Nursing Care of Children, Adolescents, and Their Families

Level III

NUR 440: Credits: 4
Lecture/Recitation/Discussion Hours: 2
Lab Hours: 6
4(2-6)

Course Meeting Day, Time, Location All sections:
Thursday 8:00-9:50 AM A131 LS

Clinical Orientation Date, Time, Location:
August 27 or 28 as scheduled through the Learning Assessment Center
7:30am – 12:30pm - 601 East Fee Hall

Clinical Days, Times, Location
Section 001: Monday, 06:30-1:30pm Sparrow 5 Foster
Section 002: Monday, 1:30-8:30pm Sparrow 5 Foster
Section 003: Tuesday, 06:30-1:30pm Sparrow 5 Foster
Section 004: Tuesday, 1:30-8:30pm Sparrow 5 Foster
Section 005: Wednesday, 06:30-1:30pm-Mott Children’s
Section 006: Wednesday 2:00pm-9:00pm-Mott Children’s

Fall 2007

Course Description
This course explores and reinforces theoretical concepts and clinical application of nursing care of infants, children, and adolescents, in varied health care settings. Synthesis of pathophysiologic, pharmacologic, and therapeutic concepts is incorporated throughout theory and clinical. Family-centered care of children is focal in the synthesis of developmental, cultural, ethnic, religious, and social structures in the pediatric population.

Course Objectives
At the end of this course the student will:
1. Integrate concepts from natural and behavioral sciences, pathophysiology, and humanities in application to the assessment and care of children and their families.
2. Analyze and apply the family-centered atraumatic approach to children and their families, with a focus on cultural, religious, social, developmental and ethnic influences.
3. Identify major developmental stages and associated health promotion issues and problems for each age group
4. Interpret influences on the developing child as a member of a family, a culture, a community and a society.
5. Understand hereditary, genetic, societal, and environmental issues impacting health promotion and risk reduction in pediatric populations.
6. Identify the etiology, pathophysiology, signs and symptoms and diagnostic procedures related to health deviations in the child.
7. Synthesize theory from child development and pathophysiology in designing nursing care plans that reflect evidence-based practice for common pediatric disorders.
8. Analyze health education needs of the growing child and their family and implement with development of a teaching care plan.
9. Compare and contrast the impact of chronic illness/disability and acute illness for children, families and communities.
10. Utilize critical thinking in the delivery of nursing care to infants, children and adolescents.
11. Perform a focused assessment and implement appropriate evidence-based interventions, including common treatments and pharmacologic therapies.
12. Skillfully communicate with children, families, colleagues, faculty, and members of the health care team in assessment and care of children and their families.
13. Demonstrate accountability for personal and professional development and nursing care in the pediatric setting.

Prerequisites: Level 1 and 2 courses

Co requisites: NUR450

Standards Documents:

Course Faculty:

Marci Mechtel RN, MSN (Course chair/theory/Monday clinical)
Office Number: W152 Owen Graduate Center
Phone Number: 353-4778 (office) 232-0440 (pager)
E-mail: mechtelm@msu.edu
Office Hours: By appointment

Susan Jaskiewicz APRN, FNP (Tuesday clinical)
Office Number: A-127 Life Sciences
Phone Number: 353-8678
E-mail: susan.jaskiewicz@hc.msu.edu
Office Hours: By appointment
Instruction:

Level Outcomes and Competencies
The CON has defined the following competencies that must be achieved by all students in Level III before progressing onto Level IV. At the end of Level III, all students will achieve the objectives and competencies listed below, as well as the bolded indicators specific to this course. All indicators, as well as the overall grade for the course, must be at 75% to proceed onto the next level. Each section of the course (clinical and theory) must be passed at 75% or greater to pass the course.

NURSING THERAPEUTICS III Evaluate data in the planning and delivery of targeted nursing care to persons and populations.

Competencies
1. Uses evidence and outcomes critically, evaluates effectiveness of the Nursing Care Plan, and revises care to improve outcomes

Indicators:
One grand rounds presentation of a patient case, including family dynamics, developmental stages, home and school environment. Critiques the barriers and limitation of the health care system and strategies for resolution, include theoretical base of practice.

