



**RNSG 2263 – 101C0
Capstone Clinical
Fall 2024
11/11/2024 – 12/5/2024**

Instructor Information: Lisa Hall DNP, MSN, RN, lhall8@com.edu, 409-933-8164

Student hours and location: Clinical Days/Hours Vary by Clinical Site
Hybrid Online & Face-to-Face at Clinical Facility

Required Textbook/Materials: Gulanick, M., Myers, J.L. (2022). Nursing care plans: Diagnoses, interventions, & outcomes (10th Ed.). Elsevier, St. Louis, MO.

Course Description: RNSG 2263, Capstone Clinical (Lecture 0, CLIN 6). Credit 2. WECM

Nursing care to adult patients and families suffering from multi-system or life-threatening health needs in a medical and/ or surgical acute care setting. Prerequisites: [RNSG 2332](#) or RNSG 1443 and [RNSG 2262](#) with a grade of "C" or better.

This 4-week course is a preceptor/assigned preceptor or faculty-supervised clinical learning experience in which the nursing student gains 96 hours in a clinical setting to apply nursing theory, skills, and concepts in the care of multiple patients. Students will complete 96 hours in the clinical setting.

Course requirements:

1. Journal based on the student's clinical experience after each clinical day/night rotation.
2. Quality Improvement / Leadership Project Presentation- Assesses the application of the IHI Model for Improvement in a clinical setting.
 - a. Completion of IHI Open School Modules
 - b. Unit-based Quality Improvement Project and Presentation
3. Clinical Tracking Tool & Time Log
4. Text the clinical instructor upon arrival to the clinical area, the name of the preceptor, and when leaving the clinical area for the day/night.
5. Text the clinical instructor if you are unable to attend clinical, arrive late, or leave clinical early.
6. Email the clinical instructor to get approval for the Quality Improvement topic.
7. Clinical Performance Evaluation - Assesses clinical competency and application of theory to practice.

Determination of Course Grade/Detailed Grading Formula:**Methods of Instruction**

Online post-conference journals, IHI Open School, facility precepted clinical hours, IPASS, U-World, and a poster presentation on quality improvement.

Grading Scale

A = 90 – 100%

B = 80 – 89.99%

C = 75 – 79.99%*

D = 60 – 74.99%

F = <60%

*A minimum final grade of “C” (75%) is required to pass this course.

Grade Calculation

All assignments, including pass/fail, must be submitted to pass the course. See Grade Determination & Calculation in the Nursing Student Handbook.

Assignment of Course Grade	%
Journal/IPASS Entries	20%
Quality Improvement / Leadership Project + IHI Modules	25%
Clinical Tracking Tool & Time Log	25%
Clinical Performance Evaluation**	25%
U-World questions	5%
TOTAL	100%
** Meeting expectations of all critical criteria (indicated with an asterisk) is required to pass the course	

Late Work, Make-Up, and Extra-Credit Policy:

All course assignments must be completed and submitted on the specified due date. See Late Assignments Policy in the Nursing Student Handbook.

Attendance Policy:

For this course, the student is required to complete 96 clinical hours over 4 weeks. Any changes from the posted schedule/calendar must be discussed/approved by the facilitator. See the Attendance Policy in the Nursing Student Handbook.

Tardiness

See Attendance Policy in the Nursing Student Handbook.

Communicating with your instructor: ALL electronic communication with the instructor must be through your COM email. Due to FERPA restrictions, faculty cannot share any information about performance in the class through other electronic means. (Faculty may add additional statement requiring monitoring and communication expectations via D2L or other LMS)

Faculty Office Hours: Meet with students face-to-face or virtually via Microsoft Teams.

Monday: 0800-1700

Wednesday: 12:00 to 1700

Student Learner Outcome	Maps to Core Objective	Assessed via this Assignment
1. Use clinical reasoning and knowledge based on evidence-based practice outcomes as a basis for decision-making in nursing practice.		Journals/IPASS
2. Determine the physical and mental health status needs and preferences of culturally, ethically, and socially diverse patients and their families based upon the interpretation of comprehensive health assessment findings compared with evidence-based health data.		Journals/IPASS
3. Analyze assessment data to identify problems, formulate goals/outcomes, and develop care plans/concept maps for patients and their family's using information from evidence-based practice in collaboration with patients, their families, and the interdisciplinary health care team.		Journals/IPASS

