Nashua Community College Department of Nursing Systematic Evaluation Plan with Data, 2019-2021

Part 1 A. End of Program Student Learning Outcomes, 2019-2021

EOPSLO	What/When to Assess	Mean ELA (Expected Level of Achievement)	Actual Level of Achievement	Interpretation	Plan
EOPSLO #1: Plan and deliver safe individualized care to patients by integrating the nursing process and pertinent nursing knowledge, principles of teaching	Final Medical-Surgical Concept Map – Care Plan, End of NURS 240N	100% of students will receive a minimum grade of 48 out of 60 points as determined by rubric (App. K, Part 2. C)	2019 2020 2021 100% 100%	ELAs met in 2019 and 2020; 100% of students demonstrated attainment of EOPSLO #1 as measured by the rubric for the <u>Final</u> <u>Medical Surgical</u> <u>Concept Map- Care Plan</u> <u>Project</u> ,	Examine the grade distribution and categories in which students did less well, evaluate known variables, and develop strategies to increase the number of points earned to a new minimum grade of above 50 of 60 points.
/ learning, and preferences of patients or legal designees across the lifespan, diversity of culture, and the levels of prevention (Patient Centered Care/Diversity, Safety)	ATI Comprehensive Predictor, End of NURS 240N: <u>QSEN Subscores:</u> 1.Patient-Centered Care 2.Safety	*At or above 70 th percentile on ATI Comp. Pred. for <u>QSEN Subscores:</u> 1.Patient-Centered Care 2.Safety *70 th percentile correlates with 90% chance of passing NCLEX-RN on first attempt	1.Patient-Centered Care 2019 2020 2021 71.6% 78% 2. Safety 2019 2020 2021 75.3% 80.9%	2019 – ELAs met 2020 – ELAs met	Change ELA if ATI changes their pass rate predictions
	Final Clinical Evaluation, End of NURS 240N	90% of students will receive grade of "Satisfactory" (S) or better for each criterion on a 4-point scale.	Percent of students earning"S" or better on final clin.evaluation2019202020192021100%92%11/12)12/13	ELAs met in 2019 and 2020.	Continue to monitor Any change in EOPSLOs should be reflected in the Clinical Evaluation Tool
	ATI Comprehensive Predictor, End of NURS 240, <u>QSEN Subscores</u> :	At or above 70 th percentile on ATI Comp. Pred. for QSEN Subscores: Teamwork & Collaboration	Z019 2020 2021 81.8% 78.8%	ELA met in 2019 and 2020	Discuss whether to raise ELA in light of substantially exceeding 70% two years in a row.

EOPSLO #2: Practice collaboratively on the multi- professional health care team using principles of	Teamwork & Collaboration Final Clinical Evaluation End of NURS 240	*70 th percentile correlates with 90% chance of passing NCLEX-RN on first attempt 90% of students will receive grade of "Satisfactory" or	Percent of s "S" or bette			Consider raising ELA in light of substantially exceeding 70% two years in a row. ELA met in 2019 and 2020	Continue to monitor
leadership across the disciplines and throughout the health care system to		better on each criterion on a 4-point scale.	evaluation 2019 100% (11/11)	2020 92.0% (12/13)	2021		Any change in EOPSLOs should be reflected in the Clinical Evaluation Tool
influence and facilitate conflict resolution and the establishment and achievement of shared goals. (Teamwork and Collaboration)	Senior Capstone Health Education Day, Final semester of program	90% of students will receive a 90% or better		2020 20	021	ELA met	Continue to monitor
EOPSLO (End of Program Student Learning Outcome)	What/When to Assess	Mean ELA (Expected Level of Achievement)	Actual Level	l of Achiev	ement	Interpretation	Plan
EOPSLO #3: Support	ATI Comprehensive	At or above 70 th percentile	Quality Imp	rovement		ELAs met in 2019; in	Review curriculum content
a culture of	Predictor, End of NURS	on ATI Comp. Pred. for	2019	2020	2021	2020 the score for	to determine conditions
continuous quality	240N, <u>QSEN Subscores:</u>	*QSEN Subscores:	70.5%	82.1%		evidence-based practice	affecting students'
improvement by	1. Quality Improvement	1. Quality Improvement				dropped and ELA was	knowledge of EBP; use
using data to monitor	2. Evidence-Based	2. Evidence-Based Practice	Evidence-Ba			not met	NCLEX Test Plan and ATI
outcomes; identifying and	Practice	*70 th percentile correlates	2019	2020	2021		Topic Descriptors to identify EBP information that is
reporting actual or		with 90% chance of passing	74.3%	66.2%			weak or missing.
potential problems;		NCLEX-RN on first attempt					
-	Final Medical Surgical	100% of students will	Percent of s	tudents ea	arning	ELAs met in 2019 and	Continue to monitor
collaborating with					0		
collaborating with the multi-	•	receive minimum grade of	"S" or bette	r on final r	olan of	2020	
•	Concept Map- Care Plan	receive minimum grade of 48 out of 60 points	"S" or bette care	r on final p	olan of	2020	
the multi-	•	receive minimum grade of 48 out of 60 points		r on final p	2021	2020	

and developing evidence-based strategies for optimal	Final Clinical Evaluation	90% of students will receive grade of "Satisfactory" or better on each criterion on	Percent of students earning "S" or better on final clin. evaluation			ELAs met in 2019 and 2020	Continue to monitor Any change in EOPSLOs should be reflected in the
practice. (Quality		a 4-point scale.	2019	2020	2021		Clinical Evaluation Tool
Improvement and			100%	92%			
Evidence Based			(11/11)	(12/13)			
Practice)							
EOPSLO (End of	What/When to Assess	Mean ELA (Expected Level	Actual Lev	el of Achie	vement	Interpretation	Plan
Program Student		of Achievement)					
Learning Outcome)							
EOPSLO #4: Use	ATI Comprehensive	At or above 70 th percentile				ELA not met for	Examine content pertaining
health care system	Predictor, End of NURS	on ATI Comp. Pred. for:				Informatics in 2020	to informatics in the
resources and	240N, <u>QSEN Subscores:</u>						curriculum.
technology, including		*QSEN Subscores:	1.Informat	tics			Compare with informatics
information	1.Informatics	1. Informatics	2019	2020	2021		topic descriptors on the ATI
technology, time,			72.7%	69.2%			Comprehensive Predictor
policies and	Nursing Process Subscore:		· · · · · ·				and the NCLEX-RN Program
procedures,	2. RN Planning	Nursing Process Subscore:	2.RN Planı	ning			Report.
materials, and		2. RN Planning	2019	2020	2021		Determine the curriculum
equipment, to	Thinking Skills Subscore:		71.1%	79.4%			gaps and design new
coordinate and	3. Clinical	Thinking Skills Subscore:					content as necessary.
deliver individual and	Judgment/Critical	3. Clinical Judgment/Critical	3. Clinical	Judgment /	Critical		
/ or population-	Thinking	Thinking	Thinking	0,			
focused care that is			2019	2020	2021		
safe, cost- effective,			73.4%	74.9%			
and efficient.	NLN Competency	NLN Competency Subscore:					
(Informatics; RN	<u>Subscore:</u>	4. Nursing Judgment	4. Nursing	Judgment			
Planning; Clinical	4. Nursing Judgment		2019	2020	2021		
Judgement/Critical		*70 th percentile correlates	73.3%	74.3%			
Thinking; Nursing		with 90% chance of passing					
Judgment)		NCLEX-RN on first attempt					
	Final Medical Surgical	100% of students will	2019	2020	2021	ELAs met 2019 and 2020	Continue to monitor
	•				2021		
		0	100/0	10070			
	Concept Map- Care Plan Project, End of NURS 240	receive minimum grade of 48 out of 60 points	100%	100%			