ILLNESS AND DISEASE MANAGEMENT III Analyzes and evaluate theories and principles in coordinating the care necessary for the management of illness and disease.

Competencies
1. Anticipates and manages complexities of patient care and health care system that impact coordinated and efficient care
2. Promote achievement of client outcomes by coordinating delivery of care

PROFESSIONAL LEADERSHIP III Formulate professional leadership approaches to promote optimal health outcomes for persons and populations in varied care settings.

Competencies
Examines licensure law, regulations, and scope of practice
Develop personal goals for professional development including areas that enhance health care and advancement of the profession

ETHICAL PRACTICE III Uses ethical problem-solving methods to effectively advocate for vulnerable persons, groups and populations.

Competencies
1. Analyze ethical problems related to the health care for vulnerable population
2. Engage in respectful and reasoned dialog with colleagues related to the health care needs for a vulnerable populations

**COMMUNICATION III** Competently engage in interpersonal relationships with person, populations, and colleagues

*Competencies*
1. Initiates effective written and verbal communication with persons, populations, and colleagues to affect patient care.
2. Evaluate group communication skills.

**HEALTH PROMOTION AND RISK REDUCTION III** Demonstrate skill in the development and implementation of health promotion plans for persons and populations. Question if this objective is a high enough level

*Competencies*
1. Uses National and State datasets to examine the health of a vulnerable population
2. Applies strategies to a special and vulnerable populations

**GLOBAL AND CULTURAL COMPETENCE III** Plan and implement care for persons and populations to address relevant global, cultural, and socioeconomic factors that influence health and illness.

*Competencies*
1. Systematically investigate the interaction between social and cultural determinants
2. Using culturally specific data, develop plan for care of culturally diverse vulnerable populations.

**CRITICAL THINKING III** Analyze and synthesize information from nursing science into nursing practice with families, children, and communities.

*Competencies*
1. Critique and value the impact of her/his critical thinking process used in their nursing practice
2. Formulates and defends an argument

**EVIDENCE-BASED PRACTICE III** Evaluate the application of theory and research to nursing practice.

*Competencies*
1. Evaluate selected research and theory as relevant to a client and family of choice.

**Required Text** (Equipment):


Instructional Model

Credits: 4

This course contains both a theoretical and clinical component. These components foster integration and application of pediatric health and nursing.

Theoretical material will be presented in a case study format and small group discussion to facilitate synthesis of content for three hours each week. Completion of assigned readings prior to class is necessary to understand and integrate material. A collaborative learning model will be utilized for discussion and assimilation of concepts during course time.

The clinical experience will provide immersion in the pediatric setting throughout the level. The clinical will incorporate prior knowledge and skills and pediatric theory. Grand rounds presentation format will be utilized for evaluation of MSU College of Nursing concepts of communication, clinical decision making, health promotion and risk reduction, nursing therapeutics, illness and disease management, professional leadership, ethical practice, evidence based practice, and global cultural competence. See attached Clinical Case Presentation evaluation form.

Evaluation/Grading Scale

Standard College of Nursing grading scale will be used.

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>100-94%</td>
<td>4.0</td>
</tr>
<tr>
<td>93-89%</td>
<td>3.5</td>
</tr>
<tr>
<td>84-88%</td>
<td>3.0</td>
</tr>
<tr>
<td>83-79%</td>
<td>2.5</td>
</tr>
<tr>
<td>75-78%</td>
<td>2.0</td>
</tr>
<tr>
<td>74-70%</td>
<td>1.5</td>
</tr>
<tr>
<td>65-69%</td>
<td>1.0</td>
</tr>
<tr>
<td>&lt;64%</td>
<td>0</td>
</tr>
</tbody>
</table>

