

Reese Campus

## Course Syllabus

COURSE: VNSG 1160 Clinical Level 1  
SEMESTER: Spring 2024  
CLINICAL TIMES: Monday & Friday Times vary depending on clinical assignment LAB TIMES: Friday 8-4  
INSTRUCTOR: Course Lead Mrs. Blair  
OFFICE: Reese Center, Building 8  
OFFICE HOURS: by appointment only  
OFFICE PHONE: 806-716-4621; 806-716-4626 (Mrs. Saucedo – Administrative Assistant)

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*"South Plains College improves each student's life."*

### GENERAL COURSE INFORMATION

\*It is the responsibility of each student to be familiar with the content and requirements listed in the course syllabus and student handbook.\*

**CO-requisite courses (concurrent): VNSG 1400, VNSG 1201, VNSG 1420, VNSG 1204, VNSG 1323**

### COURSE DESCRIPTION

A method of instruction providing detailed education, training and work-based experience and direct patient/client care, generally at a clinical site. On-site clinical instruction, supervision, evaluation and placement is the responsibility of college faculty. Clinical experiences are unpaid external learning experiences.

### STUDENT LEARNING OUTCOMES

At the completion of the program students will: (based on the Differentiated Essential Competencies of Texas Board of Nursing [DECS])

1. Become a Member of the Profession
2. Be a provider of Patient-Centered Care
3. Be a Patient Safety Advocate
4. Become a Member of the Health Care Team

**COURSE OBJECTIVES** - Outline form (C-5, C-6, C-7, C-8, C-15, C-16, C-17, C-18, C-19, C-20) (F-1, F-2, F-7, F-8, F-9, F-10, F-11, F-12)

At the completion of this course the student will:

1. Apply the theory, concepts and skills involving specialized materials, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with Vocational Nursing
2. Demonstrate legal and ethical behavior
3. Demonstrate the ability to care for a patient in an acute patient-care situation or long-term care
4. Demonstrate safety practices within the health care setting
5. Demonstrate interpersonal teamwork skills
6. Communicate in the applicable language of health care
7. Be prepared to practice within the legal, ethical, and professional standards of vocational nursing as a health care team member in a variety of roles

8. Exhibit an awareness of the changing roles of the nurse
9. Utilize the nursing process as a basis for clinical judgment and action
10. Accept responsibility for personal and professional growth
11. Be present and punctual for all clinical assignments and labs with no more than 1 absence.
<b>LEVEL 1 CLINICAL OBJECTIVES (BASED ON TBON DECS)</b>
During the clinical course, the beginning vocational nursing student progresses to novice nurse through the following:
<b>Texas Board of Nursing Differentiated Essential Competencies (DECS) Vocational Nursing</b>
<b><i>I. Member of the Profession.</i></b>
<b><i>A. Function within the nurse’s legal scope of practice and in accordance with the policies and procedures of the employing health care institution or practice setting.</i></b>
<b>Clinical Judgments and Behaviors:</b>
1. Function within a directed scope of practice of the vocational nurse with appropriate supervision.
2. Assist in determination of predictable health care needs of patients to provide individualized, goal-directed nursing care.
3. a. Practice according to facility policies and procedures.
b. Question orders, policies, and procedures that may not be in the patient’s best interest.
<b><i>B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.</i></b>
1. Practice according to the Texas laws and regulations
2. a. Provide nursing care within the parameters of vocational nursing knowledge, scope of practice, education, experience, and ethical/ legal standards of care.
3. a. Practice nursing in a caring, nonjudgmental, nondiscriminatory manner.
b. Provide culturally sensitive health care to patients and their families.
c. Provide holistic care that addresses the needs of diverse individuals across the lifespan.
4.a. Use performance and self-evaluation processes to improve individual nursing practice and professional growth.
4b. Evaluate the learning needs of self, peers, and others and intervene to assure quality of care.
5. a. Assume accountability for individual nursing practice.
b. Follow established evidence-based clinical practice guidelines.
6. a. Follow established policies and procedures.
b. Question orders, policies, and procedures that may not be in the patient’s best interest.
c. Use nursing judgment to anticipate and prevent patient harm.
7. Demonstrate professional characteristics that display a commitment to nursing care and to recognizing and meeting patient needs.
8. Use communication techniques to maintain professional boundaries in the nurse/ patient relationship.
9. Uphold professional behavior in nursing comportment and in following organizational standards and policies.
10. Implement principles of quality improvement in collaboration with the health care team.
<b><i>C. Contribute to activities that promote the development and practice of vocational nursing.</i></b>
1. Identify historical evolution of nursing practice and issues affecting the development and practice of vocational nursing.
2. Work collegially with members of the interdisciplinary health care team.
3. Participate in activities individually or in groups through organizations that promote a positive image of the vocational nursing role.
4. Recognize roles of vocational nursing organizations, regulatory agencies, and organizational committees.
5. Practice within the vocational nursing role and Scope of Practice.
6. Serve as a positive role model for students, peers, and members of the interdisciplinary health care team.

***D. Demonstrate responsibility for continued competence in nursing practice, and develop insight through reflection, self-analysis, self-care, and lifelong learning***

1. Participate in educational activities to maintain/improve competency, knowledge, and skills.
3. Use self-evaluation, reflection, peer evaluation, and feedback to modify and improve practice.
4. Demonstrate accountability to reassess and establish new competency when changing practice areas.
5. Demonstrate commitment to the value of lifelong learning.
6. Engage in self-care practices that promote work-life balance.

**II. Provider of Patient-Centered Care**

***A. Use clinical reasoning and knowledge based on the vocational nursing program of study and established evidence-based practice as the basis for decision making in nursing practice.***

1. Use problem-solving approach to make decisions regarding care of assigned patients.
2. a. Organize care for assigned patients based upon problem-solving and identified priorities.  
b. Proactively manage priorities in patient care and follow-up on clinical problems that warrant investigation with consideration of anticipated risks.  
c. recognize potential care needs of vulnerable patients
3. Identify and communicate patient physical and mental health care problems encountered in practice.
4. Apply relevant, current nursing practice journal articles to practice and clinical decisions.

