responsibility, a commitment to social justice, and global citizenship;
 - delivery of culturally competent care within diverse settings and/or populations.
9. Beginning competence in baccalaureate generalist nursing practice, with particular distinction in:
 - holistic, relationship-based care incorporating therapeutic use of self;
 - integration of nursing concepts, human responses, and safe and competent nursing care;
 - use of nursing process to effect highest quality health outcomes.

(* *The Essentials of Baccalaureate Education for Professional Nursing Practice*, AACN 2008)

UW-Eau Claire Bachelor of Science in Nursing - Level Learning Outcomes

BSN Program Student Learning Outcomes	Level 3 – End of Senior Year “Overall Student Learning Outcome” At the end of Level 3 the student will ...	Level 2 – End of Junior Year At the end of Level 2 the student will ...	Level 1 – End of Sophomore Year At the end of Level 1 the student will ...
I Integration of liberal & nursing education	<ul style="list-style-type: none"> • 3a Apply knowledge of social and cultural factors to the nursing care of diverse patients and populations • 3b Demonstrate cultural competence in professional interactions 	<ul style="list-style-type: none"> • 2a Demonstrate approaches for developing and maintaining intercultural relationships with patients and healthcare professionals 	<ul style="list-style-type: none"> • 1a Describe cultural sensitivity and cultural humility within the context of professional nursing practice.
II Organizational & systems leadership for patient safety & quality care	<ul style="list-style-type: none"> • 3a Apply national patient safety resources and quality standards in practice settings (virtual, simulation, or actual clinical setting) • 3b Demonstrate leadership and communication to effectively implement safety and quality. • 3c Demonstrate management of resources to provide cost-effective care. 	<ul style="list-style-type: none"> • 2a Identify quality improvement initiatives in a practice setting • 2b Identify gaps between local clinical settings and national best practice • 2c Describe processes used in understanding causes of error and allocation of responsibility and accountability (such as root cause analysis) • 2d Discuss potential and actual impact of national safety resources, initiatives, and regulations on/in practice settings • 2e Summarize leadership styles and key leadership skills as they affect healthcare organizations and systems • 2f Describe systems and organizational models. 	<ul style="list-style-type: none"> • 1a Identify national patient safety resources and quality standards in practice settings • 1b Describe factors that create a culture of safety within an organization. • 1c Examine human factors and other basic safety design principles as well as commonly used unsafe practices in practice settings
III Scholarship for EBP	<ul style="list-style-type: none"> • 3a Integrate evidence, clinical judgment, interprofessional perspectives, and patient preferences in planning, implementing, and evaluating outcomes of care. • 3b Collaborate in resolving discrepancies between identified standards and current practice through the application of best evidence. 	<ul style="list-style-type: none"> • 2a Investigate evidence related to discrepancies between identified standards and current practice that may adversely impact patient outcomes. • 2b Participate in the synthesis of evidence. 	<ul style="list-style-type: none"> • 1a Explain the interrelationships among theory, practice, and research • 1b Participate in the process of retrieval and appraisal of evidence based on a clinical question.

<p>IV Information management & patient care technology application</p>	<ul style="list-style-type: none"> • 3a Balance emotional and social intelligence with scientific reasoning • 3b Analyze health quality data to evaluate and improve quality of care within systems and populations • 3c Use patient care technology to safely and effectively deliver nursing care. 	<ul style="list-style-type: none"> • 2a Use standardized language that reflects nursing diagnosis and interventions that contribute uniquely to individual and family outcomes. • 2b Uphold ethical standards r/t data security, regulatory requirements, confidentiality, and client's right to privacy 	<ul style="list-style-type: none"> • 1a Describe actions to uphold ethical standards r/t data security, confidentiality and client's right to privacy in both professional and personal (e.g., social networking) spheres • 1b Use information technology resources to investigate and document patient care • 1c Analyze personal emotional and social intelligence strengths and areas for improvement • 1d Transfer principles of scientific reasoning to the nursing clinical decision making processes
<p>V Understanding of health care policy, finance, & regulatory environments</p>	<ul style="list-style-type: none"> • 3a Analyze recommendations for changes in health policy and financing to meet an identified healthcare need/disparity. 	<ul style="list-style-type: none"> • 2a Investigate the impact of healthcare policy and regulation on issues of access, equity, affordability, and social justice. 	<ul style="list-style-type: none"> • 1a Describe how health care is organized and financed. • 1b Describe legislative and regulatory processes related to healthcare.
<p>VI Interprofessional communication & collaboration for improving health outcomes (QSEN KSAs for <i>Teamwork and Collaboration</i>)</p>	<ul style="list-style-type: none"> • 3a Value the influence of system solutions in achieving effective team functioning • 3b Identify system barriers and facilitators of effective team functioning • 3c Examine strategies for improving systems to support team functioning • 3d Communicate and collaborate with team members to achieve care goals, adapting own style of communicating to needs of the team and situation • 3e Assume role of team member or leader based on the situation • 3f Delegate patient care tasks, consistent with legal and professional standards, to other members of the healthcare team 	<ul style="list-style-type: none"> • 2a Appreciate the risks associated with handoffs among providers and across transitions in care • 2b Follow communication practices that minimize risks associated with handoffs among providers and across transitions to care • 2c Function competently within own scope of practice as a member of the health care team. 	<ul style="list-style-type: none"> • 1a Describe scopes of practice and roles of health care team members • 1b Describe examples of the impact of team functioning on safety and quality of care • 1c Respect the unique attributes that members bring to a team, including variations in professional orientations and accountabilities • 1d Describe impact of own communication style on others

<p>VII Clinical prevention and population health</p> <p>(Quad Council Competencies, revised 2010)</p>	<ul style="list-style-type: none"> • 3a Partner effectively with key stakeholders, and groups in care delivery to individuals, families, groups • 3b Participate effectively in activities that facilitate community involvement • 3c Assist in the design of an evaluation plan for an individual-, family-, or community-focused program 	<ul style="list-style-type: none"> • 2a Use an ecological perspective in approaching public health practice • 2b Access sources of epidemiologic and other public health data to identify health determinants and risks for individuals and families • 2c Collect quantitative and qualitative data for the purpose of community health assessment • 2d Identify internal and external factors affecting population-focused and public health nursing practice • 2e Identify policy issues relevant to the health of individuals, families, and groups/populations. • 2f Plan collaborative (public and private) interventions to meet identified population and community health needs. 	<ul style="list-style-type: none"> • 1a Describe the historic foundation of public health and nursing science in the delivery of care to individuals, families, and groups/populations • 1b Describe the interrelationships among local, state, tribal, and federal public health and health care systems • 1c Demonstrate presentation of targeted health information to a selected audience. • 1d Demonstrate knowledge of evidence-based health promotion guidelines
<p>VIII Professionalism and professional values</p>	<ul style="list-style-type: none"> • 3a Model the values and articulate the knowledge, skills, and attitudes of the nursing profession 	<ul style="list-style-type: none"> • 2a Develop a plan, applying ethical principles, to meet individual or aggregate care needs • 2b Demonstrate accountability and responsibility for personal behavior and professional practice 	<ul style="list-style-type: none"> • 1a Explain how one's own personal value system impacts professional interactions with respect for the uniqueness of each individual patient • 1b Protect patient privacy and confidentiality of patient records and other privileged communications. • 1c Demonstrate fundamental nursing professional values and behaviors. (e.g., the ANA Code of Ethics and the ANA Nursing Scope and Standards of Practice)

<p>IX Beginning competence in generalist nursing practice</p>	<ul style="list-style-type: none"> • 3a Develop, revise, and implement theory-based, evidence-based, developmentally appropriate plans of care for individuals, families, and groups/populations • 3b Evaluate outcome achievement of individuals, families, and groups/populations • 3c Manage a caseload, collaborating with and delegating to other team members as appropriate • 3d Coordinate the care of individuals, families, and groups/populations across time and settings 	<ul style="list-style-type: none"> • 2a Exhibit clinical reasoning, using creative and critical thinking • 2b Develop theory-based, evidence-based, holistic plans of care for individuals, families, and communities. • 2c Apply knowledge from foundational sciences (e.g., physiology/pathophysiology, genetics/genomics, pharmacotherapeutics, nutrition) to the nursing care of assigned acutely and chronically ill patients • 2d Demonstrate safe and accurate performance of advanced psychomotor skills 	<ul style="list-style-type: none"> • 1a Establish and maintain a professional relationship with patients of all ages • 1b Describe the nursing process • 1c Perform a comprehensive health history and patient assessment • 1d Describe the impact of and incorporate awareness of patients' developmental stages and physiologic differences into nursing care • 1e Demonstrate safe and accurate performance of basic psychomotor skills • 1f Develop and deliver patient teaching based on identified patient needs and applying teaching/learning theory.
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Revised BSN Curriculum (TBSN) - Overview of Courses

Approved NRSB Department 10.18.12

Term	Course #	Course Title	Credits	Prerequisites	Catalog Description	Course Description
Soph 2	NRSB 245 (existing)	Pharmacology for Nursing Practice	2 (2,0)	CHEM 150 or concurrent	Introduces concepts of pharmacologic therapy for collaborative nursing practice. Selected medication categories are studied with emphasis on nursing responsibility, accountability, and safety.	This course develops foundational knowledge in pharmacology and a beginning understanding of nursing roles and responsibilities for safe, accurate, and effective medication therapies. Select medication categories are studied with identification of variations within special populations. Students are introduced to concepts of alternative pharmacotherapeutics and their integration with traditional pharmacotherapy. Critical thinking activities of case studies and medication analyses will support student learning for professional nursing responsibility, accountability, and safety.
	NRSB 249	Normal and Therapeutic Nutrition in Nursing Practice	2 (2,0)	CHEM 150 or concurrent	Examines role of human nutrition for population health promotion and as therapy for management of altered physiologic states. Addresses socio-political, cultural, spiritual, religious, and food quality and safety aspects of nutrition.	This course examines the role of human nutrition for health promotion and disease management. The role of nutrients in maintaining physiologic functioning and health promotion is introduced. Nutrition in relation to emotional health, spirituality and religion, and culture will be examined. Socio-political influences will be discussed as they relate to nutrition and population health. The role of environmental factors in determining food quality and safety is explored. Therapeutic nutrition in altered physiological states is introduced.
	NRSB 257	Foundations of the Profession and Discipline of Nursing	3 (3,0)	Statistics or concurrent	Analyzes evolution of nursing along a historical timeline. Concepts include nursing licensure, scope of practice, ethics, research, theory, quality, safety, and evidence-based practice. Includes focus on diversity, global health, and health care delivery systems.	The evolution of nursing is analyzed from an occupation to a professional status along a historical timeline, including discussion of nursing licensure, scope of practice, and "ways of knowing." Ethical principles and theories are introduced including an ethical model. The ANA Code of Ethics is discussed and applied to beginning nursing practice. Students are introduced to nursing research, nursing theory, and the process of evidence-based practice. Other key concepts discussed include: the organization of health care delivery systems, quality and safety, diversity, and global health.
	NRSB 259	Foundations of Nursing Practice	2 (2,0)	PSYC 230 or concurrent	Explores the caring and holistic aspects of the nursing profession with emphasis on concepts of the nursing process, therapeutic communication, and advocacy. Introduces interdisciplinary collaboration, patient education, documentation, and group theory.	This course focuses on the introduction and application of concepts of caring, advocacy, and holistic nursing. Emphasis is on therapeutic communication, the nursing process, and patient education. Interdisciplinary collaboration, group theory, and nursing documentation are introduced.
	NRSB 267	Practicum: Foundational Skills for Nursing Practice	3 (1,2)	BIOL 250; BIOL 314 or equivalent; NRSB 245 concurrent	Introduces nursing process, communication, and teamwork in the context of caring and advocacy. Includes skill development in health assessment and interventions including patient teaching, integrative therapies, and medication administration. Campus and clinical laboratory.	Concepts of caring and advocacy are developed within the professional roles of care provider and member of a discipline. The nursing process is utilized to obtain health histories and perform physical assessments. Emphasis is in care-giving using therapeutic interpersonal communication, holistic assessment, nursing diagnosis, health teaching, basic nursing interventions, and nursing documentation. Effective team participation is emphasized. Integrative therapies (complementary and alternative modalities) are introduced. Further development of skills in medication calculation and administration of oral and topical medications are included. Campus and clinical laboratory.

Junior 1	NRSRG 317	Practicum: Advanced Skills for Nursing Practice	4 (1,3)	NRSRG 267	Focuses on developing advanced nursing skills within the context of holistic practice. Emphasizes underlying theory. Practicum incorporates clinical reasoning, ethical practice, and implementation of advanced skills with an adult population. Campus and clinical laboratory.	This course focuses on learning and implementing advanced skills within the context of holistic nursing practice. Theory emphasis is on physiologic, psychologic, and pathologic processes underlying the implementation of advanced nursing skills with an adult population. Clinical emphasis is on implementing those advanced nursing skills using clinical reasoning, ethical principles, and the nursing process. Campus and clinical laboratory.
	NRSRG 327	Nursing Leadership and Systems I	3 (3,0)	NRSRG 257, NRSRG 259	Examines national healthcare systems and models of care, healthcare financing and regulation, collaboration, conflict management, leadership, delegation, and organizational cultures, models and theories.	This course examines the national healthcare system and model of care with comparison to other selected systems and delivery models. This course will examine healthcare financing; organizations and organizational cultures; models and theories; quality measures; collaboration; conflict management; leadership; delegation; and systems models and theories.
	NRSRG 337	Nursing Care of Adults and Older Adults I	3 (3,0)	NRSRG 317 concurrent	Focuses on nursing care of adults/older adults with application of evidence-based practice and nursing process for select acute and chronic conditions.	Focus is on nursing care of adults and older adults along the health-illness continuum. Evidence-based care of persons with select acute and chronic conditions is emphasized within the context of the nursing process. Interrelationships among physiology, pathophysiology, nursing assessments, diagnostic tests, medications, and interventions are analyzed.
	NRSRG 347	Psychiatric and Mental Health Nursing	2 (2,0)	NRSRG 337 concurrent	Introduces basic concepts of psychiatric mental health nursing. Focus is on theory- and evidence-based mental health promotion for at-risk populations and nursing care of people diagnosed with mental illnesses.	Basic concepts of psychiatric mental health nursing are introduced. Selected theories and research in mental health promotion and nursing management of mental illnesses are emphasized. Students engage in clinical reasoning to plan care for patients and populations at risk for or diagnosed with mental illnesses.
Junior 2	NRSRG 357	Nursing Care of Adults and Older Adults II	4 (4,0)	NRSRG 347	Continued examination of nursing care of adults and older adults with application of evidence-based practice and nursing process for select acute and chronic conditions.	Focus is on nursing care of adults and older adults along the health-illness continuum. Evidence-based care of persons with select acute and chronic conditions is emphasized within the context of the nursing process. Interrelationships among physiology, pathophysiology, nursing assessments, diagnostic tests, medications, and interventions are analyzed.
	NRSRG 359	Practicum: Nursing Care of Adults and Older Adults	2 (0,2)	NRSRG 357 concurrent	Focuses on use of the nursing process to give holistic theory- and evidence-based care to acutely ill adult and older adult patients and their families. Emphasizes therapeutic communication, intraprofessional collaboration, and clinical reasoning. Clinical laboratory.	An acute care clinical in which students utilize the nursing process to deliver and coordinate holistic care to diverse adult and older adult patients and their families. Therapeutic communication, intraprofessional collaboration, and clinical reasoning are emphasized. Nursing theory and current evidence are integrated into plans of care. Clinical laboratory.
	NRSRG 367	Community and Public Health Nursing	3 (3,0)	NRSRG 327; NRSRG 357 concurrent	Expands on population-focused and public health nursing practice with populations at risk and local and global communities as a whole. Key concepts include epidemiology, health promotion, disease prevention, risk reduction, harm reduction, and evidence-based practice.	This course focuses on the role of the nurse in population-focused and public health practice. Emphasis is on caring for populations at risk and local and global communities as a whole. Nursing science and epidemiology provide the basis for examining the spectrum of public health. Tools for community assessment and diagnosis as well as concepts of health promotion, disease prevention, risk reduction, harm reduction, and evidence-based practice for the health of populations and communities are presented.
	NRSRG 376	Nursing Care of Women, Infants, and Families	3 (3,0)	NRSRG 367 concurrent	Examines evidence-based nursing care with individuals and families experiencing pregnancy, birth, and care of the newborn. Examines human responses from theoretical and cultural perspectives. Health promotion and illness prevention are emphasized.	This course focuses on evidence-based nursing care with individuals and families experiencing pregnancy, birth, and care of the newborn. Human responses are examined from theoretical and cultural perspectives. With the nursing process as a framework, health promotion and illness prevention are emphasized for patients in acute and community settings.
	NRSRG 378	Practicum: Nursing Care of Women, Infants, and Families	2 (0,2)	NRSRG 317; NRSRG 376 concurrent	Focuses on nursing care of persons experiencing pregnancy, birth, and care of the newborn. Key concepts include human responses, experience of life transitions, and developmental and family theory. Clinical laboratory in acute and community settings.	This clinical course focuses on professional nursing practice in the care of individuals and families experiencing pregnancy, birth, and care of the newborn. Application of the nursing process with individuals and families in acute and community settings is emphasized. The following key concepts are included: physiological, psychological, spiritual, and cultural responses; experience of life transitions; developmental and family theory. Clinical laboratory in acute and community settings.