The course grade will include 65% theory grade and 35% clinical grade. Theory grades will be based on weekly quizzes, examinations, class preparation and participation. All quizzes are administered and monitored in class. Quizzes will be given during course periods. Students arriving late will have the scheduled time for completion of the quiz. One quiz grade will be dropped. This option is available for personal or family emergencies, illnesses, issues, and/or religious and cultural observances. There will be no make-up opportunities for quizzes. The highest quiz grades will be utilized for calculating final course grade. Quizzes will be based on material assigned for that week prior to course discussion. Class preparation and participation is based on quality discussion and interaction related to weekly topics. Peer evaluation will be incorporated into the score for this section. Preparation and participation evaluation will be done two times per semester. The first evaluation will constitute 3% of the participation grade and the final will constitute 7% of the final participation grade. Feedback received from participation and preparation will be cumulative from the group and faculty. See attached peer evaluation form.
Section examinations (1 & 2) will be cumulative for the preceding weeks. The final examination will be cumulative for the term. Students are responsible for material discussed in class, assigned readings, and prior course content.

Completion of two standardized examinations, from Educational Resources, Inc., is required for the course. The examinations (Growth and Development and Clinical Calculations and Classifications) will be scheduled and available on the ERI website (eriworld.com). Students receiving below national average scores or areas in Nursing Topics will be required to complete remediation materials. All documentation and scores for ERI examinations will be maintained by students in their portfolio and monitored by Integrative Seminar faculty.

Students will be given time to complete the course and instructor evaluation the week prior to final examinations. These evaluations will be accessed through http://www.nursing.msu.edu/evaluations.asp. The process is monitored through the University and is strictly anonymous. ½% will be added to the final exam grade with completion of the electronic SIRS for the course and instructor during the time specified.

Theory grade (65%):

<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Quizzes</td>
<td>15%</td>
</tr>
<tr>
<td>Preparation and participation</td>
<td>5%</td>
</tr>
<tr>
<td>Examination 1</td>
<td>25%</td>
</tr>
<tr>
<td>Examination 2</td>
<td>25%</td>
</tr>
<tr>
<td>Final examination</td>
<td>30%</td>
</tr>
</tbody>
</table>

The clinical grade will be further divided into clinical performance and clinical assignments. Clinical performance will be based on clinical performance evaluation tool. Written clinical assignments will include clinical synthesis assignment, weekly concept map & care plan, one teaching care plan, and grand rounds presentations. Grand rounds involve a case analysis of a child and their family. The multidimensional aspects are discussed and analyzed concluding with the most appropriate plan of care. See attached evaluation tools/rubrics for grand rounds, concept maps, and written work.
Clinical grade (35%):

<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical performance</td>
<td>60%</td>
</tr>
<tr>
<td>Clinical assignments</td>
<td></td>
</tr>
<tr>
<td>Clinical synthesis assignment (5%) x2, Week 1 &amp; 2, only second CSA graded</td>
<td>20%</td>
</tr>
<tr>
<td>Concept map/care plan [10%] graded weekly</td>
<td></td>
</tr>
<tr>
<td>Teaching plan (5%) x1 for rotation in place of care plan</td>
<td>20%</td>
</tr>
<tr>
<td>Grand Rounds Presentation</td>
<td></td>
</tr>
</tbody>
</table>

Each section of the course must be passed at 75% or greater to pass the course.

University, CON, and Course Policies

A. Refer to MSU Spartan Life Handbook and College of Nursing BSN Handbook for Policies regarding:

1. Academic Dishonesty
2. Taping and communication devices
3. Weather
4. Protection of property/computers
5. Protection of Scholarship and grades
6. SIRS
7. Clinical Attire/dress code
8. Disabled Student

B. Attendance

i. Nursing is a professional program and attendance is an expectation.
ii. Attendance for clinical is required. Any missed hours will be made up on designated dates for successful completion of the course.

