** AAS in Nursing Program**

**End of Semester Course Report**

1. Course Number and Name: NURS 158: Nursing Care of Adults in Health and Illness
2. Year / Semester: 2019 Spring
3. Course Faculty (include any adjunct faculty utilized

Peggy Drussel, Staci Warnert, Michelle Husbands, Stacy Rust (clinical WMCA), Tami Mette (clinical Elko), Sarah Johnson (clinical Elko), Tami Allred (clinical Elko), Jessica Lynch (practice lab Elko) Malia Keep, (skills check-off)

**COURSE STATISTICS**

1. Theory Ratio 28:3 Clinical Ratio 4-8:1 Simulation Ratio 5:2

(Student to faculty ratios: Please use the number of students at the beginning of the semester for these.)

1. Final Theory Outcomes:
   1. Percent Passed: Enter Percent Passed
   2. Percent Failed: Enter Percent Failed
   3. Range of Scores:
2. Final Clinical Outcomes:
   1. Percent Satisfactory: Enter Percent Satisfactory
   2. Percent Unsatisfactory: Enter Percent Unsatisfactory
3. Course Attrition:
   1. Beginning number of students: 28
   2. Withdrawals: 0
   3. Incompletes (with expected date of completion):
   4. Dismissed 1
4. Dosage Calculation Test:
   1. First attempt pass 26
   2. Second attempt pass 2
   3. Third attempt pass 0
   4. A & P committee recommendation: 0
5. Course Overview
   1. ATI Tools/Materials:

|  |  |
| --- | --- |
| ATI Test Used | When test used during semester |
| Nutrition Practice Exam B | Due by 04/25/2019 |
| Nutrition Practice Exam A | Used throughout semester for journaling. (see. |
| Nutrition Proctored Exam | 04/25/2019 |
| Nutrition Proctored Exam Retake | 05/03/2019 |
| Real Life C-Diff (Clinical time for all students) | 02/7/19 |

* 1. Brief synopsis of how ATI tools and/or materials were used in the course:

ATI Nutrition was used throughout the course for journaling and study, using both the ATI Nutrition text and ATI web tools, ATI nutrition skills module was also used. ATI was also used for review of study, test taking, skills, and used for new skills checked off this semester to include IV therapy, IV dressings, IV push medications, insulin use and administration, and NG tube insertion and enteral feeding. Nutrition Exam Content Mastery Proctored 2016 Exam was used to evaluate nutrition understanding for NCLEX. Nutrition Proctored exam was given towards the end of the course at the end of April. ATI Nutrition Tutorial Skills Module was assigned prior to Dietitian Clinical rotation – students submitted transcript with Dietitian clinical assignment. Real life C-Diff was used for clinical time. Students completed Real Life and completed adapted clinical care packet for the Real Life C-Diff simulation.   
Safe Dosage – submit transcript prior to medication calculation exam with 100% score  
Parenteral (IV) medications – submit transcript prior to medication calculation exam with 90% score  
Powdered Medications - submit transcript prior to medication calculation exam with 90% score  
Dosage and Calculation Tutorial 2.0 – review prior to medication calculation exam  
Medication Administration – review prior to medication calculation exam  
Oral Medications – review prior to medication calculation exam  
Injectable Medications – review prior to medication calculation exam