Senior 1	NRS 424	Nursing Leadership and Systems II	3 (3,0)	NRS 367	Examines role of nursing professional in influencing and developing policy within systems at the unit, local, state, national, and global levels. Key concepts include change, power, management, managerial ethics, quality improvement, safety, informatics, and technology.	This course examines the role of the nursing professional related to influencing and developing policy within systems at the unit, local, state, national, and global levels. Theories and strategies related to power and change will be explored. This course examines the role of nurses as leaders and managers for patient safety and quality care within systems. Management theories, strategies, and research will be examined. The role of the nurse manager in addressing ethical issues using the ANA Code of Ethics and using Evidence Based Practice to improve patient care will be explored. Workplace safety will be examined. The role informatics and technology play in quality improvement and monitoring patient outcomes will also be explored.
	NRS 428	Practicum: Nursing Leadership I	3 (0,3)	NRS 424 concurrent	Applies quality and safety concepts; advocates for elimination of health disparities; and demonstrates leadership, team building, and collaborative strategies to promote and maintain health at the systems level. Clinical laboratory in community settings.	In this clinical practicum the student demonstrates leadership skills, applies concepts of quality and safety, and demonstrates team building and collaborative strategies. Students will reflect on their own beliefs and values, and advocate for the elimination of health disparities to promote and maintain health with diverse populations, communities, and cultures. The clinical practicum will occur in a variety of community settings at a systems level.
	NRS 446	Nursing Care of Children and Families	4 (4,0)	NRS 367, NRS 376	Examines evidence-based nursing practice with children and families experiencing acute and chronic illness. Key concepts include growth and development, health promotion, safety, quality, family-centered care, physiological, psychological, and socioeconomic factors, diversity, and ethical dilemmas.	This course focuses on the evidence-based nursing practice with children and families to promote health within acute and chronic illness along the health-illness continuum. Application of the nursing process in the care of children and families is emphasized. Key concepts include growth and development, health promotion, safety and quality, family-centered care, physiological, psychological, and socioeconomic factors, diversity, and ethical dilemmas.
	NRS 447	Practicum: Nursing Care of Children and Families	2 (0,2)	NRS 378; NRS 446 concurrent	Focuses on nursing care of children and families experiencing acute and chronic illness. Applies theory and evidence. Emphasizes family-centered care, health promotion, safety, quality, and ethical practice. Clinical laboratory in acute or community settings.	This clinical course focuses on professional nursing practice in the care of children and families to promote health in acute and chronic illness along the health-illness continuum. Application of evidence-based practice and the nursing process in the care of children and families are emphasized. Key concepts include growth and development, family-centered care, physiological, psychological, and socioeconomic factors, health promotion, safety, quality, diversity, and ethical dilemmas. Clinical laboratory in acute or community settings.
Senior 2	NRS 457	Nursing Care of Chronically Ill Patients and Their Families	3 (3,0)	NRS 446	Focuses on holistic nursing care of patients and families experiencing chronic conditions. Key concepts include healthy adaptation to chronic illness, self-management, disability, frailty, loss and grief, end of life care, family caregiving, and evidence-based practice.	Focus is on holistic nursing care of patients and families experiencing chronic conditions. Key concepts include healthy adaptation to chronic illness, self-management, disability, frailty, loss and grief, end of life care, family caregiving, and evidence-based practice.
	NRS 467	Seminar: Innovative Solutions to Complex Healthcare Problems	2 (2,0)	NRS 424, NRS 428; NRS 477 concurrent	Focuses on designing effective systems approaches to meet needs of diverse populations with complex healthcare problems and ethical issues. Emphasizes critical and creative thinking, clinical reasoning, problem solving, collaboration, leadership, and ethical practice. Seminar.	The focus is on design of effective responses to meet needs of diverse populations that can be implemented across healthcare delivery systems. Emphasizes critical and creative thinking, clinical reasoning, problem solving, collaboration, and leadership skills to address complex healthcare problems and ethical dilemmas.
	NRS 477	Practicum: Nursing Leadership II	4 (0,4)	NRS 424	Focuses on achieving beginning competence in professional nursing practice. Integrates liberal education, leadership, scholarship, and professionalism with clinical reasoning, caseload management, organizational quality improvement and reflective practice. Clinical laboratory in acute settings.	Nursing clinical reasoning, leadership, and application of evidence are integrated with management of a caseload of multiple patients. Focus is on achievement of beginning competence in professional nursing practice. Includes participation in quality improvement at the organizational level. Discussion and reflection facilitate synthesis and integration of liberal education, leadership, scholarship, and professionalism in the context of practice. Clinical laboratory in acute settings.
	NRS 487	Transition to Professional Nursing Practice	1 (1,0)	NRS 477 concurrent	Addresses issues and strategies to launch and maintain a successful professional nursing career.	Addresses issues and strategies to launch and maintain a successful professional nursing career.

**UNIVERSITY OF WISCONSIN-EAU CLAIRE
COLLEGE OF NURSING AND HEALTH SCIENCES**

**SAMPLE PROGRAM OF UNDERGRADUATE STUDY
(2013-2014 Catalogue)**

Pre-Professional Level

FRESHMAN YEAR			
<u>Fall Semester</u>	<u>Credits</u>	<u>Spring Semester</u>	<u>Credits</u>
WRIT 116 (Critical Reading & Writing)	5	Chemistry 150 (Survey of Biochemistry)*	3
Chemistry 103 (General Chemistry)	4	Biology 214 (Anatomy & Physiology I)	4
GE III (Psychology 100 or 260)	3	GE III Psychology 230 OR GE IV	3
GE IV OR Foreign Language	3-4	GE IA Language Skills OR Foreign Language	3-4
		Physical Activity	1
		Wellness	1
TOTAL CREDITS	15-16	TOTAL CREDITS	15-16

Professional Level

SOPHOMORE YEAR			
<u>Fall Semester</u>	<u>Credits</u>	<u>Spring Semester</u>	<u>Credits</u>
Biology 250 (Microbiology)	3	NRSNG 245 (Pharmacology)	2
Biology 314 (Anatomy and Physiology II)	4	NRSNG 249 (Nutrition)	2
GE 1B Statistics OR GE IV	3-4	NRSNG 257 (Foundations Profession & Discipline)	3
GE III OR IV	3	NRSNG 259 (Foundations Nursing Practice)	2
Elective	3	NRSNG 267 (Practicum: Foundational Skills)	3
		GE IV OR V OR Statistics OR GE III Psychology 230	3-4
TOTAL CREDITS	16-17	TOTAL CREDITS	15-16

JUNIOR YEAR			
<u>Fall Semester</u>	<u>Credits</u>	<u>Spring Semester</u>	<u>Credits</u>
NRSNG 317 (Practicum: Advanced Skills)	4	NRSNG 357 (Adults & Older Adults II)	4
NRSNG 327 (Leadership & Systems I)	3	NRSNG 359 (Practicum: Adults & Older Adults)	2
NRSNG 337 (Adults & Older Adults I)	3	NRSNG 367 (Community & Public Health Nursing)	3
NRSNG 347 (Psychiatric & Mental Health Nursing)	2	NRSNG 376 (Women, Infants, & Families)	3
GE III OR IV	3	NRSNG 378 (Practicum: Women, Infants, & Families)	2
TOTAL CREDITS	15	TOTAL CREDITS	14

SENIOR YEAR			
<u>Fall Semester</u>	<u>Credits</u>	<u>Spring Semester</u>	<u>Credits</u>
NRSNG 424 (Leadership & Systems II)	3	NRSNG 457 (Chronically Ill Patients & Families)	3
NRSNG 428 (Practicum: Leadership I)	3	NRSNG 467 (Innovative Solutions to Complex Healthcare Problems)	2
NRSNG 446 (Children & Families)	4	NRSNG 477 (Practicum: Leadership II)	4
NRSNG 447 (Practicum: Children & Families)	2	NRSNG 487 (Transition to Practice)	1
GE IV OR V	3	Elective	2
		GE IV	3
TOTAL CREDITS	15	TOTAL CREDITS	15

Total Number of Credits Required for BSN Degree – 120

*Chemistry 150 available Spring Semesters at UW-Eau Claire. May consider Chem 203 via UW Colleges Online (not a UWEC course).

Prerequisites:	NRSNG 245	Chem 150 Prerequisite or Concurrent
	NRSNG 249	Chem 150 Prerequisite or Concurrent
	NRSNG 257	Statistics Prerequisite or Concurrent (Math 246 or Psyc 265)
	NRSNG 259	Psyc 230 Prerequisite or Concurrent
	NRSNG 267	Biol 250, Biol 314, CNA Certification

**UNIVERSITY OF WISCONSIN-EAU CLAIRE
COLLEGE OF NURSING AND HEALTH SCIENCES
GENERAL INFORMATION**

Enrollment: Students wishing to pursue a nursing degree register as pre-nursing students. Formal application to the professional program must be made. Students are encouraged to apply during the semester in which 30 credits will be completed. Deadline dates for filing admission applications to the nursing program are **DECEMBER 1** and **MAY 1**. Students must select Eau Claire Campus or Marshfield Site

Admission Requirements: in order to be considered for admission to the nursing program, applicants must have:

1. been accepted as a pre-nursing student in the University in good standing.
2. completed at least 30 semester credits, not including courses for nursing assistant certification, with a total cumulative grade point average of at least 3.00.
3. completed at least three required natural science courses, two of which are laboratory science courses, with a grade point average of at least 2.50.
4. earned a grade of "C" or better in all courses required for nursing.
5. completed all application materials.

Other data used by the Admissions Committee are derived from a variety of sources that include admission applications to the University and the nursing program, high school transcript showing rank in class, previous college records, and standardized tests such as ACT or SAT. International, non-native speakers of English applying to an undergraduate nursing program must have a TOEFL score as follows: TOEFL Written >560; or TOEFL (CBT) >220; or TOEFL (iBT) >83.

CNA, CPR and Health Records

1. Evidence of Health Care Provider level CPR certification and all required health and background check information must be submitted at the time of admission to the program.
2. Evidence of current or previous certification as a Nursing Assistant must be submitted prior to registering for NRS 267.

Requirements for Bachelor of Science in Nursing – Total of 120 semester credits

Overall Requirements

Writing Requirement – 5 credits
Physical Education (Kinesiology) – 1 activity credit
Cultural Diversity Requirements – 3 credits
Foreign Language/Culture competency (See Catalogue)
Wellness Theory

Required Non-nursing Courses – (Twenty-two of these credits count toward General Education Requirements)

Chemistry 103 (General Chemistry)	4 credits
Chemistry 150 (Survey of Biochemistry)	3 credits
Biology 214 (Human Anatomy and Physiology 1)	4 credits
Biology 250 (Microbiology)	3 credits
Biology 314 (Human Anatomy and Physiology 2)	4 credits
Psychology 230 (Human Development)	3 credits
Math (Statistics)	3-4 credits

General Education – At least 39 credits designated as General Education in four categories. No more than ten credits in one department.

Category One - Communications 6 credits (one is fulfilled by the statistics requirement)

1A Foreign Language or Communications Course

1B Statistics (usually Math 246)

Category Two – Natural Sciences 9-12 credits in at least 2 subcategories (fulfilled by the required science courses)

Category Three – Social Sciences 9-12 credits in at least 2 subcategories (one is fulfilled by the required Psychology 230)

Category Four – Humanities 9-12 credits in at least 2 subcategories

Category Five – University Wide 0-6 credits

Nursing Courses 60 credits

Academic Adviser: Students enrolled in the College of Nursing and Health Sciences, either as pre-nursing or professional nursing students, are assigned a nursing academic adviser.

Program Costs: In addition to the regular University and course fees, students are responsible for the costs associated with (1) purchase of uniforms and selected equipment and supplies, (2) purchase of textbooks, (3) transportation to and from clinical experiences, (4) required immunizations and health and background check monitoring practices, and (5) non-refundable application fee of about \$35.00.

FOR FURTHER INFORMATION CONTACT:

Student Services Office – Room 127
College of Nursing and Health Sciences
University of Wisconsin-Eau Claire
Eau Claire, WI 54702
Telephone: 715-836-5515 or FAX 715-836-3996

12/16/2012

Course Number and Name: NRS 245 Pharmacology for Nursing Practice

Credits: 2 (2,0)

Placement in Curriculum: Sophomore 2

Prerequisites: BIOL 314; CHEM 150 or concurrent

Course Description: This course develops foundational knowledge in pharmacology and a beginning understanding of nursing roles and responsibilities for safe, accurate, and effective medication therapies. Select medication categories are studied with identification of variations within special populations. Students are introduced to concepts of alternative pharmacotherapeutics and their integration with traditional pharmacotherapy. Critical thinking activities of case studies and medication analyses will support student learning for professional nursing responsibility, accountability, and safety.

Course Objectives: The student will:

1. Describe the professional, legal, and ethical issues and responsibilities of the nurse in using medications for collaborative health care intervention.
2. Explain the concepts of pharmacodynamics and pharmacokinetics with awareness of physiological, including genetic, differences among individuals.
3. For select medication categories, demonstrate knowledge of therapeutic indications, actions, routes of administration, adverse reactions, toxic effects, contraindications, and nursing implications.
4. Demonstrate knowledge of select alternative pharmacotherapeutics and their integration with traditional pharmacotherapy.
5. Introduce the influence of culture on use of pharmacotherapeutics.
6. Explain the significance and demonstrate knowledge of principles for safe, accurate, and effective medication administration.
7. Describe the nature of interprofessional collaboration among nurses, providers, and pharmacists for safe and effective medication administration.

Topical Outline:

Unit 1 Principles of Pharmacology

- A. Introduction to pharmacology and the collaborative nursing role (Objective 1)
 1. Terminology
 2. Development and naming of drugs
 3. Regulation of drugs - prescription & OTC
 4. Differing Medications Roles in the Health Care Team
 5. Nursing roles and responsibilities for pharmacologic therapy
 - a. Treatment
 - b. Education
 - c. Safety
 - d. Ethics of medication knowledge, skills, safety, integrity
- B. Pharmacokinetics and pharmacodynamics (Objective 2)
 1. Pharmacokinetics
 - a. Absorption
 - b. Distribution
 - c. Metabolism, biotransformation
 - d. Excretion

- 2. Pharmacodynamics
 - a. Drug/dose response
 - b. Protein binding
 - c. Drug receptors
 - d. Non-receptor responses
 - e. Agonists, antagonists, efficacy
- C. Variations in pharmacologic responses (Objective 3, 4, & 5)
 - 1. Interaction modifying expected drug effects
 - a. Drug to drug
 - b. Food intake effects
 - c. OTC drugs
 - d. herbal supplements
 - e. Other (hydration status, adiposity, smoking, etc)
 - 2. Unintended reactions
 - a. Side effects
 - b. Adverse effects
 - c. Drug toxicities
 - d. Medication errors
 - 3. Individual variations, special populations
 - a. Children, pregnancy, frail elderly
 - b. Genetic variations: individual & population
 - 1. Genotype, epigenetics
 - 2. Pharmacogenomics
 - c. Chronic disease effects: renal, hepatic, cardiac
 - d. Medication self-health behaviors
 - 1. Knowledge
 - 2. Administration practices
 - 3. Support system
 - 4. Cultural considerations
 - 5. Socioeconomics
 - 6. Access to health care

Unit 2 Nursing Practice: Patient Safety and Medication Calculations

- A. Nursing practice safety issues (Objective 1)
 - a. Interdisciplinary approach
 - b. National initiatives
- B. Cultivating safety for personal practice (Objective 6)
 - a. Six rights
 - b. Use of abbreviations
 - c. Institution specific protocols
 - d. Managing medication errors
- C. Calculation of dosages (Objective 6)
 - a. Oral medications
 - b. Parenteral medications

Unit 3 Medications for Therapeutic Responses

- A. Overview of medication categories (Objectives 2 & 3)
 - 1. Introduction to medication categories
 - 2. Organization by therapeutic action and organ system
 - 3. Monitoring effects, side effects, adverse effects, toxicity
 - 4. Use of lab values in pharmacologic therapy

- B. Medications used for infectious diseases (Objectives 2 & 3)
 - 1. Overview of the infectious process and common infections
 - 2. Anti-bacterial agents
 - 3. Anti-fungals
 - 4. Anti-virals
 - 5. Other types
- C. Medications for pain control (Objectives 2 & 3)
 - 1. Overview of pain pathology
 - 2. Centrally acting agents
 - 3. Peripherally acting agents
 - 4. Other
- D. Medications for maintaining fluid balance (Objectives 2 & 3)
 - 1. Overview of fluid & electrolyte balance
 - 2. Loop diuretics
 - 3. Thiazide diuretics
 - 4. Other types
- E. Medications for maintaining gastric pH / peptic ulcer disease (Objectives 2 & 3)
- F. Medications affecting the cardiovascular system (Objectives 2 & 3)
 - 1. Overview of cardiovascular pathophysiology
 - 2. Anti-hypertensive drugs
 - 3. Lipid lowering drugs
 - 4. Heart failure drugs
 - 5. Antiarrhythmic drugs
 - 6. Medications for other conditions
- G. Medications for diabetes mellitus (Objectives 2 & 3)
 - 1. Overview of DM pathophysiology
 - 2. Oral agents
 - 3. Insulin
 - 4. Other agents
- H. Psychotherapeutic medications (Objectives 2 & 3)
 - 1. Antidepressants
 - 2. Anti-anxiety
 - 3. Other categories
- I. Alternative pharmacotherapeutics (Objectives 4 & 5)
 - 1. Herbals (botanicals)
 - 2. Dietary supplements
 - 3. Homeopathy
 - 4. Integration with traditional pharmacotherapy
 - 5. Cultural considerations

Textbook

Pharmacology textbook

Drug Calculation textbook

Teaching / Learning Strategies:

Lecture

Case study

Critical Thinking Activity – Case study/medication analysis

Games

Group work

Assignments/Evaluation:

Quizzes

Exams

Critical Thinking Activity – Case study/medication analysis (especially looking at safety/effectiveness of med profiles that include “traditional” and “alternative” pharmacotherapeutics)

Course Name: NRS 249 Normal and Therapeutic Nutrition in Nursing Practice

Credits: 2 (2,0)

Placement in the Curriculum: Sophomore 2

Prerequisites: BIOL 314; CHEM 150 or concurrent

Course Description:

This course examines the role of human nutrition for health promotion and disease management. The role of nutrients in maintaining physiologic functioning and health promotion is introduced. Nutrition in relation to emotional health, spirituality and religion, and culture will be examined. Socio-political influences will be discussed as they relate to nutrition and population health. The role of environmental factors in determining food quality and safety is explored. Therapeutic nutrition in altered physiological states is introduced.

Course Objectives: The student will:

1. Examine the role of specific nutrients in wellness and illness across the lifespan.
2. Critically analyze nutrition in relation to national nutrition guidelines.
3. Examine impact of culture on eating preferences and practices.
4. Analyze the effects of socio-political influences, environmental factors, food industry practices, and current trends on nutrition and population health.
5. Apply knowledge of how nutrition is used as a therapeutic intervention in illness and altered physiological states, including genetic diseases.
6. Describe the nature of interprofessional collaboration among nurses, providers, and dietitians for the provision of safe and effective therapeutic nutrition.

Topical Outline:

- I. Primary nutrients (Objective 1, Objective 3)
 - A. Role in nutritional health and wellness
 - B. Considerations for specific populations
 - C. Geographic considerations
 - D. Cultural and religious/spiritual considerations
- II. Nutritional analysis (Objective 2)
 - A. National standards (U.S.)
 - B. Personal nutrition analysis
 1. Laboratory and diagnostic testing for nutritional analysis
 2. Emotional influences
 - C. Community nutrition analysis (e.g. geographical region and resources)
 - D. Population nutrition analysis (e.g. elderly, heart disease)
- III. Socio-political influences on nutrition and population health (Objective 4)
 - A. Health policy
 - B. Environmental factors (e.g. food safety, water safety)
 - C. Food industry practices vs. standards
 - D. Trends in agriculture

IV. The bad and the ugly (Objective 1, Objective 4)

- A. Foods to limit (e.g. fats, caffeine, sugar, high fructose corn syrup, artificial sweeteners)
- B. Adverse food reactions / interactions

V. Current trends in nutrition (Objective 5)

- A. Fad diets (e.g. South Beach, grapefruit)
- B. Diets with a purpose (e.g. DASH, gluten free, diabetic, renal diet, phenylketonuria)
- C. Resources for life-style change related to nutrition (e.g. counseling, support groups)

Textbook:

Nutrition text

Teaching methods:

Lecture

Case studies

Written assignment: View videos, food advertisements, documentaries (e.g., *Super Size Me*); write a brief proposal for how nurses, providers, and dietitians could address a selected poor nutritional practice in U.S. society

Group assignment: select a current nutrition-related issue (e.g., Mayor Bloomberg's policy to ban sale of soft drinks larger than 16 or 20 oz in size) and analyze the nutritional impact from sociopolitical, environmental/cultural, and ethical/legal perspectives (objective 4)

Create a health-promoting, diet-focused teaching plan (based on national standards) for patients with a selected disease (e.g., teach an older adult with hypertension how to use the DASH diet); deliver the teaching plan in Foundations for Nursing Practice course

Assessment methods:

Exams

Written proposal

Group nutrition-related issue analysis

Health promoting, diet-focused teaching plan

Course: NRS 257: Foundations of the Profession and Discipline of Nursing

Credits: 3 (3,0)

Prerequisites: Statistics or concurrent

Placement in Curriculum: Sophomore Year, Second Semester

Catalogue Description:

Analyzes evolution of nursing along a historical timeline. Concepts include nursing licensure, scope of practice, ethics, research, theory, quality, safety, and evidence-based practice. Includes focus on diversity, global health, and health care delivery systems.