C. Examinations

Examinations will be given during course periods. Students arriving late will have the scheduled time for completion of the exam. All students are expected to take examinations on the date scheduled, unless prior arrangements are made with the course faculty. For emergency situations, students are to contact faculty as soon as possible. If unable to contact faculty, call College of Nursing office and leave a message regarding the reason for absence. It is the student’s responsibility to reach faculty as soon as possible following the examination. Arrangements to take an alternate examination will be made at that time. There will be one opportunity for an alternative exam. Alternate exams may be used with additional formats (essay, fill in the blank, etc.). Make-up exams are routinely scheduled within one week of the original exam date. Health providers’ statements may be required. Questions regarding examination grades will be put forward within two weeks of the exam date. Alterations will not be made after this time.
Communication

i. Methods to contact faculty
Faculty can be reached through e-mail, phone or via pager (see front page). Phone messages may also be left on office phone answering system in the College of Nursing.

ii. Other
Lecture notes will be available through Angel. The outlines provide guidance and focus for content and material. Students are responsible for all announcements and information given in class or sent electronically.

Student Faculty Relationship
Any student may make an appointment with course faculty to discuss performance or clarify course content. Concerns or issues will be taken to involved faculty first. If any further discussion is needed, students will contact the Director of Undergraduate Programs.

It is expected that a professional, courteous, positive demeanor will be exhibited to peers, faculty and College of Nursing staff with each encounter. It is expected that you will be on time to class. If for some reason you have to be late or leave early, the course chair should be notified and plans will be made so you will not disturb the entire class. Talking, reading the newspaper and sleeping are unacceptable. Faculty are open to feedback, ideas, and concerns. For in-depth discussions, a scheduled meeting is suggested.

University Policies:
Academic integrity: Article 2.3.3 of the Academic Freedom Report states that "The student shares with the faculty the responsibility for maintaining the integrity of scholarship, grades, and professional standards." In addition, the College of Nursing adheres to the policies on academic honesty as specified in General Student Regulations 1.0, Protection of Scholarship and Grades; the all-University Policy on Integrity of Scholarship and Grades; and Ordinance 17.00, Examinations. (See Spartan Life: Student Handbook and Resource Guide and/or the MSU Web site: www.msu.edu). Therefore, unless authorized by your instructor, you are expected to complete all course assignments, including homework, lab work, quizzes, tests and exams, without assistance from any source. You are expected to develop original work for this course; therefore, you may not submit course work you completed for another course to satisfy the requirements for this course. Also, you are not authorized to use the www.allmsu.com Web site to complete any course work in NUR 440. Students who violate MSU rules may receive a penalty grade, including—but not limited to—a failing grade on the assignment or in the course. Contact your instructor if you are unsure about the appropriateness of your course work. (See also http://www.msu.edu/unit/ombud/honestylinks.html).

Accommodations for students with disabilities: Students with disabilities should contact the Resource Center for Persons with Disabilities to establish reasonable accommodations. For an appointment with a disability specialist, call 353-9642 (voice), 355-1293 (TTY), or visit MyProfile.rcpd.msu.edu.

Disruptive behavior: Article 2.3.5 of the Academic Freedom Report (AFR) for students at Michigan State University states: "The student's behavior in the classroom shall be conducive to the teaching and learning process for all concerned." Article 2.3.10 of the AFR states that "The student has a right to scholarly relationships with faculty based on mutual trust and civility." General Student Regulation 5.02 states: "No student shall . . . interfere with the functions and services of the University (for example, but not limited to, classes . . .) such that the function or service is obstructed or disrupted. Students whose conduct adversely affects the learning environment in this classroom may be subject to disciplinary action through the Student Faculty Judiciary process.

Attendance: Students whose names do not appear on the official class list for this course may not attend this class. Students who fail to attend the first four class sessions or class by the fifth day of the semester, whichever occurs first, may be dropped from the course. See the Ombudsman's web site for a discussion of student observance of major religious holidays, student-athlete participation in athletic competition, student participation in university-approved field trips, medical excuses and a dean's drop for students who fail to attend class sessions at the beginning of the semester.