	Final Clinical Evaluation	100% of students will	2019	2020	2021	ELAs met 2019 and 2020	Continue to monitor
		receive grade of	100%	92%			
		"Satisfactory" or better on	(11/11)	(12/13)			
		each criterion on a 4-point					
		scale.					
EOPSLO (End of	What/When to Assess	Mean ELA (Expected Level	Actual Lev	el of Achiev	/ement	Interpretation	Plan
Program Student		of Achievement)					
Learning Outcome)							
EOPSLO #5:	ATI Comprehensive	At or above 70 th percentile	1.Informat	tics		Informatics subscore	Continue to monitor
Communicate clearly	Predictor, End of NURS	on ATI Comp. Pred. for	2019	2020	2021	less than ELA in 2020.	
in goal-oriented,	240, QSEN Subscores:		72.7%	69.2%			Evaluate informatics
culturally sensitive,		<u>*QSEN Subscores:</u>				See Interpretation and	content across curriculum
caring, concise, and	1.Informatics	1. Informatics	2. Teamwo	ork & Collat	poration	Plan for EOPSLO #4.	as detailed in EOPSLO #4.
timely ways using	2. Teamwork &	2. Teamwork &	2019	2020	2021		
written, verbal, non-	Collaboration	Collaboration	81.8%	78.8%			
verbal, and electronic				•			
modalities.		*70 th percentile correlates					
(Informatics;		with 90% chance of passing					
Teamwork &		NCLEX-RN on first attempt					
Collaboration)							
	Senior Capstone Health	90% of students will receive		-		ELAs met 2019 and 2020	Continue to monitor
	Education Day	a 90% or better	2019	2020	2021		
			100%	100%			
EOPSLO (End of	What/When to Assess	Mean ELA (Expected Level	Actual Lev	el of Achiev	/ement	Interpretation	Plan
Program Student		of Achievement)					
Learning Outcome)							
EOPSLO #6:	ATI Comprehensive	At or above 70 th percentile	Profession	al Identity		ELAs met 2019 and 2020	Continue to monitor
Demonstrate	Predictor, End of NURS	on ATI Comp. Pred. for					
accountability for	240N, <u>NLN Competency</u>	* <u>NLN Comp. Subscore:</u>	2019	2020	2021		
professional practice	<u>Subscore:</u>	Professional Identity	79.0%	73.6%			
using legal, ethical,							
and regulatory	Professional Identity	*70 th percentile correlates					
guidelines and		with 90% chance of passing					
participate in		NCLEX-RN on first attempt					
activities that							
contribute to life-							
long learning.	Final Medical Surgical	100% of students will	2019	2020	2021	ELAs met 2019 and 2020	Continue to monitor
(Professional	Concept Map- Care Plan	receive minimum grade of	100%	100%			
Identity)	Rubric, End of NURS 240	48 out of 60 points					

Part 1 B. Systematic Evaluation Plan 2017-2019

	End-of-Program St	udent Learning Outc	omes (EOPSLOs) and	Program Outcomes (POs)	
	PLAN			IMPLEMENT	ATION
Component	Assessment Method(s)*	Expected Level(s) of Achievement	Data Collection and Assessment Frequency	Results of Data Collection: Including actual level(s) of achievement	Analysis and Actions for Program Development, Maintenance, or Revision
EPSLO #1: Plan and deliver safe individualized care to patients by integrating the nursing process and pertinent nursing knowledge, principles of teaching / learning, and preferences of patients or legal designees across the lifespan, diversity of culture, and the	1. ATI QSEN Subcategory Scores: Patient Centered Care, Safety on Comprehensive Predictor Exam	Aggregate result of <u>></u> 70% on each subcategory score; ELA based on historical program data	End of NURS 240 annual in May	2017 Patient Center Care: 72.5% Safety: 73.6% 2018 Patient Center Care: 72.5% Safety: 73.6% 2019 Patient Center Care: 71.6% Safety: 75.3%	ELA met, continue to evaluate ATI subcategory score results
levels of prevention (Patient-Centered Care/Diversity, Safety)	2. Final Clinical Evaluation Tool (Graded on a scale of Unsatisfactory, Needs Improvement, Satisfactory, or Exceeds Expectations) EOPSLO # 1 Outcome A Outcome B	95% of cohort earns Satisfactory (S) score on Final Clinical Evaluation Tool, EOPSLO # 1	End of NURS 240 annual in May	2017 A: 100% B: 100% 2018 A: 100% B: 100% 2019 A: 100% B: 100%	ELA consistently met at 100%; very seldom does a graduating senior score less than Satisfactory
EPSLO #2: Practice collaboratively on the multi- professional health care team using principles of leadership across the disciplines and throughout the health care system to influence and	1. Capstone Health Education Day Project Grading Rubric	90% of the class will obtain 90 or higher as determined by individual grades according to the Health Education Day rubric	End of NURS 240 annual in May	2016-2017* 2017-2018* (Grades were lost when NCC changed from Blackboard to Canvas) 2018-2019 - 100% of the class earned =/> 90	ELA met at 100% in 2019; continue to evaluate
facilitate conflict resolution and the establishment and achievement of shared goals. (Teamwork and Collaboration)	2. ATI QSEN Subcategory Scores: Teamwork and Collaboration on	Aggregate result of ≥70% on each subcategory score; ELA based on	End of 240 in May	2017 TWC 84% 2018 TWC 82.3%	ELA met, continue to evaluate ATI subcategory score results

	Comprehensive	historical program		2019	
	Predictor Exam	data		TWC 81.8 %	
	3. Final Clinical	> 95% of cohort	End of NURS 240	2017	ELA consistently met
	Evaluation Tool	attains Satisfactory	yearly	A: 100%	at 100%; very seldom
	(Graded on a scale of	(S) score or better		B: 100%	does a graduating
	Unsatisfactory, Needs	on Final Clinical		C: 100%	senior score less than
	Improvement,	Evaluation Tool for		2018	Satisfactory
	Satisfactory, or Exceeds	EOPSLO # 1		A: 100%	
	Expectations)			B: 100%	
	EOPSLO # 2			C: 100%	
	Outcome A			2019	
	Outcome B			A: 100%	
	Outcome C			B: 100%	
				C: 100%	
EPSLO #3: Support a culture of	1. ATI QSEN Subcategory	Aggregate result of	End of 240 in May	2017	2019 ELA not met in
continuous quality improvement	Scores:	<u>></u> 70% on each of		Quality Improvement: 81.3%	2017; ELA met the last
by using data to monitor	Quality Improvement,	the subcategory		Evidence Based Practice: 69.9%	two years, continue to
outcomes; identifying and	Evidence Based Practice	scores		2018	work with SNHMC
reporting actual or potential	on Comprehensive			Quality Improvement: 75%%	ambulatory care
problems; collaborating with the	Predictor Exam			Evidence Based Practice: 75.6%	quality improvement
multi-professional team				2019	projects in
throughout the health care				Quality Improvement: 70.5%%	collaboration with
system; and developing				Evidence Based Practice: 74.3%	hospital needs
evidence-based strategies for	2. Final Clinical	Aggregate <u>></u> 95% of		2017	ELA consistently met
optimal practice.	Evaluation Tool	cohort attains		A: 100%	at 100%; very seldom
(Quality Improvement and	(Graded on a scale of	Satisfactory (S)		B: 100%	does a graduating
Evidence Based Practice)	Unsatisfactory, Needs	score or better on		2018	senior score less than
	Improvement,	Final Clinical		A: 100%	Satisfactory
	Satisfactory, or Exceeds	Evaluation Tool		B: 100%	
	Expectations)	EOPSLO # 1		2019	
	EOPSLO # 3			A: 100%	
	Outcome A			B: 100%	
	Outcome B				