***B. Assist in determining the physical and mental health status, needs, and preferences influenced by culture, spirituality, ethnicity, identity, and social diversity of patients and their families, and in interpreting health-related data based on knowledge from the vocational nursing program of study.***

1. Use structured assessment tool to obtain patient history.
2. Perform focused assessment to assist in identifying health status and monitoring change in patients.
3. Report and document focused patient assessment data.
4. Identify predictable and multiple health needs of patients and recognize signs of decompensation.
5. Share observations that assist members of the health care team in meeting patient needs.
6. Assist with health screening.
7. Differentiate abnormal from normal health data of patients.
8. Recognize healthcare outcomes and report patient status.
9. a. Recognize that economic and family processes affect the health of patients.  
b. Identify health risks related to social determinants of health

***C. Report data to assist in the identification of problems and formulation of goals/ outcomes and patient-centered plans of care in collaboration with patients, their families, and the interdisciplinary health care team.***

1. Integrate concepts from basic sciences and humanities to deliver safe and compassionate care in delivery of patient care.
2. Identify short-term goals and outcomes, select interventions considering cultural aspects, and establish priorities for care in collaboration with patients, their families, and the interdisciplinary team.
3. Participate in the development and modification of the nursing plan of care across the lifespan, including end-of-life care.
4. Contribute to the plan of care by collaborating with interdisciplinary team members.
5. Assist in the discharge planning of selected patients.
6. Demonstrate fiscal accountability in providing patient care.
7. Demonstrate basic knowledge of disease prevention and health promotion in delivery of care to patients and their families.

***D. Provide safe, compassionate, basic nursing care to assigned patients with predictable health care needs through a supervised, directed scope of practice.***

1. Assume accountability and responsibility for nursing care through a directed scope of practice under the supervision of a registered nurse, advanced practice registered nurse, physician assistant, physician, podiatrist, or dentist using standards of care and aspects of professional character.
2. a. Identify priorities and make judgments concerning basic needs of multiple patients with predictable health care needs in order to organize care.
b. Manage multiple responsibilities.
c. Recognize changes in patient status.
d. Communicate changes in patient status to other providers.
3. a. Implement plans of care for multiple patients.
3.b. Collaborate with others to ensure that healthcare needs are met.
4. Participate in management activities.
<b><i>E. Implement aspects of the plan of care within legal, ethical, and regulatory parameters and in consideration of patient factors.</i></b>
1. Implement individualized plan of care to assist patient to meet basic physical and psychosocial needs.
2. Implement nursing interventions to promote health, rehabilitation, and implement nursing care for clients with chronic physical and mental health problems and disabilities.
3. Initiate interventions in rapidly-changing and emergency patient situations.
4. Communicate accurately and completely and document responses of patients to prescription and nonprescription medications, treatments, and procedures to other health care professionals clearly and in a timely manner.
5. Foster coping mechanisms of patients and their families during alterations in health status and end of life.
6. a. Assist interdisciplinary health care team members with examinations and procedures.
b. Seek clarification as needed.
c. Provide accurate and pertinent communication when transferring patient care to another provider
7. a. Inform patient of Patient Bill of Rights.
b. Encourage active engagement of patients and their families in care.
8. Communicate ethical and legal concerns through established channels of communication.
9. Use basic therapeutic communication skills when interacting with patients, their families, and other professionals.
10. Apply current technology and informatics to enhance direct patient care while maintaining patient confidentiality and promoting safety.
11. Facilitate maintenance of patient confidentiality.
12. a. Demonstrate accountability by providing nursing interventions safely and effectively using a directed score of practice
b. Provide nursing interventions safely and effectively using established evidence-based practice guidelines.
13. Provide direct patient care in disease prevention and health promotion and/or restoration.
<b><i>F. Identify and report alterations in patient responses to therapeutic interventions in comparison to expected outcomes.</i></b>
1. Report changes in assessment data.
2. Use standard references to compare expected and achieved outcomes of nursing care.
3. Communicate reasons for deviations from plan of care to supervisory health care team member.
4. Assist in modifying plan of care.
5. Report and document patient's responses to nursing interventions.
6. Assist in evaluating patient care delivery based on expected outcomes in plan of care and participate in revision of plan of care.
<b><i>G. Implement teaching plans for patients and their families with common health problems and well-defined health learning needs.</i></b>

1. Identify health-related learning needs of patients and their families.
2. Contribute to the development of an individualized teaching plan.
3. Implement aspects of an established teaching plan for patients and their families.
4. Assist in evaluation of learning outcomes using structured evaluation tools
5. Teach health promotion and maintenance and self-care to individuals from a designated teaching plan.
6. Provide the patient with the information needed to make choices regarding health
7. Provide patients and families with basic sources of health information.
<b><i>H. Assist in the coordination of human, information, and physical resources in providing care for assigned patients and their families.</i></b>
1. Participate in implementing changes that lead to improvement in the work setting.
2.a. Report unsafe patient care environment and equipment.
2 b. Report threatening or violent behavior in the workplace
3. Implement established cost containment measures in direct patient care.
4. Assign patient care activities taking patient safety into consideration according to Texas Board of Nursing rules (217.11).
5. Use management skills to assign to licensed and unlicensed personnel.
6. Assist with maintenance of standards of care.

### III. Patient Safety Advocate

<b><i>B. Implement measures to promote quality and a safe environment for patients, self, and others.</i></b>
1. Promote a safe, effective caring environment conducive to the optimal health, safety, and dignity of the patients and their families, the health care team and others consistent with the principles of just culture.
2. Accurately identify patients
3. Safely perform preventive and therapeutic procedures and nursing measures including safe patient handling.
4. Clarify any order or treatment regimen believed to be inaccurate, non-efficacious, contraindicated, or otherwise harmful to the patient.
5. Document and report reactions and untoward effects to medications, treatments, and procedures and clearly and accurately communicate the same to other health care professionals.
6. Report environmental and systems incidents and issues that affect quality and safety, and promote a culture of safety.
8. Implement measures to prevent risk of patient harm resulting from errors and preventable occurrences.
9. Inform patients regarding their plans of care and encourage participation to ensure consistency and accuracy in their care.
<b><i>C. Assist in the formulation of goals and outcomes to reduce patient risks.</i></b>
1. Assist in the formulation of goals and outcomes to reduce patient risk of health care-associated infections
2. a. Implement measures to prevent exposure to infectious pathogens and communicable conditions.
b. Anticipate risk for the patient.
3. Implement established policies related to disease prevention and control.
<b><i>D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.</i></b>
1. Evaluate individual scope of practice and competency related to assigned task.
2. Seek orientation/ training for competency when encountering unfamiliar patient care situations.
3. Seek orientation/ training for competency when encountering new equipment and technology.
<b><i>E. Comply with mandatory reporting requirements of the Texas Nursing Practice Act</i></b>
1. Report unsafe practices of healthcare providers using appropriate channels of communication.
2. Understand nursing peer review rules and implement when appropriate.

3. Report safety incidents and issues through the appropriate channels.
4. Implement established safety and risk management measures
<b>* F. Accept and make assignments that take into consideration patient safety and organizational policy.</b>
1. Accept only those assignments that fall within individual scope of practice based on experience and educational preparation.