|  |  |
| --- | --- |
| **ATI Nutrition 2016 Proctored Exam** |  |
|  | Current  Semester  Spring 2019  (ATI Nutrition 2016 Proctored Exam) | Previous  Semester/Spring 2018  (ATI Nutrition 2016 Proctored Exam) | Previous Semester/Spring 2017 (ATI Nutrition 2013 Proctored Exam) | Previous Semester /Spring 2016(ATI Nutrition 2013 Proctored Exam) |
|  |  |  |  |  |
| % & # of Group Below Proficiency Level 1 | 0 | 0 | 0 | 0 |
| % & # of Group at Proficiency Level 1 | 0 | 11.8 (4) | 11.1 | 26.9 |
| % & # of Group at Proficiency Level 2 | 59.3 (16) | 55.9 (19) | 40.7 | 65.4 |
| % & # of Group at Proficiency Level 3 | 40.7 (11) | 32.4 (11) | 48.1 | 7.7 |
| Group Score: (Adjusted) | 78.9 | 76.4 | 76.9 | 71.0 |
| Group Mean—National: | 64.7 | 63.0 | 63.0 | 63.0 |
| Group Mean –Program: | 64.3 | 62.4 | 62.4 | 62.4 |
| Institutional Benchmark: |  |  | N/A | N/A |
| % of Group Meeting Institutional  Benchmark: | 100% | 88.2% | 88.8% | 73.1% |
| Group Percentile Rank - National | 98 | 99 | 88.9 | 88 |
| Group Percentile Rank - Program | 99 | 99 | 88.9 | 90 |
| **Thinking Skills Group Scores** |  |  |  |  |
| Foundational Thinking | 74.9 | 75.8 | 83.3 | 71.1 |
| Clinical Judgment/Critical Thinking | 81.4 | 78.4 | 76.3 | 70.2 |
| Priority Setting | 66.7 | 65.2 | 79.0 | 85.3 |
| **Nursing Process Group Scores** |  |  |  |  |
| Assessment | 60 | 64.7 | 74.1 | 73.6 |
| Analysis/Diagnosis | 74.1 | 79.8 | 89.4 | 76.9 |
| Planning | 83.1 | 80.7 | 82.2 | 70.1 |
| Implementation/Therapeutic Nursing | 82.7 | 77.8 | 73.1 | 69.6 |
| Evaluation | 87 | 82.1 | 75.7 | 68.7 |
| **Major NCLEX Content Areas** |  |  |  |  |
| Management of Care | Not listed | Not listed | Not listed | No score |
| Safety and Infection Control | 70.4 | 67.6 | 77.8 | 100 |
| Health Promotion and Maintenance | 75.7 | 77.2 | 75.7 | 74.8 |
| Psychosocial Integrity | 91.4 | 83.3 | 90.1 | 61.5 |
| Basic Care and Comfort | 83.7 | 79.1 | 75.1 | 69.4 |
| Pharmacological and Parenteral Therapies | 98.1 | 92.6 | 79.6 | 50 |
| Reduction of Risk Potential | 74.4 | 76.5 | 90 | 79.6 |
| Physiological Adaptation | 81.5 | 73.0 | 58.6 | 59.6 |
| **QSEN** |  |  |  |  |
| Safety | 79.3 | 74.7 | 79.3 | 75.1 |
| Patient-Centered Care | 84.3 | 81.7 | 75.8 | 68.9 |
| Evidence Based Practice | 78.0 | 76.1 | 77.9 | 72.3 |
| Teamwork and Collaboration | Not Listed | Not Listed | Not listed | Not listed |

* 1. Any issues identified (i.e. are group scores higher or lower than previous semesters).

Overall students scored much higher than students last year. 100% met the institutional benchmark of a Level 2. Students improved in most categories. Health Promotion and Maintenance and Foundational thinking only decreased slightly. Reduction of Risk Potential is trending downward. Looking at the questions more closely, 1 question was related to renal failure and labs, which is not taught until Nurs 257. Nutrition and wounds and wound healing should be discussed as preventing worsening complications. In the nursing process Assessment and Diagnosis categories are trending down. Students discuss the importance of nutritional assessments during their dietitian rotation. Suggest looking for ways to emphasize assessment.

Will continue to incorporate journaling of nutrition ATI questions in the course. We added a nutritional component to the clinical care packet. We encouraged students to review the ATI Enteral feeding and Nutrition skills modules prior to the Nutrition exam and will plan to do that next year as well. Also encouraged students to examine the nutrition sections in the ATI med-surg, ATI pediatrics, and ATI OB books to assist with studying and will suggest that again next year. Supplemental nutrition information was provided during the nutrition module. Will provide again and review along with new textbook. Will continue with the Nutrition review day with student nutrition presentations. Will continue to keep the Nutrition Exam scheduled earlier in the semester to avoid multiple exams at the end of the semester. This seems to afford students the time to concentrate and study the nutrition content rather than trying to study the content in addition to studying for other finals. Will continue to administer Nutrition Exam at the end of April and time the exam with other courses.

* 1. Course Exams:

|  |  |
| --- | --- |
| Course Exam | Average Percentage |
| Exam 1: Sections 1 & 2 | 84% |
| Exam 2: Sections 3 & 4 | 85% |
| Exam 3: Sections 5, 6, 7 | 86% |
| Final Exam | 83% |

* 1. Any adjustments that may need to be done in course exams related to percentage distribution of NCLEX categories, cognitive level, and nursing process. (Please see test blueprints and allotted percentages of item categories)

Item analysis was conducted for each test and is summarized on the test blueprints. Ten questions were added to Exams 1, 2, & 3 for a total of 60 questions in attempt to improve the reliability of the exams. Exam 1 and Exam 3 the alpha increased. Questions were mostly written at the application level. Will continue with higher percentage of application questions, as application is a required component outlined in the course outcomes. Please see test blueprints for more information. Will make changes to exams next year based on the test item analysis.