EPSLO #4: Use health care	1. ATI QSEN & BSN	Aggregate result of	End of 240 annual in	2017	
system resources and technology; including	Essential Subcategory Scores:	>70% on each subcategory score	Мау	Informatics- Information management-	
information technology, time,	Informatics; Information	subcategory score		2018	
policies and procedures,	Management and			Informatics-	
materials, and equipment, to	Application of Patient			Information management-	
coordinate and deliver	Care Technologies on			2019	
individual and / or population-	Comprehensive			Informatics-	
focused care that is safe, cost- effective, and efficient.	Predictor Exam			Information management-	
	2. Final Clinical	Aggregate <u>></u> 95% of		2017 100%	Benchmark
	Evaluation Tool	cohort attains		2018 100%	consistently met at
	(Graded on a scale of Unsatisfactory, Needs	Satisfactory (S) score or better on		2019 100%	100% (increase benchmark?)
	Improvement,	Final Clinical			Denchinark?)
	Satisfactory, or Exceeds	Evaluation Tool			
	Expectations)	EOPSLO # 1			
	EOPSLO # 4				
	Outcome A				
EPSLO #5: Communicate clearly	Final Medical-Surgical	95*% of the class	End of 240 yearly	2017 2018	Information is missing
in goal-oriented, culturally sensitive, caring, concise, and	Concept Map (or Pedi or Maternity or Med Surg	has S or better on this section		2018 2019	due to change from Blackboard to Canvas.
timely ways using written,	Concept Maps) as long	*Changed from 90%		2019	Diackboard to Carivas.
verbal, non-verbal, and	as we have 3 years of				
electronic modalities.	grades				
		95*% of the class			
	Final Clinical Evaluation	has S or Better on	End of 240 yearly	2017 100%	Benchmark
	Tool Final clinical eval., EOPSLO 5	this section *Changed from 90%		2018 100% 2019 100%	consistently met at 100%
EPSLO #6: Demonstrate	Capstone Health	90% of the class will	End of 240 yearly	2019 100%	2017-2018 grades that
accountability for professional	Education Day Project	obtain 90 or higher		2018	were stored in
practice using legal, ethical, and	Grading Rubric	as determined by		2019 100%	Blackboard have been
regulatory guidelines and		the health			lost in the switch to
participate in activities that		education day			Canvas.
contribute to life-long learning	Final exam question #65	rubric	End of 240 yearly		
	ATI Comprehensive	80% of the students	End of 240 yearly		
	Predictor items:	will answer the test	, ,		
	Professional/Legal	item correctly			

responsibilities; Informed consent			Prof/Legal: 2019 72.7% (low grade related to "select all that apply"?) 2020 TBA 2021	Add new Final exam test item questions (delegation/scope of practice question)
Final Clinical Evaluation Tool EOPSLO 6	95*% of the class has S or Better on this section	End of 240 yearly	2017: 76.5% 2018: 100% 2019: 81.8%	
				Benchmark
			2017 100%	consistently met at
			2018 100%	100%
			2019 100%	

Part 2. Program Outcomes, 2017-2020

			Program Outcomes					
PLAN					IMPLEMENTATION			
Component	Assessment Method(s)*	Expected Level(s) of Achievement	Data Collection and Assessment Frequency	Results of Data Collection Including actual level(s) of achievement		Analysis and Actions for Program Development, Maintenance, or Revision		
Exam Pass Rate+ NCLEX Certifications	Divide the number of graduates passing NCXLEX-RN on the first attempt by the number taking it from the same cohort within 12 months of program completion	ELA: The NCLEX- RN passing rate for a cohort =/> than the national average (required rate of the NH BON)	Gather data as it becomes available from the NH BON and analyze it annually at end of academic year.		2018 88.29% ass Rate 2018 100%	2019 89.94% 2019 81.8%	ass Rate 2020 85.5% Q2 2020 100%	The program has consistently scored above 80% as required by ACEN. In 2019, the program scored below the NHBON requirement of the national average: 81.8% vs 89.94% The ATI Comprehensive Predictor and Live Review was offered by NCC to support the Class of 2020
Program Completion	Divide the number	ELA: =/> 70%	Department		#	#/% in	#/% in	on the NCLEX-RN; they achieved 100% pass rate. The program has been met
Rate++	completing the program within 3 years of beginning the first nursing course by the number beginning the program from the same cohort	complete the program within three years of beginning the first nursing course. <u>ELA Rationale:</u> In some cases, students are not successful in class or clinical and leave the program temporarily or permanently; a	Secretary records data about number of students in entering class, students leaving the program, and students returning and completing the program within three years of date of first entry	Year of ent 9/19 Class 2021 9/18 Class 2020 9/17 Class 2019 9/16 Class 2018	of 21 of 15 of 14	4 sem. NA 12 (80%) 10 (71.4%) 15 (68.2%)	6 sem. NA NA 0 1 (4.5%)	the ELA of 70% with the classes that entered in 2017. Full information is TBD for the classes that entered in 2018 and 2019. However, we believe we can do better with retention and it is part of the Program Plan for the next few years. We believe the new ATI materials will help reduce academic attrition.
		student can be re- admitted once. Many students experience						

Job Discoment Pote	Survey cent out in Sect	personal or family circumstances that require them to take a leave or drop the program.	Data is aggregated	2017	2018	2010	2020	Southorn NH and Northern
Job Placement Rate	Survey sent out in Sept. to most recently graduated class. Check Social Media. Linked-In; and Institutional Research Department. Students often keep in touch with faculty after graduation by social media. The number of new RNs with jobs is counted, but unless there is data on all new graduates, a valid rate cannot be calculated; lack of information is not evidence of employment.	ELA: =/> 75% within six months of program completion. ELA Rationale: Students are usually eager to get a job and there is a shortage on RNs in NH	Data is aggregated as it becomes available. It is reviewed and analyzed annually at the end of the academic year.	2017 100%	2018 95%	2019	2020 8/25/20 10/12-83%	Southern NH and Northern Massachusetts have many health care facilities and agencies where new graduates can find employment, and the NCC graduates have traditionally been recognized as capable nurses.