**IV. Member of the Health Care Team:**

<b>A. Communicate and collaborate with patients, their families, and the interdisciplinary health care team to assist in the planning, delivery, and coordination of patient-centered care to assigned patients.</b>
1. Involve patients and their families with other interdisciplinary health care team members in decisions about patient care across the lifespan.
2. Cooperate and communicate to assist in planning and delivering interdisciplinary health care.
3. Participate in evidence-based practice in development of patient care policy with the interdisciplinary team to promote care of patients and their families.
<b>B. Participate as an advocate in activities that focus on improving the health care of patients and their families</b>
1. Respect the privacy and dignity of the patient.
2. Identify unmet health needs of patients.
3. Act as an advocate for patient’s basic needs, including following established procedures for reporting and solving institutional care problems and chain of command.
4. Participate in quality improvement activities.
5. Refer patients and their families to community resources.
<b>C. Participate in the identification of patient needs for referral to resources that facilitate continuity of care, and ensure confidentiality.</b>
1. a. Identify support systems of patients and their families.
b. Identify major community resources that can assist in meeting needs.
2. a. Communicate patient needs to the family and members of the health care team.
b. Maintain confidentiality
c. Promote system-wide verbal, written, and electronic confidentiality.
3. a. Advocate with other members of the interdisciplinary health care team on behalf of patients and families to procure resources for care.
b. Assist patient to communicate needs to their support systems and to other health care professionals.
4. Identify treatment modalities and cost of health care services for patients and their families.
<b>D. E. F. Communicate patient data using technology to support decision making to improve patient care.</b>
1. a. Identify, collect, process, and manage data in the delivery of patient care and in support of nursing practice and education.
b. Use recognized, credible sources of information, including internet sites.
c. Access, review, and use electronic data to support decision-making
2. a. Apply knowledge of facility regulations when accessing client records.
b. Protect confidentiality when using technology.
c. Intervene to protect patient confidentiality when violations occur.
3. a. Use current technology and informatics to enhance communication, support decision making, and promote improvement of patient care.
b. Advocate for availability of current technology.
4. Document electronic information accurately, completely, and in a timely manner.

**G. Assist health care teams during local or global health emergencies or pandemics to promote health and safety, and prevent disease.**

1. Recognize the impact and prepare to respond to an emergent global or local health issue in an assistant role
2. Guide patients, staff, and others in understanding the extent of the emergency and their response
3. Participate with the health care team to promote safety and maintain health during an emergency or pandemic
4. Include public health strategies in the care of individuals and communities that address resolution of a global or local crisis and promotion of health among the population.

### **COURSE COMPETENCY**

The student will successfully complete 1160 with a “C” (76) or better and follow safe nursing practices. See Level 1 EXPECTATIONS and OBJECTIVES on blackboard. All assignments must be turned in whether or not they meet the grading deadline. **Students who fail to turn in assigned paperwork fail the clinical course, REGARDLESS OF OTHER CLINICAL GRADES!**

### **EVALUATION METHODS**

Weekly clinical performance evaluations and other assignments with a final Summative Evaluation at the end of the semester.

### **ACADEMIC INTEGRITY**

It is the aim of the faculty of South Plains College to foster a spirit of complete honesty and a high standard of integrity. The attempt of any student to present as his or her own any work which he or she has not honestly performed is regarded by the faculty and administration as a most serious offense and renders the offender liable to serious consequences, possibly suspension.

**Cheating** - Dishonesty of any kind on examinations or on written assignments, illegal possession of examinations, the use of unauthorized notes during an examination, obtaining information during an examination from the textbook or from the examination paper of another student, assisting others to cheat, alteration of grade records, illegal entry or unauthorized presence in the office are examples of cheating. Complete honesty is required of the student in the presentation of any and all phases of coursework. This applies to quizzes of whatever length, as well as final examinations, to daily reports and to term papers.

**Plagiarism** - Offering the work of another as one's own, without proper acknowledgment, is plagiarism; therefore, any student who fails to give credit for quotations or essentially identical expression of material taken from books, encyclopedias, magazines and other reference works, or from themes, reports or other writings of a fellow student, is guilty of plagiarism. If there is any suspicion of work completed by Artificial Intelligence (A.I.), the student and their work may be questioned, and if proven that A.I. was used will be considered guilty of plagiarism.

### **VARIFICATION OF WORKPLACE COMPETENCIES**

Successful completion of this course and all required concurrent theory courses entitles the student to receive a Certificate of Proficiency and to apply to write the examination for licensure (NCLEX-PN) to practice as a Licensed Vocational Nurse in the State of Texas.

### **BLACKBOARD**

**Blackboard is an e-Education platform designed to enable educational innovations everywhere by connecting people and technology. This educational tool will be used in this course throughout the semester as a reporting tool and communication tool.** Students should be aware that the “total” points noted on this education platform do not reflect the actual grade of the student because it does not take into consideration the percentages of each grade. Please calculate your grade according to the criteria in this syllabus.

### **FACEBOOK**

The Vocational Nursing Program has a Facebook page at

<https://www.facebook.com/SouthPlainsCollegeVocationalNursingProgram> in addition to the South Plains College website; this Facebook page will be used to keep students up-to-date on program activities, South Plains College announcements and will help with program recruitment. “Liking” the South Plains College Vocational Nursing Program Facebook page is not mandatory, nor are personal Facebook accounts, in order to access this page

## SPECIFIC COURSE INFORMATION

### SPECIFIC UNIT OBJECTIVES

## MEDICAL-SURGICAL ROTATIONS

### University Medical Center: Medical-Surgical Floor Objectives

Unit	Location	Phone	Specialty
3 West	3 <sup>rd</sup> floor west of patio	775-8909	Orthopedics: pre/post op care for joint replacements, amputations, arthroscopy or trauma. May also have overflow medical patients.
3 East	3 <sup>rd</sup> floor east of patio	775-8903	Medical and Surgical patients such as pneumonia, GI bleeds, skin issues, pain
3 West Tower SCU/GTU	3 <sup>rd</sup> floor West Tower	775-9770	Geriatric trauma and supportive care. Supportive care manages pain, nausea, loss of appetites or other s/s caused by illness or medical treatments. Floor includes end-of-life care
4 West	4 <sup>th</sup> floor west of patio	775-8959	Urology/Kidney/Dialysis patients. May also have overflow medical patients.
4 East	4 <sup>th</sup> floor east of patio	775-8945	Cancer/Chemo/Oncology patients. May also have overflow medical patients.
5 West	5 <sup>th</sup> floor west of patio	775-9790	Medical or surgical patients and patients for “observation”. Admissions & discharges are frequent
5 East	5 <sup>th</sup> floor east of patio	775-9780	Medical/Surgical/Telemetry patients; includes pre/post op, cardiac procedures and medical problems.

### General Guidelines for ALL Medical Surgical Rotations in Level 1

Criteria	Level 1
Number of patients	1-2
Medication administration with instructor supervision	No
Documentation on student pages	Yes
Chart Pack (follow instructions on Level 1 EXPECTATIONS and OBJECTIVES)	Yes
VS and brief assessment by 0730	Yes
Full assessment documented by 0930	Yes
Follow Do and Don't List in handbook	Yes

### TEXT AND MATERIALS – Required

**Davis Drug Guide – 18<sup>th</sup> Ed.      Tabers**

Students should use current resources from theory textbooks such as the Williams & Hopper, Davis Drug Guide, etc. as tools to equip them for patient care. Websites that the student may use should end in “.org” “.gov” or “.edu”. Wiki



websites are not acceptable; neither are WebMD or Mayo Clinic [these websites are designed for laypeople—not professionals!].