Course Description:

The evolution of nursing is analyzed from an occupation to a professional status along a historical timeline, including discussion of nursing licensure, scope of practice, and “ways of knowing.” Ethical principles and theories are introduced including an ethical model. The ANA Code of Ethics is discussed and applied to beginning nursing practice. Students are introduced to nursing research, nursing theory, and the process of evidence-based practice. Other key concepts discussed include: the organization of health care delivery systems, quality and safety, diversity, and global health.

Course Objectives

The student will:

1. Discuss professional characteristics, roles, scope of practice, evolving definitions, and “ways of knowing” (including nursing theory) of nursing.
2. Describe the professional values, behaviors, and ethical principles in the ANA Code of Ethics as the foundation to nursing practice
3. Reflect on one’s own beliefs and values while applying an ethical model to a nursing practice dilemma
4. Demonstrate an understanding of the basic elements of the research process and models for applying evidence to clinical practice.
5. Describe the history of nursing as it contributes to contemporary nursing practice, education, and research.
6. Participate in the process of retrieval, appraisal, and application of evidence to a clinical improvement question.
7. Describe basic knowledge of how health care systems are organized, inter-related, financed, and influenced by sociocultural, economic, and political factors.
8. Identify factors that promote patient safety and quality of care, consistent with national standards, in practice settings.
9. Describe the importance of respecting diverse populations in the role of a professional nurse.

Topical Outline:

(Personal Knowing) Nursing Professional Development

- Self- Reflection on Nursing
- Definition of Nursing
- Meta-concepts of the Nursing profession: person, health (health/illness continuum), environment
- Historical development of Nursing
- Image of Nursing
- Educational preparation of nursing
- Licensure, certification, scope of practice, professional accountability, negligence, malpractice
- Professionalism, professional organizations

(Ethical Knowing) Ethics

- Professional values, ANA Code of Ethics
 - Foundational respect for “inherent dignity, worth, and uniqueness of every individual”
 - Individual cultural sensitivity and competence

- Ethical principles, and theories
- Ethical models for decision making in ethical dilemmas
- Application of Code of Ethics to patient scenarios

(Empirical Knowing) Scholarship: Research and Evidence- Based Practice

- Overview of research vs. evidence- based practice
- Research process
 - Quantitative research and qualitative research
 - Validity and reliability
 - Application of statistical methods
 - Sampling and research ethics, including informed consent
- Evidence Based decision making process
 - Formation of PICOT question
 - Evidence retrieval, basic appraisal, and application to PICOT question

(Emancipatory Knowing) Health Care Systems

- Introduction to the organization and financing of health care delivery systems
- Influences on health care systems – sociocultural, economic, political
- Nursing care impact on patient quality and safety outcomes
 - Sources of patient safety and quality standards: national, professional, etc.
- Global health nursing

(Aesthetic Knowing) Nursing Theory

- Nursing concepts, models, and theories
- Putting all ways of knowing together

Textbooks

- Professional nursing text
- Nursing concepts text
- Introduction to nursing process text
- Nursing research & evidence-based text
- *ANA Nursing's Social Policy Statement: The Essence of the Profession*
- *ANA Nursing Scope and Standards of Practice*
- *ANA Guide to the Code of Ethics for Nurses, Interpretation and Application*
- Transcultural nursing text
- Ethics teaching tool

Course Delivery Format:

This course should be considered for hybrid delivery.

Teaching/Learning Strategies

- Small group EBP project - Formation of PICOT, Retrieval of evidence, appraisal, application, summary
- Compare hospital bills for same health entity of pts with varied insurance and identify where nursing services are embedded
- Read historical research for its depiction of the development of contemporary nursing practice, education, and research (Essential VIII).
- In class self - reflection writing assignment
- Peer Diversity Educators Presentation
- Interview: professional nurse
- Small group: Application of Code of Ethics to clinical scenarios
- Ethical Lens Inventory
- Apply personal Ethical Lens to small group clinical simulation exercise

Assessment

- Library Search worksheet
- Article appraisal worksheet
- Research/ EBP exam
- Written reflection: post PDE presentation (in class)
- Written Personal Ethics Statement (from Ethical lens inventory)
- Peer /peer evaluation of participation of personal lens in simulation exercise

Course: NRSRG 259: Foundations of Nursing Practice

Credits: 2 (2,0)

Pre-requisites: PSYC 230 or concurrent

Placement in Curriculum: Sophomore Year, Second Semester

Catalog Description: Explores the caring and holistic aspects of the nursing profession with emphasis on concepts of the nursing process, therapeutic communication, and advocacy. Introduces interdisciplinary collaboration, patient education, documentation, and group theory.

Course Description: This course focuses on the introduction and application of concepts of caring, advocacy, and holistic nursing. Emphasis is on therapeutic communication, the nursing process, and patient education. Interdisciplinary collaboration, group theory, and nursing documentation are introduced.

Course Objectives: The student will:

1. Incorporate concepts of holistic nursing, caring, and advocacy into interactions with patients, colleagues, and professional health care team members.
2. Demonstrate skills of therapeutic interpersonal communication.
3. Apply nursing process to selected human responses and health problems.
4. Practice and apply principles of health teaching with patients and selected groups of learners to promote and maintain health.
5. Explore use of information systems and communication related to safety, confidentiality, and privacy in patient care delivery.
6. Examine interprofessional and intra professional group dynamics and collaboration related to patient care delivery.

Topical Outline:

I. Professional Caring and Advocacy

- A. Caring (includes notion of self-care/"Healthy Nurse" as well as care for others)
- B. Patient advocacy
- C. Patient safety
- D. Holistic nursing
 1. Whole person as focus - Mind, body, spirit
 2. Health promotion (self and others)
 3. Family-centered care
 4. Spirituality and spiritual care

II. The Nursing Process, Critical Thinking, and Clinical Reasoning

- A. Process
 1. Relationship to critical thinking, clinical reasoning, and clinical judgment
 2. Utility of standardized nursing languages such as NANDA, NOC, and NIC, Omaha, and others
- B. Phases
 1. Assessment
 2. Diagnosis
 3. Outcomes identification
 4. Planning
 5. Implementation
 6. Evaluation
- C. Clinical reasoning models [e.g., Outcome-Present State-Test (OPT) Model]

D. Reflective practice

III. Professional Communication with Patients and Colleagues

- A. Therapeutic communication with the patient and family members
 - 1. Awareness of own communication style
 - 2. Attentive listening, reflection, self-disclosure, interpretation
- B. Interdisciplinary team communication
 - 1. Interdisciplinary team roles/scopes of practice
 - 2. Group dynamics, including group communication and collaboration
 - 3. Interprofessional communication
 - a. Hand-off communication (e.g., SBAR, bedside reporting)
- C. Healthcare Informatics and Documentation
 - 1. Healthcare informatics, including basic computer skills, information literacy, and information management
 - 2. Electronic health and medical records
 - a) Documentation
 - b) Decision support
 - c) Data retrieval for quality management purposes
 - 3. Standardized nursing languages, including North American Nursing Diagnosis Association (NANDA), Nursing Interventions Classification (NIC), and Nursing Outcomes Classification (NOC)
 - 4. Legal and ethical aspects, including data security, right to privacy, maintenance of confidentiality, professional use of social media

IV. Teaching and Learning for Health Education

- A. Characteristics of Effective Teaching
- B. Assessment of learner characteristics and needs
 - 1. Health literacy – reading ability, emotional state, and amount of experience with health care
 - 2. Preferred learning style
 - 3. Potential barriers to learning
- C. Development of teaching-learning plan
- D. Evaluation

Textbooks

Professional nursing text

Nursing concepts text

Introduction to nursing process text

Teaching/Learning Strategies

Read stories and poems about nursing practice (e.g., from the *HeArt of Nursing* books), write a reflection paper on what they say about holistic nursing, caring, and advocacy

Critique a film or television program in which interprofessional communication is depicted

Critique a nursing care plan

Role play an intraprofessional group work experience (e.g., RN and nursing assistants planning how to manage a workload when another RN called in sick) and critique the group process

Health informatics assignment – access simulated patient’s health information

Approved UGCC 10.11.12 NRSB 10.18.12

Develop and present a health promotion patient education plan with a focus on nutrition (joint assignment with the Normal and Therapeutic Nutrition course)

Assessment/Evaluation

Exams

Reflection paper

Interprofessional communication critique

Care plan critique

Health informatics assignment

Patient education plan and presentation

Course Name: NRSRG 267 Clinical Practicum: Foundational Skills for Nursing Practice

Credits: 3 credits (1, 2) [1 lab cr. on campus – 45 hrs, 1 lab cr. on site - 45 hrs]

Placement in Curriculum: Sophomore 2

Prerequisites: BIOL 250; NRSRG 245 or concurrent; BIOL 314 or equivalent

Course Description: Concepts of caring and advocacy are developed within the professional roles of care provider and member of a discipline. The nursing process is utilized to obtain health histories and perform physical assessments. Emphasis is in care-giving using therapeutic interpersonal communication, holistic assessment, nursing diagnosis, health teaching, basic nursing interventions, and nursing documentation. Effective team participation is emphasized. Integrative therapies (complementary and alternative modalities) are introduced. Further development of skills in medication calculation and administration of oral and topical medications are included.

Course Objectives: The student will:

1. Incorporate concepts of caring and advocacy into interactions with patients.
2. Obtain adult health histories and perform physical assessments utilizing a holistic approach.
3. Implement the nursing process, with emphasis on assessment and nursing diagnosis, when providing care to patients.
4. Demonstrate basic integrative therapies in patient care.
5. Demonstrate therapeutic communication skills with patients.
6. Demonstrate professional communication and interaction with team members.
7. Apply principles of health teaching with patients and selected groups of learners.
8. Demonstrate safety and accuracy in calculating and administering oral and topical medications.
9. Demonstrate safe and competent performance of basic nursing interventions.

Topical Outline:

I. Comprehensive Health History and Documentation

A. Obtaining a health history as a part of nursing care (assessment).

B. Approaches to assessment

1. Individual as patient (child, adult)
2. Maintaining a patient focus during assessment
3. Caring
4. Advocacy

C. The scope of a comprehensive, holistic health history

1. Mental status (cognitive-perceptual)
2. Lifestyle and culture, including primary language
3. Spiritual assessment – spiritual development, spiritual needs, religious practices
4. Psychosocial assessment, including self-perception, self-concept, coping-stress tolerance
5. Socioeconomic assessment
6. Sexuality-reproductive assessment
7. Nutrition
8. Physical health
9. Functional ability
10. Modes of self-care
11. Patient's health literacy level

- D. Professional communication and documentation of data.
 - 1. Communicating with the patient and family members
 - 2. Communicating with health care professionals.
 - 3. Professional appearance and demeanor
 - 4. Documentation

II. Physical Assessment and Documentation

- A. Introduction to Physical Assessment
- B. Approaches, Data Collection, and Analysis of findings
- C. Documentation
- D. Patient care technology
- E. Introduction to acute care patient assessment

III. Integrative Therapies

- A. Psychoneuroimmunology as a foundation for integrative approaches
 - a. Stress and anxiety
 - b. Adaptation
 - c. Coping
- B. Mind, Body, and Spirit integrative therapies
 - a. Manipulative and body-based practices
 - a. Massage
 - b. Mind and body practices
 - a. Relaxation
 - b. Guided imagery
 - c. Energy field (biofield) manipulation
 - a. Introduction to healing touch

IV. Time Management and Organizational Skills

- A. Goal-setting
- B. Prioritizing
- C. Organizing work, including creating lists, schedules, reminders

V. Foundational Nursing Skills – Verification of Competency

- a. Vital signs
- b. Environmental safety
- c. Restraint use
- d. Personal hygiene
 - i. Oral care
 - ii. General appearance care (hair, shaving, grooming)
 - iii. Bathing – tissue integrity
 - iv. Perineal care
 - v. Foot & Nail care
- e. Bed making
- f. Ergonomic principles (body mechanics) & positioning
 - i. Patient and nurse (health care worker) injury prevention
- g. Exercise & ambulation
 - i. Transfers and ambulation
 - ii. Assistive devices
- h. Infection control
 - i. Standard precautions, including hand hygiene
 - ii. Transmission-based precautions (Isolation)

- i. Intake & output
 - i. Oral intake, emesis, NG output
 - ii. Urinary elimination
 - 1. Bedpan, urinal, commode
 - iii. Bowel elimination
 - 1. Enemas & rectal tubes
 - 2. Digital stimulation, digital removal of impaction, abdominal massage

VI. Medication Calculation and Administration

- A. Dose calculation
- B. Administration via PO, rectal, and topical routes
 - 1. Six (or seven) right of patients
- C. Documentation
- D. Variance (incident) reports

Textbooks

Clinical nursing skills text
Introduction to complementary and alternative therapies text
Pharmacology text
Drug dose calculation text
Drug handbook
Skills Supply Bag

Teaching Strategies:

Lecture/review/discussion

Interactive learning using resources posted on Desire2 Learn (D2L), instructional videos, and clinical simulations (e.g., physical assessment, communication with patients, skill performance)

Demonstration/self-directed practice/skills lab

Journaling

Direct patient care during on-site clinical experience, with focus on professional communication, physical assessment, and basic nursing skills

Assessment/Evaluation:

Exams
Demonstration of competent skill performance
Clinical performance
Medication knowledge and calculation quizzes

Course Name: NRS 317 Clinical Practicum: Advanced Skills for Nursing Practice

Course Credits: 4 (1,3) [1 clinical credit on campus – 45 hrs, 2 clinical credits on site – 90 hrs]

Placement in the Curriculum (semester): Junior 1

Prerequisites: NRS 267; NRS 337 concurrent

Course Description:

This course focuses on learning and implementing advanced skills within the context of holistic nursing practice. Theory emphasis is on physiologic, psychologic, and pathologic processes underlying the implementation of advanced nursing skills with an adult population. Clinical emphasis is on implementing those advanced nursing skills using clinical reasoning, ethical principles, and the nursing process.

Course Objectives: The student will:

1. Apply knowledge of physiologic, psychologic, and pathologic processes when implementing advanced nursing interventions.
2. Demonstrate clinical reasoning, using creative and critical thinking, when providing holistic nursing care to adult patients.
3. Demonstrate effective verbal and written communication skills with patients and team members.
4. Implement advanced nursing skills in a safe, effective, and ethically appropriate manner.
5. Demonstrate accountability and responsibility in professional and personal interactions.
6. Incorporates evidence-based nursing interventions in the delivery of patient care.

Content Outline:

I. Advanced Medication Administration

- A. Dose calculation
- B. Medication administration: intradermal, subcutaneous, IM, and IV routes
- C. Documentation

II. Venous access

- A. Peripheral IV access and maintenance
- B. Central venous access
 1. Maintenance of:
 - a. Peripherally inserted central catheter (PICC)
 - b. Central venous access device (CVAD)
 2. Obtaining venous sample of blood

III. Fluid, blood product, and parenteral nutrition administration

- A. Parenteral hydration
- B. Blood product administration
- C. Total parenteral nutrition (TPN)
- D. Lipid administration

IV. Wound care

- A. Wound assessment
- B. Wound irrigation

- C. Suture and staples
 - D. Managing drainage evacuation (drains)
 - E. Dressings
 - F. Abdominal and breast binding
 - G. Warm and cold therapies
- V. Enteral Nutrition - Nasogastric / Feeding tubes
- A. Insertion
 - B. Management
 - C. Medication administration
 - D. Enteral nutrition
- VI. Elimination support
- A. Urinary catheterization
 - B. Urinary diversion
 - C. Bowel diversion
- VII. Airway Management and Ventilatory Support
- A. Nasal cannula and masks
 - B. Maintenance of artificial airways (tracheostomy, endotracheal tubes)
 - C. Ventilatory support
 - 1. noninvasive support (e.g., CPAP, BiPAP)
 - 2. mechanical ventilation
 - D. Incentive spirometry
 - E. Chest physiotherapy
- VIII. Chest tube management
- A. Maintenance of chest tubes
 - 1. Wet vs. dry system
 - 2. Gravity vs. suction
 - 3. Dressings
 - 4. Set up
 - 5. Removal
- IX. Laboratory / Specimen collection
- A. Handling of infectious materials
 - B. Urinalysis
 - C. Gastric aspirate
 - D. Stool sample
 - E. Capillary blood glucose
 - F. Venipuncture (peripheral vein blood sample)
 - G. Cultures
- X. Perioperative care
- A. Legal and ethical issues, including informed consent
 - B. Preparing the patient for surgery – preoperative care
 - C. Intraoperative care
 - 1. Asepsis
 - 2. Safety, including “time out”
 - 3. Role of RN
 - D. Post operative care

Textbooks:

Skills textbook (e.g., Perry & Potter)

Skills videos

Skills supply bag

Teaching Strategies:

Lecture/review/discussion

Interactive learning using resources posted on Desire2 Learn (D2L), instructional videos, and clinical simulations (e.g., skill performance, clinical reasoning)

Demonstration/self-directed practice/skills lab

Journaling

Direct patient care during on-site clinical experience, with focus on care planning and implementation of advanced nursing skills

Assessment/Evaluation:

Exams

Demonstration of competent skill performance

Clinical (direct patient care) performance

Medication knowledge and calculation quizzes

Approved UGCC 9.13.12 NRS 10.18.12

Course Title: NRS 327 Nursing Leadership and Systems I

Course Credits (Lecture-Lab): 3 (3,0)

Placement in the Curriculum (semester): Junior 1

Prerequisites: NRS 257, NRS 259; NRS 337 concurrent

Course Description:

This course examines the national healthcare system and model of care with comparison to other selected systems and delivery models. This course will examine healthcare financing; organizations and organizational cultures; models and theories; quality measures; collaboration; conflict management; leadership; delegation; and systems models and theories.

Catalog description: Examine national healthcare systems and models of care, healthcare financing and regulation, collaboration, conflict management, leadership, delegation, and organizational cultures, models and theories.