- * The appropriateness of an assessment method is based on whether its application yields data, which when analyzed assist faculty in determining whether the outcome being evaluated has or has not been met. The nursing program should select assessment method(s) appropriate to the concepts/competencies in the EPSLO being evaluated; more than one method may be needed to obtain comprehensive assessment data. ELAs should be specific to each assessment method selected.
- + If the program is offered at multiple locations or has multiple program options, report licensure/certification examination pass rate for each location/option and also in aggregate for the program as a whole. Programs with multiple annual admission cohorts should also report disaggregate licensure pass rate data by date of completion.
- ++ If the program is offered at multiple locations or has multiple program options, report program completion data for each location/option and also in aggregate for the program as a whole. Programs with multiple annual admission cohorts should also report program completion data by date of completion or entering cohort.

Part 3. Data Collection Tools

Part 3 A. Final Clinical Evaluation Tool

Nashua Community College School of Nursing NURS240N Management of Nursing Care across the Lifespan Final Clinical Evaluation Tool

Student Name:	Date:	Nursing Faculty:
Clinical Absence Dates:		

Clinical Site Location:

Clinical Skills Checklist updated at final evaluation (Date):_____

Keys:

U=Unsatisfactory*	N/I=Needs Improvement	S= Satisfactory	E=Exceeds Expectations
Unable to develop skills, meet clinical	Requires intensive instructor assistance	Requires instructor assistance to develop	Independently able to meet clinical
objectives, utilize resources for	to meet clinical objectives and/or	skills and meet clinical objectives. Always	objectives, maintain patient safety
remediating knowledge deficits, or	maintain standards of care. Always	maintains patient safety. Consistently	and standards of care. Consistently
threatens the safety of the patient.	maintains patient safety. Rarely utilizes	utilizes resources to remediate	utilizes resources to remediate
Unable to synthesize theory with	resources to remediate knowledge	knowledge deficits	deficits.
clinical practice.	deficits.		

Clinical Objectives and Evaluation Criteria:

1. PLAN AND DELIVER INDIVIDUALIZED CARE

Plan and deliver safe individualized care to patients by integrating the nursing process and pertinent nursing knowledge, principles of teaching / learning, and preferences of patients or legal designees across the lifespan, diversity of culture, and the levels of prevention	Mid-Point Evaluation Date	Student Rating Mid- Point	Clinical Faculty Mid- Point	Final Evaluation Date	Student rating Final	Clinical Faculty Final
A. Apply the nursing process to complex health-related problems of multicultural groups of patients / families across the lifespan		Point	Point			
 B. Implement appropriate individualized teaching/learning principles to assist patients / families with primary, secondary, and tertiary prevention of health problems. 						

Student Comments Midterm	Faculty Comments Midterm
Student Comments Final	Faculty Comments Final

2. PRACTICE COLLABORATIVELY

leaders	e collaboratively on the multi-professional health care team using principles of hip across the disciplines and throughout the health care system to influence ilitate conflict resolution and the establishment and achievement of shared	Mid-Point Evaluation Date	Student Rating Mid- Point	Clinical Faculty Mid- Point	Final Evaluation Date	Student Rating Final	Clinical Faculty Final
Α.	Delegate aspects of patient care in the clinical setting consistent with the NH Nurse Practice Act.						
В.	Collaborate with multi-disciplinary staff and faculty in prioritizing, organizing, and providing safe nursing care for multicultural groups of patients / families across the lifespan.						
C.	Develop plans for continuing care of discharged patients / families with ongoing health alterations						
Student Comments Midterm		Faculty Com	iments Mid	term	1	1	
Student	: Comments Final	Faculty Com	nments Fina	l			

3. SUPPORT A CULTURE OF CONTINUOUS QUALITY IMPROVEMENT

Support a culture of continuous quality improvement by using data to monitor outcomes; identifying, reporting, and intervening in actual or potential problems; collaborating with the multi-professional team throughout the health care system; and developing evidence-based strategies for optimal practice.	Mid-Point Evaluation Date	Student Rating Mid- Point	Clinical Faculty Mid- Point	Final Evaluation Date	Student Rating Final	Clinical Faculty Final
A. Apply principles of quality improvement to a problem encountered in clinical practice.						

 B. Analyze the impact of contemporary trends and health system issues on the provision of nursing care. 					
Student Comments Midterm	Faculty Com	iments Mid	term		
Student Comments Final	Faculty Com	iments Fina	I		

4. USE HEALTH CARE SYSTEM RESOURCES AND TECHNOLOGY

Use health care system resources and technology, including information technology, time, policies and procedures, materials, and equipment, to coordinate and deliver individual and / or population-focused care that is effective and efficient.		Student Rating Mid- Point	Clinical Faculty Mid- Point	Final Evaluation Date	Student Rating Final	Clinical Faculty Final
A. Gather and use appropriate resources and current evidence from nursing, allied health, and other resources in the delivery of nursing care.						
Student Comments Midterm:	Faculty Comments Midterm					
Student Comments Final	Faculty Comme	nts Final				

5. COMMUNICATE CLEARLY

Communicate clearly in goal-oriented, culturally sensitive, caring, concise, and timely ways using written, verbal, non-verbal, and electronic modalities.	Mid-point Evaluation Date	Student Rating Mid- Point	Clinical Faculty Mid- Point	Final Evaluation Date	Student Rating Final	Clinical Faculty Final
A. Tailor communication to the cultural and developmental needs of patients and families.						
B. Communicate effectively in managing and delegating patient care.						
Student Comments Midterm:	Faculty Commen	ts Midterm:				

Student Comments Final:	Faculty Comments Final:

6. DEMONSTRATE ACCOUNTABILITY FOR PROFESSIONAL PRACTICE

Demonstrate accountability for professional practice using legal, ethical, and regulatory guidelines and participate in activities that contribute to life- long learning.	Mid-point Evaluation Date	Student Rating Mid- Point	Clinical Faculty Mid- Point	Final Evaluation Date	Clinical Faculty Mid- Point	Clinical Faculty Final
A. Hypothesize resolutions for ethical dilemmas encountered in practice.						
 B. Reflect the ANA Code for Nurses, ANA Standards of Practice, and the NH Nurse Practice Act in the performance of the professional role. 						
C. Follow Board of Nursing procedures in the desired state of licensure to register for the NCLEX-RN.						
D. Formulate strategies to address common challenges in transitioning to practice and professional development.						
Student Comments Midterm:	Faculty Comment	s Midterm				
Student Comments Final:	Faculty Comment	s Final				

Student/Clinical Faculty Mid-Point Evaluation:

Student	Clinical faculty
Signature:	Signature:
Date:	Date:

	Evaluation Summary
	Midterm Goals
Student	
	Final Comments and Goals
Clinical Faculty	Midterm Comments
	Final Comments

Student/Clinical Faculty Final Review:

Student	Clinical faculty
Signature:	Signature:
Date:	Date:

Part 3 B. Capstone - Health Education Day Grading Rubric

Nashua Community College Department of Nursing

Capstone - Health Education Day Grading Rubric

Name: _____

Date: ______ Score _____

Key: 5 Points = Satisfactory 3 Points - Needs Improvement 0 Points = Unsatisfactory

	Criteria		3 points	0 points	Comments
	Students Reflection Requirements for Paper				
Plan an	d Deliver Safe Individualized Care				
1.	Provide evidence of how you contributed to the overall goals (objectives) and tasks to accomplish the class project.				
2.	Provide evidence of how you identified, planned, and accomplished the goals within your subgroup for Health Education Day.				
Practice	e Collaboratively				
3.	Provide evidence of your contribution to teamwork to facilitate group goals and describe your use of effective leadership or followership style.				
4.	Describe how tasks were delegated among group members of your subgroup based on experience, the complexity of the task, time and skill necessary to complete the task (i.e., hospitality, equipment, AV/technology, logistics, maintenance, document creation/writing, speaker support, guest speaker contact, etc.)				
Suppor	t a Culture of Continuous Quality Improvement				
5.	Did you encounter any actual or potential conflicts or obstacles? If so, describe how the conflict was resolved (i.e., using therapeutic communication, emotional intelligence, negotiation, and active listening skills). If you did not experience a conflict, how did you manage to avoid one? Describe your response and how you created an alternative plan to achieve goals in response to an obstacle.				
Use He	alth Care System Resources and Technology				
7.	Demonstrate evidence of how you gathered and used appropriate, valid, current, and reliable resources to plan your educational program.				
8.	Describe your time management skills that were or were not effective in completing tasks and accomplishing group goals.				