Students are required to have the following items with them for the clinical experience:

- This syllabus with Level 1 Clinical Objectives and specific unit objectives
- Level 1 EXPECTATIONS and OBJECTIVES
- Davis Drug Guide
- Skills Checklist

### ADDITIONAL CLINICAL ITEMS

Students should come to clinicals *prepared* to care for patients. The ISBAR and Narrative/Chart Pack are required for each patient. The student must be in full clinical uniform which includes the student badge, stethoscope, blood pressure cuff, penlight, bandage scissors, black ink pen and analog watch. Refer to the Student Handbook for the full dress code

### ATTENDANCE POLICY (\*READ CAREFULLY)

#### Clinical Attendance

Clinical experiences offer the student the opportunity to apply theory of nursing to actual nursing practice. Students are expected to attend all assigned clinical experiences, including Simulation and Friday Lab. The student may be administratively withdrawn from the course when absences become excessive as defined in the course syllabus.

**ALL CLINICAL ABSENCES MUST BE MADE UP in order to successfully meet clinical objectives.** In the Level 1 clinical course (VNSG 1160), there is one make up day built into the schedule. **\*For an extended Covid exposure,** additional make up days will be added into the student’s total time until the days can be made up. This may extend the student’s completion date. Covid make-up days must be coordinated with clinical agencies, college, and faculty schedules and are not scheduled at the student’s request. The student will receive an “incomplete” in the course until the days can be completed.

Recognizing that sometimes students are ill or have ill children or have some other real reason to be absent, the student may take one absence this semester (to be made up at the end of the semester)—this includes any day the student is sent home for clinicals for a rule violation (see Student Handbook) or Friday absences. Because students cannot be evaluated if they are absent, points are deducted from the weekly clinical grade. **Exceeding allowable clinical absences (1) is failure in the clinical course. The student would be required to meet with the VESC committee and may be administratively withdrawn.** FOR MORE INFORMATION, please refer to the student handbook.

**Clinical Times:** (must be clocked in BEFORE the “Absent at” time; Students are absent on the given time.

Facility	Clinical Time	Lunch	Absent at:	Call In Time	May leave floor at
University Medical Center; Grace Medical Center	0630-1530	30 minutes	0645	0600	1515
Carillon House	0530-1430	30 minutes	0540	0500	1415
Simulation	0755-1600	Approx. 60 minutes	0800	0700	1600
Friday LAB	0755-1600	Approx. 60 minutes	0800	0700	1600

Clinical time is “on the job” learning. Students are expected to be up and working throughout the entire shift. Students MAY NOT leave the assigned unit at the hospitals until 3:15 at the hospitals. This means that the student gives report, checks on the patients and participates in patient care until 3:15 and then gathers belongings, leaves the floor and clocks out. Students who leave the floor before 3:15 or students who clock out right at 3:15 (which means they had to leave early in order to get to the time clock by then) are given an absence for the entire day. The clock out time should be no earlier than 3:20!

PLEASE NOTE: The Time Clock located at UMC (or Covenant) is the OFFICIAL clinical time. It is usually set to the Universal Time as found on digital media. Please set your analog watch to the time clock.

Students are officially enrolled in all courses for which they pay tuition and fees at the time of registration. Should a student, for any reason, delay in reporting to a class after official enrollment, absences will be attributed to the student from the first class meeting.

Students who enroll in a course but have “Never Attended” by the official census date, as reported by the faculty member, will be administratively dropped by the Office of Admissions and Records. A student who does not meet the attendance requirements of a class as stated in the course syllabus and does not officially withdraw from that course by the official census date of the semester, may be administratively withdrawn from that course and receive a grade of “X” or “F” as determined by the instructor. Instructors are responsible for clearly stating their administrative drop policy in the course syllabus, and it is the student’s responsibility to be aware of that policy.

It is the student’s responsibility to verify administrative drops for excessive absences through MySPC using his or her student online account. If it is determined that a student is awarded financial aid for a class or classes in which the student never attended or participated, the financial aid award will be adjusted in accordance with the classes in which the student did attend/participate and the student will owe any balance resulting from the adjustment.

([http://catalog.southplainscollege.edu/content.php?catoid=47&navoid=1229#Class\\_Attendance](http://catalog.southplainscollege.edu/content.php?catoid=47&navoid=1229#Class_Attendance))

Student MAY NOT attend clinicals when running a fever, experiencing vomiting or diarrhea, having pink eye or any other infectious process. The student should anticipate that such illnesses or other emergencies may occur and should judiciously take an absence. Please refer to the Student Vocational Nurse Handbook for more information on attendance, infectious processes for which the student should stay home, NO SHOW policy and call in procedures.

LUNCH—the lunch break in the hospital setting is 30 minutes; this begins when the student reports off care of the patient until the time the student returns and resumes care. If the student spends 10 minutes waiting on the elevator, the student has 20 minutes remaining on the lunch break.

In some outpatient settings, the student may be given an hour for lunch IF there are no meetings during the noon hour which would give the student an additional learning experience (see each clinic objective). A student who takes excessive lunches or who leaves the site when there was a meeting during the noon hour will receive full disciplinary action and possible dismissal for unprofessional conduct.

BREAKS—please refer to the Student Handbook for information about breaks

TARDIES—tardiness is considered unprofessional. **There are NO tardies in the Vocational Nursing Program.**

CLOCKING IN/OUT: Clocking in/out for other student(s) is PROHIBITED and is considered unprofessional conduct as dishonest behavior. All students involved are dismissed from the Vocational Nursing Program (please refer to the Student Handbook).

Time sheets are required at off-hospital rotations. Students who misrepresent themselves on the time sheet or forge a time sheet are deemed “unprofessional” and are dismissed from the program for unprofessional conduct (please refer to the Student Handbook).

Professional behavior requires the student to call when he/she will be absent. When absent on a clinical day, the student must email Kelli Blair at [kblair@southplainscollege.edu](mailto:kblair@southplainscollege.edu) before the specified deadline. STUDENTS MUST EMAIL PRIOR TO THE SHIFT FOR THE ABSENCE TO NOT COUNT AS A ‘NO SHOW’—ONCE THE SHIFT STARTS, IT IS A “NO SHOW” (so at 0645, the student is No Show if there has not been a call-in).

Please refer to the Student Handbook for more information about the clinical experience and policies and about the NO SHOW POLICY.