4. Provide safe, compassionate, comprehensive nursing care to patients and their families through a broad array of healthcare services.		Journals/SBAR Clinical Tracking Tool & Time Log
5. Implement the plan of care for patients and their families within legal, ethical, and regulatory parameters and in consideration of disease prevention, wellness, and promotion of healthy lifestyles.		Journals/IPASS Clinical Tracking Tool & Time Log
6. Evaluate and report patient outcomes and responses to therapeutic interventions compared to benchmarks from evidence-based practice and plan follow-up nursing care.		Journals/IPASS Clinical Performance Eval
7. Develop, implement, and evaluate patient and family teaching plans to address health promotion, maintenance, and restoration.		Journals/IPASS
8. Coordinate human, information, and material resources to care for patients and their families.		Journals/IPASS
9. Implement measures to promote quality and a safe environment for patients,		

self, and others.		Quality Improvement/Leadership Project
10. Formulate goals and outcomes using evidence-based data to reduce patient risks.		Quality Improvement/Leadership Project
11. Coordinate, collaborate, and communicate with patients, their families, and the interdisciplinary health care team to plan, deliver, and evaluate patient-centered care.		Journals/IPASS
12. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients and their families.		Journals/IPASS
13. Refer patients and their families to resources that facilitate continuity of care, health promotion, maintenance, and restoration, and ensure confidentiality.		Journals/IPASS
14. Communicate and collaborate promptly with interdisciplinary healthcare team members to promote and maintain the optimal health status of patients and their families.		Journals/IPASS
15. Communicate and manage information using technology to support decision-making to improve patient care.		Journals/IPASS

16. Assign and/or delegate nursing care to other members of the health care team based upon an analysis of patient or unit need.		Journals/IPASS
17. Supervise nursing care provided by others for whom the nurse is responsible using evidence-based nursing practice.		Journals/IPASS

Academic Dishonesty:

Any incidence of academic dishonesty, such as cheating on exams or copying other students' assignments, will be dealt with in accordance with college policy and the Student Handbook. Academic dishonesty is an extremely serious offense. See the Behavior/Conduct policy in the Nursing Student Handbook.

Plagiarism

Plagiarism is using someone else's words or ideas and claiming them as your own. Plagiarism is a very serious offense. Plagiarism includes paraphrasing someone else's words without giving proper citation, copying directly from a website, and pasting it into your paper, using someone else's words without quotation marks. An assignment containing any plagiarized material will be referred to the Office of Student Conduct for appropriate discipline action. Also see the Behavior/Conduct policy in the Nursing Student Handbook. Plagiarism will result in disciplinary action up to and including dismissal from the nursing program.

Avoiding Plagiarism <http://www.plagiarism.org/>

Student Concerns: If you have any questions or concerns about any aspect of this course, please contact me using the provided contact information. If, after discussing your concern with me, you continue to have questions, please contact D. Bauer/Director of Nursing at dbauer3@com.edu.

ANA Scope and Standards of Practice

Students are expected to adhere to the established ANA Scope and Standards of Practice (2015). (For a detailed explanation of the standards, See the Student Handbook and Clinical Evaluation Tool.)

Student Handbooks

Students are expected to adhere to all policies outlined in the College and Nursing Student Handbooks.

Syllabus Revisions

Faculty reserves the right to make changes to the syllabus as deemed necessary.

Course outline: See clinical guidelines below/ see the course outline in D2L

Institutional Policies and Guidelines

Grade Appeal Process: Concerns about the accuracy of grades should first be discussed with the instructor. A request for a change of grade is a formal request and must be made within six months of the grade assignment. Directions for filing an appeal can be found in the student handbook https://www.com.edu/student-services/docs/Student_Handbook_2024-2025_v2.pdf. *An appeal will not be considered because of general dissatisfaction with a grade, penalty, or outcome of a course. Disagreement with the instructor's professional judgment of the quality of the student's work and performance is also not an admissible basis for a grade appeal.*

Academic Success & Support Services: The College of the Mainland is committed to providing students with the necessary support and tools for success in their college careers. Our Tutoring Services, Library, Counseling, and Student Services offer support. Please discuss any concerns with your faculty or an advisor.

ADA Statement: Any student with a documented disability needing academic accommodations is requested to contact:

Kimberly Lachney, Student Accessibility Services Coordinator

Phone: 409-933-8919

Email: AccessibilityServices@com.edu

Location: COM Doyle Family Administration Building, Student Success Center

Textbook Purchasing Statement: A student attending the College of the Mainland is not under any obligation to purchase a textbook from the college-affiliated bookstore. The same textbook may also be available from an independent retailer, including an online retailer.