Communicate Clearly			
 Demonstrate participation in Canvas discussions by posting and responding thoughtfully and timely. 			
 To what extent is your paper well-organized, follows the order of the above questions, and is well-documented as to how you participated in your subgroup. 			
Demonstrate Accountability of Professional Practice			
11. Describe how you actively participated on the actual day of the event. What was your specific role?			
12. Did you encounter obstacles/challenges on the day of the event? How did you resolve them or avoid them? What would you have done differently?			
 In summary, describe what you learned about yourself, your nursing peers, and the process of putting together an educational program. 			
14. How did and will this Capstone Project affect your future role as a professional nurse?			
15. Paper was submitted on time, followed the order of the questions, and is substantial			
in its evidence of the student's work in the Capstone project.			
Average of Peer Evaluation Scores	40 pts.	0 pts.	
Evaluate your peers in your subgroup on Canvas.	(S)	(U)	
16. This student fully participated in identifying, planning, and accomplishing overall group goals.			
17. This student was active in communicating clearly and appropriately by making useful suggestions, giving constructive feedback, and providing praise and positive reinforcement to other peers.			
 This student contributed to teamwork and facilitated group goals using effective follower and leadership style. 			
19. This student demonstrated professional excellence by being accountable for their behavior, being truthful in all interactions, respecting the diversity of their peers, and demonstrating awareness of interdependence of group members.			
Final Grade:/100			

Part 3 C. Instructions and Rubric for Final Concept Map/Care Plan Project

Instructions for Final Concept Map/Care Plan Project NURS240N

Concept Map/Care Plan Project: There will be a concept map-care plan project due for your pediatric and OB clinical experience. Then your final concept map-care plan project for your medical-surgical clinical. The maternity and pediatric concept map and care plan assignment will be due by the end of the week after your last clinical day. The Medical-Surgical Concept map/care plan due date is on the calendar. Consult the Concept Map/Care Plan Project grading rubric for the criteria of the project.

There are three parts to this project:

Part 1 – Concept Map

- Only page 1 of the Weekly Concept Map
- See instructions for Weekly Concept Map for page 1
- Connect the pertinent relationships shown between information on the concept map. (Drawing lines, numbering, or color-coding each connection of information.)

Part 2 – Care Plan

- Three nursing diagnosis is written in the 4-part process (not to include knowledge deficit)
- Three SMART objectives for each nursing diagnosis with one of them as an educational objective
- A minimum of three nursing interventions with a rationale for each intervention. (include education, collaboration, and consults, etc.)
- Reevaluation for each objective. However, if the patient did not meet this objective, what would be "your plan of action?"
- Find one evidenced-based article to support one of your nursing interventions. Highlight the intervention on the care plan and the sections within the article that supports the intervention.

Part 3 – Documentation

- SBAR (IPASS) report
- Progress note
- Quality Improvement Questions
 - What quality improvement or safety measure would improve the care you gave this patient on your shift today?
 - What quality improvements or safety measures might be needed to improve care for this type of patient in general?

Criteria	10 points	7 points	3 points	0 points	Points	Comments
Plan and deliver safe, individualized care	It pointsConcept Map includes(first page only)information related tothe patient:Demographics, medicaldiagnosis (chiefcomplaint), past medicaland surgical history,physical assessment,medications,labs/diagnostic studies.One possiblecomplication for thisclient, with theanticipatory signs tomonitor.Identified one or morehealth promotion/prevention educationfor this patientAble to connect thepertinent relationshipsshown betweeninformation on theconcept mapCare Plan includes:Three nursing diagnoses(written correctly)Three SMART objectives(one being educationalobjective) for eachdiagnosis	Concept Map Includes (first page only) information related to the patient: Missing more than 25% of the critical points of the concept map. Shows some relationships between the various components of the concept map. Care Plan More than 50% of the nursing diagnosis and objectives are written correctly More than 50% of the interventions have rationales.	Concept Map Includes (first page only) information related to the patient: Missing more than 50% of critical points. Little effort made to show the relationship between the various components of the concept map. Care Plan Less than 50% of the nursing diagnosis and objectives are written correctly Less than 50% of the interventions have rationales	Concept Map No effort made Care Plan No effort made		

Rubric for Final Concept Map/Care Plan Project

Demonstrates accountability for professional practice	Work submitted on time	Work submitted on time	Not all portions of the project submitted on time	Work submitted late	
Healthcare system Resources and Technology	Attach reference from a nursing journal or nursing organization with pertinent information highlighted	Article attached but lacks usefulness	The article has very little application to client	No article attached	
Support a culture of continuous quality improvement	A thoughtful and substantive response to the quality questions.	One of the quality questions were thoughtful and substantive.	Both responses to the quality questions were vague.	No response to quality questions.	
Communicate clearly	Three interventions for each objective with a rationale for each intervention Reevaluation for each objective. A written plan of action for objectives not met. SBAR (IPASS) included and complete Progress Note The concept map and care plan are easy to follow, clear, and useful. The concept map and care plan show a high level of understanding of the entire patient's picture.	SBAR included and 75% complete. Acceptable effort but somewhat difficult to follow. The concept map and care plan show a modest understanding of the client's picture. Documentation completed in a clinical setting attached.	SBAR included with 50% completed. Very difficult to follow. Shows minimal understanding of the client's picture. Documentation completed in clinical not included	SBAR not included	

Total points possible	Scores below 48 points	Total Points		
= 60 points	must be revised and		/60	
	passed in for a second			
	evaluation by the			
	clinical instructor			

Part 3 D. ATI EXAM: Comprehensive Predictor Outcomes

Content areas that are =/	'< 50% of students answered correctly

*Aqua highlight = 2nd year scored <50%; Violet highlight = 3rd year scored <50% Red highlight = 4th year scored <50% Green highlight = not taught in depth in curriculum as of test date Yellow highlight = not taught in curriculum Red = scores down from year before Green = scores up from year before