## NO SHOW POLICY

Professional behavior requires the student to call in any time he/she will be absent. When absent on a clinical day, the student email ALL instructors by the specified deadline. STUDENTS MUST EMAIL PRIOR TO THE SHIFT FOR THE ABSENCE TO NOT COUNT AS A 'NO SHOW'—ONCE THE SHIFT STARTS, IT IS A "NO SHOW" (so at 0645, the student is No Show if there has not been a call-in). Just not showing up is unprofessional and is detrimental to patient safety. No Shows apply to the entire clinical year as they would in employment; if a student has a No Show in the previous semester, it still is a part of the record and subsequent No Shows will be labeled as #2 or #3, depending on the actual number.

### CONSEQUENCES of No Show:

1. Failure to email correctly by 0644 to report an absence results in being classified as NO SHOW.
2. The absence will have to be made up as with any other clinical absence; however, the grade for the missed day will remain the same (no points awarded for the NO SHOW.)
3. A second NO SHOW results in the same as in #2 and the student is placed on probation. Probation means that the student will not have any "off campus" rotations in the remainder of this Level and in Level 3
4. A third NO SHOW results in clinical failure, regardless of other grades, and the student is administratively withdrawn.

**FRIDAY LAB:** This lab day is the second clinical day of the week—depending on the schedule, it may be an afternoon lab. Students will complete lab projects and virtual simulations as assigned. Absences are counted toward the clinical absences. The grade is part of the clinical paperwork grade.

### Attendance:

This is a clinical day that begins at 0800 for full days and at 1300 for half days—there is no tardy. At 0800 (1300), the student is absent.

1. Students who are ill must call in by 0700 or at noon for the afternoon at 716-4626 to report the absence. Failure to call in appropriately results in the student classified as "NO Show" following clinical guidelines regarding No Show.
2. Absences on Friday do count against the allowable semester absences.
3. Students are expected to be in the classroom or the lab at all times. The student must sign in/out each time they leave the classroom (except at lunch and dismissal). Failure to do so results in a clinical deduction.

### Dress Code:

1. Full clinical dress code rules apply, including hair, make-up, etc.
2. Students violating dress code will have deductions taken from the weekly clinical grade IF the dress code violation can be immediately corrected. If the violation cannot be immediately corrected, the student is sent home "absent."
3. PLEASE NOTE: Cell phones are PROHIBITED at all times during Friday lab—this is a clinical day. Phones should be left in the student vehicle (like on other clinical days) and not accessed at any time during the lab hours.

**Students who are found with their cell phone during the lab hours are sent home "absent."**

**Assignments** for each lab will be posted weekly on Blackboard. Instructions for submission and the due date and time will be posted on Blackboard.

**Faculty Appointments:** Faculty will be available to offer extra assistance to students on Fridays **by appointment**. In order to allow students the best opportunity for assistance, students MUST make appointments with the faculty by emailing the instructor for an available appointment time.

Appointments are scheduled throughout the day and students must take the first available appointment. It is not professional behavior to just "drop in" during these times.

If students are merely wanting to review a test and not seeking tutoring, then more than one student may be given the same time.

Student Reporting: Just as the Texas Board of Nursing requires that nurses report unethical behavior, so does the nursing program. Unethical behavior regarding Friday lab includes (but not limited to) falsifying records, deliberately passing or failing a student in lab, attempting to sabotage another student or the program itself, etc. Students who are aware that students are violating Friday Lab rules have a duty to report the behavior with facts and evidence.

### **ASSIGNMENT POLICY—CLINICAL PREPARATION**

All assignments must be completed by the assigned due date. Late and/or incomplete work will not be accepted and a grade of zero will be recorded.

It is the responsibility of the student to be informed of class progress and assignments and to come to clinical prepared to participate in patient care, to turn in any assignments due, and/or take the quiz or test scheduled for that day in Friday lab. Students may be required to write Care Plans and Case Studies as part of the clinical experience.

### **Clinical Preparation**

Preparing for clinical practice is a DUTY of the student vocational nurse and leads to SAFE NURSING PRACTICE. The student is required to prepare for clinical in such a way as to understand the medical diagnoses and medications, the implications of labs and diagnostics, the potential complications and how to prevent them, and the required nursing care. Adequate preparation is a must. The student should plan on a minimum of two hours of prep time per day for each clinical experience.

To prepare for hospital experiences; Please also refer to the Clinical Expectations placed on Blackboard

Documentation/Chart Pack: In all medical-surgical rotations, the student must complete individual research and the chart pack. The Chart Pack is the student's practice documentation and is considered a legal document (it may be subpoenaed for evidence); therefore, the Chart Pack/Documentation should be treated with respect and completed up to the point the student relinquishes care of the patient. The completed Chart Packs/documentation should be turned in for a check on Tuesday by 0800 to the clinical box in the front office 805. After each is checked, the Chart Pack is returned to the student for safe-keeping. For more information on the Chart Pack and clinical research, please go to that area on Black Board.

**Clinical Schedule will be on Blackboard in the Clinical Course VNSG-1160**

### **COMPUTER USAGE**

Clinical Computer Usage: Computer systems at the clinical sites are for the purposes of clinical work. Students may only use the agency computer systems for accessing important patient data the student needs for safe and effective patient care. Students MAY NOT use the agency computer for personal usages such as checking emails (even SPC or instructor-sent emails are prohibited on agency computers), Blackboard, websites (including drug or diagnoses websites) or other personal usage. No "research" is to be done during the clinical period. **Students who engage in inappropriate computer usage will be placed on probation for the first offense and dismissed from the VNP for a subsequent offense.** Refer to the Student Vocational Nurse Handbook.

As computer technology in the field of health occupations continues to become more popular, computers may be used in this course for Case Studies and Care Plans if the student chooses to use them. All students have access to computers and printers on the South Plains College campus. All registered students are supplied with a working email account from South Plains College.

**ALL STUDENTS ARE EXPECTED TO KNOW THEIR SPC STUDENT USER NAME AND PASSWORD.**

### **Computer Checklist**

#### **History and Physical**

Go to Clinical Notes -> Hospital -> Physician -> History and Physical

- If History and Physical does not show up at this time, you may need to change your search dates.
- Right click on the Dates that are displayed and click change search criteria. Click on Admission to Current. This should make the history and physical accessible.

If you are still unable to find the history and physical, you need to call your instructor!

- Utilize the H&P to fill in your ISBAR with information you did not receive from your nurse or patient.
- Be sure to READ all the way to the bottom. You can skip over any lab and radiology results as you will be looking at that later under the Lab section.
- At the bottom of the H&P is the Impression and Plan. This is where Physicians write what they believe is going on and will write the plan for treatment.

The H&P is documented within 24hrs of admission so be aware that these diagnoses can change and more may be added. This is why you will be looking next at your Progress notes for changes that have occurred since admission.