Objectives

1. Describe system models, including their structural components and characteristics.
2. Examine the US healthcare system, emphasizing its evolution, financing structure, health care and quality and safety outcomes; and comparison to other selected systems and delivery models.
3. Discuss US healthcare organizations, focusing on types, internal structure and culture, and the role of organizational philosophy, mission, and vision.
4. Explain key elements of healthcare regulation, including accreditation, regulatory bodies, federal and state legislation and agencies, as well as professional guidelines and standards.
5. Examine leadership, highlighting key theories common in nursing, leadership ethics, and leadership strategies, including collaboration, conflict management, and negotiation.
6. Describe delegation, including professional nursing responsibilities and the legal consideration.

Topical List

UNIT 1: Systems models and theories, including complexity theory (complex adaptive systems)

UNIT 2: United States Healthcare System

1. Systems and models of care
2. Compare to other selected systems in the world

UNIT 3: Healthcare financing

1. United States
2. Types (Public/Private/Out of pocket)
 - a. Taxation
 - b. Funding streams
 - c. Medicare
 - d. Medicaid
3. Current issues

UNIT 4: Healthcare organizations

1. Organizational culture
 - a. Communication
 - b. Incivility/Horizontal Violence/Bullying
 - c. Role of nurse within the above
2. Type of organizations in the US (acute, long term care, community)
3. Mission, vision and philosophy

UNIT 5: Healthcare regulation

1. Accreditation
 - a. Hospital
 - i. Joint Commission
 - b. Public Health
 - c. Nursing Home
 - d. Other—free standing emergency/surgery centers
2. Regulatory bodies
 - a. CMS—introduce core measures
 - b. State Surveyors--Long term care
 - c. Community/Public Health (e.g. Ag Department, HHS, how pass-through dollars work)
 - d. Others
3. Federal and State Laws, Administrative Rules, and Regulations
4. Federal Agency (e.g. FDA, OSHA, NIOSH, HHS, EPA)
5. Guidelines and Standards (e.g. Clearing House Guidelines, Professional Organizations-ANA)

UNIT 6: Leadership

1. How is leadership different than management—focus on leadership for this class
2. Leadership Theories
3. Leadership ethics (assumption that ANA code of ethics and individual ethics are covered sophomore level)
4. Leadership Strategies, including
 - a. Communication
 - b. Conflict management
 - c. Negotiation
 - d. Collaboration
 - e. Strategic planning

UNIT 7: Delegation and Supervision

1. Delegation and supervision from an individual perspective-legal issues, who to delegate to, what is delegated to individual, 5 rights of delegation, nurse practice acts related to delegation, etc.

UNIT 8: Case Management

1. Nursing case management approaches and strategies
2. Referrals and consultations

Approved UGCC 9.13.12 NRS 10.18.12

Textbook:

Leadership and management text

Course Delivery Method:

This course may be suitable for a hybrid delivery mode.

Teaching/Learning Strategies:

Lecture

Ethics Game Simulation

Role Play

Shadow a leader and reflect on the experience (AACN Faculty Toolkit suggestion)

Writing to learn activities, including a Leadership paper with presentation

Assessment/Evaluation:

Exams

Ethics Game Simulation Assignment

Reflection paper

Leadership Paper

Leadership Presentation

Approved UGCC 9.13.12 NRS 10.18.12

Course Title: NRS 337 Nursing Care of Adults and Older Adults 1

Credits: 3 (3,0)

Placement in the Curriculum (semester): Junior 1

Prerequisites: NRS 267, NRS 245, NRS 249; NRS 317 concurrent

Catalog description: Nursing care of adults/older adults with application of evidence-based practice and nursing process for select acute and chronic conditions.

Course Description: Focus is on nursing care of adults and older adults along the health-illness continuum. Evidence-based care of persons with select acute and chronic conditions is emphasized within the context of the nursing process. Interrelationships among physiology, pathophysiology, nursing assessments, diagnostic tests, medications, and interventions are analyzed.

Course Objectives:

1. Describe pathophysiologic and psychopathologic origins, including genetic influences, select acute and chronic conditions in adults and older adults across the health- illness continuum.
2. Recognize and correctly interpret manifestations of acute processes within the context of chronic health conditions in adults and older adults.
3. Apply the nursing process using nursing and other relevant theories, evidence, and knowledge of pharmacotherapeutics in prioritizing care for adults and older adults and their families.
4. Design nursing care appropriate for promoting, maintaining, and optimizing health of adults and older adults based on analysis of assessment data, interrelationships, and evidence-based practice.
5. Examine and discuss selected ethical issues and provision of culturally competent care of adults and older adults.

Topical Outline

Adult development

aging processes and physiological changes
biological, psychological, & sociological theories of aging

Health promotion with adults and older adults

Wellness practices
Screening recommendations
Theories of health behavior and motivation for change
Interventions to promote health behavior change, including teaching, coaching, and motivational interviewing

Pain and Suffering

acute & chronic pain
suffering

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Fluid & electrolyte/Acid-base balance - Regulation
dehydration

burns

fluid overload

electrolyte imbalances: sodium, potassium, calcium, magnesium

SIADH

arterial blood gases

acidosis

alkalosis

hypovolemic shock

Ventilation, Gas exchange, Oxygenation

atelectasis

V/Q mismatch

Ventilatory failure

pneumonia

tuberculosis

COPD

adult asthma

pneumothorax

thoracic surgery

Oxygen transport

anemia

O₂-CO₂ dissociation

Infection

Inflammation

Fever - thermoregulation

nosocomial infections– MRSA, VRE, ESBL

antibiotic resistance

systemic inflammatory response system (SIRS)

septic shock

Endocrine - regulation

Glucose regulation - type 1 & 2 diabetes

hypothyroidism/hyperthyroidism

addison's disease

cushings syndrome

parathyroid function

Immunity/autoimmunity

hypersensitivity, allergies, anaphylaxis with anaphylactic shock

autoimmunity, autoimmune connective tissue disorders – systemic lupus erythematosus, rheumatoid arthritis

HIV/AIDS

Upper GI disorders – Ingestion, digestion, elimination

dysphagia

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gastritis
GERD
Peptic Ulcer Disease

Liver/Biliary – metabolism, clotting
liver
pancreas
gall bladder

Lower GI disorders – inflammation
Inflammatory bowel
irritable bowel
Diverticulitis
constipation
diarrhea
Obstruction
perforation
diversions

Textbook:

Medical-surgical nursing textbook
Simulation learning system (case studies)
Pathophysiology textbook
Pharmacology textbook
Diagnostic and Lab Test textbook

Teaching/Learning Strategies:

- Didactic
- Case Studies
- Group Work - think, pair, share; minute papers; “turn to your partner” strategy

- Written assignment – conduct a 15-minute interview a young, middle-aged, or older adult who has a chronic health condition, ask, “What has your experience been with this disease?” Write a paper applying developmental theory or pathophysiology to the person’s described experience. Assignment will include peer review before submitting the final paper.
- Group discussion (I-clickers)

Assessment/Evaluation:

- Exams
- Written assignment with peer evaluation

Course Title: NRSB 347 Psychiatric and Mental Health Nursing

Credits: 2 (2,0)

Placement in the Curriculum: Junior 1

Prerequisites: NRSB 337 concurrent

Catalog description:

Introduces basic concepts of psychiatric mental health nursing. Focus is on theory- and evidence-based mental health promotion for at-risk populations and nursing care of people diagnosed with mental illnesses.

Course description:

Basic concepts of psychiatric mental health nursing are introduced. Selected theories and research in mental health promotion and nursing management of mental illnesses are emphasized. Students engage in clinical reasoning to plan care for patients and populations at risk for or diagnosed with mental illnesses.

Course objectives:

1. Apply nursing and related theories and research findings to mental health promotion and mental illness care, including principles and behaviors that reflect emotional and psychological growth and achievement of developmental milestones.
2. Demonstrate understanding of the nursing process for care of patients with psychiatric disorders across the life-span.
3. Identify major neuro psychopathology and its relationship to observable patient behavior & symptoms of psychiatric disorders.
4. Identify evidence-based psychological, biological, pharmacotherapeutic, and complementary interventions to manage care of the patient & family.
5. Explore political, socioeconomic, and ethical forces that impact mental health care of patients, families, and communities.
6. Recognize complex care needs of vulnerable and diverse populations and plan interventions that protect the rights, privacy, and dignity of these populations.
7. Discuss and evaluate moral, ethical, legal, and socioeconomic dilemmas associated with psychiatric and mental health nursing practice.

Topical outline (based on IPA & APNA Essentials 2008):

Mental Health Promotion

- Individual, family, and community strategies

Mental Disorders from a Growth & Development Perspective:

- Recognition of major disorders occurring in adulthood
 - Mood disorders
 - Psychotic disorders

- Personality disorders
- Substance abuse/dependence disorders
- Anxiety disorders
- Recognition of major disorders occurring in older age: (currently in a different course)
 - Depression (screening and intervention for suicide)
 - Dementia
 - Delirium
- Recognition of major disorders occurring in childhood/adolescence
 - Mood disorders
 - Eating disorders
 - Conduct disorders
 - Substance abuse/dependence disorders

Pharmacotherapeutics & basic principles of pharmacology

- Neurobiological basis of pharmacological & somatic treatments
- Major psychotropic agents for identified psychiatric disorders that include:
 - Classification
 - Action & expected effect
 - Side effects & toxicity
 - Potential interactions w/other medications & diet

Communication Theory & Interpersonal relational skills

- Therapeutic interventions for patients, families, & groups experiencing or at risk for psychiatric disorders
- Therapeutic use of self w/patients, families, & groups experiencing or at risk for psychiatric disorders
 - Identify appropriate affective & cognitive responses with intervention
 - Demonstrate understanding of concept of professional boundaries with psychiatric patients
 - Identify appropriate ways to communicate with patients experiencing common psychiatric symptoms such as hallucinations, delusions, and decreased production of speech

Clinical Decision making

- Classification of psychiatric disorders
- Evidence-based care principles
- Use of outcome measures to evaluate interventions & care strategies
- Principles of patient and nurse safety in various treatment settings
- Concepts of psychiatric crisis & common intervention practices for patients in crisis
- Standard care practices of common psychiatric disorders

Cultural, ethnic, & spiritual concepts

- Diversity
- Cultural, religious, & spiritual beliefs re: mental health & illness
- Cultural, religious, & spiritual beliefs as relate to psychiatric symptom expression

- Cultural/racial/ethnic diversity and impact on mental health care delivery

Concepts of chronic illness

- Common adaptation & coping techniques used to deal w/severe & persistent psychiatric disorders
- Symptom management w/those who have serious & persistent psychiatric disorders
- Concepts of co-morbidity
- Symptom management for those w/co-occurring chronic conditions
- Concepts of relapse, relapse prevention, recovery & resilience

Ethical and legal principles

- Standards of practice for psych-mental health
- Least restrictive treatment approaches
- Legal rights of psychiatric patients based on voluntary compared to involuntary status

Vulnerable populations

- Principles & concepts of working with vulnerable populations
- Access to care
- Health disparities in mental health care & outcomes

Nursing research

- Research related to psychiatric health nursing & care delivery concepts
- Concepts of evidence based practice

Textbooks:

Psychiatric/Mental Health Nursing textbook

Course Delivery:

This theory course lends itself very well to the hybrid format utilizing D2L, google blogger, or other technology that becomes available. The hybrid format would facilitate discussion of issues that may be more difficult to discuss face-to-face such as personal experiences with mental illness or stereotypical beliefs about those with mental illness. The hybrid format would also facilitate integration of evidence from the research literature as well as materials from the humanities such as literature, art, film, and personal essays. Maintaining a face-to-face component is important for presenting some content that is challenging to explain online as well as providing a platform for guest speakers.

Teaching-Learning strategies:

- Lecture
- Film, literature, essays and other materials from the humanities
- Case studies, concept mapping

- Role playing and simulation
- Online assignments: group or individual
- Writing assignment - written critique of a popular film that integrates research evidence, political and socioeconomic perspectives.

Evaluation Strategies:

Quizzes (more quizzes, fewer exams per student feedback)

Exams

Case study, using concept/mind mapping approach

Written assignment

Approved UGCC 9.13.12 NRS 10.18.12

Course Title: NRS 357 Nursing Care of Adults and Older Adults 2

Credits: 3 (3,0)

Placement in the Curriculum (semester): Junior 2

Prerequisites: NRS 337, NRS 347

Course Description:

Focus is on nursing care of adults and older adults along the health-illness continuum. Evidence-based care of persons with select acute and chronic conditions is emphasized within the context of the nursing process. Interrelationships among physiology, pathophysiology, nursing assessments, diagnostic tests, medications, and interventions are analyzed.

Catalog description: Continued examination of nursing care of adults and older adults with application of evidence-based practice and nursing process for select acute and chronic conditions.

Course Objectives:

1. Describe pathophysiologic and psychopathologic origins, including genetic influences, of selected acute and chronic conditions in adults and older adults across the health- illness continuum.
2. Recognize and correctly interpret manifestations of acute processes within the context of chronic health conditions in adults and older adults.
3. Apply the nursing process utilizing nursing and other relevant theories, evidence, and knowledge of pharmacotherapeutics in prioritizing care for adults and older adults and their families.
4. Design nursing care appropriate for promoting, maintaining, and optimizing health of adults with potential or actual health problems.
5. Examine and discuss selected ethical issues and provision of culturally competent care of adults and older adults.

Topical Outline

Clotting and Anticoagulation

Therapy in DVT prophylaxis, MI and stroke prophylaxis, etc.

Mobility/Immobility

Osteoarthritis

Osteoporosis

Pressure ulcers – tissue integrity

Joint replacements

Joint deformity

Fractures

Bone healing

Renal system – fluid/electrolyte balance, acid-base balance regulation, elimination

Incontinence

UTI

Pyelonephritis

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Cystitis
Diverticula
Acute kidney injury/chronic kidney disease
Dialysis

Cardiac – Circulation, hemodynamics, perfusion, oxygenation

Dysrhythmias
HTN
Dyslipidemia
Acute coronary syndrome (angina/MI)
Heart failure
Cardiogenic shock

Neuro – Intracranial regulation

Delirium
TBI
Stroke
Spinal cord injury – neurogenic shock
Seizure
Brain death

Multi-Organ System Dysfunction (MODS)

Sexually Transmitted Infections

(by prevalence) Gonorrhea, Chlamydia, Syphilis, genital herpes, genital warts

Reproductive health

Prostate
Breast
Uterus

Cancer care – Cellular regulation

Blood dyscrasias
Prevention/screening
Therapies – radiation/chemo

Textbook:

Medical-surgical nursing textbook
Simulation learning system (case studies)
Pathophysiology textbook
Pharmacology textbook
Diagnostic and Lab Test textbook

Teaching/Learning Strategies:

- Didactic
- Case Studies
- Group Work - think, pair, share; minute papers; “turn to your partner”
- Written assignment – select an intervention (nursing or interdisciplinary) for an acute or chronic disease, obtain a systematic research review or a clinical practice guideline in which the intervention is investigated, summarize the findings and judge the strength of the evidence for the intervention. Peer evaluation will be incorporated into the writing process.
- Group discussion (I-clickers)

Assessment/Evaluation:

- Exams
- Written assignment with peer evaluation

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Course Title: NRS 359 Clinical Practicum: Nursing Care of Adults and Older Adults I

Course Credits: 2 (0,2)

Placement in the Curriculum (semester): 2nd Semester Junior

Prerequisites: NRS 317; NRS 357 concurrent

Course Description:

An acute care clinical in which students utilize the nursing process to deliver and coordinate holistic care to diverse adult and older adult patients and their families. Therapeutic communication, intraprofessional collaboration, and clinical reasoning are emphasized. Nursing theory and current evidence are integrated into plans of care.

Objectives: The student will...

1. Apply nursing and related theories and research findings to the care of adults with complex needs and their families.
2. Critically apply the nursing process, with emphasis on planning, implementing, and evaluating outcomes, to provide coordinated care for culturally and ethnically diverse adults and older adults and their families in a variety of healthcare settings.
3. Survey the practice setting to identify existing and needed quality improvement initiatives.
4. Demonstrate skills of evidence retrieval, appraisal, and reporting related to select clinical questions.
5. Demonstrate effective communication (verbal and written) with patients, families, faculty, colleagues, and interdisciplinary team members to insure continuity of care.
6. Fulfill clinical assignments and responsibilities demonstrating accountability to self, patients, families, and colleagues.
7. Apply professional codes and standards of practice when analyzing moral, social, ethical, and legal implications of nursing care.

Textbooks

All pertinent previously-purchased textbooks

Teaching/Learning Strategies

Direct patient care in the hospital setting

Attendance at/participation in interdisciplinary care planning conferences

Post-conference discussions (e.g., Grand Rounds and case review formats)

Create concept (mind) maps for assigned patients

Select an assigned patient with a history of mental health or AODA issues, describe how the patient's current care plan does or does not (and how it should) address those issues.

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Select an assigned patient and create a genetic pedigree, describe the patient's risk profile and develop a plan of care that includes patient education and referral.

As a group, identify a clinical question (PICO format), retrieve and appraise the evidence for the practice in question

Assessment/Evaluation:

Clinical performance evaluation

Concept (mind) maps

Mental health paper

Group EBP project

Medication knowledge and calculation quizzes

COURSE TITLE: NRS 367 Community and Public Health Nursing

CREDITS: 3 (3-0)

PLACEMENT IN THE CURRICULUM: Junior 2

PREREQUISITES: NRS 327; NRS 357 concurrent

CATALOG DESCRIPTION:

Expands on population-focused and public health nursing practice with populations at risk and local and global communities as a whole. Key concepts include epidemiology, health promotion, disease prevention, risk reduction, harm reduction, and evidence-based practice.

COURSE DESCRIPTION:

This course focuses on the role of the nurse in population-focused and public health practice. Emphasis is on caring for populations at risk and local and global communities as a whole. Nursing science and epidemiology provide the basis for examining the spectrum of public health. Tools for community assessment and diagnosis as well as concepts of health promotion, disease prevention, risk reduction, harm reduction, and evidence-based practice for the health of populations and communities are presented.

COURSE OBJECTIVES: Upon completion of this course, the student will be able to:

1. Discuss the scope of population-focused and public health nursing practice.
2. Examine the impact of culture, genetics, socioeconomic factors, health behaviors, and physical environment on the health and safety of communities.
3. Use basic epidemiological methods to assess and analyze the health of communities.
4. Discuss the application of key health planning concepts in the development of public health policy and programs to meet identified needs.
5. Identify appropriate primary, secondary, and tertiary prevention strategies and risk reduction approaches in working with populations at risk.
6. Use evidence-based practices when implementing health teaching, health counseling, screening, disease and outbreak investigation, referral, and follow-up.