Class of 2017	Class Of 2018	Class of 2019	Class Of 2020	
Form 2016 Retake	Form 2016 Retake	Form 2019 Retake	Form 2019 Retake	
11559736	13276276	#15235017	#17799582	
05-02-2017	05-02-2018	05/08/2019	04/29/2020	
Adjusted group score 72.8%	Adjusted group score 74.8%	Adjusted group score – 74.2%	Adjusted group score – 74.9%	
Group percentile rank – national:	Group percentile rank – national: 89	Group percentile rank –	Group percentile rank – national: 71	
82	Group percentile rank – program: 89	national: 66	Group percentile rank – program: 71	
Group percentile rank – program:	NCLEX probability – Individual Score	Group percentile rank –	Predicted probability of Passing NCLEX-RN	
82	99% - 5 >=80.7%	program: 66	Score - # of students	
NCLEX probability – Individual Score	98% - 3 77.3% - 79.3%	NCLEX probability – Individual	99% - 2	
99% - 3 >=80.7%	96%-97% - 4 74.0% - 76.7%	<u>Score</u>	98% - 3	
98% - 2 77.3% - 79.3%	94% - 95% - 2 72.0% - 73.3%	99% - 2 >=80%	95% - 97% - 3	
96%-97% - 3 74.0% - 76.7%	91% - 93% - 2 70.0% - 71.3%	98% - 1 77.2% -	90% - 94% - 3	
94% - 95% - 2 72.0% - 73.3%	89% - 90% - 0 68.7% - 69.3%	79.4%	<u>85% - 89% - 0</u>	
91% - 93% - 1 70.0% - 71.3%	<u>84% - 87% - 2</u> 66.7% - 68.0%	96% - 97% - 4 74.0% -	80% - 84% - 0	
89% - 90% - 0 68.7% - 69.3%	80% - 82% - 0 65.3% - 66.0%	76.8%	70% - 79% - 0	
<u>84% - 87% - 1</u> 66.7% - 68.0%	73% - 78% - 2 63.3% - 64.7%	94% - 95% - 0 72.0% -	60% - 69% - 1	
80% - 82% - 2 65.3% - 66.0%	59% - 71% - 0 60.0% - 62.7%	73.4%	50% - 59% - 0	
73% - 78% - 1 63.3% - 64.7%	31% - 56% - 0 54.0% - 59.3%	91% - 93% - 1 70.0% -	40% - 49% - 1	
59% - 71% - 0 60.0% - 62.7%	1% - 28% - 0 0.0% - 53.3%	71.4%	30% - 39% - 0	
31% - 56% - 1 54.0% - 59.3%	Benchmark: 85%	89% - 90% - 0 68.6% -	1% - 29% - 0	
1% - 28% - 0 0.0% - 53.3%	Data = 16/20 (80%)	69.4%	Benchmark: 85%	
Benchmark: 85%		<u>84% - 87% - 1</u> 66.6% -	Data11/13 (85%)	
Data = 11/17 (64.7%)		68.0%		
		80% - 82% - 0 65.2% -		
		66.0%		
		73% - 78% - 1 63.2% -		
		64.8%		
		59% - 71% - 1 60.0% -		
		62.8%		
		31% - 56% - 0 54.0% -		
		59.4%		

Major Content Areas, Group Scores Management of care 76.9% 1st Safety/infection control 69.8% 8th Health promotion & maintenance 73.7% 3rd Psychosocial integrity 73.6% 4th Basic care & comfort 76.0% 2nd Pharm & parenteral therapies 70.7% 7th Reduction of risk potential 70.5% 6th Physiological adaptation 71.1% 5th	Major Content Areas, Group Scores Management of care 79.2% 2nd Safety/infection control 72.2% 7th Health promotion & maintenance 76.8% 3rd Psychosocial integrity 67.7% 8th Basic care & comfort 79.6% 1st Pharm & parenteral therapies 75.9% 4th Reduction of risk potential 72.8% 6th Physiological adaptation 72.9% 5th	1% - 28% - 00.0% -53.4%Benchmark: 85%Data = 9/11 - 82%Major Content Areas, GroupScoresManagement of care (79.4%)2ndSafety/infection control (79.8%)1stHealth promotion &maintenance (75.3%) 5thPsychosocial integrity (67.1%)7thBasic care & comfort (78.3%)3rdPharm & parenteral therapies(64.8%) 8thReduction of risk potential(70.2%) 6th	Major Content Areas, Group Scores Management of care (81.0%) 2nd Safety/infection control (82.1%) 1st Health promotion & maintenance (72.0%) 7th Psychosocial integrity (72.2%) 6th Basic care & comfort (73.4%) 5th Pharm & Parenteral therapies (72.6%) 4th Reduction of risk potential (74.8%) 3rd Physiological adaptation (67.4%) 8th
Nurring Process	Nursing Process	Physiological adaptation (76.6%) 4 th Nursing Process	Nursing Process
Nursing Process	Nursing Process		
Assessment 72.8% 3rd	Assessment 69.4% 5th	Assessment (69.7%)	Assessment (72.7%)
Analysis/diagnosis 70.5% 5th	Analysis/diagnosis 73.0% 4th	Analysis/diagnosis (70.7%)	Analysis/diagnosis (69.2%)
Planning 77.7% 1st Implementation/intervention	Planning 78.0% 2nd Implementation/intervention 75.4% 3rd	Planning (71.1%) Implementation/intervention	Planning (79.4%) Implementation/intervention (75.7%)
71.6% 4th	Evaluation 80.9% 1st	(78.6%)	Evaluation (72.4%)
Evaluation 75.4% 2nd		(78.0%) Evaluation (70.7%)	
Thinking Skills	Thinking Skills	Thinking Skills	Thinking Skills
Foundational thinking 72.8%	Foundational thinking 71.3%	Foundational thinking (83.5%)	Foundational thinking (75.3%)
Clinical judgment/critical thinking	Clinical judgment/critical thinking 75.4%	Clinical judgment/critical	Clinical judgment/critical thinking (74.9%)
72.8%	Priority setting 80.9%	thinking (73.4%)	Priority setting (79.8%)
Priority setting 72.6%	,	Priority setting (74.2%)	, U(,
BSN Essentials	BSN Essentials	BSN Essentials	BSN Essentials