* 1. Address technology used in the classroom, including IAV, and brief summary of how it was used, what worked well, and any adjustments that need to be made.

WebCampus was used to organize course content and provide students with important course information. IAV was used with three centers (Elko, Winnemucca, and Pahrump). Theory was delivered from Elko, Winnemucca, and Pahrump to the other centers. Professor Warnert taught from Winnemucca, Professor Drussel taught from Pahrump, and Professor Husbands taught from Elko. IAV technology was overall reliable. Students in Pahrump and Winnemucca were reminded to not mute their mics in order to remain engaged in the classroom. Student collaboration between the centers worked well for the student Nutrition Presentations. Will continue to use groups consisting of students at different centers and provide tips for distance group work. Instructors also collaborated to teach together during class periods from different centers. Instructors met with students in Elko, Pahrump and Winnemucca via Cranium Café, Big Blue Button and IAV during the semester. Some issues with the screens being blurry were noted in Pahrump and Winnemucca when content was shared.

**THEORY EVALUATION**

1. Textbooks used and evaluation of each:

Hoffman and Sullivan (2017). The textbook outlines the content following the nursing process and provides students with case studies as they read. The textbook proved easy to read and students verbalized that they liked how it was outlined. The textbook has minimal information related to nutrition/ nutritional therapy so supplemental resources were used. Pathophysiology is also lacking with this textbook. A review of this textbook in comparison to Lewis et al.’s med-surg text was completed by faculty and faculty voted to switch textbooks due to lack of detail beginning next year. Ladwig, G. B., Ackley, B.J. (2016). Mosby’s guide to nursing diagnoses. (4th Ed.). St. Louis, MO: Mosby. This text was used mostly in the clinical setting for clinical care packet. Was also used as a resource for multiple clinical assignments. In addition, the text was a good resource for building care plans within the classroom. Deglin, J. H., Vallerand, A. H., & Sanoski, C. A. (2017). Davis’s drug guide for nurses. (15th ed.). Philadelphia, PA: F. A. Davis Company. Used during theory study as a resource for looking up medications as outline in the content covered. Also used in the clinical setting as a resource for medication prior to giving and as needed during pre-course work. Van Leeuwen, A. M., & Bladh, M. L. (2017). Davis’s comprehensive handbook of laboratory diagnostic tests with nursing implications. (7th ed.). Philadelphia, PA: F. A. Davis Company. Text was used during and before actual care plan work in the clinical setting and is an invaluable tool for students planning care. The text also was used to clarify further tests and treatments highlighted in the Med-Surg textbook. VandenBos, G. R. (Ed.). (2010). Publication manual of the American psychological association. (6th ed.) Washington, DC: AmericanPsychological Association. All students were required to purchase this text in Nursing 135, however, they do not seem to be using successfully. APA continues to be an issue for these students in both the classroom and with assignments. Students were also provided with Owl Purdue as an online resource. Most students were able to successfully use APA for references. \*\*\*\*\*\*\*ATI Nursing Education. (2016). Medical Surgical Nursing (Ed. 10.0) and .Nutrition (Ed. 6.0) Assessment Technologies Institute, LLC. The Med-Surg book was recommended to the students to use as a reference as needed. The Nutrition text was a resource for journaling on nutrition during the course. Was also the resource for the final in Nutrition. Students were able to use the text without difficulty as it is a summary versus extensive information on nutrition. Good supplement for students during this course. Will also incorporate Med-Surg ATI book into theory content and reference for the students.

1. Weekly content:

See Syllabus with Theory Schedule for specific content.

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

Collaborative testing was utilized for the course exams.

1. Teaching Methods:

Various of teaching methods were used to include Lecture with PowerPoint and Prezi, Case Studies, group work, classroom activities, games, discussion, and NCLEX style Questions.

**CLINICAL EVALUATION**

1. Clinical Site Evaluation - Include EBP, Patient Health & Safety and ANA Standards

(Please list strengths and/or limitations specific to each site)

**Elko:**

**Dietitian at NNRH**: Students worked with dietitian to evaluate patients for four hours. Students completed a mini nutritional assessment with the dietitian and learned about recommended diets. Lab work was looked at intensely and the dietitian worked with students to connect the labs with dietary needs. The dietitian is willing to continue working with students. Will continue with this rotation as reinforces and has students apply nutrition content. Limitations centered on the dietitian’s availability due to part-time schedule and set days of the week. 92% of the students (12) agreed and strongly agreed that clinical sites provided a supportive learning environment’ was met. 100% of the students agreed and strongly agreed that clinical should continue with the dietitian.