TEXTBOOKS:

Community/public health textbook (e.g., Nies & McEwen, *Community/Public Health Nursing: Promoting the Health of Populations*, 5th Ed., 2010)

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

Topical Outline:

Unit 1: Foundational Concepts

- I. Core/Essential Public Health Services
- II. Definitions

- a. Community health
- b. Population health
- c. Public health
- III. Community as Patient
 - a. Determinants of health - Culture, Biological/genetics, Socioeconomic status, Environment (e.g., environmental safety, home safety), Lifestyle, Violence (interpersonal and community)
 - b. Key health outcomes
 - c. Vulnerable populations
- IV. Organization of the U.S. Public Health system (federal, state, local)
- V. Public health policy, politics, and legislation
 - a. Policy development
 - b. Policy enforcement
- VI. Community Health Nursing - Definition, Focus, Process & Roles

Unit 2: Foundational Skills and Strategies

- I. Basic Epidemiological Concepts
- II. Interprofessional and community collaboration, coalition building, organizing
- III. Emergency preparedness, disaster response (e.g., bioterrorism, hazardous spill)

Unit 3: Practice Concepts

- I. Evidence-based Community/Public Health Nursing Practice:
 - a. Community Assessment (protective, predictive, and risk factors),
 - b. Data Analysis, Interpretation, and Diagnosis
 - c. Planning
 - d. Population-focused Interventions, including but not limited to
 - i. Health promotion
 - ii. Screening
 - iii. Harm reduction
 - iv. Disease management
 - v. Health counseling
 - vi. Health teaching
 - vii. Outreach
 - viii. Disease and outbreak investigation
 - ix. Referral and follow-up
 - e. Evaluation

Unit 4: Ethical Issues in Community/Population/Public Health

- I. Disparities in Health Outcomes (social ethics)

TEACHING/LEARNING ACTIVITIES:

Lecture/discussion

Guest speakers

Audiovisual presentations

Group Community Assessment, including Group Project Notebook and Peer/Self Evaluation
Community assessment

Personal reflection assignment - Personal reactions to/reflection on assigned readings or in-class activities

Community Health Problem/ Aggregate at Risk Paper and Presentation

On-line learning module: *Preparing for & Responding to Emergencies & Disasters*

Develop a “policy memo” to address a health issue identified in the community

ASSESSMENT/EVALUATION:

Exams

Community Health Problem/ Aggregate at Risk Paper and Presentation

Group Community Assessment, including Group Project Notebook and Peer/Self Evaluation

Completion of On-line Module, *Emergencies & Disasters*

Policy memo

Course Title: NRS 376 Nursing Care of Women, Infants, and Families

Credits: 3 (3,0)

Placement in the Curriculum: Junior 2

Prerequisites: NRS 367 concurrent

Course Description: This course focuses on evidence-based nursing care with individuals and families experiencing pregnancy, birth, and care of the newborn. Human responses are examined from theoretical and cultural perspectives. With the nursing process as a framework, health promotion and illness prevention are emphasized for patients in acute and community settings.

Course Objectives:

1. Analyze comprehensive patient health and illness assessment data, with particular attention to cultural differences in childbearing and newborn care practices.
2. Apply the nursing process, pertinent theories, and current evidence to deliver safe care and promote quality outcomes.
3. Describe collaborative interventions to promote health and prevent illness with diverse individuals and families in acute and community settings.
4. Discuss the implications of healthcare policy on the ethics of access, equity, and affordability of care.

Topical Outline

I. Trends and Issues

- U.S. Fertility and Birth rates
- U.S. Infant Mortality and Maternal Death rates
- Issues: (teenage pregnancy, substance abuse, health disparities, cultural competence, maternal- fetal conflict, stem cell research, cord blood banking, poverty, violence against women)
- Maternal and Child Health care Goals

II. Antepartal Period

- A. Genetics, Fetal Development, Placenta, Amniotic membranes, amniotic fluid, umbilical cord, Infertility
- B. Physiological adaptation to antepartum
- C. Psycho-social- cultural responses to antepartum
- D. Antepartal Risks/ Fetal Tests
 1. Antepartal Risk Factors
 2. Antenatal Testing: Fetal Well Being
 - a. Ultrasound
 - b. CVS
 - c. Alpha Fetal Protein
 - d. Daily Fetal Movement Count
 - e. Non-stress test
 - f. Contraction stress test
 - g. Biophysical profile
- E. Holistic Antepartal Nursing Assessment

III. High Risk Antepartum

PRE- Gestational Onset

- A. Cardiovascular disorders
 - 1. Anemia
 - 2. Heart Disease
 - B. Diabetes
 - 1. Woman with diabetes/becomes pregnant
 - 2. Gestational diabetes
 - GESTATIONAL-Onset
 - C. Hypertensive Disorders
 - 1. Preeclampsia
 - 2. Eclampsia
 - 3. HELLP syndrome
 - D. Placental/ Bleeding disorders
 - 1. Abortion
 - 2. Placental abnormalities
 - a). Placenta previa
 - b). Placenta abruption
 - 3. Ectopic pregnancy
 - E. Rh Incompatibility
 - F. Hyperemesis
 - G. Preterm labor
 - H. Holistic Antepartal Assessment & Care
- IV. Intrapartum Period
- A. Physiology of Labor
 - B. Stages of Labor
 - C. Maternal responses to labor
 - D. Family, cultural, spiritual responses to labor
 - E. Fetal responses to labor
 - 1. Fetal heart rate patterns
 - F. Five critical P's affecting labor
 - G. Lamaze International Care Practices that for Normal Birth
Standards of care for assessment of low risk & high risk women in labor
 - H. Non-Pharmacologic and Pharmacologic Interventions for laboring women
 - I. High Risk Labor and Birth
 - 1. Uterine Dystocia
 - 2. Labor interventions
 - a. Labor induction (cervical ripening, stripping membranes, oxytocin induction, amniotomy)
 - b. Labor augmentation
 - c. Amniotomy
 - 3. Operative vaginal delivery
 - a. Vacuum- assisted delivery
 - b. Forceps-assisted delivery
 - 4. Operative Birth
 - a. Vaginal Birth after a Cesarean (VBAC)
 - b. Cesarean Birth
 - 5. Post –Term pregnancy
 - 6. Obstetrical Emergencies
 - 1. Shoulder dystocia
 - 2. Prolapse cord
 - 3. Rupture of the uterus
 - 4. Amniotic fluid embolism
 - 5. Disseminated Intravascular Coagulation

V. Postpartum Care of Families

A. Family theory: Transition to Parenthood

1. Becoming a Mother Theory
2. Fatherhood
3. Bonding and Attachment theory
4. Cultural differences

B. Physiologic Assessments

1. Reproductive system
2. Breasts
3. Cardiovascular system
4. Respiratory system
5. Immune system
6. Urinary system
7. Muscular and Nervous systems
8. Gastrointestinal system

C. Assessment: Postpartum blues/ postpartum depression

D. Patient/Family Teaching

VI. High Risk Postpartum

A. Complications of postpartum

1. Hemorrhage
2. Infection
3. Coagulation disorders
4. Psychological complications

VII. The Neonatal period

A. Physiological and Behavioral responses of the neonate

1. Transition to Extrauterine Life (thermoregulation and other aspects)
2. Immediate assessment/ care after fourth stage of birth
3. Ongoing Neonatal Assessment
4. Behavioral Characteristics
5. Newborn Nutrition and Feeding
6. Therapeutic procedures (immunizations, hearing/screening, circ?)

B. Parent-infant attachment

1. Assess parent-infant bonding
2. Teach parent newborn care

VIII. High Risk Neonatal Care

A. Preterm newborn

B. Postmature newborn

C. Newborn with Meconium Aspiration Syndrome

D. Care of Small-for- Gestational Age Newborn/ Intrauterine Growth Restricted Newborn (IUGR)

E. Care of the Large-for- Gestational Age Newborn

F. Newborn with Hyperbilirubinemia

G. Newborn of Mother with Diabetes

H. Care of Newborn with Infection (Group Beta Strep)

I. Care of Newborn of Substance Abusing Mother

J. Care of Family with loss and grief of high risk newborn

Approved UGCC 9.13.12 NRS 10.18.12

Textbook:

Maternal/newborn textbook, (e.g., Davidson, London, & Ladewig, *Olds Maternal-Newborn Nursing and Women's Health Across the Lifespan*, 9th Ed., 2012)

Course Delivery Mode:

This course could be taught in the hybrid format. It was proposed using the Team-Based Learning strategy.

Teaching Strategies:

Case studies (including controversial cases), with teams
Class discussion
Videotaped vignettes/case studies/simulation with analysis by teams
Team-focused readiness tests
NCLEX-style questions

Assessment/Evaluation:

Take a position on an issue in a controversial case study
Class presentations
Written assignments by teams (analysis of collaboration during simulation)
Readiness achievement tests
I-clicker NCLEX questions
Exams

Course Title: NRSB 378 Clinical Practicum: Nursing Care of Women, Infants, and Families

Credits: 2 (0-2)

Placement in the Curriculum (semester): Jr 2

Prerequisites: NRSB 317; NRSB 376 concurrent

Course Description: This clinical course focuses on professional nursing practice in the care of individuals and families experiencing pregnancy, birth, and care of the newborn. Application of the nursing process with individuals and families in acute and community settings is emphasized. The following key concepts are included: physiological, psychological, spiritual, and cultural responses; experience of life transitions; developmental and family theory.

Course Objectives: The student will

1. Apply relevant developmental, family, transition, and other theories to plan care for individuals and families experiencing transitions of pregnancy, birth, and care of the newborn.
2. Implement holistic, evidence-based care for patients.
3. Demonstrate effective communication with patients, families, faculty, colleagues, and interdisciplinary team members to deliver family-centered, culturally sensitive care.
4. Use patient care technologies, information systems, and communication devices to support safe, quality nursing care.
5. Incorporate knowledge of the impact of cultural, socioeconomic, legal, and healthcare policy factors on healthcare delivery into the plan of care for women, infants, and families.
6. Demonstrate professional standards of ethical and legal conduct including accountability for personal and professional behaviors.

Textbooks

Maternal/infant textbook

Clinical Settings:

Hospital and community settings

Teaching/Learning Strategies

Direct patient care

Post-conference discussions (e.g., clinical issues, personal values and beliefs)

Journaling

Verbal and written care maps for assigned patients/families

Assessment/Evaluation

Clinical performance evaluation

Demonstration of use of facility computer system to obtain patient info, document med administration and interventions.

Verbal and Written Care Maps of patient/family nursing care

Discuss clinical issues, personal values, beliefs in post conference discussions or journal format

Medication knowledge and calculation quizzes

Approved NRSB Department 10.18.12

Course Title: NRSB 424 Nursing Leadership and Systems II

Credits: 3 (3,0)

Placement in the Curriculum: Senior I

Prerequisites: NRSB 327, NRSB 367

Catalog Description:

Examines role of nursing professional in influencing and developing policy within systems at the unit, local, state, national, and global levels. Key concepts include change, power, management, managerial ethics, quality improvement, safety, informatics, and technology.

Course Description:

This course examines the role of the nursing professional related to influencing and developing policy within systems at the unit, local, state, national, and global levels. Theories and strategies related to power and change will be explored. This course examines the role of nurses as leaders and managers for patient safety and quality care within systems. Management theories, strategies, and research will be examined. The role of the nurse manager in addressing ethical issues using the ANA Code of Ethics and using Evidence Based Practice to improve patient care will be explored. Workplace safety will be examined. The role informatics and technology play in quality improvement and monitoring patient outcomes will also be explored.

Course Objectives

1. Examine nursing management theories, strategies, and research.
2. Analyze the role of the nurse in influencing, developing, leading, and evaluating policies at unit, local, state, national, and global levels.
3. Analyze recommendations for healthcare policy and financing that address issues of access, equity, and affordability at a local, state, national, and global level.
4. Use the ANA Code of Ethics and a decision-making model to address ethical issues in management.
5. Analyze nursing's input into the life cycle of patient care technologies and electronic health record systems.
6. Examine the use of information systems to store and analyze health quality data for safe, quality care.
7. Examine system quality and safety standards that improve patient outcomes and enhance workplace safety.
8. Discuss the role of the nurse manager in using research and evidence-based practice (EBP) to improve patient care and direct management decisions.

Topical List

Unit I: Social determinants of health and their impact on health care at the organization/state/national/global levels

1. Educational/SES impacts

Unit II: Change

1. Change Theories and Models
2. Change Strategies
3. Community participatory process/community action

4. Strategic planning

Unit III: Policy and Politics

1. Policy making/implementation/evaluation
 - a. Unit level
 - b. Organizational level
 - c. Local level
 - d. State level
 - e. National level
 - f. Global level
2. Political process for Policy development
 - a. Unit level
 - b. Organizational level
 - c. Local level
 - d. State level
 - e. National level
 - f. Global level
3. Nurse involvement---nurse as activist, nurse in political arena

Unit IV: Management

1. Management Theories
2. Management Ethics
3. Management Strategies

Unit V: Quality improvement – QI process unit level, facility and organizational level, policy level

1. Role of informatics
2. Nurses' input into lifecycle of information systems and patient technologies

Unit VI: Safety

1. Patient—organization/national/global
2. Workplace violence and safety
3. QSEN

Unit VII: Magnet status/shared governance

Unit VIII: Quality benchmarks and core measures

Unit IX: Other selected health care systems from around the world in comparison with U.S.

Unit X: Research at the Systems level

1. How the nurse manager facilitates EBP on the unit
2. How the nurse manager uses research to guide management decisions

Unit XI: Ethics

1. Use of ANA Ethical Standards at a systems level
2. Managerial ethics
 - a. Similarities with ANA
 - b. Differences with ANA

Textbook:

Leadership – management text

Course Delivery Method:

This course may be suitable for a hybrid delivery mode.

Teaching/Learning Strategies

Lecture

Ethical game Simulation

Writing to learn activities, including a Management paper with presentation

Group assignment: Mock root cause analysis

Group assignment: Small test of change

Assessment/Evaluation

Exams

Management paper

Management presentation

Course Title: NRS 428 Clinical Practicum: Nursing Leadership I

Course Credits (Lecture-Lab): Clinical 2 Credits

Placement in the Curriculum (semester): Senior 1

Prerequisites: NRS 424 concurrent

Catalogue description: Applies quality and safety concepts; advocates for elimination of health disparities; and demonstrates leadership, team building, and collaborative strategies to promote and maintain health at the systems level. Clinical laboratory in community settings.

Course Description: In this clinical practicum the student demonstrates leadership skills, applies concepts of quality and safety, and demonstrates team building and collaborative strategies. Students will reflect on their own beliefs and values, and advocate for the elimination of health disparities to promote and maintain health with diverse populations, communities, and cultures. The clinical practicum will occur in a variety of settings at a systems level.

Clinical Objectives

1. Demonstrate leadership skills to implement patient safety and quality improvement standards and initiatives.
2. Apply concepts of quality and safety using structure, process, and outcome measures to identify clinical questions and facilitate the process of changing current practice.
3. Demonstrate team building and collaborative strategies when working with intra- and inter- professional teams.
4. Reflect on personal beliefs and values as they relate to one's professional leadership and management practice within systems.
5. Advocate for specific recommendations to eliminate health disparities in practice settings.
6. Demonstrate clinical reasoning to promote and maintain health in populations, diverse in culture, socioeconomic status, and education, in a variety of settings.

Textbooks:

Leadership management text

Community/Public Health textbook

Possible Clinical Settings for this Systems Level clinical experience:

Community and public health settings

Clinic or hospital settings

Home health agencies

Long term care or assisted living facilities

Group homes

Industries

Community agencies

Professional nursing organizations

Government agencies, policy making bodies, etc.

Teaching/Learning Strategies

Systems-level nursing practice in various settings

Group project - quality improvement project(s) within the health care system of the clinical experience that includes interprofessional collaboration

Individual written assignment – critique of their experience with intra- and interprofessional teamwork and collaboration, applying group theory; and discussion of how they applied learning from a liberal education course to this clinical experience

Clinical discussions, post-conferences

Assessment/Evaluation:

Clinical performance in leadership/management/communication/collaboration domains

Written assignment - description of the group quality improvement project

Individual written assignment – critique of experience with intra- and interprofessional teamwork/collaboration (applying group theory), and discussion of application of liberal education learning to this clinical

Course Title: NRS 446 Nursing Care of Children & Families

Credits: 4 (4, 0)

Placement in the Curriculum (semester): Senior 1

Prerequisites: NRS 367, NRS 376

Course Description: This course focuses on the evidence-based nursing practice with children and families to promote health within acute and chronic illness along the health-illness continuum. Application of the nursing process in the care of children and families is emphasized. Key concepts include growth and development, health promotion, safety and quality, family-centered care, physiological, psychological, and socioeconomic factors, diversity, and ethical dilemmas.

Course Objectives:

The student will:

1. Synthesize current health promotion and clinical prevention recommendations into nursing care of children and families.
2. Explore strategies for improving the safety, quality, and cost-effectiveness of health care through the active involvement of children and families.
3. Appraise the strength and relevance of available evidence to choose interventions for the provision of child- and family centered care.
4. Apply scientific, nursing, and related theories to diagnose and address identified nursing care needs of children and their families.
5. Use clinical reasoning to analyze health quality data and plan care for acutely and chronically ill children and their families.
6. Develop strategies to resolve ethical and legal dilemmas in the care of acutely and chronically ill children.