### Progress Notes

Clinical Notes -> Hospital -> Physician -> Progress Notes

- There is typically a progress note for every day of their stay during this admission. You should read at least the first and last progress note. If, when reading the progress note, you do not know how all of the sudden several diagnoses have changed or been added, you can skip back and read more of the progress notes.
- Again, you must read all the way to the bottom. At the bottom, you will find the Impression and Plan.

Use this information to fill in your ISBAR with current and past medical diagnoses. Also, fill in what is happening now. You can also see if they are planning discharge.

### MAR

1. Get your White Medication Sheet from the chart pack.
2. Fill in the medication name, route, dose, frequency and times.

**This is not the time to fill in classification, indication, side effects, and V/S needed- that is for research.**

3. For Scheduled medications you will need to right click on the medication -> Order Info -> Additional Information. This should show you the times that the medication is scheduled. Be aware that if the med is BID- you are looking for 2 times, TID- 3 times, etc...
4. You only need to fill in frequency for PRN medications, not times because they are not scheduled at set times.

Example of Scheduled vs. PRN:

Medication	Classification	Indication	Dose/route	Frequency/time	Side effects	v/s
Furosemide (Lasix)			20 mg PO	Daily 0900		
Acetaminophen (Tylenol)			500mg PO	Q4h PRN		

### Orders

- Click on orders tab on left hand side of the screen.
- Be sure to note any wound care, Ted Hose, SCDs, Oxygen, IV fluids, Accu-checks, Diet, Fluid Restriction, Weight bearing restrictions, etc...

### Flowsheets (Labs, Radiology, Nursing Plan of Care)

Click on Flowsheets tab on left hand side of the screen. This will bring up a chart that looks similar to:

	Labs 48 hours	Lab	Radiology	Nursing plan of care
Complete blood count				
complete metabolic panel				
Point of Care				

- Skip over the 48 hour labs and Click on the tab labeled Lab. This will show you the most recent labs.
- You will need to look at your patient's admission date and get your lab sheet from your chart pack. Fill in the labs from the date of admission.
- Then look at the most current labs and fill those labs in on the next column. You need to write this information in black ink.

- DO NOT write in the normal values or draw your high or low arrows in blue or red at this time. This is for you to do at home as research.
- Be sure to look at the left hand column (Complete Blood Count, Complete metabolic panel, etc.) You can toggle through the labs using this column.
- Make sure to note any Microbiology. This is where you will find cultures such as blood cultures, urine cultures, wound cultures.
- If your patient has Accu-checks, you will find them under Point of Care glucose.
- Next Click the Radiology Tab.
  - Get your Diagnostics paper from your chart pack and fill in any x-rays, MRI, US, results from the current admission

### COMPUTER LAB USAGE

The computer labs are available in building 8 and may be used by students during scheduled open hours or as assigned by an instructor. Printer paper will not be provided for students to print materials but students may seek assistance from faculty or staff to request lab paper from the college if needed. Lack of computer lab paper is not an excuse for not completing assignments.

### CLINICAL PAPERWORK

Students will be required to turn in written paperwork as assigned on the Expectations and Objectives page. All assignments are due at 0800 on the scheduled date. Late work is not accepted for grading; HOWEVER, all assignments must be turned in and turned in complete in order to exit the course. **Students who do not turn in all work will fail the course, regardless of other grades.**

### GRADING POLICY

Students must earn an overall grade of 76 or better in this course to pass this course, but have some specific grading criteria:

#### Final semester grades will be based on the following:

- Departmental Math Exam**—this grade was determined at the beginning of the semester.
- Weekly clinical evaluation**—students will receive a weekly clinical evaluation based on the student's individual clinical performance and preparedness to practice nursing. The weekly ratings are averaged together for the length of the course. The student must have a 76-performance average in order to complete the course, and if not, fails the clinical course, regardless of other clinical grades. The weekly grade also includes the Friday Lab Evaluation and Self-Reflection (refer to Black Board for more information on Friday lab).
- Written Work: Assessments, quizzes, reflections, interviews, Case Studies and Care Plans, other**—students should strive for a 76 average on the written work.
- Completion of Skills Checklist**—students should perform skills and document those skills on the Student Skills Checklist. Students that do not have at least 80% of the skills completed by the deadline are placed on probation for the next clinical course and given a short time to bring their skills up to completion. If, after the probationary period, the student is unsuccessful, the student is withdrawn from the program.
- CPR and Immunizations**—CPR and immunizations must be kept current. If CPR expires or if an immunization booster/update is required, the student may not attend clinicals, accruing absences. Should this put the student over the allowable absences, the student will fail the clinical course, regardless of other grades. If the student misses one day due to an expired CPR or immunization, that student will have to make up that day in the clinical setting. IT IS THE RESPONSIBILITY OF THE STUDENT TO MAINTAIN CPR AND IMMUNIZATIONS.
- Summative Evaluation**—at the end of the semester, the student will have a summative evaluation that states if the student met all expectations of the clinical experience. The student must have completed all assignments, remediation, clinical experiences and make up days in order to have a successful summary.

## GRADING SCALE:

- 90-100 = A
- 80-89.99 = B
- 76-79.99 = C
- <76 = F (There is no "D" in clinicals)

Please note: clinical grades are reported as whole numbers; decimals are dropped and are not rounded up.

## GRADE BREAKDOWN

- Weekly Evaluations: 90%
- Written Assignments: 10%

## COMMUNICATION POLICY

Electronic communication between instructor and students in this course will utilize the South Plains College Blackboard and email systems. The instructor will not initiate communication using private email accounts. Students are encouraged to check SPC email on a regular basis. Students will also have access to assignments, web-links, handouts, and other vital material which will be delivered via Blackboard. Any student having difficulty accessing the Blackboard or their email should immediately contact the help desk.

### Email Policy:

- A. Students are expected to read and, if needed, respond in a timely manner to college e-mails. It is suggested that students check college e-mail daily to avoid missing time-sensitive or important college messages. Students may forward college e-mails to alternate e-mail addresses; however, SPC will not be held responsible for e-mails forwarded to alternate addresses.
- B. A student's failure to receive or read official communications sent to the student's assigned e-mail address in a timely manner does not absolve the student from knowing and complying with the content of the official communication.
- C. The official college e-mail address assigned to students can be revoked if it is determined the student is utilizing it inappropriately. College e-mail must not be used to send offensive or disruptive messages nor to display messages that violate state or federal law
- D. Instructors make every attempt to respond to student emails during regular college business hours when faculty are on campus. Instructors are not required to answer emails after hours or on weekends.
- E. Students who use email inappropriately to faculty, students, staff or others will be placed on probation for the first offense; dismissed from the program for a second offense.

**Texting Faculty:** Students should not text faculty via the faculty cell phone. Written communication should be by email, office phone, or personal notes. The faculty cell phone is for contact during the clinical hours ONLY and should not be used outside the clinical experience. Students who text faculty will be placed on probation for the first offense and dismissed from the program for the second offense.