**Highland Manor Teaching:** Students developed a teaching demonstration and plan to for exercise and fitness at the Highland Manor. Students’ utilized evidence based exercises for the elderly to develop a class and teaching demo. Limitation(s) noted was the time for the teaching session coincided with the residents’ regular scheduled activity time, resulting in low numbers of participants. Future plans is to coordinate with activity director and physical therapist and allow the students to facilitate the exercise activity.100% of the students (11) agreed or strongly agreed that the clinical site provided a supportive learning environment and to continue clinical at this site. (85%) agreed and strongly agreed and 2 students (16%) disagreed that staff adhered to best practices. No written comments were received. Will continue to use and monitor this clinical site.

**Golden Health**: Students worked with RNs in the urgent/walk-in clinic and observed the Wellness Coach (when available). Students worked with a diverse group of patients and their families from the mining industry. This included immunizations, occupational physicals, acute illness, and lifestyle modification education. 100% of the students (13) agreed or strongly agreed that the clinical site provided a supportive learning environment and clinical should continue at this site.

**Pioneer Urgent Care**: Students assisted nurses, nurse practitioners, and physicians in this facilities to provide care for acute conditions. There was a multitude of various learning activity that went on depending on the day. . 92% of the students (12) agreed and strongly agreed that Pioneer Urgent Care. One student (8%) disagreed that the clinical site provided a supportive learning environment. 100% of the students (13) agreed to continue with clinical rotations at Pioneer Urgent Care.

**NNRH Med Surg**: Student provided assessment and care within their scope to a minimum of one patient per clinical rotation, providing assessment, EMR documentation, medication administration, and developing care plans. 100% of the students (13) agreed or strongly agreed that NNRH provided a supportive learning environment and that NNRH should continue to be used for clinical.

**NNRH Infection Control:**  Students each spent 4 hours with the Infection Control RN at the hospital learning her collaborative role and advocacy for best practices to keep nosocomial infections at a minimum. The infection control nurse is willing to work with students again. Students verbalized they learned a lot during the rotation. 100% of the students (13) agreed or strongly agreed that the infection control rotation provided a supportive learning environment and that the rotation should be continued.

**NNRH Health Fair:** M. Husbands and J. Lynch met with the NNRH organizers prior to the events and informed them of the NURS 158 course objectives that the students were to meet so an educational plan could be developed.Will continue to meet with organizers prior to the event and ensure that student assigned will enhance the clinical experience and reflect course SLOs. 14Students worked with the children and their parents on health topics such as handwashing, exercise, relaxation, infection prevention (covering your cough) and nutrition. Each student provided 4 hours of time with with 5-15 year olds on these topics and were provided prizes at each station by NNRH. All content was made by NNRH and students were provided training on their assignment. The NNRH organizers compiled and developed an educational poster regarding the various labs draw at the health fair that the students presented to the public. 100% of the students (13) agreed or strongly agreed that the Health fair provided a supportive learning environment and should continue to be used.

100% of students agreed that all sites had established health and safety goals. 100% agreed that all clinical sites, with the exception of Highland Manor (92%) adhered to best practices