Topical Outline:

- Family-centered care
 - Family theory: Parenting
 - Family Assessment Strategies
 - Family presence –family members as integral to the nursing care of children
 - Stressors of illness and hospitalization on children and families
- Health promotion and clinical prevention with children and families
 - Primary prevention (e.g., immunizations)
 - Screenings (e.g., developmental)
 - Environmental safety recommendations
 - Anticipatory guidance with parents based on developmental age
 - Bright Futures Resource
 - Search Institute Resource on Developmental Assets
- Caring for children
 - Pediatric physical and developmental assessment
 - Genetic assessment, including genogram/pedigree
 - Child Life Overview
 - Caring for the child with (includes pathophysiology, diagnostics, and medical and nursing management)
 - Respiratory dysfunction
 - Upper vs. Lower Respiratory infections in children
 - RSV
 - Croup
 - Otitis Media
 - Asthma

- Cystic Fibrosis
- Tonsillectomy
- Cardiovascular dysfunction
 - Hemodynamics, distinctive manifestations, therapeutic management of congenital heart disease (e.g. ASD, VSD, Transposition of Great Vessels)
 - Congestive heart failure
 - Kawasaki
 - Rheumatic Fever and Rheumatic heart disease
 - Cholesterol screenings in children
 - Hypertension in children and adolescents
- Cerebral dysfunction
 - CNS Function and Assessment in Children
 - Increased intracranial pressure
 - Syndrome of Inappropriate Antidiuretic Hormone
 - Head Injuries
 - Epidural and Subdural hemorrhages
 - Near-Drowning
 - Bacterial Meningitis
 - Aseptic/Tuberculosis Meningitis
 - Seizures and Epilepsy in children
 - Myelomeningocele
- Neuromuscular dysfunction
 - Muscular Dystrophy--Duchenne
 - Cerebral Palsy
 - Hypotonia
- Musculoskeletal dysfunction
 - Effects of Immobilization on children and families
 - Fractures in children
 - Legg-Calve-Perthes Disease
 - Slipped Capital Femoral Epiphysis
 - Osteogenesis Imperfecta
 - Scoliosis
 - Osteomyelitis
 - Juvenile Idiopathic Arthritis
 - Congenital dysplasia of the hip
 - Club foot
- Genitourinary dysfunction
 - Urinary tract infections
 - Vesicoureteral Reflux
 - Acute glomerulonephritis
 - Nephrotic syndrome
 - Nephrogenic diabetes insipidus
 - Hemolytic uremic syndrome
 - Familial nephritis(Alport syndrome)
 - Renal failure (acute and chronic)
- Gastrointestinal dysfunction
 - Infections affecting GI system in children
 - Constipation
 - Hirschsprung Disease

- Gastroesophageal Reflux
- Encopresis
- Acute appendicitis
- Ulcerative colitis
- Crohn disease
- Hypertrophic pyloric stenosis
- Celiac disease
- Short-bowel syndrome
- Hepatitis
- End-stage liver disease
- Endocrine dysfunction
 - Growth hormone deficiency
 - Excessive Growth Hormone
 - Congenital Adrenal Hyperplasia,
 - Addison Disease
 - Type 1 Diabetes mellitus
 - Type 2 Diabetes
 - Juvenile Hypothyroidism
 - Hyperthyroidism
 - Addison Disease
 - Cushing Syndrome
 - Phenylketonuria
- Cancers
 - Occurrence and survival of childhood cancer
 - Treatment of cancer in children: (e.g. chemotherapeutic agents common used in children, radiation, Bone marrow transplant)
 - Lethal organisms in the immunocompromised child
 - Pain management in children with cancer
 - Brain tumors
 - Leukemia-ALL
 - Hodgkin disease
 - Non-Hodgkin lymphoma
 - Neuroblastoma
 - Osteosarcoma
 - Ewing sarcoma
 - Wilms tumor
 - Rhabdomyosarcoma
 - Retinoblastoma
 - Testicular cancer
 - Late effects of cancer treatment in children
 - Death and dying of children
- Family with a Member Experiencing an Alteration in Mental Health
 - Cognitive impairment
 - Autism spectrum disorder
 - Attention Deficit Hyperactivity Disorder or Attention Deficit Disorder
 - Depression/Affective Disorder
 - Eating disorder
 - Substance abuse (tobacco, alcohol, drug)
 - Suicide

- Caring for families
 - Family and community/public health
 - Issues in Access to Care and Health Care Finance
 - Medical Home for children and families
 - Vulnerable children and families (e.g. Homeless children and families, migrant children and families, children growing up in homes with same-gender parents)
 - Child abuse
- Legal/Cultural/Ethical issues in pediatrics
 - Circumcision (male and female)
 - Parental vs. child's legal rights (e.g. parental notification prior to abortion, child's consent/assent to research, treatment, refusal of immunizations by parents)
 - Laws directly affecting children (e.g. spanking)
 - Any other 'hot issue' at time of course offering

Textbook:

Pediatric Nursing Textbook

Teaching/Learning Activities:

Case studies

Case studies

Nursing care plans, concept maps

Teaching plans

i-clicker questions

Group Ethical/Legal/Cultural Issues Handout and Presentation

Assessment

Exams

Weekly Online Quizzes

Seminar Participation

Group Ethical/Legal/Cultural Issues Handout and Presentation

Medication Knowledge Quiz

Course Title: NRSB 447 Clinical Practicum: Nursing Care of Children and Families

Credits: 2 (0,2)

Placement in the Curriculum (semester): Senior 1

Prerequisites: NRSB 378; NRSB 446 concurrent

Course Description: This clinical course focuses on professional nursing practice in the care of children and families to promote health in acute and chronic illness along the health-illness continuum. Application of evidence-based practice and the nursing process in the care of children and families are emphasized. Key concepts include growth and development, family-centered care, physiological, psychological, and socioeconomic factors, health promotion, safety, quality, diversity, and ethical dilemmas.

Course Objectives:

1. Conduct assessments of health and illness parameters in children and their families using developmentally and culturally appropriate approaches.
2. Revise the plan of care based on ongoing evaluation based on child and family outcomes.
3. Use nursing and family theory to implement evidence-based interventions with children and families along the health-illness continuum.
4. Use inter- and intra-professional communication and collaborative skills to advocate for and deliver quality child- and family-centered care.
5. Utilize patient care technology and information tools to support safe processes of care for children and their families.
6. Explore strategies for improving the safety, quality, and cost-effectiveness of health care through the active involvement of children and families.
7. Demonstrate responsibility for self-direction, self-evaluation, and independent learning in professional practice.

Textbooks:

Care of infants and children textbook, e.g., Hockenberry & Wilson, *Wongs' Nursing Care of Infants and Children*, 9th Ed., 2011

Clinical Practicum Setting:

Hospitals and/or community/public health settings

Teaching/Learning:

Direct patient care (child and family)

Concept maps with post-conference presentation

Post-conference discussions

Developmental theory assignment

Patient safety goals assignment

Delegating and prioritizing care assignment

Group EBP exercise: identify clinical question, retrieve and appraise evidence, integrate into a recommendation for a clinical practice change, propose evaluation

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Assessment/Evaluation:

Developmental Theory Assignment re: an assigned patient and family

Patient Safety Goals Assignment: Joint Commission's Patient Safety Goals

Delegating and Prioritizing Assignment re: an assigned patient's care plan

Concept Maps with post-conference presentation

Paper describing the Group EBP Exercise: describe the process (i.e., identify clinical question, retrieve and appraise evidence, synthesize into a recommendation for a clinical practice change, propose evaluation)

Medication knowledge and calculation quizzes

Course Title: NRS 457 Nursing Care of Chronically Ill Patients and Their Families

Credits: 3 (3,0)

Placement in the Curriculum: Senior 2

Prerequisites: NRS 357, NRS 376, NRS 446

Course Description:

Focus is on holistic nursing care of patients and families experiencing chronic conditions. Key concepts include healthy adaptation to chronic illness, self-management, disability, frailty, loss and grief, end of life care, family caregiving, and evidence-based practice.

Course Objectives: The student will:

1. Estimate the impact of chronic and terminal illness(es) on individual and family function, including coping, based on key theoretical concepts.
2. Create holistic care plans for patients and families at various points on the chronic illness trajectory, considering relationships among disease pathophysiology, human responses, disease manifestations, evidence-based management strategies and available community resources.
3. Design interprofessional approaches to care coordination addressing the complexity of care of patients experiencing multiple chronic conditions or complicated acute events.
4. Develop approaches to resolve ethical issues associated with chronic conditions and the end of life.

Topical Outline

Theoretical background to chronic illness

The trajectory of chronic illness

Health within illness

Disability

Debilitation

Frailty

Self-management

Adherence

Family theory: family caregiving

Caregiver role strain

Human responses common in chronic illness:

Resilience

Self-efficacy

Fatigue

Transcendence

Denial

ChronicPain

Suffering

Spirituality

Uncertainty

Nursing care of adults, older adults, and children with chronic conditions, and their families

Functional assessment

Holistic interventions, including

Motivational interviewing

Stress management

Community resources for complex chronic illness support

Case management for individuals and populations

Change of living setting – when, where, how, resources

Caregiver support

Ethical decision making in complex situations

Withdrawal of nutrition

Withdrawal of life support

Interpersonal abuse and/or neglect (e.g., elder abuse and neglect)

Palliative, hospice, and end-of-life care

Palliation/palliative care

Hospice care

Advanced directives and advanced care planning

Grief and loss, grief support

Spiritual care

Human responses in unexpected deaths (e.g., perinatal loss, death of a child, suicide, traumatic death)

Management of selected chronic conditions: (select for prevalence)

Asthma

Cystic fibrosis

Autosomal recessive vs autosomal dominant polycystic kidney disease (ARPKD vs ADPKD)

Metabolic syndrome (from a health promotion perspective)

Dementia

Multiple sclerosis

Myasthenia gravis

Amyotrophic lateralizing sclerosis (ALS)

Parkinson's

Chronic neck and back pain

HIV/AIDS

Textbooks

Chronic illness textbook

Medical-surgical textbooks

Pediatric textbook

Pharmacology textbook

Teaching/Learning Strategies

Lecture

Case studies with concept maps

Role Play – take an assigned role in an interdisciplinary team planning care for chronically ill patient with complex needs

Group Discussions

Debates – students are given “pro” or “con” positions in a debate of ethical issues around end-of-life care (AACN Faculty Toolkit suggestion)

Written assignment - describe community resources available in the student’s home community for a patient with a disabling chronic health condition. Include resources for home maintenance and management, accessing health care services, mobility in the community, health information, etc.

Assessment/Evaluation

Exams

Case studies with concept maps

Written assignment on community resources

Course Title: NRS 467 Seminar: Innovative Solutions to Complex Healthcare Problems

Credits: 2 (2,0)

Placement in the Curriculum: 2nd Semester Senior

Prerequisites: NRS 424, NRS 428; NRS 477 concurrent

Catalog Description:

Focuses on designing effective systems approaches to meet needs of diverse populations with complex healthcare problems and ethical issues. Emphasizes critical and creative thinking, clinical reasoning, problem solving, collaboration, leadership, and ethical practice. Seminar.

Course Description:

The focus is on design of effective responses to meet needs of diverse populations that can be implemented across healthcare delivery systems. Emphasizes critical and creative thinking, clinical reasoning, problem solving, collaboration, and leadership skills to address complex healthcare problems and ethical dilemmas.

Objectives: The student will...

1. Analyze the multiple factors inherent in documented persistent population health problems at local, state, national, and global levels.
2. Evaluate effectiveness of current public and private models, systems, and strategies to solve complex, documented, and persistent population health problems.
3. Critique existing models, systems, and approaches to health promotion and care delivery based on principles of social justice (social ethics) in meeting identified health outcomes.
4. Design evidence-based, culturally competent, collaborative solutions to persistent population health problems.

Topical Outline:

Organizing Question: What can nurses individually, collectively, and collaboratively (interprofessional and community collaboration) do to solve horrible, complex, unfair, persistent health problems?

Local/Regional level

- Identify and analyze a persistent problem (consider selecting mental health issues to allow for a mental health promotion focus)
- Evaluate effectiveness of current public and private models, systems, and strategies in solving the persistent health problem
- Critique existing local models, systems, and approaches to health promotion and care delivery based on principles of social justice in meeting identified health outcomes.
- Design evidence-based, culturally competent, collaborative solutions
- Identify a relevant target audience for the designed solutions and discuss how the solution would be disseminated

State level

- Identify and analyze a persistent problem
- Evaluate effectiveness of current public and private models, systems, and strategies in solving the persistent health problem
- Critique existing state models, systems, and approaches to health promotion and care delivery based on principles of social justice in meeting identified health outcomes.
- Design evidence-based, culturally competent, collaborative solutions
- Identify a relevant target audience for the designed solutions and discuss how the solution would be disseminated

National level

- Identify and analyze a persistent problem
- Evaluate effectiveness of current public and private models, systems, and strategies in solving the persistent health problem
- Critique existing national models, systems, and approaches to health promotion and care delivery based on principles of social justice in meeting identified health outcomes.
- Design evidence-based, culturally competent, collaborative solutions
- Identify a relevant target audience for the designed solutions and discuss how the solution would be disseminated

Global level

- Identify and analyze a persistent problem
- Evaluate effectiveness of current public and private models, systems, and strategies in solving the persistent health problem
- Critique existing models, systems, and approaches to health promotion and care delivery based on principles of social justice in meeting identified health outcomes.
- Design evidence-based, culturally competent, collaborative solutions
- Identify a relevant target audience for the designed solutions and discuss how the solution would be disseminated

Textbook

Community/Public Health textbook

Leadership textbook

Course Scheduling Suggestion:

Schedule this seminar (a total of 30 hours) in blocks, some before and some after their Senior 2 hospital clinical course, so that learning in the population-focused seminar can inform their hospital leadership clinical practice, and vice versa.

Teaching/Learning Strategies:

Public health nurse simulation (may not be a guarantee that all students will have a public health clinical experience)

Group Interprofessional project (e.g., social work, health care administration, political science students) that includes analysis of selected persistent health problems using identified analytical framework, evaluation of

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current approaches to the problem for their effectiveness and social justice, and designing and disseminating solutions.

Assessment/Evaluation:

Group papers and presentations based on the analysis/critique/development of solutions

Peer evaluation of group participation using a peer evaluation rubric

Course Title: NRS 477 Clinical Practicum: Nursing Leadership II

Credits: 4 (0, 4)

Placement in curriculum: 2nd Semester Sr

Prerequisites: NRS 424, NRS 428, NRS 446; NRS 457 and NRS 467 co-requisites

Course Description: Nursing clinical reasoning, leadership, and application of evidence are integrated with management of a caseload of multiple patients. Focus is on achievement of beginning competence in professional nursing practice. Includes participation in quality improvement at the organizational level. Discussion and reflection facilitate synthesis and integration of liberal education, leadership, scholarship, and professionalism in the context of practice.

Objectives: The student will:

1. Synthesize clinical evidence, nursing process, systems knowledge, and liberal education to promote the health, safety, and quality of care for individuals, families, groups, and populations.
2. Integrate liberal & nursing education to collaboratively develop an evidence-based quality improvement plan to address an identified nursing practice problem.
3. Demonstrate competent use of patient care technology.
4. Incorporate patient education into every aspect of nursing care.
5. Demonstrate leadership in care coordination for a caseload of patients to address individual patient outcomes.
6. Synthesize recommendations for changes in health policy and financing to meet acute healthcare needs of populations.
7. Collaborate with intradisciplinary and interdisciplinary groups to optimize patient outcomes.
8. Adhere to professional standards in nursing practice.
9. Demonstrate appropriate delegation of nursing care based on an understanding of legal and ethical issues.
10. Evaluate achievement of healthcare outcomes including the effectiveness of patient care management, nursing care delivery, and continuity of care.

Teaching/Learning Strategies:

Care coordination simulation

Direct patient care with a caseload of patients (Objectives 1, 2, 3, 4, 5, 7, 8, & 9)

Group assignment: Quality Management and Improvement Project to improve outcomes of care for an identified patient population in the hospital, with a focus on analysis and synthesis of evidence into recommendations and implementing those recommendations (Objectives 6 & 10)

Reflection paper on professional values, knowledge, skills, and attitudes

Assessment/Evaluation:

Medication knowledge and calculation quizzes

Clinical performance evaluation

Written description of Group Quality Management and Improvement Project

Reflection paper on professional values, knowledge, skills, and attitudes

Course Title: NRS 487 Transition to Professional Nursing Practice

Credits: 1 (1,0)

Placement in the Curriculum: Second semester senior

Prerequisites: NRS 424; NRS 477 concurrent

Course Description: Addresses issues and strategies to launch and maintain a successful professional nursing career.

Course Objectives:

1. Refine skills in resume/cover letter preparation, interviewing, and portfolio design and use. Demonstrate readiness to perform successfully on the NCLEX exam.
2. Describe key components of the RN licensure application process.
3. Practice NCLEX test taking strategies.
4. Recognize the ethical boundaries between personal life and professional practice.
5. Appreciate the importance of continuing education and mentorship across a career trajectory.
6. Synthesize a plan to adopt selected strategies to enhance personal and professional safety and success.

Topical outline:

1. Seeking and securing an RN Position: Issues & strategies (4 hrs.)
 - A. Resume & cover letter
 - B. Interview (phone & face-to-face)
 - C. Portfolio preparation and use
2. NCLEX & RN licensure (4 hrs.)
 - A. Description of NCLEX and RN licensure
 - B. Preparing for NCLEX—test taking strategies
 - C. Application process; individual student considerations
 - D. Elsevier Exam
3. Launching a successful personal and professional nursing career (6 hrs.)
 - A. Career trajectory as a leader (McBride's model)
 - B. Strategies to enhance personal and professional safety and success
 1. Preceptorship & mentorship
 2. Graduate education; continuing education
 3. Safety
 - i. Protection against malpractice—professional liability insurance
 - ii. Nurse fatigue
 - iii. Injury prevention
 4. Preparing for a successful personal financial future
 - C. Ethical boundaries between personal life and professional practice
 1. Ethical use of social media
 - D. Balancing personal and professional responsibilities
 1. Self-care including work-leisure balance, stress management

Textbooks:

NCLEX-RN review/prep textbooks that offer a good review of content, at least 4500 review questions, and a focus on test-taking strategies and rationale (e.g., Kaplan *NCLEX-RN Strategies, Practice, and Review 2012-13*, and Silvestri, *Saunders Comprehensive Review for the NCLEX-RN Examination*, 5th Ed, 2011)

Course Delivery Format:

Would be appropriate for immersion delivery strategy, early in the final semester (e.g., four 4-hour blocks)

Teaching/Learning Strategies:

- Voice of Experience: RN Panel (2 hrs.) (Panelists addressing all seminar topics from a lived experience perspective)
- Prepare a resume and portfolio
- Completion NCLEX practice items
- Develop a self-care improvement plan (AACN Faculty Toolkit suggestion)
- Develop a professional development plan
- Guest speaker: financial management expert

Assessment/Evaluation:

- Completion of NCLEX practice quizzes
- Performance on the HESI/Elsevier Exit Exam
- Professional development plan

**University of Wisconsin – Eau Claire
College of Nursing and Health Sciences
Department of Nursing**

Evaluation Plan for Revised BSN Curriculum

The measures that will be used for evaluation of the revised BSN curriculum will include:

- Student and faculty evaluations of courses
- Student end-of-program evaluations, including a standardized evaluation
- Artifacts demonstrating student achievement of program student learning outcomes (see Table 1 below)
- National standardized exam performance
- NCLEX-RN pass rates
- Alumni evaluations of the program

Table 1 Selected Artifacts Demonstrating Student Achievement of Program Student Learning Outcomes

PSLO	Level III Course	Semester	Artifact/Assignment
I	NRSG 428 Practicum: Leadership I	Senior 1	Written assignment, making explicit connection between what learned in Lib Ed and clinical experience
II, V, and VII	NRSG 428 Practicum: Leadership I	Senior 1	Written description of the group health promotion or quality improvement project to address population needs
III	NRSG 477 Practicum: Nursing Leadership II	Senior 2	Group quality improvement project to improve outcomes of care for an identified patient population, with focus on analysis and synthesis of evidence into recommendations
IV	NRSG 447 Practicum: Nursing Care of Children and Families	Senior 1	Written description of the EBP project, with appropriate emphasis on analysis of health quality data in the course of that project
VI (Level 3 outcomes 3a, 3b, & 3d)	NRSG 428 Practicum: Leadership I	Senior 1	Written critique of their experience with intra- and interprofessional teamwork and collaboration
VI (Level 3 outcomes 3d, 3e, & 3f), IX	NRSG 477 Practicum: Nursing Leadership II	Senior 2	Clinical performance
VIII	NRSG 477 Practicum: Nursing Leadership II	Senior 2	Reflective paper on professional values, knowledge, skills, and attitudes

**University of Wisconsin – Eau Claire
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**Plan for Faculty and Clinical Facilities
Transitioning from Current to Revised Curriculum**

Courses in corresponding semesters of the current and revised BSN curriculums will not be taught simultaneously. For example, Sophomore 2 courses in the current curriculum will be taught for the last time in Fall 2013 and Sophomore 2 courses in the revised curriculum will be taught for the first time in Spring 2014. Faculty with the requisite skill mix, as well as clinical facilities appropriate to serve the objectives of the courses, will be transitioned from courses in the current curriculum to courses in the revised curriculum.