*(New)Liberal Ed for	Liberal Ed for Baccalaureate Generalist	Liberal Ed. For BSN Generalist	Liberal Ed. For BSN Generalist Nursing
Baccalaureate Generalist Nursing	Nursing Practice 72.7%	Nursing Practice (72.7%)	Practice (76.9%)
Practice 75.0%	Basic Organization & Systems Leadership	Basic org & systems leadership	Basic org & systems leadership for quality
Basic Organization & Systems	for QA & Pt Safety 52.5%	for quality care & patient safety	care & patient safety (88.1%)
Leadership for QA & Pt Safety	Scholarship for EBP 72.0%	(78.5%)	Scholarship for EBP (65.8%)
70.0%	Information Management & application	Scholarship for EBP (73.7%)	Information management & application of
Scholarship for EBP 69.2%	of patient care Technology 100%	Information management &	patient care technology (69.2%)
Information Management &	Healthcare Policy, Finance & regulatory	application of patient care	Healthcare policy. Finance, & regulatory
application of patient care	environment (technology (72.7%)	environments (80.8%)
Technology 75.0%	Interprofessional communication &	Healthcare policy. Finance, &	Interprofessional communication &
Healthcare policy: finance, &	collaboration 81.6%	regulatory environments (100%)	collaboration (83.5%)
regulatory environment 87.5%	Clinical Prevention & Population Health	Interprofessional	Clinical prevention and population health
Interprofessional communication	75.0%	communication & collaboration	(77.1%)
& collaboration 83.3%	Professionalism & Professional Skills 100%	(77.3%)	Professionalism and professional values
Clinical Prevention & Population	Baccalaureate Generalist Nursing Practice	Clinical prevention and	(46.2%)
Health 70.4%	74.9%	population health (72.2%)	Baccalaureate generalist nursing practice
Professionalism & Professional		Professionalism and	(78.4%)
Skills 70.8%		professional values (77.3%)	
Baccalaureate Generalist Nursing		Baccalaureate generalist	
Practice 74.5%		nursing practice (72.7%)	
QSEN	<u>QSEN</u>	QSEN	<u>QSEN</u>
Safety 73.6%	Safety 75.3%	Safety (75.3%)	Safety (80.9%)
Patient-Centered Care 72.5%	Patient-Centered Care 73.4%	Patient-Centered Care (71.6%)	Patient-Centered Care (78.0%)
Evidenced Based Practice 69.9%	Evidenced Based Practice 75.6%	Evidenced Based Practice	Evidenced Based Practice (66.2%)
Informatics 75.0%	Informatics 58.3%	(74.3%)	Informatics (69.2%)
Quality Improvement 81.3%	Quality Improvement 75.0%	Informatics (72.7%)	Quality Improvement (82.1%)
Teamwork & Collaboration 84.0%	Teamwork & Collaboration 82.3%	Quality Improvement (70.5%)	Teamwork & Collaboration (78.8%)
		Teamwork & Collaboration	
		(81.8%)	
<u>Clinical Areas</u>	<u>Clinical Areas</u>	<u>Clinical Areas</u>	<u>Clinical Areas</u>
Fundamentals 81.0% 1st	Fundamentals 68.7% 7th	Fundamentals (76.5%) 4th	Fundamentals (79.3%) 2nd
Adult Medical-Surgical 70.2% 8th	Adult Medical-Surgical 73.4% 6th	Adult Medical-Surgical (74.1%)	Adult Medical-Surgical (71.4%)
Maternal Newborn 75.4% 6th	Maternal Newborn 79.2% 4th	6th	Maternal Newborn (75.1%) 4th
Mental Health 62.1%	Mental Health 65.3% 9th	Maternal Newborn (71.6%) 7th	Mental Health (69.7%) 7th

Nursing Care of Children 62.8% Oth	Nursing Core of Children 70, 70/ 2rd	Montal Health (C2 C0/) Oth	Nursing Care of Children (76, 49/) and
Nursing Care of Children 63.8% 9th	Nursing Care of Children 79.7% 3rd	Mental Health (63.6%) 9th	Nursing Care of Children (76.4%) 3rd
Leadership 78.9% 5th	Leadership 83.7% 1st	Nursing Care of Children (80.6%)	Leadership (82.8%) 1st
Community Health 78.1% 4th	Community Health 75.5% 5th	1st	Community Health (72.3%) 6th
Pharmacology 71.2% 7th	Pharmacology 80.0% 2nd	Leadership (79.8%) 2nd	Pharmacology (74.0%) 5th
Nutrition 79.7% 2nd	Nutrition 68.6% 8th	Community Health (78.8%) 3rd	Nutrition (63.1%) 8th
		Pharmacology (70.6%) 8th	
		Nutrition (74.5%) 5th	
NLN Competency	NLN Competency	NLN Competency	NLN Competency
Human Flourishing 78.4%	Human Flourishing 73.8%	Human Flourishing (75.3%)	Human Flourishing (80.6%)
Nursing Judgment 72.7%	Nursing Judgment 74.7%	Nursing Judgment (73.3%)	Nursing Judgment (74.3%)
Professional Identity 72.4%	Professional Identity 80.8%	Professional Identity (79.0%)	Professional Identity (73.6%)
Spirit of inquiry 69.0%	Spirit of inquiry 73.2%	Spirit of inquiry (73.7%)	Spirit of inquiry (72.2%
Management of Care	Management of Care	Management of Care	Management of Care
Management of Care Establishing Priorities	Management of Care Continuity of Care	Management of Care Advocacy	Management of Care Assignment, Delegation, & Supervision
Establishing Priorities	Continuity of Care	Advocacy	Assignment, Delegation, & Supervision - Managing Client Care: Planning to Follow Progressive Discipline (46.2%)
Establishing Priorities - Medications for psychotic	Continuity of Care - Safe medication administration and	Advocacy - Professional	Assignment, Delegation, & Supervision - Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities
Establishing Priorities - Medications for psychotic disorders: prioritizing client	Continuity of Care - Safe medication administration and error reduction; transcribing prescriptions (25%) Informed Consent	Advocacy - Professional responsibilities: communicating with clients who do not	Assignment, Delegation, & Supervision - Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities - Practice Settings and Nursing roles in
 Establishing Priorities Medications for psychotic disorders: prioritizing client care 37.5% Practice settings and aggregates: Priority action 	Continuity of Care - Safe medication administration and error reduction; transcribing prescriptions (25%)	Advocacy - Professional responsibilities: communicating with	 Assignment, Delegation, & Supervision Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities Practice Settings and Nursing roles in the Community: Priority action for
 Establishing Priorities Medications for psychotic disorders: prioritizing client care 37.5% Practice settings and 	Continuity of Care - Safe medication administration and error reduction; transcribing prescriptions (25%) Informed Consent	Advocacy - Professional responsibilities: communicating with clients who do not	Assignment, Delegation, & Supervision - Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities - Practice Settings and Nursing roles in
 Establishing Priorities Medications for psychotic disorders: prioritizing client care 37.5% Practice settings and aggregates: Priority action 	Continuity of Care - Safe medication administration and error reduction; transcribing prescriptions (25%) Informed Consent	Advocacy - Professional responsibilities: communicating with clients who do not speak the same language as nurse (45.5%)	 Assignment, Delegation, & Supervision Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities Practice Settings and Nursing roles in the Community: Priority action for
 Establishing Priorities Medications for psychotic disorders: prioritizing client care 37.5% Practice settings and aggregates: Priority action 	Continuity of Care - Safe medication administration and error reduction; transcribing prescriptions (25%) Informed Consent	Advocacy - Professional responsibilities: communicating with clients who do not speak the same language as nurse	 Assignment, Delegation, & Supervision Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities Practice Settings and Nursing roles in the Community: Priority action for
 Establishing Priorities Medications for psychotic disorders: prioritizing client care 37.5% Practice settings and aggregates: Priority action 	Continuity of Care - Safe medication administration and error reduction; transcribing prescriptions (25%) Informed Consent	Advocacy - Professional responsibilities: communicating with clients who do not speak the same language as nurse (45.5%) Performance Improvement - Coordinating client care;	 Assignment, Delegation, & Supervision Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities Practice Settings and Nursing roles in the Community: Priority action for
 Establishing Priorities Medications for psychotic disorders: prioritizing client care 37.5% Practice settings and aggregates: Priority action 	Continuity of Care - Safe medication administration and error reduction; transcribing prescriptions (25%) Informed Consent	Advocacy - Professional responsibilities: communicating with clients who do not speak the same language as nurse (45.5%) Performance Improvement - Coordinating client care; teaching about	 Assignment, Delegation, & Supervision Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities Practice Settings and Nursing roles in the Community: Priority action for
 Establishing Priorities Medications for psychotic disorders: prioritizing client care 37.5% Practice settings and aggregates: Priority action 	Continuity of Care - Safe medication administration and error reduction; transcribing prescriptions (25%) Informed Consent	Advocacy - Professional responsibilities: communicating with clients who do not speak the same language as nurse (45.5%) Performance Improvement - Coordinating client care;	 Assignment, Delegation, & Supervision Managing Client Care: Planning to Follow Progressive Discipline (46.2%) Legal Rights & Responsibilities Practice Settings and Nursing roles in the Community: Priority action for