College of Nursing Policies: Professional Development Guidelines found in CON Student Handbooks at CON website. Students are responsible for the information found in the CON BSN Student Handbook.
<table>
<thead>
<tr>
<th>Criteria</th>
<th>Score*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Listens attentively and respectfully without interruption or disruption</td>
<td></td>
</tr>
<tr>
<td>Participation adds to, elaborates on, or clarifies points in discussion</td>
<td></td>
</tr>
<tr>
<td>Demonstrates professional responsibility and accountability</td>
<td></td>
</tr>
</tbody>
</table>

*Key
4 Accomplished = almost always exhibits 12 = 100%
3 Proficient = very often exhibits 9 = 75%
2 Developing = sometimes exhibits
1 Novice = rarely exhibits
NA = not applicable

MAK.6/05
Michigan State University
College of Nursing
Evaluation Tool
Grand Rounds Presentations

<table>
<thead>
<tr>
<th>Criteria</th>
<th>4 Accomplished</th>
<th>3 Proficient</th>
<th>2 Developing</th>
<th>1 Novice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Content</td>
<td>Shows full understanding of collaborative and nursing issues; major points* included</td>
<td>Shows good understanding of collaborative and nursing issues; some of major points* included</td>
<td>Shows good understanding of parts of collaborative and nursing issues; few major points* included</td>
<td>Does not understand collaborative and nursing issues; major points* not included</td>
</tr>
<tr>
<td>Information</td>
<td>Information and data is accurate and current</td>
<td>Most information and data is accurate and current</td>
<td>Some accuracy of information and data</td>
<td>Inaccurate information and/or data</td>
</tr>
<tr>
<td>Delivery</td>
<td>Speaks clearly &amp; distinctly, with consistent eye-contact, appropriate posture and volume; no non-word fillers</td>
<td>Speaks clearly &amp; distinctly, with eye contact to some of audience, stands straight; occasional non-word fillers</td>
<td>Speaks clearly and distinctly some times (85%), some eye contact; regular use of non-word fillers</td>
<td>Mumbles or cannot be understood, minimal eye contact</td>
</tr>
</tbody>
</table>

*Major points include:
- history
- psychosocial, spiritual, physical, environmental (home & school), & developmental level/status
- interventions (including system limitations/barriers & facilitators)
- major issues related to child/family and
- plan
- evaluation

Follow clinical synthesis format.

100% = 12
75% = 9
### Michigan State University
College of Nursing
Clinical Synthesis Assignment Rubric

<table>
<thead>
<tr>
<th>Criteria</th>
<th>4 Accomplished</th>
<th>3 Proficient</th>
<th>2 Developing</th>
<th>1 Novice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case presentation (data and history)</td>
<td>Presents pathophys in clear, concise manner; demonstrates synthesis of information. Provides all pertinent signs, symptoms and tx in systematic approach</td>
<td>Most key issues about pathophysiology are presented but missing some important factors. Lists most common signs, symptoms, and treatment.</td>
<td>Pathophys minimal. Poor synthesis of information. Lists some signs and symptoms but not well organized. Treatment limited.</td>
<td>Unable to present concise pathophys related to chief complaint. Limited inclusion of signs, symptoms or treatment.</td>
</tr>
<tr>
<td>Health Patterns</td>
<td>Provides all significant assessment data, including pertinent negatives</td>
<td>Provides most significant assessment data, but does not address pertinent neg.</td>
<td>Provides some assessment data, few to no pertinent negatives</td>
<td>Inaccurate or lacking relevant assessment data in most sections.</td>
</tr>
<tr>
<td>Concept Map</td>
<td>Concept map contains all appropriately prioritized diagnoses or problems, with relevant supporting data and logical connections/Interactions. Includes all Priority assessments.</td>
<td>Concept map contains most diagnoses or problems appropriately prioritized, with some relevant supporting data and logical connections/Interactions. Incl. most priority assessments.</td>
<td>Concept map contains limited diagnoses/problems or inapprop. prioritization, with some relevant supporting data. Incl. some priority assessments.</td>
<td>Concept map contains inappropriate diagnoses/problems, with limited relevant supporting data. Does not include any priority assessments.</td>
</tr>
<tr>
<td>Nursing Care Plan</td>
<td>Well-focused &amp; realistic desired outcomes. Sound rationale for interventions that relates well to the EO that is trying to be achieved.</td>
<td>Focused nursing care (interventions) with some outcomes not always realistic Rationale adequate and related to EO.</td>
<td>Limited scope of nursing care plan with limited rationales and relates somewhat to EO.</td>
<td>Poorly focused nursing care plan. Outcomes or rationales not supported by science and does not relate to the EO.</td>
</tr>
</tbody>
</table>