UW-Eau Claire undergraduate students are placed in hospitals, long-term care settings, and community settings (e.g., assisted living facilities) primarily in the greater Eau Claire/Chippewa Falls and Marshfield areas. We currently have an affiliation agreement with a Minneapolis, Minnesota, hospital for a hospital pediatric clinical experience for students at the Eau Claire site. Students are placed for public health practicums in a large number of western and central Wisconsin agencies.

**UW-Eau Claire Department of Nursing
Detailed Current Curriculum Termination and Revised BSN Curriculum Implementation Plan**

Color Codes:	Last offering of a current curriculum course	First offering of a revised curriculum course	Indicates NRSNG 245, the only course in the current curriculum which is retained in the revised curriculum.	Courses in corresponding semesters of the current and revised curriculums will not be taught together. For example, Sophomore 2 courses in the current curriculum will be taught for the last time in Fall 2013 and Sophomore 2 courses in the revised curriculum will be taught for the first time in Spring 2014. The table below depicts the implementation/termination plan for the revised and current curriculums.
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Summer 2013	Fall 2013	Spring 2014	Summer 2014	Fall 2014	Spring 2015	Summer 2015	Fall 2015	Spring 2016	Summer 2016	
Summer work group: Course planning for Sophomore 2 and Junior 1 courses	NRSNG 230		Summer work group: Course planning for Junior 2 and Senior 1 courses			Summer work group: Course planning for Senior 2 courses			Summer work group: Evaluation of revised curriculum. By December 1, 2016, Submit evaluation to WI BON, along with planned and/or anticipated changes based on evaluation data.	
	NRSNG 240									
	NRSNG 245	NRSNG 245		NRSNG 245	NRSNG 245		NRSNG 245	NRSNG 245		NRSNG 245
		NRSNG 249		NRSNG 249	NRSNG 249		NRSNG 249	NRSNG 249		NRSNG 249
		NRSNG 257		NRSNG 257	NRSNG 257		NRSNG 257	NRSNG 257		NRSNG 257
		NRSNG 259		NRSNG 259	NRSNG 259		NRSNG 259	NRSNG 259		NRSNG 259
		NRSNG 267		NRSNG 267	NRSNG 267		NRSNG 267	NRSNG 267		NRSNG 267
		NRSNG 330		NRSNG 330	NRSNG 317		NRSNG 317	NRSNG 317		NRSNG 317
		NRSNG 335		NRSNG 335	NRSNG 327		NRSNG 327	NRSNG 327		NRSNG 327
		NRSNG 345		NRSNG 345	NRSNG 337		NRSNG 337	NRSNG 337		NRSNG 337
					NRSNG 347		NRSNG 347	NRSNG 347		NRSNG 347
		NRSNG 350		NRSNG 350	NRSNG 350		NRSNG 357	NRSNG 357		NRSNG 357
		NRSNG 352		NRSNG 352	NRSNG 352		NRSNG 359	NRSNG 359		NRSNG 359
		NRSNG 358		NRSNG 358	NRSNG 358		NRSNG 367	NRSNG 367		NRSNG 367
		NRSNG 368		NRSNG 368	NRSNG 368		NRSNG 376	NRSNG 376		NRSNG 376
							NRSNG 378	NRSNG 378		NRSNG 378
		NRSNG 420		NRSNG 420	NRSNG 420		NRSNG 420	NRSNG 420		NRSNG 424
		NRSNG 422		NRSNG 422	NRSNG 422		NRSNG 422	NRSNG 422		NRSNG 428
		NRSNG 432		NRSNG 432	NRSNG 432		NRSNG 432	NRSNG 432		NRSNG 446
		NRSNG 435		NRSNG 435	NRSNG 435		NRSNG 435	NRSNG 435		NRSNG 447
		NRSNG 438		NRSNG 438	NRSNG 438		NRSNG 438	NRSNG 438		
		NRSNG 470		NRSNG 470	NRSNG 470		NRSNG 470	NRSNG 470		NRSNG 470
		NRSNG 472		NRSNG 472	NRSNG 472		NRSNG 472	NRSNG 472		NRSNG 472
										NRSNG 477
										NRSNG 487

University of Wisconsin-Eau Claire Department of Nursing
Detailed Plan for Facilitating Progression in the Event of Failures in Courses in the Current BSN
Curriculum the Final Semester a Course is Offered

Individual students, in the event of failure of a course in the current curriculum during the final semester that course is offered, would need to meet with their advisor and the Associate Dean to map out a revised program plan that included remediation for the failed course. The table below identifies courses in the revised curriculum which have the potential to be substituted for courses in the current curriculum. Options for Independent or Directed study might also be appropriate.

Term (color-coded)	If a student fails this course in the current curriculum	Student could take this/these revised curriculum course(s) the following semester (and beyond)	Equivalency Note	"Unused" courses in the revised curriculum	
Sophomore 2	NRSRG 230	NRSRG 257		NRSRG 367 has no analogous course in the current curriculum	
	NRSRG 240	NRSRG 259 & NRSRG 267			
	NRSRG 245	NRSRG 245			
Junior 1	NRSRG 330	NRSRG 327			
	NRSRG 335				
	NRSRG 345	NRSRG 317 & NRSRG 337			
Junior 2	NRSRG 350	NRSRG 347 & NRSRG 357 (or NRSRG 347 plus the mental health component of NRSRG 350 as Independent Study)	NRSRG 347 plus NRSRG 357 would equal 6 credits whereas NRSRG 350 is just a 4-credit course		
	NRSRG 352	NRSRG 359			
	NRSRG 358	NRSRG 376			
	NRSRG 368	NRSRG 378			
Senior 1	NRSRG 420	NRSRG 420 as a Directed Study course	NRSRG 457, which would be analogous in the revised curriculum, will not yet have been offered as it is a Senior 2 course.		NRSRG 428 has no analogous course in the current curriculum
	NRSRG 422	Tailored 2 cr Directed Study clinical	No analogous clinical course in the revised curriculum		
	NRSRG 432	NRSRG 424			
	NRSRG 435	NRSRG 446			
	NRSRG 438	NRSRG 447			
Senior 2	NRSRG 470	NRSRG 467 & NRSRG 477			
	NRSRG 472	NRSRG 484			

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Sharon Henes		2) Date When Request Submitted: 4/1/13 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: WI Board of Nursing – Education and Licensure Committee			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Faculty exceptions – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Executive Assistant prior to the start of a meeting.			

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Dan Williams		2) Date When Request Submitted: 4/1/13 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: WI Board of Nursing – Education and Licensure Committee			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Clarification of continuing school approval as it relates to the usage of the NCLEX pass rate – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: Motion from 2012: Review of Quarter 3 2012 National Council Licensure Examination Report Pass Rate Data <i>(1) COMMITTEE MOTION:</i> Kay Coppens moved, seconded by Gretchen Lowe, to no longer use the current NCLEX pass rate monitoring program (appendix D/Guidelines for Nursing program administrators/May/06) and to instead follow the rules as written in N1.04 and N1.05. That NCLEX pass rates be a trigger for review of continuation of approval and not for monitoring/probation. Appendix D will be removed from the website. Motion carried unanimously.			

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Sharon Henes		2) Date When Request Submitted: 4/1/13 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: WI Board of Nursing – Education and Licensure Committee			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Status Update as to the Guidelines for Nursing Program Approval – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Executive Assistant prior to the start of a meeting.			

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**BOARD OF NURSING
MEETING MINUTES
MARCH 14, 2013**

PRESENT: Rachelle Lancaster, Julie Ellis, Maria Joseph (*left the meeting at 9:30 a.m.*), Lillian Nolan, Carol Ott, Gretchen Lowe; Kay Coppens

ABSENT: Julia Nelson; Jeffrey Miller

STAFF: Dan Williams, Executive Director; Pamela Stach, Legal Counsel; Matthew Niehaus, Bureau Assistant; Sharon Henes, Paralegal; and other Department Staff

CALL TO ORDER

Gretchen Lowe, Vice-Chair, called the meeting to order at 8:02 a.m. A quorum of seven (7) members was present.

ADOPTION OF AGENDA

Amendments to the Agenda

- Item “W-3” (closed session) **REPLACE** the agenda item titled “Jane Hathorn, R.N. (12 NUR 111)” with “June Hathorn, R.N. (12 NUR 111)”
- Item “W-13” (closed session) **REMOVE** the agenda item titled “W-13) Brandi J. Malcook, L.P.N. (12 NUR 416)”

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to adopt the agenda as amended. Motion carried unanimously.

OPEN MEETINGS LAW PRESENTATION

MOTION: Julie Ellis moved, seconded by Kay Coppens, to grant Greg Murray to 10 minutes to present on Open Meetings Law. Motion carried.

Rachelle Lancaster voted nay.

Maria Joseph left the meeting at 9:30 a.m.

APPROVAL OF MINUTES OF FEBRUARY 14, 2013

MOTION: Carol Ott moved, seconded by Rachelle Lancaster, to approve the minutes of February 14, 2013 as amended. Motion carried unanimously.

REPORT OF LEGISLATION AND RULES COMMITTEE

BOARD MOTION: Rachelle Lancaster moved for the adoption of the Legislation and Rules Committee’s recommendations. The Board adopts by unanimous consent.

Drafting N1, N2.02, and N3.02, Relating to School Approval

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, that the Legislative and Rules Committee will hold a meeting prior to the meeting in April to begin a first draft of N1. Motion carried unanimously.

COMMITTEE MOTION: Lillian Nolan moved, seconded by Rachelle Lancaster, to designate Rachelle Lancaster as the Board's representative to attend the Administrators for Nursing Education in Wisconsin on April 3, 2013. Motion carried unanimously.

REPORT OF EDUCATION AND LICENSURE COMMITTEE

BOARD MOTION: Carol Ott moved for the adoption of the Education and Licensure Committee's recommendations. The Board adopts by unanimous consent.

Status Update as to the Guidelines for Nursing Program Approval

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to place an item on the April 11, 2013 meeting for a status update as to the Guidelines for Nursing Program Approval document to consider the exceptions. If something arises that requires immediate action before that meeting, the Committee may hold an emergency meeting. Motion carried unanimously.

Board of Nursing Position Statement on Qualifications of Faculty for Distance Education Courses

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to request DSPS staff to remove the position statement on qualifications of faculty for distance education courses from the DSPS website. Motion carried unanimously.

Alverno College Request for Approval of Changes to RN-to-BSN Program

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to approve changes to the RN-to-BSN program for Alverno College. Motion carried unanimously.

Rasmussen College Ocala School of Nursing Request for Authority to Plan an Online RN-to-BSN Program

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to accept the proposal of Rasmussen College Ocala School of Nursing for authority to plan an online RN-to-BSN program. Motion carried unanimously.

Rasmussen College – Green Bay – Associate Degree in Nursing Program

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to request an addendum from Rasmussen College – Green Bay to the report previously submitted addressing NCLEX scores. Motion carried unanimously.

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to give authority to DSPS within the next 6 months to conduct a survey visit for program approval at Rasmussen College – Green Bay as described in N1.03(4) and defined in N1.02(13). Motion carried unanimously.

COMMITTEE MOTION: Kay Coppens moved, seconded by Gretchen Lowe, to request DSPS to determine who can legally be delegated to perform site visits. Motion carried unanimously.

Wisconsin Lutheran College Bachelor of Science in Nursing Program

COMMITTEE MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to request that Wisconsin Lutheran College provide an updated progress report addressing N1.06 and a plan to address NCLEX scores to DSPS no later than 8 business days prior to the April, 11, 2013 meeting. Motion carried unanimously.

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to give authority to DSPS before the end of this academic year (May, 2013) to conduct a survey visit at Wisconsin Lutheran College for program approval as described in N1.03(4) and defined in N1.02(13). Motion carried unanimously.

COMMITTEE MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to request DSPS to determine who can legally be delegated to perform site visits. Motion carried unanimously.

Herzing-Madison Request for Authorization to Admit Students to Bachelor of Science in Nursing Program

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to authorize Herzing to admit students for a BSN program. Motion carried unanimously.

Marian University Request for Approval of Major Program Change to Bachelor of Science in Nursing Program

COMMITTEE MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to approve Marian University's change to BSN major program proposal. Motion carried unanimously.

Lac Courte Oreilles Ojibwe Community College Request for Approval of Major Program Change to Associate of Applied Science in Nursing Program

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to request a self-evaluation of curriculum for Lac Courte Oreilles Ojibwe Community College by June 1, 2013. Motion carried unanimously.

COMMITTEE MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to give authority to DSPS to conduct a survey visit at Lac Courte Oreilles Ojibwe Community College for program approval as described in N1.03(4) and defined in N1.02(13). Motion carried unanimously.

COMMITTEE MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to request DSPS to determine who can legally be delegated to perform site visits. Motion carried unanimously.

COMMITTEE MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to approve the revised curriculum submitted by Lac Courte Oreilles Ojibwe Community College. Motion carried unanimously.

REPORT OF PRACTICE COMMITTEE

BOARD MOTION: Julie Ellis moved for the adoption of the Practice Committee's recommendations. The Board adopts by unanimous consent.

Discussion and Review of BON Position Papers currently on the DSPS website

COMMITTEE MOTION: Lillian Nolan moved, seconded by Julie Ellis, that Position Statements and/or FAQ's do not have the force of law, but are a means of providing direction for nurses on issues of concern to the Board relevant to protection of the public. Board position statements are reviewed annually for relevance and accuracy to current practice, the Nursing Practice Act, and Board rules. Motion carried unanimously.

Patient Abandonment

COMMITTEE MOTION: Lillian Nolan moved, seconded by Julie Ellis, to bring the Patient Abandonment Position Statement back to the Committee after revisions reflecting the discussion. Motion carried unanimously.

Performance of IV Therapy by Licensed Practical Nurses

COMMITTEE MOTION: Lillian Nolan moved, seconded by Julie Ellis, to remove the position paper on Performance of IV Therapy by Licensed Practical Nurses from the DSPS website. Motion carried unanimously.

Use of Social Media by Nurses

COMMITTEE MOTION: Lillian Nolan moved, seconded by Julie Ellis, to bring the Use of Social Media by Nurses Position Statement back to the Committee after revisions reflecting the discussion. Motion carried unanimously.

REQUIREMENT OF MILITARY CANDIDATES TO TAKE LPN NCLEX EXAMINATION

MOTION: Rachelle Lancaster moved, seconded by Julie Ellis, that the Board will create two lists, one for policy advisors and another for disciplinary experts. These lists will be maintained by DSPS staff. Motion carried unanimously.

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to place an item on the April meeting to address the criteria for being a policy advisor to the Board and the criteria for being a disciplinary expert for the Board. Motion carried unanimously.

NCSBN 2013 EXECUTIVE OFFICER SUMMIT

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to designate Dan Williams, with a DSPS attorney as an alternate, as the Board's representative to attend the NCSBN 2013 Executive Officer Summit in Lake Geneva on June 18-19, 2013. Motion carried unanimously.

INFORMATIONAL ITEMS

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to acknowledge the resignation of Kay Coppens. The Board designates Kay Coppens as the first Board Member Emeritus. The Board will draft a letter of appreciation to be sent to Kay and requests that Kay provide the Board with a photo and letter for publication on the Board of Nursing website. Motion carried unanimously.

MOTION: Carol Ott moved, seconded by Lillian Nolan, to allow Diana Gedamke to sit through closed session, with the exception of Monitoring and PAP Matters. Motion carried unanimously.

MOTION: Julie Ellis moved, seconded by Kay Coppens, to designate Rachelle Lancaster and Carol Ott, as the Board's representatives to attend the Froedert event on April 23, 2013. Motion carried unanimously.

CLOSED SESSION

MOTION: Julie Ellis moved, seconded by Rachelle Lancaster, to convene to closed session pursuant to Wisconsin State statutes 19.85(1)(a)(b)(f) and (g) for the purpose of conducting appearances, reviewing monitoring requests, requests for licensure, deliberate on stipulations, administrative warnings, proposed decisions and orders, consulting with Legal Counsel and Division of Legal Services and Compliance case status reports. Roll Call Vote: Kay Coppens-yes; Rachelle Lancaster-yes; Gretchen Lowe-yes; Julie Ellis-yes; Lillian Nolan-yes; and Carol Ott-yes. Motion carried unanimously.

The Board convened into Closed Session at 12:06 p.m.

RECONVENE TO OPEN SESSION

MOTION: Julie Ellis moved, seconded by Rachelle Lancaster, to reconvene into open session. Motion carried unanimously.

The Board reconvened into Open Session at 4:18 p.m.

VOTING ON ITEMS CONSIDERED OR DELIBERATED ON IN CLOSED SESSION

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to affirm all motions made in closed session. Motion carried unanimously.

ADMINISTRATIVE WARNINGS

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to issue an administrative warning in the matter of case number 12 NUR 354, 12 NUR 446, 12 NUR 462, 12 NUR 489, 12 NUR 506, and 12 NUR 542. Motion carried unanimously.

PROPOSED STIPULATIONS, FINAL DECISION AND ORDER IN THE MATTER OF DISCIPLINARY PROCEEDINGS AGAINST KAY S. WHITE, L.P.N., DHA SPS-12-0053, DLSC 12 NUR 145

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to table the matter of the disciplinary proceedings against Kay S. White, L.P.N. (12 NUR 145) until the April Board meeting due to quorum issues. Motion carried.

Julie Ellis recused herself from deliberation and voting in the matter of Kay S. White

PROPOSED STIPULATIONS, FINAL DECISIONS AND ORDERS

- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Barbara Phillips, L.P.N. (11 NUR 600). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Mary Ford, R.N. (11 NUR 666). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against June Hathorn, R.N. (12 NUR 111). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Tina M. Behrens, R.N. (12 NUR 133). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Deborah S. Summerville, L.P.N. (12 NUR 153). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Laura Adams, L.P.N. (12 NUR 163). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Jane E. Beers, R.N. (12 NUR 295). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Margaret R. Powell-Mack, R.N. (12 NUR 296). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against John M. Daniels, R.N. (12 NUR 315). Motion carried unanimously.

- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Karen Cole, R.N. (12 NUR 347). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Jennifer S. Pipes, R.N. (12 NUR 400). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Tammy M. Wendt, R.N. (12 NUR 400). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Larua K. Berweger, R.N. (12 NUR 418). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Susan S. Vancamp, R.N. (12 NUR 425). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Valerie K. Whitehead, R.N. (12 NUR 431). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Cynthia L. Schmidt, R.N. (12 NUR 450). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Rachael A. Balthazor, R.N. (12 NUR 466). Motion carried unanimously.
- MOTION:** Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Keith P. Hawkins, R.N. (12 NUR 519). Motion carried unanimously.

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Matthew S. Elliot, R.N. (12 NUR 523). Motion carried unanimously.