Withdrawal Policy: Students may withdraw from this course for any reason prior to the last eligible day for a "W" grade. Before withdrawing, students should speak with the instructor and consult an advisor. Students are permitted to withdraw only six times during their college career by state law. The last date to withdraw from the 1st 8-week session is October 2. The last date to withdraw from the 16-week session is November 15. The last date to withdraw for the 2nd 8-week session is November 26.

FN Grading: The FN grade is issued in cases of *failure due to a lack of attendance*, as determined by the instructor. The FN grade may be issued for cases in which the student ceases or fails to attend

class, submit assignments, or participate in required capacities, and for which the student has failed to withdraw. The issuing of the FN grade is at the discretion of the instructor. The last date of attendance should be documented for submission of an FN grade.

Early Alert Program: The Student Success Center at College of the Mainland has implemented an Early Alert Program because student success and retention are very important to us. I have been asked to refer students to the program throughout the semester if they have difficulty completing assignments or have poor attendance. If you are referred to the Early Alert Program you will be contacted by someone in the Student Success Center who will schedule a meeting with you to see what assistance they can offer in order for you to meet your academic goals.

Resources to Help with Stress:

If you are experiencing stress or anxiety about your daily living needs, including food and housing, or just feel you could benefit from free resources to help you through a difficult time, please click here: <https://www.com.edu/community-resource-center/>. College of the Mainland has partnered with free community resources to help you stay on track with your schoolwork by addressing life issues that get in the way of doing your best in school. All services are private and confidential. You may also contact the Dean of Students office at deanofstudents@com.edu or communityresources@com.edu.

Notice to Students Regarding Licensing

Effective September 1, 2017, HB 1508 amends the Texas Occupations Code Section 53 that requires education providers to notify potential or enrolled students that a criminal history may make them ineligible for an occupational license upon program completion. The following website provides links to information about the licensing process and requirements:
https://www.bon.texas.gov/licensure_eligibility.asp.

Should you wish to request a review of the impact of criminal history on your potential Registered Nurse License prior to or during your quest for a degree, you can visit this link and request a "Criminal History Evaluation": https://www.bon.texas.gov/licensure_endorsement.asp This information is being provided to all persons who apply or enroll in the program, with notice of the requirements as described above, regardless of whether or not the person has been convicted of a criminal offense. Additionally, HB 1508 authorizes licensing agencies to require reimbursements when a student fails to receive the required notice.

Nondiscrimination Statement:

The College District prohibits discrimination, including harassment, against any individual based on race, color, religion, national origin, age, veteran status, disability, sex, sexual orientation, gender (including gender identity and gender expression), or any other basis prohibited by law. Retaliation against anyone involved in the complaint process is a violation of College District policy.

Clinical Guidelines

Student Responsibilities

1. Faculty Present / Daily Assigned Preceptors

Faculty will be present at traditional clinical sites for immediate access if needed. Students assigned to a preceptor clinical site will report to assigned units and ask the charge nurse to assign the student to work with a designated preceptor for the shift.

Negotiation of Clinical Hours and Clinical expectations

Students are expected to make necessary personal and work schedule accommodations to complete the clinical hours specified by the course. Changes or requests to the approved clinical schedule must be submitted by email to the clinical facilitator. This must be communicated and approved before implementation. Any changes that may be approved are emergency situations at the facilitator's discretion.

The student is required to text the clinical instructor upon arrival at the start of each shift and when leaving the hospital. Should the charge nurse at the clinical facility make a unit change, the student is to notify the clinical instructor ASAP via text and email.

If the student arrives late or leaves early on their designated/scheduled clinical day, they will need to make up those hours on another clinical day at the discretion of the facilitator and the availability of the clinical site. The student clinical hours are 0645 to 1915 or 1845 to 0715.

If the Journal/IPASS & Clinical tracking tool & time log completed forms entry are uploaded one day late, the student will receive a grade of 50. **If the Journal/IPASS & Clinical tracking tool & time log forms are two days late**, the student will receive a 0. The first submission of the **Journal/IPASS & Clinical tracking tool & time log** will be graded. Clinical Journal entries are to be uploaded into D2L pre course calendar due date after each clinical shift.