**Winnemucca:**

**Dietitian at HGH**: Students worked with dietitian to evaluate patients for four hours. Students completed a mini nutritional assessment with the dietitian and learned about recommended diets. Lab work was looked at intensely and the dietitian worked with students to connect the labs with dietary needs. They worked with the dietitian in both Med Surg and Harmony Manor. The dietitian was great with the students and the students indicated they learned a lot from her. She is willing to work with our students again. All students agreed that the rotation provided a supportive learning environment and to continue clinical rotations with the dietitian. **HGH - Med Surg**: Students provided assessment and care within their scope to one patient per clinical due to patient census. Students utilized the EMR system, Pyxis for medication, and developing care plans. Students were able to follow their clients to other areas for testing. Most students reported enjoying the clinical experience at the hospital facilities. The nurses worked really well with the students. Census was high enough to meet the needs of the students during their clinical rotations. 100% of students agreed HGH provided a supportive learning environment and clinical rotations should continue. **HGH – NP Assignment (Nurse Matthews)**: Students worked with the NP seeing patients and discussing the role of the NP in healthcare and health promotion. This allowed the students to evaluate how the NP manages the care of multiple patients with acute and chronic disease processes in the clinical setting to improve patient outcomes. 100% of students agreed N. Matthews provided a supportive environment and clinical should continue with her. **HGH –Acute Care Clinic (Nurse Hurst)**: Students were at the outpatient walk-in clinic with Nurse Hurst (a few students worked with Nurse Matthews again at the walk-in clinic as she was covering for Nurse Hurst). Each student worked with the NP for eight hours assessing patients, providing immunizations, education, medication reconciliation, procedures; all within their scope and under the supervision of the NP. Student logs showed students saw a variety of patients. Some students stated the rotation should not continue and Nurse Hurst did not follow best practice. It was verbalized by students that Nurse Hurst saw patients very quickly and they were concerned about a lack of thoroughness of assessments. The previous year students did not voice this concern. Will evaluate and continue to monitor the rotation. **State of Nevada – Public Health Nurse**: Students worked with the PHN for eight hours. Students assisted PHN with immunizations, assessments, and family planning for clients of various ages and sexes. Due to patient cancellations some clinical rotations were slow; however, clinical rotations were well received by students. Most students reported enjoying the clinical and reported this clinical also helped them understand the needs of the community with regards to medical care and the need for providers. 100% of students reported the PHN provided a supportive environment and the majority of students stated to continue clinical with the public health nurse. **Pleasant Senior Center**: Students developed a teaching demonstration for seniors at the center. The topics addressed were nutrition and exercise. Students also volunteered time to do BPs on seniors after completion of the demonstration and socialized with seniors for lunch. Students reported enjoying the clinical and lunch period in which they were able to give more information to the seniors and learn more about the aging population.

**Golden Valley Medical Center:** This rotation was added to align with wellness assignment and align with Golden Valley Medical Center in Elko. Clinical hours were reduced at this clinical site based on student feedback last year. Students worked with the wellness RN and observed the wellness coach. Some students indicated the rotation did not provide a supportive environment and to not continue clinical. Students did not work with RNs in the walk-in portion of the clinic as they did the previous year and clients for the wellness portion were limited. Possibly reduce hours so students are only at the rotation when clients are scheduled. Or consider eliminating the rotation completely.

Data from surveys not completely accurate as there were 9 responses when only 7 students are in Winnemucca. The majority of students indicated all clinical sites provided a supportive environment, followed best practices, had established health and safety goals, and to continue clinical rotations. Best practice concerns were indicated at Golden Valley and with Nurse Hurst. Health and safety goals were a concern at the public health and with Nurse Hurst.

**Pahrump:**

**Pahrump** **Dietitian** at Desert View Hospital (DVH)/DaVita: For the first 5 weeks of semester students worked with registered dietitian at DVH, completing nutritional assessments on multiple patients, then focused on one patient intensively to develop a teaching plan. The dietitian educated them on the interdisciplinary partnership between the RN, MD and RDN (registered dietitian nutritionist). The RDN shared her expertise regarding recommended diets based on multifactorial analysis including disease process and labwork. Due to a change in the DVH dietitian’s schedule and responsibilities it became necessary to use the DaVita dietitian for the last few weeks of the semester. Three students completed their dietitian rotation at DaVita All students received the same information and were educated on disease process that led patients to suffer kidney loss. **Infection Control** at DVH: Students each spent 4 hours with the Infection Control RN at the hospital learning her collaborative role and advocacy for best practices to keep nosocomial infections at a minimum. The infection control nurse has over 44 years of experience as an RN and is passionate in her role. **Case Management** at DVH: Students each spent 4 hours with the case management team learning about their role from admission through discharge, including transfer and placement, if needed. The rotation was scheduled to capture the daily interdisciplinary rounds between bedside nurses, attending physicians and the case management team. **Senior Center**: Students developed a teaching demonstration about possible interactions between vitamin supplements and prescribed medications. After the presentation, questions were answered and blood pressures measured. **Calvada Urgent Care/Fast Track Care at DVH**: Students assisted an NP-C (Certified Nurse Practitioner) in providing acute care for 9 hours during one clinical day. There was difficulty meeting with the NP as she frequently was not present for students to follow at Calvada Urgent Care. Three students worked with the NP at Calvada Urgent Care. To complete this clinical rotation with the remaining four students, the four students were set up to go to the “Fast Track” at DVH where patients are treated and released equivalent to an Urgent Care setting. The students were able to follow a nurse to assess and treat patients with a variety of illness to include strep, ear aches, hypoglycemia, etc. Patients seen in this section of care are released the same day.