Safety and Infection Control	Safety and Infection Control	Safety and Infection Control	Safety and Infection Control
 Accident/error/injury prevention Preoperative nursing care: risk factors for latex allergy 6.3% Use of restraints/safety devices Chronic neuromusculoskeletal disorders: Treatment of positional plagiocephaly 25.0% 	 Accident/error/injury prevention Mobility and Immobility; pressure ulcers (45%) Preoperative nursing care; evaluating client understanding of latex allergy (45%) Mobility and immobility; preventing contractures (50%) Handling hazardous and infectious materials CA treatment options: caring for a client who has a sealed radiation implant (15%) 	 Handling Hazardous and infectious Materials CA treatment options: caring for a client who has radiation implant (45.5%) Use of restraints/safety devices Legal and ethical issues; appropriate nursing action when caring for client in seclusion (36.4%) 	 Standard Precautions/Transmission-Based Precautions/Surgical Asepsis Medical & Surgical Asepsis: maintaining a sterile field while pouring sterile solution (38.5%)
 Health Promotion & Maintenance Ante/Intra/Postpartum and NB Care Assessment of fetal well-being: screening tests at 16 weeks of gestation 43.8% 	 Health Promotion & Maintenance Anta/Intra/PP and NB care Nursing care and discharge teaching; circumcision (50%) Techniques pf Physical Assessment Electrolyte imbalances; priority assessment for suspected hypocalcemia (45%) 	Health Promotion & Maintenance Health Promotion/Disease Prevention - Immunization; immunization during pregnancy (27.3%)	 Health Promotion & Maintenance Health Promotion/Disease Prevention Gastrointestinal Therapeutic Procedure: Evaluating teaching about bariatric surgery (38.5%)
 Psychosocial Integrity Chemical & other dependencies/substance use disorder Substance use and addictive disorders: stimulant withdrawal 31.3% 	 Psychosocial Integrity Behavioral interventions Anxiety Disorders; identify mild anxiety (35%) Therapeutic Communication Effective communication: therapeutic response to the partner of a client who has bipolar disorder (50%) 	Psychosocial Integrity Behavioral Interventions - Anxiety disorders; identifying mild anxiety (45.5%) Support Systems Neurocognitive disorders: teaching family members of a client who has dementia (45.5%)	<u>Psychosocial Integrity</u> - N/A
Basic Care and ComfortNutrition and Oral Hydration-Acute and chronicglomerulonephritis; Dietarychoices 43.8%	 Basic Care and Comfort Nutrition and Oral hydration Chronic obstructive pulmonary disease; managing nutrition (35%) 	Basic Care and Comfort Elimination - Mobility and immobility; planning a bowel-training program (36.4%) Nutrition and Oral Hydration	Basic Care and Comfort Elimination - Postpartum Physiological Adaptations: Interventions to promote voiding (38.5%) -

Pharmacological & Parenteral Therapies Adverse effects/Contraindications/SE/Intera ctions - Medications for depressive disorders: Client teaching about Phanelzine 12.5% Expected Actions/Outcomes - Electrolyte imbalance: interpreting Rhythm Strip for Hyperkalemia 12.5%	Pharmacological & Parenteral Therapies Adverse effects/contraindications/SE/interactions - Medications for depressive disorders; monitoring to adverse effects of amitriptyline (45%) - Contraception; contraindications for combination oral contraceptives (50%) - Psychotic disorders; reportable adverse effects of Haloperidol (50%) - Vitamins, mineral, and supplements; contraindications for potassium administration (50%)	 Burns; supporting nutritional requirements (45.5%) Nutritional assessment/data collection; calculating a client's BMI (45.5%) Pharmacological & Parenteral (45.5%) Pharmacological & Parenteral Therapies Adverse effects/Contraindications/SE/Int eractions Medications for psychotic disorders reportable finding in a client who has schizophrenia (18.2%) Expected Actions/Outcomes Adjuvant medications for pain; client teaching about glucocorticoid therapy (36.4%) Medication Administration Disorders of the eye; teaching a client about timolol (9.1%) PP physiological adaptations; interventions for constipation (45.5%) 	Pharmacological & Parenteral Therapies Adverse effects/Contraindications/Side Effects/Interactions - Medications affecting Coagulation: Contraindications for ASA (30.8%) Medication Administration - Diabetes mellitus: Selecting a Long- Acting Insulin (30.8%) Pharmacological Pain Management - Connective tissue disorders: Pain Medication for Fibromyalgia (23.1%)
Reductions of Risk Potential	Reduction of Risk Potential	Reductions of Risk Potential	Reductions of Risk Potential
Potential for complications of dx test/treatment/procedures	Laboratory Values - Cushing's Disease/syndrome; expected	Laboratory Values - Cardiac glycosides and	Potential for complications of diagnostic tests/treatments/procedures
- Arthroplasty: Postop care	lab findings (40%)	heart failure; lab results to	 Nasogastric intubation and enteral
following total hop	Potential for alternation in body systems	report for digoxin therapy	feedings: Findings that indicate
arthroplasty 43.8%	- Stroke; priority nursing intervention	(45.5%)	misplacement of tube (46.2%)
Therapeutic procedures	(50%)	Potential for complications of dx	-
- Postop Nursing care: client care	Potential for complications for dx	tests/treatment/procedures	
following mastectomy 31.3%	tests/treatments/procedures - Intravenous therapy: nursing action for	- Pacemakers: evaluating	
	a client who has phlebitis (50%)	teaching for a client who	
		has an implantable	

Physiological Adaptation Alterations in Body Systems - Renal Disorders: Risk factors for glomerular Disease 37.5% Pathophysiology - Disorders of the eye: manifestations of acute glaucoma 25.0% - Visual and hearing impairments: Expected findings for retinoblastoma 25.0%	Physiological Adaptation Illness Management - Anesthesia and moderate sedation; lab values to report (40%) - Cardiovascular disorders: planning care for a child who has Kawasaki disease (45%) Pathophysiology - Personality disorders; histrionic personality disorder (40%)	 cardioverter defibrillator (36.4%) Chest tube insertion and monitoring; caring for a client who has a chest tube attached to a water seal drainage (45.5%) Potential for complications from surgical procedure and health alterations Meningitis; priority action for bacterial meningitis (36.4%) Physiological Adaptation Alterations in Body Systems Postoperative nursing care: priority action for a client who has nausea (45.5%) 	 Physiological Adaptation Alterations in Body Systems Pressure Injury, Wounds, & Wound Management: Wound Care for an abdominal incision (7.7%) Head injury: Caring for a client who has cerebral edema (23.1%) Chronic Neuromusculoskeletal Disorders: Teaching about Management of Juvenile Idiopathic Arthritis (46.2%) Respiratory Management and mechanical Ventilation: Effectiveness of Endotracheal Suctioning (46.2%) Hemodynamics Peripheral Vascular Disease: Interventions for deep-vein thrombosis (38.5%
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