QI (Quality Improvement) topics are to be approved by your clinical instructor. The QI outline and subject matter must be sent to your clinical instructor three weeks prior to the presentation.

QI (Quality Improvement) presentation date and time must be sent to your clinical instructor.

(Quality Improvement) Projects are to be done in the student-assigned units at the hospital clinical site in front of the assigned preceptor.

2. Preparation for Clinical

The student is expected to prepare for the clinical practicum as the faculty and preceptor recommended. Preparation includes developing individual learning objectives, conferring with faculty and preceptors on areas that need to be refined, and seeking learning experiences that will provide the student with a higher level of confidence. The student should discuss with the preceptor the expectations of the preceptor's practice and the most common problems and challenges that s/he can expect to encounter in the clinical site. The student is expected to prepare for the clinical practicum by reading current reference material appropriate for the clinical setting and problems most often encountered by the preceptor. The student must take the clinical objectives and nursing skills list to clinical.

3. Attendance at Clinical

Students are expected to attend each assigned clinical day/night rotation. Students are expected to treat the approved clinical calendar as a contract by attending clinicals on the days or nights they are assigned. If the student is going to be absent, the clinical instructor should be notified prior to the beginning of the clinical day. In the event of an absence due to illness or health intervention, the student must provide the faculty member with a release to return to school from the health care provider before returning to the clinical setting. There are no makeup clinical days for the capstone. The student must meet the clinical objectives and requirements of the course. The clinical objectives and requirements include completing 96 hours of capstone clinical to complete the course.

Confidentiality of Information

The student will maintain confidentiality in all communication and documentation, including social media.

1. Preceptor Roles

The preceptor's primary role is teaching and mentoring the student. Preceptors can stimulate clinical decision-making through a variety of activities, including introducing challenging experiences and questioning the student regarding observations and reasoning. This process assists the student in reflecting and describing observations, discussing the planned interventions, and contributing to the patient's plan of care.

Additionally, preceptors guide the student to improve accuracy and comprehension in documenting pertinent information. During the mentoring process, the preceptor can model interpersonal relationship skills.

2. Preceptor Communication with Faculty

The faculty will provide preceptors with contact information. Preceptors are encouraged to contact the faculty at any time. Faculty must be contacted immediately for situations

involving a student's unsafe practice, unethical conduct, or changes in preceptor availability. Any concerns expressed by other employees and contractors should be communicated to the faculty member. Preceptors can discuss student progress with the faculty member during the site visit(s).

3. **Preceptor Communication with Student**

Preceptors are encouraged to provide regular daily feedback to the student. To help the student resolve any concerns expeditiously, preceptors are encouraged to relate concerns to the student when they occur. Written documentation of concerns and resolutions will then be shared with the faculty at the next regularly scheduled communication or sooner if the preceptor deems it necessary.

4. **Preceptor Evaluation of Student**

While the faculty member is ultimately responsible for the formal evaluation, the preceptor's input provides evidence to support the ratings. The "Preceptor/Faculty Evaluation of the Student" form provides a guide for collecting and recording data related to student performance. The preceptor's primary role is teaching. In this process, the preceptor will observe the student in practice and fit those observations into the evaluation framework.

The preceptor not only collects data that verifies student competence but also can support professional practice standards and the credibility of COM Nursing. The preceptor's observations regarding the student's performance should be compared with practice standards, corroborated with faculty, and shared with the student. Preceptors need to remember that they do not fail students or impede a student's progress. Rather, the student's performance either meets or fails to meet criteria.

Faculty Responsibilities

1. **Student Preparation**

Faculty will confirm that students meet requirements prior to entering the clinical setting.

2. **Site Visits & Facilitation of Clinical Activities**

The faculty members will make visits at each assigned clinical site. For a traditional clinical, faculty will be on site with the students each clinical day. For a preceptor clinical, faculty will make 1 or 2 visits to meet with the students and the assigned preceptor for that shift. The purpose of the visit is to determine and evaluate the student in actual practicum situations, observe (if on site), and evaluate the student's interaction with staff and preceptor.

3. Faculty Communication with Students

Faculty will email or communicate face-to-face during clinical visits for any assignment feedback with students to discuss their progress. Faculty will communicate with the student via email, online platforms, and phone/team meetings.