**Cell Phones:** cell phones are PROHIBITED at any clinical setting, including Friday lab and Simulation. Students should not have cell phones on their person, in their back packs, pockets or other personal areas during clinicals. Cell phones should be left in the student vehicle so that there is no temptation to use. Students who violate this policy and have their cell phone out during the clinical day for any reason will be sent home as absent—no matter when the infraction is discovered. If this absence causes the student to exceed the allowable absences, the student fails the clinical course, regardless of other clinical grades. This is considered a professional violation. Please refer to the Student Handbook for more information.

## PROFESSIONAL CONDUCT AND SAFE/UNSAFE/UNSATISFACTORY CLINICAL PERFORMANCE

Students are expected to follow the ethics and rules of professional conduct as outlined in the student handbook. Unprofessional conduct on the part of a student as outlined in the student handbook is UNSAFE nursing practice and

results in dismissal from the program.

Students are expected

- (1) to demonstrate growth in clinical practice through application of knowledge and skills from previous and concurrent courses.
- (2) to demonstrate growth in clinical practice as they progress through courses and to meet clinical expectations as outlined in the clinical objectives.
- (3) to prepare for clinical practice in order to provide SAFE, COMPETENT care.
- (4) to continuously practice skills to achieve 100% proficiency.

UNSAFE clinical practice is any behavior that places the patient or staff in either physical or emotional jeopardy.

Emotional jeopardy means that the student creates an environment of anxiety or distress which puts the patient, family, or staff at risk for emotional or psychological harm.

Physically unsafe practices include (but are not limited to):

- (a) violations of previously mastered principles/learning objectives in carrying out nursing care skills and/or delegated medical functions.
- (b) assuming inappropriate independence in actions or decisions.
- (c) failing to recognize own limitations, incompetence and/or legal responsibilities.
- (d) failing to accept moral and legal responsibility for his/her own actions.
- (e) noncompliance with all aspects in the VN Student Handbook and Clinical guidelines.
- (f) violating confidentiality or HIPAA violations in ANY VNP situation.
- (g) being unprepared to answer instructor or staff questions regarding patient's medications, doctor's orders, progress notes, H&P, and current status of patient.
- (h) Exhibiting unprofessional conduct as outlined in the student handbook

**UNSAFE clinical practice is an occurrence (one event) or a pattern of behavior involving unacceptable risk!**

#### **CLINICAL EXPECTATIONS OF PREPARATION:**

The student is expected to be prepared for clinical experience on a daily basis. The student will

1. Attend report & get information from report
2. Check patient, obtain VS, perform comfort measures
3. Assess patient
4. Complete chart review: physician's orders, progress notes, history & physical, lab, diagnostics, MAR, nurse's notes (ISBAR and morning paperwork should be complete prior to accessing the computer)
5. Meet with instructor to discuss patient care
6. Answer call lights
7. Assist TPC nurses
8. Perform procedures (only after being checked off in the lab and with appropriate supervision)
9. Report off any time leaving the unit, including lunch and end of shift
10. Maintain documentation

#### **STUDENT CONDUCT—Please refer to the Student Vocational Nursing Handbook for all Program Rules & Policies**

Rules and regulations relating to the students at South Plains College are made with the view of protecting the best interests of the individual, the general welfare of the entire student body and the educational objectives of the college.

As in any segment of society, a college community must be guided by standards that are stringent enough to prevent disorder, yet moderate enough to provide an atmosphere conducive to intellectual and personal development.

A high standard of conduct is expected of all students. When a student enrolls at South Plains College, it is assumed that the student accepts the obligations of performance and behavior imposed by the college relevant to its lawful missions, processes and functions. Obedience to the law, respect for properly constituted authority, personal honor, integrity and common sense guide the actions of each member of the college community both in and out of the classroom.

Students are subject to federal, state and local laws, as well as South Plains College rules and regulations. A student is not entitled to greater immunities or privileges before the law than those enjoyed by other citizens. Students are subject to such reasonable disciplinary action as the administration of the college may consider appropriate, including suspension and expulsion in appropriate cases for breach of federal, state or local laws, or college rules and regulations.



This principle extends to conduct off-campus which is likely to have adverse effects on the college or on the educational process which identifies the offender as an unfit associate for fellow students.

Any student who fails to perform according to expected standards may be asked to withdraw.

Rules and regulations regarding student conduct appear in the current Student Guide and in the Vocational Nursing Student Handbook.

## CONFIDENTIALITY/HIPAA

Student Vocational Nurses will not divulge any protected patient information, clinical instructional information, or instructor-student conference information

In the Vocational Nurse's Pledge, we pledge:

“I will not reveal any confidential information that may come to my knowledge in the course of my work.”

This statement makes it clear that any information gained by the nurse during examination, treatment, observation or conversation with the client or his/her family is confidential. Unless the nurse is authorized by the client to disclose the information or is ordered by a court to do so, she/he has a clear moral obligation to keep the information confidential.

The nurse may use the knowledge to improve the quality of client care, but she/he never shares information about the client with anyone not involved with his/her care. The student will direct all inquiries directly to the charge nurse.

Even when sharing with caregivers, the nurse must be extremely cautious. The information is not discussed in the cafeteria or around persons not involved with the patient's care. Students need to be **very aware** of confidentiality and be **extremely careful** with whom and where they discuss their assignments.

*The Health Insurance Portability and Accountability Act (HIPAA)* became effective April 14, 2003 for all health care providers in the United States. HIPAA established regulations for the use and disclosure of Protected Health Information (PHI). PHI is **any** information held by a covered entity which concerns health status, provision of health care, or payment for health care that can be linked to an individual. This means that NO information about a patient may be shared outside of those health care providers that “need to know” the information to properly care for the patient. Violation of HIPAA is a federal violation and is grounds for dismissal from the nurse program. This includes any information about a health care facility or individuals providing health care at a specific facility.

Students must always be aware of the private information that they have about patients and must protect that information. Even if a specific name is not mentioned, a violation can exist if there is enough information for other individuals to “connect the dots” and find out who the information is about. Students must be very cautious in discussing PHI – elevators, cafeterias, and even open nursing stations may be inappropriate places to discuss information.

All social networking sites are inappropriate areas to be discussing patient information. This includes Facebook, Instagram, Snap Chat, TikTok, Twitter, etc. HIPAA violations could also occur through the use of email or other computer programs. **Students who post inappropriate information or PHI on social media are dismissed from the program.**

Students should only share PHI with their instructors for the purpose of learning and with the other health care providers on the assigned unit who are participating in that individual patient's care. It is inappropriate to discuss situations with other classmates, family members, etc.

Students must also protect all student paperwork and may not leave these out where anyone can read them. Students should always secure any identifying information when leaving that information (don't leave information at the nursing station, in patient rooms, etc.) ALWAYS LOG OFF of a computer system if you have used it! Press F4 when leaving the computer to close the chart.