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to adopt the Findings of Fact, Conclusions of Law, Final Decisions and Orders in the disciplinary proceedings against Kathryn A. Re, R.N. (12 NUR 554). Motion carried unanimously.

CASE CLOSINGS

MOTION: Carol Ott moved, seconded by Lillian Nolan, to close the case #12 NUR 268 for Compliance Gained (P2). Motion carried unanimously.

MOTION: Carol Ott moved, seconded by Lillian Nolan, to close the case #13 NUR 073 for Insufficient Evidence (IE). Motion carried unanimously.

MOTION: Carol Ott moved, seconded by Lillian Nolan, to close the case #12 NUR 196 & #12 NUR 197 for Prosecutorial Discretion (P1). Motion carried unanimously.

MOTION: Carol Ott moved, seconded by Lillian Nolan, to close the case #12 NUR 397 for Insufficient Evidence (IE). Motion carried unanimously.

CREDENTIALING MATTERS

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to request DSPS staff to provide Rachelle Lancaster with all applicants with a current disciplinary action in another state or currently enrolled in PAP, or a similar program, in another state for review. Motion carried unanimously.

Lisa Dietrich – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Lisa Dietrich's application for licensure once all other conditions are met. Motion carried unanimously.

Kim Geiger – L.P.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to deny Kim Geiger's application for licensure. **REASON FOR DENIAL:** California requirements for licensure for L.V.N.s are not equivalent to N3.03(5). Motion carried unanimously.

Anasthasia Vakunta – L.P.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to deny Anasthasia Vakunta’s application for licensure. **REASON FOR DENIAL:** California requirements for licensure for L.V.N.s are not equivalent to N3.03(5). Motion carried unanimously.

Beth Smith – R.N. Re-Registration

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Beth Smith’s a limited license pursuant to 5.08(2)(b) for the sole purpose of taking a Nurse Refresher Course. Motion carried unanimously.

Julie Alvarado – L.P.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant Julie Alvarado’s request to sit for the L.P.N. Examination. Motion carried unanimously.

Christie Henke – A.P.N.P. Examination

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to grant Christie Henke’s request to sit for the A.P.N.P. Examination. Motion carried unanimously.

Deborah Longhenry – R.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Deborah Longhenry’s request to sit for the R.N. Examination. Motion carried unanimously.

Rachelle Mertes – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant Rachelle Mertes’ application for licensure once all other conditions are met. Motion carried unanimously.

Ellary K. Renier – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Ellary K. Renier’s application for licensure once all other conditions are met. Motion carried unanimously.

Deonna Shanks – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to grant Deonna D. Shanks’ application for licensure once all other conditions are met. Motion carried unanimously.

Travys Thorsen – L.P.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Travys Thorsen’s request to sit for the L.P.N. Examination. Motion carried unanimously.

James Bichler – L.P.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant James Bichler’s request to sit for the L.P.N. Examination. Motion carried unanimously.

Virginia Capelle – R.N. Examination

MOTION: Kay Coppens moved, seconded by Julie Ellis, to deny Virginia Capelle’s request to sit for the R.N. Examination. **REASON FOR DENIAL:** Recent convictions substantially related to the practice of nursing. Motion carried unanimously.

Julie Holmes – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant Julie Holmes’ application for licensure once all other conditions are met. Motion carried unanimously.

Nancy Klausegger – R.N. Re-Registration

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to grant Nancy Klausegger’s application for re-registration once all other conditions are met. Motion carried unanimously.

Erin Owens – L.P.N. Examination

MOTION: Julie Ellis moved, seconded by Carol Ott, to grant Erin Owens’ request to sit for the L.P.N. Examination. Motion carried unanimously.

Liliana Rascon – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Julie Ellis, to grant Liliana Rascon’s application for licensure once all other conditions are met. Motion carried unanimously.

Ashley Spencer – R.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant Ashley Spencer’s request to sit for the R.N. Examination. Motion carried unanimously.

Heather Wiltse – L.P.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Julie Ellis, to deny Heather Wiltse’s request to sit for the L.P.N. Examination. **REASON FOR DENIAL:** Recent convictions substantially related to the practice of nursing. Motion carried unanimously.

Holly Woodford-Schiller – R.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Holly Woodford-Schiller’s request to sit for the R.N. Examination. Motion carried unanimously.

Xayxana Yang – R.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant Xayxana Yang’s request to sit for the R.N. Examination. Motion carried unanimously.

Christa Waldenmaier – R.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant Christa Waldenmaier’s request to sit for the R.N. Examination. Motion carried unanimously.

Chad Bintz – R.N. Examination

MOTION: Kay Coppens moved, seconded by Julie Ellis, to grant Chad Bintz’s request to sit for the R.N. Examination. Motion carried unanimously.

Rebecca Suess – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Julie Ellis, to grant Rebecca Suess’ application for licensure once all other conditions are met. Motion carried unanimously.

Wanda Waller – L.P.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Wanda Waller’s request to sit for the L.P.N. Examination. Motion carried unanimously.

Sandra Carson – R.N. Endorsement

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to grant Sandra Carson’s application for licensure once all other conditions are met. Motion carried unanimously.

Lori Hollister – R.N. Examination

MOTION: Julie Ellis moved, seconded by Carol Ott, to table Lori Hollister’s request to sit for the R.N. Examination until further information is obtained regarding the terms of probation. Motion carried unanimously.

Chastity Peterson – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Julie Ellis, to grant Chastity Peterson’s application for licensure once all other conditions are met. Motion carried unanimously.

Jacqueline Kucera – R.N. Endorsement

MOTION: Julie Ellis moved, seconded by Rachelle Lancaster, to grant Jacqueline Kucera’s application for licensure once all other conditions are met. Motion carried unanimously.

Andrea Baker – R.N. Endorsement

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Andrea Baker’s application for licensure once all other conditions are met. Motion carried unanimously.

David Steele – A.P.N.P. Endorsement

MOTION: Lillian Nolan moved, seconded by Carol Ott, to grant David Steele’s application for licensure once all other conditions are met. Motion carried unanimously.

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to adopt the following statement:

The Board recognizes that the following applicants for licensure were inadvertently allowed by DSPS to sit for the NCLEX examination prior to the full Board’s consideration of whether each applicant’s conviction was substantially related to the practice of nursing. Motion carried unanimously.

The Board now considers each applicant’s conviction and makes the following motions:

Valerie Agee – R.N. Examination

MOTION: Julie Ellis moved, seconded by Carol Ott, to grant Valerie Agee’s request to sit for the R.N. Examination. Motion carried unanimously.

NaPortia Ashford – R.N. Examination

MOTION: Kay Coppens moved, seconded by Carol Ott, to grant NaPortia Ashford's request to sit for the R.N. Examination. Motion carried unanimously.

Brian Bellendorf – L.P.N. Examination

MOTION: Carol Ott moved, seconded by Kay Coppens, to grant Brian Bellendorf's request to sit for the L.P.N. Examination. Motion carried unanimously.

Daniel Golombowski – R.N. Examination

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to grant Daniel Golombowski's request to sit for the R.N. Examination. Motion carried unanimously.

Lindsey Russell – L.P.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Lindsey Russell's request to sit for the L.P.N. Examination. Motion carried unanimously.

Chloe Schrab – R.N. Examination

MOTION: Lillian Nolan moved, seconded by Kay Coppens, to grant Chloe Schrab's request to sit for the R.N. Examination. Motion carried unanimously.

Matthew Varnum – R.N. Examination

MOTION: Lillian Nolan moved, seconded by Rachelle Lancaster, to grant Matthew Varnum's request to sit for the R.N. Examination. Motion carried unanimously.

Kristin Jensen – R.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to grant Kristin Jensen's request to sit for the R.N. Examination. Motion carried unanimously.

Karen Myhre – R.N. Examination

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant Karen Myhre's request to sit for the R.N. Examination. Motion carried unanimously.

Kelly Moriarty – R.N. Examination

MOTION: Kay Coppens moved, seconded by Carol Ott, to grant Kelly Moriarty's request to sit for the R.N. Examination. Motion carried unanimously.

Jody Gutowski – R.N. Examination

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to grant Jody Gutowski's request to sit for the R.N. Examination. Motion carried unanimously.

Brittani Kessenich – R.N. Examination

MOTION: Carol Ott moved, seconded by Kay Coppens, to grant Brittani Kessenich's request to sit for the R.N. Examination. Motion carried unanimously.

Andrew Martin – R.N. Examination

MOTION: Kay Coppens moved, seconded by Carol Ott, to grant Andrew Martin's request to sit for the R.N. Examination. Motion carried unanimously.

Thaddeus Wolf – R.N. Examination

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to grant Thaddeus Wolf's request to sit for the R.N. Examination. Motion carried unanimously.

Lyndsie Peterson – R.N. Examination

MOTION: Kay Coppens moved, seconded by Carol Ott, to grant Lyndsie Peterson's request to sit for the R.N. Examination. Motion carried unanimously.

Shawn Siebold – R.N. Examination

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to issue an intent to deny in the matter of Shawn Siebold's request to sit for the R.N. Examination. The Board requests additional background information regarding Applicant's conviction history to consider whether substantially related to the practice of nursing. Motion carried unanimously.

Melinda Keech – L.P.N. Examination

MOTION: Kay Coppens moved, seconded by Lillian Nolan, to grant Melinda Keech's request to sit for the R.N. Examination. Motion carried unanimously.

Nicole Baker – R.N. Examination

MOTION: Kay Coppens moved, seconded by Carol Ott, to issue an intent to deny in the matter of Nicole Baker’s request to sit for the R.N. Examination. The Board requests additional background information regarding Applicant’s conviction history to consider whether substantially related to the practice of nursing. Motion carried unanimously.

Renée Roach – R.N. Examination

MOTION: Julie Ellis moved, seconded by Rachelle Lancaster, to grant Renée Roach’s request to sit for the R.N. Examination. Motion carried unanimously.

MONITORING

Kristin Bleichwehl, R.N. – Requesting Modification of Order

MOTION: Rachelle Lancaster moved, seconded by Julie Ellis, to recognize the withdrawal of request from Kristin Bleichwehl’s. Motion carried unanimously.

Jill Gustafson, R.N. – Requesting Modification of Order

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to deny Jill Gustafson’s request. The Board grants reduction in the frequency of drug screens to twenty-eight (28) per year with one (1) annual hair test. **REASON FOR DENIAL:** Insufficient time under Board order. Motion carried unanimously.

Mary S. Gallagher, R.N. – Requesting Reinstatement of License

MOTION: Julie Ellis moved, seconded by Carol Ott, to deny Mary S. Gallagher’s request for full licensure. **REASON FOR DENIAL::** Psychological evaluation recommends further testing. Motion carried unanimously.

Mark A. Kongshaug, R.N. – Requesting Modification of Order

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant Mark A. Kongshaug’s request for reduction in the frequency of drug screens to twenty-eight (28) per year with one (1) annual hair test. Motion carried unanimously.

James D. Larson, R.N. – Requesting Modification of Order

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to grant James D. Larson’s request for reduction in the frequency of drug screens to fourteen (14) per year with one (1) annual hair test. Motion carried unanimously.

Andrea M. Kempinski, L.P.N. – Requesting Modification of Order

MOTION: Rachelle Lancaster moved, seconded by Kay Coppens, to deny Andrea M. Kempinski’s request for reduction of frequency of AA/NA meetings. The Board grants a reduction in the frequency of drug screens to twenty-eight (28) per year with one (1) annual hair test. **REASON FOR DENIAL::** The Ordered attendance at AA/NA meetings is imperative to the treatment. Motion carried unanimously.

Michael A. Hafemann, R.N. – Requesting Reinstatement of License

MOTION: Kay Coppens moved, seconded by Lillian Nolan, to grant Michael A. Hafemann’s request for full licensure once all requirements are met. Motion carried unanimously.

Jayne M. Shelley, R.N. – Requesting Reinstatement of License

MOTION: Rachelle Lancaster moved, seconded by Carol Ott, to grant Jayne M. Shelley’s request for full licensure once all requirements are met. Motion carried unanimously.

Kathryn Talajkowski, L.P.N. – Requesting Reinstatement of License

MOTION: Julie Ellis moved, seconded by Carol Ott, to grant Kathryn Talajkowski’s request for full licensure once all requirements are met. Motion carried unanimously.

ADJOURNMENT

MOTION: Kay Coppens moved, seconded by Rachelle Lancaster, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 4:31 p.m.

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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Dan Williams		2) Date When Request Submitted: 4/1/13 Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: WI Board of Nursing			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Lancaster report as to the ANEW speaking engagement – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: Motion from last meeting” <p style="text-align: center;">Lillian Nolan moved, seconded by Rachelle Lancaster, to designate Rachelle Lancaster as the Board’s representative to attend the Administrators for Nursing Education (ANEW) in Wisconsin on April 3, 2013. Motion carried unanimously.</p>			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Board Services Bureau Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Executive Assistant prior to the start of a meeting.			

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**State of Wisconsin
Department of Safety & Professional Services**

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3) Name of Board, Committee, Council, Sections: WI Board of Nursing			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Board delegation for Lancaster to speak before the Wisconsin League of Nursing (WLN) on 4/11/13 – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: BON chairperson Nelson has provided pre-approval for Lancaster to make arrangements to appear at the WLN meeting on 4/11/13 on behalf of the BON. Given the WLN meeting is after the BON meeting, the Board will make the final determination as to the appearance. Nelson has delegated authority from the Board to make decisions related to matters that occur during the interim between Board meetings.			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
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**State of Wisconsin
Department of Safety & Professional Services**

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3) Name of Board, Committee, Council, Sections: WI Board of Nursing			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Submission/Request of annual report to the Secretary of DSPS – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: <div style="background-color: #ffffcc; padding: 5px;">15.08 Examining boards and councils.</div> (9) Annual reports. Every examining board shall submit to the head of the department in which it is created, upon request of that person not more often than annually, a report on the operation of the examining board.			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
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**State of Wisconsin
Department of Safety & Professional Services**

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3) Name of Board, Committee, Council, Sections: WI Board of Nursing			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Adoption of Robert's Rules of Order as the official parliamentary authority to guide the BON meetings. – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed:			
11) Authorization			
Signature of person making this request			Date
Supervisor (if required)			Date
Executive Director signature (indicates approval to add post agenda deadline item to agenda)			Date
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3) Name of Board, Committee, Council, Sections: WI Board of Nursing			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Adoption of a Seal for the Board of Nursing – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: <div style="background-color: #ffffcc; padding: 5px;"> 15.08 Examining boards and councils. (10) Seal. Every examining board may adopt a seal. History: 1971 c. 40; 1975 c. 86, 199; 1977 c. 418; 1979 c. 32; 1979 c. 34 ss. 32e to 32s, 2102 (45) (a); 1979 c. 221; 1981 c. 94; 1983 a. 403, 524; 1985 a. 332, 340; 1987 a. 399; 1989 a. 229, 316, 359; 1991 a. 39, 160, 316; 1993 a. 105, 107, 184, 490; 1995 a. 245; 1997 a. 175; 1999 a. 180; 2001 a. 80, 89, 105; 2009 a. 106, 149; 2011 a. 32, 258. </div>			
11) <p style="text-align: center;">Authorization</p> <hr/> Signature of person making this request Date <hr/> Supervisor (if required) Date <hr/> Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
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3) Name of Board, Committee, Council, Sections: WI Board of Nursing			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? BON advisor and expert lists; criteria to be determined as to being named to the list – Discussion and Consideration	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: <p>Motions from the last meeting:</p> <p>Rachelle Lancaster moved, seconded by Julie Ellis, that the Board will create two lists, one for policy advisors and another for disciplinary experts. These lists will be maintained by DSPS staff. Motion carried unanimously.</p> <p>Rachelle Lancaster moved, seconded by Carol Ott, to place an item on the April meeting to address the criteria for being a policy advisor to the Board and the criteria for being a disciplinary expert for the Board. Motion carried unanimously.</p>			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
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STATE OF WISCONSIN
Department of Safety and Professional Services
1400 E Washington Ave.
Madison WI 53703

Mail to:
PO Box 8935
Madison WI 53708-8935

Email: dsps@wisconsin.gov
Web: <http://dsps.wi.gov>

Governor Scott Walker Secretary Dave Ross

Voice: 608-266-2112 • FAX: 608-267-3816 • TTY: 608-267-2416

BOARD OF NURSING
ROOM 121A, 1400 E. WASHINGTON AVENUE, MADISON WI
CONTACT: DAN WILLIAMS (608) 266-2112
APRIL 11, 2013

Notice: The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a description of the actions and deliberations of the Board. A quorum of the Board will be present during the committee meetings.

LEGISLATION AND RULES COMMITTEE

3:00 P.M.

(or immediately following the conclusion of the Nursing Board meeting).

CALL TO ORDER – ROLL CALL

OPEN SESSION: Jeffrey Miller (Committee Chair), Rachelle Lancaster, Lillian Nolan

- A. **Approval of Agenda (193-194)**
- B. **Approval of Legislation and Rules Committee Minutes of March 14, 2013 (195-196)**
- C. **Anticipated Goals – Discussion and Consideration (197-198)**
- D. **General Review Process for Rulemaking – Discussion and Consideration (197-198)**
- E. **Amendments to Chapter N1 – Discussion and Consideration (197-198)**
- F. **Public Comments**

ADJOURNMENT OF LEGISLATION AND RULES COMMITTEE MEETING

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LEGISLATIVE AND RULES COMMITTEE
BOARD OF NURSING
MEETING MINUTES
MARCH 14, 2013

PRESENT: Rachelle Lancaster, Lillian Nolan

EXCUSED: Jeffrey Miller

STAFF: Dan Williams, Executive Director; Matt Niehaus, Bureau Assistant; other DSPS staff

CALL TO ORDER

Rachelle Lancaster called the meeting to order at 8:04 a.m. A quorum of two (2) members was present.

ADOPTION OF AGENDA

MOTION: Lillian Nolan moved, seconded by Rachelle Lancaster, to adopt the agenda as published. Motion carried unanimously.

DRAFTING N1, N2.02, AND N.3.02, RELATING TO SCHOOL APPROVAL

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to that the Legislative and Rules Committee will hold a meeting prior to the meeting in April to begin a first draft of N1. Motion carried unanimously.

MOTION: Lillian Nolan moved, seconded by Rachelle Lancaster, to designate Rachelle Lancaster as the Board's representative to attend the Administrators for Nursing Education in Wisconsin on April 3, 2013 . Motion carried unanimously.

ADJOURNMENT

MOTION: Rachelle Lancaster moved, seconded by Lillian Nolan, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 8:30 a.m.

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**State of Wisconsin
Department of Safety & Professional Services**

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3) Name of Board, Committee, Council, Sections: WI Board of Nursing – Legislative Committee			
4) Meeting Date: 4/11/13	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? AGENDA	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? <input type="checkbox"/> Yes by <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: <p style="text-align: center;">Items for Discussion and Consideration:</p> <ol style="list-style-type: none"> 1) Anticipated goals 2) General review process for rulemaking 3) Amendments to Chapter N1 			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
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