*Total of 16 points available with complete CSA (12 = 75%)
12 points available without health patterns (9=75%)

Health patterns done twice only during the term.
Michigan State University
College of Nursing
Clinical Evaluation Tool

Level III
NUR440
Fall 2007

Section A

**Nursing Therapeutics: LEVEL III OUTCOME:** Evaluate data in the planning and delivery of targeted nursing care to persons and populations

**COMPETENCY Statement:** Uses evidence and outcomes to critically evaluate effectiveness of the Nursing Care Plan, and revises care to improve outcomes

**Critical Thinking LEVEL III OUTCOME:** Analyze and synthesize information from nursing science into nursing practice with families, children and communities.

**COMPETENCY Statement(s):**
1. Critique and value the impact of her/his critical thinking process used in their nursing practice
2. Formulates and defends an argument

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Evaluation Methods</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Performs and articulates a focused, developmentally appropriate assessment for various age groups</td>
<td>O, V, CSA assessment portion</td>
<td></td>
</tr>
<tr>
<td>2. Interprets relevant data for assessment, intervention, and evaluation of plan of care, revising as necessary</td>
<td>O, V, Concept map, CSA Clinical Assessment section</td>
<td></td>
</tr>
<tr>
<td>3. Accurately utilizes technology and monitoring in assessment process in a self-directed manner</td>
<td>O, V</td>
<td></td>
</tr>
<tr>
<td>4. Evaluates hydration and elimination appropriately based on child’s weight, age, and status in a self-directed manner</td>
<td>O, V, CSA Patient data section</td>
<td></td>
</tr>
</tbody>
</table>

Section B

**Evidence-based Practice: LEVEL III OUTCOME:** Evaluates the application of theory and research to nursing practice

**COMPETENCY Statement(s):**
Evaluates selected research and theory as relevant to a client and family of choice

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Evaluation Methods</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Incorporates current pediatric research in implementing, planning, and/or teaching children and their families</td>
<td>O, V, Concept map Functional/Environmental section</td>
<td></td>
</tr>
</tbody>
</table>

Section C

**Illness and Disease Management LEVEL III OUTCOME:** Analyzes and evaluate theories and principles in coordinating the care necessary for the management of illness and disease.

**COMPETENCY Statement(s):**
1. Anticipates and manages complexities of patient care and health care system that impact coordinated and efficient care
2. Promote achievement of client outcomes by coordinating delivery of care
### Section D

**Communication LEVEL III OUTCOME:** Competently engages in interpersonal relationships with persons, populations, and colleagues.

**COMPETENCY Statement(s):**
1. Initiates effective written and verbal communication with persons, populations and colleagues to affect patient care.
2. Evaluates group communication skills.

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Evaluation Methods</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Uses communication developmentally appropriate for children and consistent with family/caretaker level of understanding in a professional manner</td>
<td>O, V</td>
<td></td>
</tr>
<tr>
<td>2. Documents accurately and concisely on agency and CON materials using appropriate terminology and language according to established policy and procedure</td>
<td>V</td>
<td></td>
</tr>
<tr>
<td>3. Verbalizes complete and concise update or report to staff/faculty with pertinent information</td>
<td>V, O</td>
<td></td>
</tr>
<tr>
<td>4. Effectively uses verbal and non-verbal methods in professional communication with peers, faculty, and staff</td>
<td>V, O</td>
<td></td>
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</table>

### Section E

**Professional Leadership LEVEL III OUTCOME:** Assumes responsibility for the effective delivery of nursing care for individuals and groups within evolving health care systems.

**COMPETENCY Statement:**
Coordinates care in collaboration with faculty and agency staff supervision of ancillary staff in providing care to a selected group of patients.