**Confidentiality also extends to the nursing report, facility in-services or other hospital/clinic meetings that the student nurse attends. Additionally, confidentiality is to be maintained in all student/instructor conferences and disciplinary actions.**

**Failure to maintain confidentiality is grounds for dismissal.**

**Additionally, confidentiality is to be maintained in all program situations including classroom discussions, student/instructor conferences and disciplinary actions. Student grades and clinical evaluations are confidential also. Simulation scenarios should not be discussed with other classmates outside of the group assigned for a simulation. Sharing of information is CHEATING and violation of confidentiality. This is grounds for dismissal.**

In observance of confidentiality, students who have family members or friends in the hospital MAY NOT review their charts or take them as patients. Family members who want to review documentation should follow the established hospital protocol. Students who violate confidentiality in this manner will be withdrawn from the VNP.

Students agree to protect confidentiality in the Student Contract at the end of this manual. A separate Confidentiality Agreement is required by some clinical affiliates prior to participating in clinical experiences at those facilities.

- **COVID policy**

If you are experiencing any of the following symptoms, please do not attend class or clinical and either seek medical attention or test for COVID-19.

- Cough, shortness of breath, difficulty breathing
- Fever or chills
- Muscles or body aches
- Vomiting or diarrhea
- New loss of taste and smell

Please also notify DeEtte Edens, BSN, RN, Associate Director of Health & Wellness, at [dedens@southplainscollege.edu](mailto:dedens@southplainscollege.edu) or 806-716-2376. Proof of a positive test is required. A home test is sufficient but students must submit a photo of the positive result. The date of test must be written on the test result and an ID included in the photo. If tested elsewhere (clinic, pharmacy, etc.), please submit a copy of the doctor's note or email notification. Results may be emailed to DeEtte Edens, BSN, RN at [dedens@southplainscollege.edu](mailto:dedens@southplainscollege.edu).

**Please immediately notify your instructor and program director, and DeEtte Edens (Associate Director of Health and Wellness) any time you test positive for COVID-19.**

## ACCOMMODATIONS

For college policy statements related to Intellectual Exchange Statements, Disabilities Statements, Non-Discrimination Statements, Title IX Pregnancy Accommodations Statements, CARE, Campus Concealed Carry Statements, COVID-19, or the use of AI-Artificial Intelligence, visit: [https://www.southplainscollege.edu/syllabusstatements/.](https://www.southplainscollege.edu/syllabusstatements/)

**Be aware you must still hold a LTC to carry on our campus. Also, there is a NO Carry Policy at all within ANY clinical facility.**

## FOUNDATION SKILLS

### **BASIC SKILLS—Reads, Writes, Performs Arithmetic and Mathematical Operations, Listens and Speaks**

F-1 Reading—locates, understands, and interprets written information in prose and in documents such as manuals, graphs, and schedules.

F-2 Writing—communicates thoughts, ideas, information and messages in writing and creates documents such as letters, directions, manuals, reports, graphs, and flow charts.

F-3 Arithmetic—performs basic computations; uses basic numerical concepts such as whole numbers, etc.

F-4 Mathematics—approaches practical problems by choosing appropriately from a variety of mathematical techniques.

F-5 Listening—receives, attends to, interprets, and responds to verbal messages and other cues.

F-6 Speaking—organizes ideas and communicates orally.

### **THINKING SKILLS—Thinks Creatively, Makes Decisions, Solves Problems, Visualizes and Knows How to Learn and Reason**

F-7 Creative Thinking—generates new ideas.

F-8 Decision-Making—specifies goals and constraints, generates alternatives, considers risks, evaluates and chooses best alternative.

F-9 Problem Solving—recognizes problems, devises and implements plan of action.

F-10 Seeing Things in the Mind’s Eye—organizes and processes symbols, pictures, graphs, objects, and other information.

F-11 Knowing How to Learn—uses efficient learning techniques to acquire and apply new knowledge and skills.

F-12 Reasoning—discovers a rule or principle underlying the relationship between two or more objects and applies it when solving a problem.

### **PERSONAL QUALITIES—Displays Responsibility, Self-Esteem, Sociability, Self-Management, Integrity and Honesty**

F-13 Responsibility—exerts a high level of effort and perseveres towards goal attainment.

F-14 Self-Esteem—believes in own self-worth and maintains a positive view of self.

F-15 Sociability—demonstrates understanding, friendliness, adaptability, empathy and politeness in group settings.

F-16 Self-Management—assesses self accurately, sets personal goals, monitors progress and exhibits self-control.

F-17 Integrity/Honesty—chooses ethical courses of action.

## **SCANS COMPETENCIES**

C-1 **TIME** - Selects goal - relevant activities, ranks them, allocates time, prepares and follows schedules.

C-2 **MONEY** - Uses or prepares budgets, makes forecasts, keeps records and makes adjustments to meet objectives.

C-3 **MATERIALS AND FACILITIES** - Acquires, stores, allocates, and uses materials or space efficiently.

C-4 **HUMAN RESOURCES** - Assesses skills and distributes work accordingly, evaluates performances and provides feedback.

### **INFORMATION - Acquires and Uses Information**

C-5 Acquires and evaluates information.

C-6 Organizes and maintains information.

C-7 Interprets and communicates information.

C-8 Uses computers to process information.

### **INTERPERSONAL—Works With Others**

C-9 Participates as a member of a team and contributes to group effort.

C-10 Teaches others new skills.

C-11 Serves Clients/Customers—works to satisfy customer’s expectations.

C-12 Exercises Leadership—communicates ideas to justify position, persuades and convinces others, responsibly challenges existing procedures and policies.

C-13 Negotiates—works toward agreements involving exchanges of resources; resolves divergent interests.

C-14 Works With Diversity—works well with men and women from diverse backgrounds.

### **SYSTEMS—Understands Complex Interrelationships**

C-15 Understands Systems—knows how social, organizational, and technological systems work and operates effectively with them.

C-16 Monitors and Corrects Performance—distinguishes trends, predicts impacts on system operations, diagnoses systems performance and corrects malfunctions.

C-17 Improves or Designs Systems—suggests modifications to existing systems and develops new or alternative systems to improve performance.

### **TECHNOLOGY—Works with a Variety of Technologies**

C-18 Selects Technology—chooses procedures, tools, or equipment, including computers and related technologies.

C-19 Applies Technology to Task—understands overall intent and proper procedures for setup and operation of equipment.

C-20 Maintains and Troubleshoots Equipment—prevents, identifies, or solves problems with equipment, including computers and other technologies

## VNSG 1160 Syllabus Contract

PRINT NAME: \_\_\_\_\_

(Please print, read, sign and return this syllabus contract during clinical orientation; the student may not attend clinicals if this contract is not submitted).

*I have read the VSNG 1160 syllabus and understand the course requirements. I have had the opportunity to ask questions. I can comply with all requirements found in this syllabus and the Student Vocational Nurse Handbook.*

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_