4. Student Evaluation

The requirements and evaluation criteria for successful student performance are found in the course syllabus and clinical evaluation forms. Evaluations by the faculty member with input from the preceptor are an important component of student performance. Open communication between the faculty, preceptor, and student is essential for student success. Faculty assumes the ultimate responsibility for the evaluation of the student. While specific criteria are identified in each course, faculty utilizes a combination of methods, including making site visits (s) to observe the student's performance and interactions with students, staff, and preceptors. Regular review of journal entries and supportive evidence from the clinical preceptor are utilized.

Clinical Assignments & Grading Criteria

Post Conference Journal and clinical tracking tool & time log (online only)

- **Eight Journals, a Clinical Tracking Tool & Time Log** must be submitted after each clinical rotation. Due dates are noted on the course calendar. The journal assignment will be based on the clinical assignment.
- Students are to complete an **SBAR** on each of their assigned patients. For example, if the student is assigned to the ICU, they are expected to complete an IPASS on 1 to 2 patients of the preceptor/student assignment. If the student is on the floor or at the emergency center, they are expected to complete an IPASS on four patients of the preceptor/student assignment.
- A grade is assigned for addressing all questions posed in the journal/SBAR instructions, clinical tracking tool & time log.

Quality Improvement / Leadership Project

- Schedule one shift with the nurse manager and/or charge nurse for the assigned shift.
 - Identify specific core measures monitored on the unit.
 - Identify who is responsible for collecting the data.
 - Identify how the results are shared with all providers of patient care.
 - Identify the consequences of not meeting the expected level of performance for identified core measures or quality improvement initiatives.

- Develop a performance improvement project utilizing the IHI Model for Improvement.
- Present the QI project to the assigned preceptor and upload the poster presentation in D2L.
- A grading rubric is used to assess the quality of the project.

Clinical Performance Evaluation

- Clinical Performance Evaluation (must be submitted before final evaluation can be completed)
- Clinical Evaluation of course objectives

Guidelines for Clinical Experience

Students are expected to follow the rules and regulations outlined in the college catalog and the nursing program's Student Handbook.

The student will be expected to complete all pre-and post-clinical work as specified in the course syllabus.

The student will communicate and present the skill checklist to their assigned preceptor. These are the skills they will be able to perform during their shift. The student should have total patient care of the preceptor assignment, including taking and giving reports. The student is not taking the role of PCA and/or just following the nurse for their shift.

The student will communicate with their preceptor or assigned nurse about their role during the clinical shift. The student assigned to ICU will be responsible for the total care of the preceptor's assignment. For example, if the preceptor has 1 or 2 patients in ICU, the student is responsible for caring for those patients. When a student is assigned to a floor/unit or emergency center, they will be responsible for the total patient care of 4 patients. The student can only perform the skills listed on the permissible capstone nursing skills list. Please note that students cannot give chemotherapy or blood transfusions, but they can monitor the patient to see if they are receiving the above medication or transfusion.

Uniform

The COM uniform policy outlined in the nursing student handbook will be followed. Students must come to the clinical facility in full uniform (white top and red pants). Their shoes must be all white leather-like tennis shoes or nurse mates with all areas closed in (no Crocs or sling-back shoes). They may not wear nose rings or piercings and may wear only one set of earrings (like a stud).

*The student who has been fit tested with an N-95 mask can only care for patients with airborne illnesses requiring the use of an N-95 mask.

Permissible Capstone Nursing Skills

The student will perform only those procedures and treatments which have been successfully completed during the nursing skills course or nursing skills laboratory. Preceptor discretion is advised.

Independent	RN Preceptor Supervised
Skills typically delegated to CNAs	IV push medications
Colostomy Care	Drawing blood from central lines
Enema administration	Flushing central lines
Foley Catheter insertion	IV Pump set up
IV insertion	NG feeding initiation / set up
Isolation procedures*	PCA Pump set up
IV site maintenance	Phlebotomy / Specimen collection
IV flow rate regulation	Restraint application/monitoring
IV tubing changes	Any equipment with which the student is not familiar or comfortable
Medication Administration **	Documentation as permitted by the facility
NGT insertion/removal	***Blood product and chemotherapy administration is a non-permissible skill, and the student can only observe
Oxygen administration	
Pre-Op/ Post Op care	
Pressure Ulcer care	
Sterile dressing changes	
Tracheal suctioning	
Traction	
Wound drainage device care	

** may require RN to acquire medication from dispensing machine and barcode scan as student will not typically have this access.