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Evaluation Methods</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Engages in on-going self-evaluation, identifying personal learning needs and resources available to improve clinical performance</td>
<td>V, CSA Self evaluation section</td>
<td></td>
</tr>
<tr>
<td>2. Seeks assistance appropriately for safe and thorough care of children</td>
<td>V, O</td>
<td></td>
</tr>
</tbody>
</table>
Section F

Global Cultural Competence LEVEL III OUTCOME: Plan and implement care for persons and populations to address relevant global, cultural, and socioeconomic factors that influence health and

COMPETENCY Statement(s):
1) Systematically investigate the interaction between social and cultural determinants.
2) Using culturally specific data, develop plan for care of culturally diverse vulnerable populations

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Evaluation Methods</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Examines cultural factors impacting health and development of children</td>
<td>V, O, Concept map Functional/ Environmental section</td>
<td></td>
</tr>
<tr>
<td>2. Identifies cultural and environmental barriers and facilitators to plan of care</td>
<td>V, O, Concept map Functional/ Environmental section</td>
<td></td>
</tr>
</tbody>
</table>

Section G

Ethical Practice LEVEL III OUTCOME: Uses ethical problem-solving methods to effectively advocate for vulnerable persons, groups and populations.

COMPETENCY Statement(s):
1) Analyze ethical problems related to the health care for vulnerable population
2) Engage in respectful and reasoned dialog with colleagues related to the health care needs for a vulnerable populations

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Evaluation Methods</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Respects and maintains confidentiality of child and family information in compliance with requirements of agency, state, and federal laws</td>
<td>V, O</td>
<td></td>
</tr>
<tr>
<td>2. Maintains privacy, dignity, and values of child and family members</td>
<td>V, O</td>
<td></td>
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</tbody>
</table>

Section H

Health Promotion / Risk Reduction LEVEL III OUTCOME: Skillfully facilitates adoption of values and behaviors of persons/populations that will achieve and/or maintain an optimal level of health and wellness

COMPETENCY Statement: Applies wellness and health promotion/risk reduction models to assess and intervene with vulnerable populations, and conducts process and outcomes evaluation of the HP/RR intervention.

<table>
<thead>
<tr>
<th>Performance Criteria</th>
<th>Evaluation Methods</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identifies key, developmentally focused factors for influence health and development in children</td>
<td>V, O, Concept map Functional/ Environmental section</td>
<td></td>
</tr>
</tbody>
</table>

Total score:

Computation: \((\text{Total Score}/19)\times12.5 + 37.5\)%

Comments:

Student signature/date

Faculty signature/date

Evaluation Methods: O: Observation, V: Verbalization, CSA: Clinical Synthesis Assignment, CM: Concept map
At the end of the clinical rotation, specific behaviors:

5 - Consistently exceed the expected clinical performance behavior (>90% self-directed, accurate, affect and focus is appropriate, proficient, coordinated, highly skilled, occasional expenditure of excess energy, expedient in time required, in-depth understanding, OR no supporting cues needed)

4 - Consistently meet and often exceed the expected clinical performance behavior (80-89% supervised, usually accurate performance, affect is appropriate, efficient, coordinated, skillful, some expenditure of excess energy, reasonable time for completion, complete understanding, OR occasional supporting cues needed)

3 – Consistently meet expectations (70-79% assisted, safe, sometimes accurate, affect appropriate, skillful in parts of the behavior, coordinated, skilled, expends excess energy, delayed time period, adequate understanding, OR frequent verbal directive cues needed)

2 - Does not consistently meet the expected clinical performance behavior (65-69% occasionally accurate, affect appropriate, skilled, efficient, considerable expenditure of energy, prolonged time for completion, superficial understanding, OR frequent cues needed)

1 - Frequently does not meet the expected clinical performance behavior (<64% dependent, unable to demonstrate behavior, lacks confidence, coordination, efficiency, unskilled, minimal understanding/competence, OR continuous cues needed)

N/O - Not observed

(Scheetz, 1990/Holaday, 2005/Oakwood Healthcare, Inc.)