**Medical/Surgical/Telemetry unit at** **DVH:** Students provided assessment and care within their scope of practice for two patients each clinical day. They utilized EMR documentation, administered medications, and developed care plans. All students enjoyed their clinical rotations per their report. Additionally, each student spent one clinical day as the Team Leader of their student cohort and another clinical day completed a comprehensive medication analysis on one patient. Students were readily able to see themselves as change agents for evidence-based practice in their future career.

100% of students agreed all clinical sites provided a supportive learning environment, had established health and safety goals, followed best practices, and clinical should be continued at the all sites.

(All Centers) **EBP, ANA standards, and patient health and safety** are addressed in each assignment to include the Med-Surg assignments. Med-Surg assignments (CCP) have areas that address each of these areas by students. Students were able to identify problem areas and often this was the focus of debriefing after clinical experiences. Reflection was key in providing care and addressing these areas. Safety and infection control stations were added to lab practice time at the beginning of the semester to emphasize patient safety and infection control in the clinical setting. Students participated in hands on safety simulations and practiced body mechanics and infection control principles and discussed. Will continue to implement safety stations next year.

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

See above descriptions of the clinical sites and below clinical changes and reasons.

1. Clinical changes and reason(s):

**Elko:**  The IHS clinical rotation was discontinued due to more paperwork/ background checks for students and difficulty scheduling. Will continue to not use this clinical site unless scheduling and paperwork concerns change. Students were able to meet course outcomes without this rotation.

**Winnemucca:** Change clinical hours at rotations to possibly decrease hours at Golden Valley per student feedback.

**Pahrump**: Changes planned for the clinical setting include moving students to the P3 Health Clinic with the NP to replace Health Care Partners NP rotation. We have struggled to have a consistent rotations at HCP and students were asked to follow a physician, which is not acceptable by Nevada State Board of Nursing.

The NNRH Health Fair assignment was general in nature due to not knowing exactly what students would be helping with. If NNRH determines a specific area students will be helping with (well in advance) may tailor the assignment to that area. No anticipated changes to the other assignments; however, will reexamine assignment instructions and corresponding rubrics to ensure clarity.

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

Students participated in a total of 5 simulations for this course. Positive feedback was received regarding simulation and learning. Six students completed remediation after simulation and repeated the simulation per policy. The students increased their performance with remediation. In addition to sim, students also completed Real Life with ATI.

1. Teaching Methods

ATI was utilized for demonstration of skills. Practice in the skills lab; high-fidelity simulation in practice lab; ATI Real Life simulation with debriefing; post-conference debriefing with discussion and focused topics; clinical rotations (at clinical sites listed above) with observation and hands on application of theory content.

**FULL COURSE OVERVIEW**

1. What worked well and reason(s):

A class ID associated with the Med-Surg textbook was created for students to more easily access the online book resources associated with the class. Due to lower alphas on the exams 10 questions were added to the exams (for a total of 60 questions) to attempt to improve the reliability. Alpha improved for exams 1 and 3. Exam 2 the alpha continues to be low and the entire exam will need to be evaluated again (see exam blueprints). Objectives for each module were updated to more clearly reflect pertinent knowledge.

Various teaching methods worked well. The majority of students (96%) agreed all course SLOs were met.

1. Anticipated Changes

Minimal changes are anticipated. Will reevaluate clinical time allotment for all three sites. Will also anticipate editing and carefully examining each module’s objectives to reflect the module and guide students studying. With the implementation of a new textbook will need to realign assigned reading with content in the course. Provided students who did not pass the final with a guided remediation to complete during finals week.

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

Weekly theory content will remain the same.

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

No anticipated changes to point allocation. The percentages of the exams, final exam, ATI nutrition, and theory assignments was adjusted from last year. The percentages now are balanced for the work being done and will keep the same next year.

1. Other changes and reason(s):

Review and clarify the instructions and rubric for the infection control assignment based on student feedback. Update skills checklists to reflect newly updated ATI skills checklists.

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

and filed.

* 1. Integrated Concepts Illustration has been updated with

all changes made and filed.

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

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

**Date:** 5/16/19

**Directions:** Complete and save in Dropbox/Nursing Shared Files/SPE/Course Reports along with syllabus, clinical schedule, grade book, curriculum map, integrated concepts illustration, and test blueprint.